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TO THE COUNCIL, THE EUROPEAN PARLIAMENT,
THE ECONOMIC AND SOCIAL COMMITTEE
AND THE COMMITTEE OF THE REGIONS

on a European Union Action Plan to Combat Drugs

(2000 – 2004)

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I. INTRODUCTION

The EU Member States and the European Community have, since the mid-1980s, adopted important common measures for combating drug addiction and drug trafficking and for promoting international co-operation. These multi-disciplinary measures come under various European Plans to combat drugs and action programmes approved by successive European Councils since 1990.¹

The current EU Action Plan to Combat Drugs (1995-1999)² stresses the need for a global, multidisciplinary and integrated response based on the following four key elements: (i) demand reduction, (ii) supply reduction and the fight against illicit trafficking, (iii) international co-operation and (iv) co-ordination at national and Union level. In proposing the current Action Plan, the Commission at this time emphasised that effective action to combat drugs required a comprehensive and integrated approach. This did not mean that everyone must fight on all fronts and at all levels at the same time. It meant that co-ordination and interaction of players and approaches must be ensured to reach maximum efficiency.

The 1995-1999 Action Plan has been complemented by the report drawn up by the Group of Experts on Drugs approved by the Madrid European Council (December 1995)³.

The Treaty of Amsterdam has introduced the objective of providing citizens with a high level of safety within "an area of freedom, security and justice", three notions which are closely inter-linked. The fight against drugs is an inseparable objective of the area of freedom, security and justice.

The present communication is the Commission's follow-up to the Cardiff and Vienna European Councils conclusions requesting the Council, the Commission and the European Parliament to develop into a comprehensive plan the post 1999 drugs strategy based on the key elements endorsed by the Cardiff European Council.⁴ These key elements represent an effective basis for action at EU level. This communication also refers to the conclusions of the Vienna Council which invite the Member States and the Commission to study possible measures to intensify the fight against doping in sport.

This communication also responds to a commitment taken by the Commission itself when adopting the current Action Plan (1995-1999) that it would submit a final report on the implementation of the Action Plan.

¹ The first European Plan to Combat Drugs was adopted by the Rome European Council (1990), followed in December 1992 by the adoption of a revised and updated version by the Edinburgh European Council.

² COM (94) 234 final

³ Doc. 12247/95 Cordrogue 69 of 30.11.95

⁴ Doc. 7930/98 Rev 2 Cordrogue 26 of 2.06.98

The EU Action Plan to Combat Drugs for the period 2000-2004 is presented under Chapter III. The Plan covers the following areas:

1. Information
2. Action on demand reduction
3. Action on reduction of illicit trafficking in narcotic drugs and psychotropic substances
4. Action at international level
5. Co-ordination

The communication includes the following Annexes:

- Towards an evaluation of existing EC and EU instruments and programmes (under ANNEX I);

- Current trends in demand reduction (under ANNEX II);

- Current development in legislation and practices (under ANNEX III);

- 1998 Community funding in the field of drugs (Table) (under ANNEX IV).

II. RECENT TRENDS IN CONSUMPTION AND TRAFFICKING IN THE EU

At the level of the European Union, effective and sound policies and strategies require the availability of objective, reliable and comparable information on the drugs situation. This, in turn, requires common definition and concepts. For the purpose of this Communication, the term illicit drugs refers to the substances listed in the three UN conventions from 1961, 1971 and 1988. As regards synthetic drugs, this term also covers new synthetic drugs put on the market and which are not yet listed in these conventions.

The extent and magnitude of the drugs phenomenon is now better known thanks to the valuable work carried out by the European Monitoring Centre for Drug and Drug Addiction (EMCDDA) and the Europol Drugs Unit (EDU). The setting up of these two bodies has given a new dimension to co-operation between Member States in the field of information on the drugs situation in the EU.

Based on information provided by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) in its 1998 Annual Report and by EDU, the main features of the drug situation in the EU can be described as follows:

A. Trends in illicit drugs use

- Cannabis is the most commonly used illicit drug across the EU, having been tried by between 1 and 8 % of the total population and up to 20% of younger adults. The use is stable on the whole.
- Amphetamine is the second most used illegal drug in most countries (tried by 2-4% of the adult population and up to 10% of young adults). Its use is continuing to rise and is likely to be more significant in the future than ecstasy.
- Ecstasy use is no longer rising in those Member States where it frequently appeared earlier but it is still rising in the others.
- Cocaine is modestly but steadily rising in use, although prevalence is still low.
- Crack remains a limited phenomenon.
- Heroin use appears relatively constant although there is some evidence of a new generation of young heroin smokers.
- Other substances: solvents are often the second most abused substances by adolescents. Misuse of medicines by adults such as benzodiazepines, often in combination with alcohol, is reported to be increasing.
- Drugs and health: the strongest link between illicit drug use and health damage is among injectors. While rates of AIDS have levelled out, the recorded cases of Hepatitis may have serious public health implications. The number of drug-

related deaths is generally stable or decreasing, although with exceptions in certain Member States.

B. Trends in illicit drug production and trafficking

- Most heroin seized in the EU originates from South West Asia. Central Asia is being increasingly used for the transit of heroin coming from South West Asia to Russia or to the EU through the Balkan route. In Central and Eastern Europe heroin depots have been set up for further re-transportation of the drugs to the EU, in smaller quantities. Drug trafficking is mostly controlled by criminal organisations. Turkish criminal groups, and also gradually Albanian-Yugoslav criminal groups, play an important role in the heroin trade. Colombian heroin is partly destined for EU markets.
- Cocaine trafficking towards the EU takes place predominantly by sea freight. Colombia is the main producer of cocaine destined for the Member States. The Caribbean is one of the main areas of transit for cocaine trafficking to Europe. There is increased diversion of cocaine shipments to Central and Eastern Europe from where, subsequently, the drugs are transported overland to the EU.
- The EU is a major production region for synthetic drugs. Production of synthetic drugs in Central and Eastern Europe mainly affects the northern Member States. It poses a serious threat to the Member States, due to the lack of precursors control in the region and the large availability of professional chemists.
- Cannabis seizures in the Member States are massive, up to 600 tons annually. Morocco is a major supplier of cannabis resin (hashish) to the Member States. Pakistan is another source country. Colombia, South Africa, Nigeria and Thailand are suppliers of herbal cannabis (marihuana). Central and Eastern Europe is a transit region for cannabis destined for the Member States. Cultivation of cannabis, for personal use or distribution, takes place nowadays in almost all Member States, although there are no signs of large scale intra-EU trafficking.
- Substantial reduction in illicit coca and opium poppy cultivation is being achieved, in line with the commitment made by world leaders at the United Nations General Assembly Special Session on Drugs (June 1998, New York). These achievements in the main producing countries are the results of the mobilisation of the international community in support of the producing countries' efforts to eliminate illicit cultivation through sustainable development which takes into account in particular measures related to alternative development and access to international trade markets.

III. THE EU ACTION PLAN TO COMBAT DRUGS (2000-2004)

A. The European Union approach: a global, multidisciplinary and integrated strategy to fight illicit drugs

On the eve of the year 2000, the drugs problem continues to pose threats and new challenges such as the growing success of synthetic drugs among young people and the worrying phenomenon of the increasing number of juveniles, sometimes pre-adolescents, involved with criminal groups in the sale of illicit drugs. Also, sporting activities has now become activities which can lead to the development of new addictions. The social and health aspects of the drugs problem, which poses threats to both the users themselves and to their families, are increasingly recognised in the EU Member States. The relationship between drug abuse and a broader social disadvantage, such as poverty, deprivation, unemployment, homelessness, exclusion as well as the links between drug abuse, delinquency and crime indicate the necessity to ensure a balanced approach between demand reduction and supply reduction.

According to the results of the first Eurobarometer on public safety⁵, illicit drugs considerably affect the life of the citizen. Actual contacts with open drug scenes – seeing people openly dealing drugs or finding syringes in the park – as well as actual victimisation by violent crime are important sources of feelings of insecurity in European cities. On average, fourteen percent of EU residents have been in contact with drug-related problems in their own area over the past 12 months.

Since the beginning of the nineties, drugs issues appear high on the political agenda of the European Union, a situation which reflects the recognition that fighting against illicit drugs represents a common threat requiring an integrated approach to the drugs phenomenon and intense co-operation at all levels.

The international dimension of the fight against drugs is widely recognised as requiring more intense co-operation. Problems are common and the solutions must also be so. The progress achieved during the past few years is important in the sense that agreement has been achieved on some fundamental principles concerning international drugs control co-operation. Whereas at the beginning of the 1990s this co-operation was dominated by a divide between producer and consumer countries as well as by a heavy emphasis on law enforcement, the emphasis has now shifted to a broad consensus between the developing world and the developed world, between so called ‘producer’ and ‘consumer’ countries. Drugs control is today recognised as part of overall efforts to foster social and economic development in a broader sense. The concepts of ‘shared responsibility’ and ‘partnership’ have become the basis for co-operation in this field. The drug problem is being viewed from a broader set of human welfare issues addressing the social and economic dimensions of sustainable development in both producing and consuming countries.

⁵ Carried out by the Commission in view of a joint EC/EP/Presidency seminar on the Prevention of Urban Delinquency linked to Drugs Dependence (Brussels, 21-22 November 1996)

B. Evaluation

Evaluation must be an integral part of the EU approach to fighting illicit drugs. The necessary methodological tools for the evaluation of drugs policies and strategies are currently not sufficient and will need to be developed. Efforts carried out at EC level in the 1995-1999 period in the field of evaluation have been insufficient and will have to be reinforced. Recourse at EC level to external independent experts for evaluation purposes will need to be widely used. A mid-term review of the EU Action Plan will be conducted by the EC and presented to the Council and the Parliament. The regular assessment of the magnitude and nature of drug use by the EMCDDA and data produced by EDU on trafficking constitute valuable resources for the identification of any emerging trends and the improvement of the knowledge at EU level on the drugs phenomenon.

Evaluation is not to be achieved without difficulties. Evaluating the efficiency of the fight against illicit drugs abuse, production and trafficking poses the difficult question of defining appropriate performance indicators. Also, some of the EC and EU actions and programmes have been launched recently and have not yet been evaluated.

Up to now the issue of evaluation has not been tackled as a priority issue. But this trend is changing. Efforts will therefore be concentrated in this area as more EC programmes will be evaluated by the EC through recourse to independent experts. For EU programmes, joint evaluation will be proposed.

Evaluation has been the subject of limited feasibility studies and small-scale studies in Europe carried out in particular by the EMCDDA and the Pompidou Group of the Council of Europe. The EMCDDA is, however, focusing its scientific work on evaluation and has issued and will continue to issue guidelines for the evaluation of demand reduction activities and models for the assessment of policies.

It will be of the utmost importance to concentrate efforts on the regular evaluation of achievement of the initiatives, programmes and policies initiated or pursued during the 2000-2004 period. In this context, and whenever possible, impact evaluation will be implemented. In particular, it will be essential to adapt existing evaluation means and tools, including those produced by the EMCDDA, in order to facilitate the assessment of the level of achievement of objectives described in the present communication.

Clearly more attention should be given in future to this activity. External experts should be involved in the establishment of the evaluation indicators and the evaluation process in itself. Steps have been taken in this direction with the ongoing external evaluation of the Community Action Programme on the Prevention of Drug Dependence. A mid-term report will be transmitted to the Parliament and the Council during the first half of 1999. The main elements of this evaluation are included under Chapter III Section F.2.1.

C. New challenges

There is a need to improve the monitoring of the drugs problems to rapidly identify new challenges and adopt appropriate strategies

The following new challenges have been identified:

- **Cannabis, amphetamine and ecstasy:** the EU is a major production and consuming region of these three illicit drugs, as mentioned under chapter II. Major efforts should continue to be pursued at EU level to fight their production and abuse. In particular, new challenges have arisen with the growing appeal of synthetic drugs (amphetamines and Ecstasy type stimulants) among young people.
- **Urban delinquency:** the worrying phenomenon of the increasing number of juveniles, sometimes pre-adolescents, involved with criminal groups in the sale of illicit drugs⁶ points up the need for social measures to prevent the onset of addictions and/or their escalation into more damaging, i.e. criminal forms. Comprehensive projects which combine a mixture of different measures are most likely to produce lasting results. There is also the need to collect drug-related crime statistics at EU level. .
- **Other health, social and criminal justice challenges:** these include polydrug use, hepatitis, social exclusion, community involvement in prevention, drug use in prisons, alternatives to punishment, social and vocational reinsertion.
- **Preparation for enlargement:**

Participation in the EMCDDA and in different drug related EC and EU Programmes

The pre-accession strategy included the possibility for the candidate countries to become members of certain Agencies such as the EMCDDA, even before full membership of the Union. In September 1998, the Commission agreed that maximum participation of the 11 applicant countries plus Turkey in these Agencies was desirable, with decisions to be made on a case-by-case basis. The Commission intends to present a draft negotiating mandate for all applicant countries in view of their participation in the EMCDDA through bilateral negotiation with each of them which formally requests it. Pre-accession strategy also covers the participation of the candidate countries in Community programmes such as those in the public health field. The Community programme on prevention of drug dependence was opened for the participation of Hungary in 1998. Other candidate countries are expected to join in 1999. Concerning the co-operation programmes under Title VI of the TEU (Justice and Home Affairs), the Commission is envisaging to amend the existing legal basis of these programmes to make possible the full participation of the applicant countries.

⁶ Joint EC/EP/Presidency seminar on the prevention of urban delinquency linked to drugs dependence (Brussels, 21-22.11.96)

The Phare Multi-Beneficiary Drugs Programme

The Multi-Beneficiary Drugs Programme is the main Phare supported programme to develop the institutional capacity of the ten candidate countries of Central and Eastern Europe to develop multi-disciplinary and co-ordinated drug policies, in line with the EU drugs strategy. The programme also provides for the integration of non-candidate countries namely Albania, Bosnia-Herzegovina and the Former Yugoslav Republic of Macedonia.

The Programme is organised around three priorities: (1) drug information systems, (2) drug supply reduction, and (3) drug demand reduction, where emphasis is put on capacity building for the development of integrated prevention programmes, including the active involvement of the civil society. Following the extension of Phare assistance to the field of Justice and Home Affairs, emphasis is also given to drug law enforcement.

To facilitate the transposition of the EU acquis in the field of drugs, the Programme is focusing on support for institution building in order to establish the required legislation and standards and to reinforce the operational capacities of the drug control structures.

D. The new legal framework provided by the Treaty of Amsterdam

Further to the Maastricht Treaty on European Union which extended the Community's scope for action in the field of drugs as well as the scope for co-operation between the EU Member States, the entry into force of the Treaty of Amsterdam will represent a new step forward in the fight against drugs in the field of public health by the possibility of introducing prevention measures (Article 152) in the law enforcement area by the setting up of reinforced co-operation in the fight against illicit drug trafficking (Title VI) and in the field of international co-operation.

(i) *Drugs, a Public Health priority (Title XIII, Article 152 of the EC Treaty)*

Article 152 (1) first paragraph of the EC Treaty indicates that *A high level of human health protection shall be ensured in the definition and implementation of all Community policies and activities.* This implies the mainstreaming of public health priorities in all Community policies and activities, like the youth programmes, the research programmes, the programmes and activities in the social field.

Article 152 (1) second paragraph stipulates that *Community action, which shall complement national policies, shall be directed towards improving public health, preventing human illness and diseases, and obviating sources of danger to human health. Such action shall cover the fight against the major health scourges, by promoting research into their causes, their transmission and their prevention, as well as health information and education.* The Treaty no longer singles out drugs as a major scourge but clearly drugs remains a priority subject for Community action in the field of public health. Indeed, Article 152 (1) third paragraph mentions that *The Community shall complement the Member States' actions in reducing drugs-related health damage, including information and prevention.* The reduction of drug-related

health damage appears as a new objective of the co-operation between Member States, alongside the traditional co-operation in the prevention field.

Article 152 (3) stipulates that *The Community and the Member States shall foster co-operation with third countries and the competent international organisations in the sphere of public health.* Article 152 (4) indicates that the Council can adopt, on the basis of Article 251 of the EC Treaty (co-decision procedure), *incentive measures designed to protect and improve human health, excluding any harmonisation of the laws and regulations of the Member States.*

The new provisions of Article 152 will need to be exploited to the full in order to enhance co-operation in the area of demand reduction and achieve, whenever possible, an approximation of practices in areas such as evaluation methods and procedures. Exchange of information on “best practices” in drug prevention and in other areas such as the alternative measures to penal sanctions should be encouraged. At EU level, the current achievements of the Drug Dependence Programme will need to be considered as a basis for further progress in bringing closer the practices in demand reduction and prevention

(ii) *Drugs, a priority for co-operation in the field of Justice and Home Affairs (Title VI of the Treaty on European Union - TEU)*

The new legal framework puts the co-operation between the EU Member States in the fight against illicit trafficking into a new institutional framework which creates a Treaty obligation of working together on the basis of a spirit of dialogue and conciliation between different approaches pursued by the Member States.

The main innovation of the Amsterdam Treaty is the objective stipulated in Article 29 (ex-K.1) to police and judicial co-operation which is to provide citizens with a high level of safety within “an area of freedom, security and justice”. This objective must be achieved by preventing and combating crime at the appropriate level,” organised or otherwise, in particular ...illicit drug trafficking”. Three methods are envisaged to fight against illicit drug trafficking:

- closer co-operation between police forces, customs authorities and other competent authorities, directly or through Europol;
- closer co-operation between judicial and other competent authorities of the Member States;
- approximation, where necessary, of rules on criminal matters in the Member States.

Under Article 34 (ex-K.6) the Commission now has a shared right of initiative with the Member States in all the areas referred to in Title VI. The legal decisions adopted by the Council will continue to be based on the unanimity rule. In addition to common positions and conventions, two new instruments have been introduced:

- the framework decision (binding but leaving to national authorities the choice of forms and methods to achieve the result) for the approximation of the laws and regulations of the Member States;

- the decision (binding with no direct legal effect) for any other purpose consistent with the objectives of Title VI, excluding any approximation of the laws and regulations of the Member States.

Furthermore the Treaty fixes a number of objectives for police and judicial co-operation, which are tracks to be explored with the aim of intensifying the fight against drugs.

It is within this framework and with the support of both Europol, which has a particular role in the Amsterdam architecture of support and co-ordination in the implementation of the co-operation of law enforcement services (art.30.2), and the EMCDDA, that the Council will have, pursuant to Amsterdam, to take the measures and favour the co-operation with the purpose of contributing to meeting the Union's objectives (art. 34) by deciding by unanimity, and this following the initiative of any Member State or the Commission.

Article 31 (e) foresees the adoption of measures establishing minimum rules relating to the constituent elements of criminal acts and to penalties in the fields of organised crime, terrorism and illicit drug trafficking. Under a Declaration on this Article, it is said that these provisions shall not have the consequence of obliging a Member State whose legal system does not provide for minimum sentences to adopt them.

The role of the Court of Justice is reinforced by Article 35 (ex-K.7) as the Court will have jurisdiction to give preliminary rulings on the validity and interpretation of decisions taken under Title VI. But this control is subject to the declaration of competence by the Member States (paragraph 2). Moreover, the Court shall have no jurisdiction to review the validity or proportionality of operations carried out by the police or other law enforcement services. The role of the European Parliament is also reinforced under Article 39 (ex-K.11) as it will have to provide its opinion before the adoption of framework decisions, decisions and conventions, instead of being consulted only on the principal activities under Title VI.

The possibility of establishing closer co-operation between Member States is foreseen under Article 40 of Title VI as long as the co-operation proposed (a) respects the powers of the European Community and the objectives laid down by Title VI and (b) has the aim of enabling the Union to develop more rapidly into an area of freedom, security and justice. Under these conditions, the Council can authorise the setting up of closer co-operation, acting on a qualified majority at the request of the Member States concerned and after inviting the Commission to present its opinion. But if a Member State declares that, for important and stated reasons of national policy, it intends to oppose the granting of an authorisation by a qualified majority, a vote shall not be taken.

The integration of the Schengen *acquis* into the framework of the European Union is foreseen through a Protocol annexed to the Treaty. This is a fundamental change to the scope of this co-operation. With the new operational powers given to Europol (Article 30 paragraph 2), co-operation will be more concrete and will give a new impetus to the efforts being made in the fight against illicit drugs.

(iii) Drugs, a priority for international co-operation

The Amsterdam Treaty does not provide new instruments other than those already existing under the previous Treaty, that is to say common positions and joint actions mentioned respectively under Articles 14 and 15 of the TEU (former Articles J.4 and J.5). The EU has recognised the importance of the drugs issue in foreign policy by applying two broad categories of action: (i) multilateral action through active support for global policy-making, strengthening of strategy-setting by UN institutions and effective functioning of informal bodies.; (ii) bilateral and regional actions mainly through three types of instruments for co-operation with third countries in the framework of drugs clauses introduced in EU agreements with third countries: political dialogue, trade policy and financial technical support.

E. Main aims and objectives

In line with the principle of subsidiarity, the five general aims and objectives of the EU Action Plan 2000-2004 are the following:

- To ensure that the issue of the fight against drugs is kept as a major priority for EU internal and external action;
- To continue the EU integrated and balanced approach of the fight against drugs, in which supply and demand reduction are seen as mutually reinforcing elements;
- To ensure collection, analysis and dissemination of objective, reliable and comparable data on the drugs phenomenon in the EU with the support of EMCDDA and Europol;
- To promote international co-operation, integration of drug control into EU development co-operation and to support the efforts of the United Nations and of UNDCP in particular to develop international co-operation, based on the principles adopted at UNGASS;
- To emphasise that, while not bidding for new resources, the successful implementation of the strategy and actions mentioned in this Action Plan will necessitate appropriate resources.

The major characteristics of this Plan are the following:

- it emphasises the need for evaluating the experiences made and identifying the best practices with a view to ensuring the consistency and continuity of the Community action in tackling the drugs phenomenon; it, thus, builds upon the previous Action Plan;
- it identifies new challenges and strategies to be implemented at EU level and in co-operation with our international partners;
- it reaffirms our commitment to the UN Conventions on drug control, in accordance with the EP resolution of October 1998⁷

⁷ Report of Mrs d'Ancona. Doc. A4-0211/98

F. Specific targets

The specific targets of the Action Plan in the five domains of action are the following:

1. Information

The EU global strategy to combat drugs has to be based on a regular assessment of the nature and magnitude of drug use in the population and its consequences, as well as on knowledge acquired from research and on lessons derived from past programmes.

It is the task of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) to collect, analyse and compare existing data on the drugs phenomenon. It is of the utmost importance to ensure that the highest quality of information flows to it. In particular, improving comparability of data is a central task of the EMCDDA. The REITOX national focal points will have to play a central role in this context. Progressive harmonisation of key epidemiological indicators on the prevalence and health consequences of drug use⁸ is needed. This is an important challenge since, in particular, structures for collecting data on each indicator differ between Member States. National authorities should reinforce their commitment to this challenge with political and institutional support. This task will not be achieved quickly nor easily. Improved comparability of statistics should also be accompanied by measures to ensure quality (including training) and to interpret and understand the data in national and local contexts.

The EMCDDA, in close co-operation with its REITOX national focal point network, will pursue and concentrate its efforts on:

- the regular collection, analysis and dissemination of data at European level concerning drugs and drug addiction and their consequences’;
- the improvement of data comparison methods;
- the implementation of common indicators among Member States
- the systematic and scientific evaluation of demand reduction activities, including cost-effectiveness
- the co-operation with European and international bodies and organisations and with non-Community countries.

By the year 2004, the EMCDDA will progressively cover all areas specified in the regulation establishing the Observatory:

- demand and reduction of the demand for drugs;
- national and Community strategies and policies;
- international co-operation and the geopolitics of supply (with special emphasis on co-operation programmes and information on producer and transit countries);

⁸ The five key indicators concern: the demand for treatment by drug users; drug-related deaths, mortality and causes of death among drug users; the incidence of drug-related infectious disease (HIV, hepatitis B and C); the comparability of surveys of drug use, behaviour and attitudes in general population; and the comparability of prevalence estimates of problem drug use.

- control of the trade in narcotic drugs, psychotropic substances and precursors, as provided for in the relevant present or future international conventions and Community acts; and
- implications of the drugs phenomenon for producer, consumer and transit countries, including money laundering, as laid down by the relevant present or future Community acts.

In the framework of the Statistical Programme 1998-2002, Eurostat, the Statistical Office of the European Communities, and the EMCDDA will co-operate closely in the development of definitions and other methods aimed at providing comparable statistical information at Community level. For data collection on drug-related deaths and data through health-related surveys the EMCDDA is already co-operating with Eurostat.

2. *Action on demand reduction*

The highest priority should be given to health, education, research and training activities and on instruments to combat social exclusion. Exchanges of experience and best practices on demand reduction and promotion of networks at city level and of professionals should be supported. Adequate resources should be available for these types of activities.

Given comparable methods for surveys and data collection at Community level, two major objectives have been set for the EU and should be evaluated before 2004:

- (i) to reduce significantly over 5 years the prevalence of illicit drug use among young people under 18 years of age;
- (ii) to reduce substantially over 5 years the number of drug-related deaths.

2.1. Public Health

The key problems in this area are the following:

- The rise in the demand for drugs especially among young people;
- The increase in oral use of illicit drugs, such as “ecstasy”, new synthetic drugs and smoking heroin;
- The growing problem of the abuse of amphetamine in particular ;
- The frequent underrating of relevant health risks;
- The high prevalence of hepatitis C and HIV/AIDS as well as other serious diseases among intravenous users;
- The high number of drug-related deaths in many Member States.

Consideration of the following main challenges will need to be taken into account:

- To identify best practices on prevention for further use, and to ensure peer influences and support in preventive tools designed for the target group;
- The necessity for a comprehensive preventive approach in schools, in co-operation with the whole school community, including specific training of teachers in early recognition of young peoples problems;

- The need to put a greater emphasis on instruments to combat social exclusion, in order to prevent drug abuse and to help with the re-integration of former drug users ;
- The health and social aspects linked to the mobility of risk groups in and towards the EU Member States, migrants and displaced people, and those problems caused by drug tourism;
- Improving the quality of substitute treatment programmes with oral methadone and further exploration of alternative less addictive substitutes.
- The necessity to balance a number of considerations such as law enforcement goals and the treatment needs of the drug users, and further implementation of alternative measures to imprisonment.

Future orientations in the field of public health aspects should take into account:

(i) the need to rank very high the imperatives of public health as the basis for action and to complement specific public health instruments with other relevant Community policies and activities. There is also a need for adequate funding for the specific public health instruments;

(ii) experience gained to date in the implementation of the Community Action Programme on the Prevention of Drug Dependence and other relevant public health programmes (Aids prevention and health promotion);

(iii) integration with the forthcoming plan for public health policy with its three strands of action: improving information for the development of public health; reacting rapidly to health threats; tackling health determinants through health promotion and disease prevention;⁹

(iv) the guiding principles on drug demand reduction adopted by UNGASS in June 1998 which foresees the setting up of a comprehensive demand reduction strategy and puts unprecedented emphasis on demand reduction as part of an integrated approach to the drug problem.

Resulting from the mid-term evaluation of the 1996-2000 Drugs Prevention Programme, the following recommendations for future action in the framework of drug prevention can be made:

- To consider further studies and pilot projects on: (i) early identification of changed drug-use trends, either of already known substances or new substances and (ii) evaluation of the impact of prevention actions: do interventions reach their targets? What is the impact on single individuals/on groups/at Community level?
- To improve liaison between the projects and activities of relevant international agencies. To stimulate international co-operation between national public bodies as a way to enhance the growth of shared perceptions of events.

⁹ COM (98) 239 final of 15.04.98

- To adopt a more pro-active approach for the prevention and reduction of associated health risks, which should be grounded on a comprehensive strategy that can be used to drive the cost-effective allocation of resources.
- To further develop pilot studies of target groups in the framework of the prevention and reduction of associated risks, given the geographical spread and the social and cultural diversity of the Member States. Such studies should be fully grounded in a wide-ranging context that allows comparisons through all or at least most of the Member States.
- To develop prevention projects in the area of information and educational tools for target groups taking into account the Evaluation Guidelines for Prevention Projects, prepared by the EMCDDA. The project results should be presented accordingly.
- To continue subsidising the functioning of networks aimed at community exchanges concerning local prevention. These networks, while taking due consideration of national policy requirements, follow the goal of developing municipal drug policy strategies in collaboration with other cities in the Member States. The target would then be to strive for co-operation between the current comparable networks, and in so-doing, perhaps achieve new complementarity effects.
- To develop training programmes related to the prevention of drug dependence aimed at developing more intensively: (i) innovative training strategies which facilitate coping with new challenges and (ii) integration mechanisms that would ensure community-based training.

A comprehensive approach is still considered to be the best strategy to meet future problems. Such an approach should cover all areas of drug abuse prevention, from discouraging the initial use to reducing the negative health and social consequences of drug abuse. Community based prevention programmes and peer education projects should be implemented on a wider scale in the Member States.

In a comprehensive approach all types of drugs used and abused should be of concern, licit or illicit. Risks for health damage are not limited to prohibited drugs. Many of the new synthetic drugs are not yet controlled in the Member States. These are substances similar to and with more or less the same potential health risks as those which are controlled and prohibited.

More attention should be paid to the connection between an early start with smoking tobacco, an early introduction to alcohol and initial use of illegal drugs. Tobacco and alcohol are themselves without any doubt drugs proven to cause severe health damage. As such, preventive strategies implemented on tobacco and alcohol could also have impact on preventing initial use of illegal drugs.

One key issue should be an emphasis on helping drug users to reduce their existing drug demand. Reducing the adverse health and social consequences of drug abuse should also be pursued. The availability of a wide range of treatment services of high quality, both in-patient and out-patient is also of importance in a demand reduction

perspective. There is a particular need for further development of low threshold services and to improve health care in prison.

Taking into account that illegal use of drugs in general is still rising, and this in spite of all efforts made, more attention should therefore be given in the Member States to setting concrete standards for prevention programmes both in number and quality, for an easy access to treatment on all levels, as well as for measures to prevent relapses.

2.2. Education and raising awareness through information campaigns

The objective is to provide education and awareness raising which could play a relevant role in the prevention of drug addiction and risk reduction. These activities should (i) improve knowledge about drug dependence by producing and using educational materials and methodologies and (ii) enable people to adopt a responsible attitude in front of drugs.

Educating young people and their parents about the nature and dangers of drug abuse is a vital element in tackling the problem. Children need to be made aware of drugs from primary school level onwards. It is also important that parents and teachers are given the opportunity to learn more about drugs so that they can notice and help anyone with a possible drug problem.

National school programmes are a major primary prevention measure. Education programmes at national and European level have been initiated to establish protective factors against drug abuse by developing personal and social skills in handling conflict situations and peer pressure and by fostering critical attitudes and decision making skills. These kinds of approaches have also been successfully applied as a means of incorporating primary prevention in leisure time activities.

Mass media campaigns have been widely used as a means of raising awareness on drug issues. To be effective, the messages in these campaigns should be well targeted, informed and realistic. It is of the utmost importance that such information campaigns act as a supportive element for local level actions undertaken with an educational perspective, both for young people and for key persons in their environment. The European Drug Prevention Week in 1998 is a good example of combination with a European campaign to highlight the theme of the week and to support the visibility of local events.

The main priorities for education and awareness raising in Europe are the following:

- The necessity for a comprehensive preventive approach in schools, in co-operation with the whole school community, including specific training of teachers in early recognition of young peoples problem. The comprehensive approach should also include the families.

- The need for including and improving drug related training in postgraduate education for professionals who will have their future work in the health-, social- and law enforcement sectors.

- The development of flexible educational tools and methodologies for assisting the implementation and evaluation of prevention programmes. Full use should be made of the experience and knowledge of the EMCDDA in this field.
- The effective utilisation of new media, especially the Internet, in designing, implementing and evaluating educational prevention programmes.
- The importance of peer groups has been widely recognised. Most often, the first experimental drug use occurs because someone you know offers you drugs. Peer groups can also act as a protective factor. Young people themselves should be involved, from the beginning, in the setting up of prevention programmes. When a programme is targeted at the drug using population, the involvement of former drug users may be advisable.
- The active participation in sports and other hobbies must be encouraged. It is especially important that schools, together with NGOs, youth clubs etc..., arrange supervised activities during after school hours to offer attractive alternatives to the youth.

2.3. Research

The objective at EU level is to stimulate research to prevent and control drug-related health problems by using to the full the possibilities that exist under the Fifth Framework Programme for Research, Technological Development and Demonstration. Considering the limited proportion of the Fifth Framework Programme budget with respect to the overall public spending for research in the EU, other relevant initiatives, in particular those undertaken at national level or in other European fora, should be given appropriate attention in the realisation of the objectives of this action plan.

The Fifth Framework Programme of the European Community for Research, technological development and demonstration activities (1998 to 2002)¹⁰ has introduced a specific priority for research activities related to the fight against drugs with a view to prevent and, where appropriate, control drug-related health problems through (i) establishing the psychological and socio-economic factors involved in drug-taking and drug abuse, (ii) developing better understanding of the long-term health and social consequences of abuse, and (iii) developing more effective treatment strategies.

The research priorities as mentioned in the work programme of the theme "*Quality of life and management of living resources*" under the action line "Public health and health service research" are:

- Biomedical approaches to drug demand reduction and treatment, including research into rehabilitation and non-structured bio-medical support (morbidity/mortality studies, treatment outcome, co-morbidity, behaviour and disease, multi-drug abuse, risk groups);

¹⁰ Decision N° 182/1999/EC of the European Parliament and of the Council of 22.12.98 O J N° L 26 of 1.02.99

- Health and socio-economic aspects of drug use and drug addiction (youth and other high risk or vulnerable groups, drug-use patterns, social effects, economic costs of drug use and addiction, drug related health services research, prevention, environmental determinants and public perception);

- Physical detection, drug profiling and biological monitoring of drugs, precursors and solvents.

The action line "Neuroscience" also under "Quality of life and management of living resources" will specifically look into understanding reward and punishment mechanisms and their implications for learning and drug dependence.

In addition, within the theme "Competitive and sustainable growth", attention is given to measurements and testing and anti-fraud methodologies. This activity should enable illegally used substances or component, forbidden drugs in sports, illegal drugs trafficking and illegal (animal) trading to be detected.

In general, attention will be paid to the socio-economic impact of the drugs phenomenon. This will be developed in close co-operation with the EMCDDA, which develops pilot studies in this field. In this context, a project co-ordinated by the EMCDDA was selected during the third call for proposals of the *Targeted Socio-Economic Research programme*. The project is entitled "European network to develop policy models and socio-economic analyses of drug use, consequences and interventions.

2.4. Other key drugs related issues

- *Drugs and driving*

The objectives at EC level are:

- to review the situation as far as drugs and driving is concerned;
- to analyse the implication of illicit drugs in road accidents on the basis of available data;
- to recommend more reliable methodologies for the collection of such data;
- to review and support development regarding road-side testing methods and further laboratory analysis, and their limitations;
- to review and further develop experimental control studies on driving impairment and pharmacokinetics;
- to review and compare the measures taken in the field of rehabilitation.

Although the effect of alcohol on driving is well established, as is its role in traffic accidents, there is far less evidence of this kind for other drugs. There is still an insufficient scientific basis to develop specific measures for drugs. This issue was not considered under the 1995-1999 Action Plan to combat drugs. However, it was included in the first Action Programme on Road Safety adopted by the Commission in 1993¹¹, following which a Working Party on "Alcohol, Drugs and Medicines and

¹¹ Com (93) 246 final of 9.06.93

Driving” was established in early 1994 in the framework of the High Level Group on Road Safety.

This Working Party produced a report including a first set of recommendations such as that the first priority was to define the true nature of the problem through epidemiological research. Its recommendations related to (i) how to define the prevalence of illicit drugs among the driving population and the relative risks of traffic accident involvement for the users of various drugs, individually and in combination, (ii) the combined use of illicit drugs and alcohol and (iii) legislation for controlling the presence of illicit drugs in drivers.

More recently, the 1994 Working Party has been reactivated. The topic is maintained under the second Action Programme on Road Safety, adopted by the Commission in April 1997¹², covering the period 1997-2001 with special emphasis on the development of road checks. Appropriate co-ordination with the EMCDDA and the Pompidou Group of the Council of Europe has been established. Under the Fifth Framework Research and Technological Development Programme, research activities will continue on issues linked to driving under the influence of illicit drugs and prescribed medicines.

- Doping in sport

At Community level, the following goals have been set for the next five years: (i) improving information about doping and its consequences for the public at large; (ii) raising awareness of the problem among doctors; (iii) introducing and improving co-ordination in the legislative field; (iv) establishing clear definitions, lists of forbidden substances and standards for testing; and (v) improving health protection for young athletes.

So serious has been the increase in doping in sport in recent years that the Vienna European Council underlined its concern at the seriousness of the problem which undermines the sporting ethic and endangers public health. Professional sport is currently witnessing the development of ever more sophisticated doping methods. Many ordinary people for whom sport is a way of improving their quality of life can be exposed to drugs through sport. Doping in sport often does not mean taking illegal substances but misusing legal drugs.

The problem of doping in sport requires a double approach. Doping at professional level should be treated as a professional matter. Indeed, rules against doping require close co-ordination between States, sporting organisations and international organisations. Eliminating doping at amateur level calls for more uniform measures already tested in the general fight against drugs. It is important to bear in mind the impact of sporting activities on the general public and the influence of sports stars' behaviour on young people. Combating drugs in sport is therefore an excellent means of getting the message across in the more general fight against drugs.

The Member States and the Commission agreed on the need to develop new measures at Community level to make more effective use of the different Community policies

¹² Com (97) 131 final of 9.04.97

and to harmonise legislation. As trafficking in illicit substances can also be involved in doping in sport, the framework of the co-operation in justice and home affairs could also have a role to play in this respect.

Finally, the fight against doping in sport calls for closer international co-operation. Athletes are becoming increasingly mobile and need a clear and precise legal framework to avoid committing an offence.

3. *Action on reduction of illicit trafficking in narcotic drugs and psychotropic substances*

Priority attention should be given by the EU to enhancing measures and instruments related to (i) the control of chemical precursors diversion within the EU and in third countries, (ii) the prevention and the fight against money laundering, (iii) the effective co-operation between police, customs and judicial authorities, (iv) the implementation of the EU Action Plan on Organised Crime, (v) the prevention of the use of new communication systems (e.g. Internet) as means of developing drug abuse, production and trafficking, (vi) the international co-operation in the fight against illicit drugs trafficking. Co-ordination and co-operation represent key elements for the successful implementation of these policies.

3.1. Consolidation of the *acquis communautaire*

3.1.1. Diversion of precursors and psychotropic substances

Precursors are an important area of the supply reduction side of the drug problem as they are essential chemicals indispensable for the manufacture of drugs; these chemicals are commonly traded and used for the manufacture of licit products such as plastics or pharmaceuticals; however, a small part of them is diverted to the illicit manufacture of drugs, namely heroine, cocaine and synthetic drugs.

More specifically, precursors are any of the 22 scheduled chemical substances which are listed in Table I or II of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988 (UN 1988 Convention) of which the Community is a Contracting Party under its Article 12 alone that deals with precursors. Monitoring external trade on precursors is a Community competence under Article 113 of the EC Treaty.

The Community has approved the appropriate internal legislation to fight precursor diversion at Community and international level. While Council Directive 92/109/EEC¹³ deals with the manufacture and placing of precursors on the Community market, Council Regulation 3677/90¹⁴ addresses the trade in precursors

¹³ OJ n° 370 of 19.12.92. The Annexes to this Directive were modified by Commission Directive 93/46/EEC of 22.06.93.

¹⁴ - Council Regulation (EEC) No 3677/90 of 13.12.1990 - OJ L 357 of 20.12.90. p.1 as amended by Council Regulation (EEC) No 900/92 of 31.03.1992 - OJ L 96 of 10.04.1992. p.1. as implemented by Commission Regulation (EEC) No 3769/92 of 21.12.1992 - OJ L 383 of 29.12.92. p.17. as amended by by Commission Regulation (EEC) No 2959/93 of 27.1.1993 - OJ No L 267 of 28.10.93. p.8. and amended by Commission Regulation (EC) No 2093/97 of 24.10.1997 - OJ L 292 of 25.10.1997. p.11.

between the Community and third countries by setting forth a number of export requirements.

The existing Community precursor control system has worked correctly. Further improvements are envisaged through (i) enhanced co-operation with industry and (ii) the conclusion of precursor control agreements with more risk countries which are capable of coping with the monitoring mechanisms under those agreements.

As precursor diversion is the exception to licit commercial transactions, a purely law enforcement approach on precursor control is not rewarding. Efforts to counter diversion have to be balanced with the needs of licit trade.

Bilateral agreements on precursor control with third countries (Bolivia, Colombia, Equator, Peru and Venezuela), Chile, Mexico and the United States have paid off as they contribute greatly to a widespread information-sharing in the combat against precursor diversion. The conclusion of similar bilateral agreements with more countries and regions in the world should be pursued as a good basis for enhancing and extending the precursor control system; they should be placed under a regional approach in order to avoid illicit traffic in precursors circumventing national controls via neighbouring countries. Hence, under the framework of the Europe Agreements, the Community should also soon start negotiations on precursor control agreements with the associate countries of Eastern and Central Europe which are particularly important for the manufacture of the so-called new synthetic drugs (amphetamines...).

Fighting precursor diversion at international level may imply the exchange of sensitive information on individuals or companies. This information is protected by national and Community legislation. Nevertheless, the Community has managed to facilitate such an exchange by concluding the above-mentioned precursor control agreement, which provides the indispensable legal coverage for the exchange of sensitive information. The Community should pursue this effort and streamline it as worthwhile and representing a major success of the Community in curbing the availability of precursors for the illicit manufacture of drugs.

Addressing the problem of precursors for new synthetic drugs should take into account the large number of these precursors on the market which have a highly changing and evolving nature. The above makes it unrealistic to establish a control mechanism similar to that imposed on the 22 scheduled substances because additional constraints on more substances could only result in weakening the global efficiency of the precursor control system while hampering the very productive co-operation between operators and the authorities.

The 22 precursors identified in the UN 1988 Convention are not sufficient to fully address the precursor diversion issue. Therefore, bearing in mind the new challenge posed by new synthetic drugs, as described above, it is sensible to establish "special surveillance lists" for non-scheduled precursors. Such lists should reflect in an evolving perspective the diversion patterns in the Community of the chemicals under such surveillance lists, and the principle of co-operation with industry.

The G 7 Chemical Action Task Force recommendations of 1991 enshrined a targeted approach gearing the international precursor control mechanisms towards a specific

and limited number of chemicals consistent with the nature and trade patterns of each product. This is more realistic and cost-effective than extended control on a wide range of chemicals.

3.1.2. Money laundering

The Commission's Second Implementation Report adopted on 1 July 1998¹⁵ concerning the Directive on the prevention of the use of the financial system for the purpose of money laundering¹⁶ has been forwarded to the Council and Parliament. It records that all the Member States have implemented the Directive. The one current infringement procedure concerns Austria's anonymous savings books.

The report also makes a fairly positive assessment of the impact of the Directive. However, an important aim of the Directive is preventive in nature and it is impossible to assess how much money laundering may have been prevented. On the other hand the data on suspicious transaction reports set out in Annex 8 shows that the financial sector has responded fairly well to its responsibilities under the Directive. In short, all the Member States continue to take an active stance against money laundering.

A money laundering experts subgroup of the Multidisciplinary Group analysed the effectiveness of anti-money laundering systems in respect of co-operation under Title VI of the TEU as the results of the anti-money laundering effort in terms of prosecutions, convictions and assets confiscation remain relatively modest so far. In order to enhance effective co-operation between Member States in this area, the Council adopted on 3 December 1998, on the basis of Article K.3 of the TEU, a Joint Action on money laundering, the identification, tracing, freezing, seizing and confiscation of instrumentalities and the proceeds from crime.¹⁷

Moreover, the Commission announced in its Second Report and in the accompanying press release that work has started on a proposal for a second money laundering Directive to extend and update the 91 Directive. This proposal will seek to give effect to the recommendations related to Community fields of competence of the Organised Crime Action Plan and to some of the wishes expressed by the European Parliament. It intends in particular to extend the scope of the directive to certain non financial activities and professions.

Money laundering is a global concern and efforts to combat it can be effective only if all countries and regions of the world share the same objective. However sophisticated the EU's (or FATF members') anti-money laundering systems may be they will be rendered ineffective if other countries or regions have inadequate or non-existent systems. Hence the importance of the Financial Action Task Force (FATF) and UN global efforts and the EU's external work in this area.

FATF remains the foremost international anti-money laundering body and it has been decided that its mandate should be extended for a further five years as from mid-1999.

¹⁵ COM (1998) 401 final

¹⁶ OJ N° 166 of 28.06.91

¹⁷ OJ n° L 333 of 9.12.98

The FATF is now beginning work on taking in a small number of strategically important new members and on the creation of a world-wide network of regional anti-money laundering bodies. Work has also begun on two complex and sensitive tasks passed to the FATF by the G7/8, namely on non-co-operative jurisdictions (in terms of excessive banking secrecy and opaque corporate structures) and the use of anti-money laundering defences to combat tax fraud.

The Phare programme has been particularly active in anti-money laundering efforts, including its support for the Council of Europe mutual evaluation project. Work is now being launched under TACIS (feasibility study in Russia, Ukraine and Moldova). A major project has been launched with the US in the Caribbean and another project is in execution for the five countries of the Andean Community. The SADC drugs control programme also has a money laundering component. Work is continuing to ascertain whether it will be possible to co-finance anti-money laundering measures under ASEM.

These external efforts are important and also give the Commission and the EU enhanced international visibility. They should be continued and developed even further.

3.1.3. Prevention of the use of new communication systems (e.g. Internet) as means of developing drug abuse, production and trafficking.

New technology, in particular Internet, can have both positive and negative impacts on drug misuse. As an example of positive impact, Internet can be used to raise public awareness on drugs misuse and to provide accurate information on harm caused by drugs, especially new synthetic drugs. As negative impact, Internet can be used for drug-related illicit purposes with a view, in particular, (i) to provide information on the chemical precursors and essential substances, access to specialist literature and to the market of laboratory equipment needed for the illicit manufacture of drugs, (ii) to provide training on illicit manufacturing and (iii) to incite drugs abuse.

The European Parliament and the Council by a decision dated 25 January 1999 adopted a multiannual Community action plan on promoting safer use of the Internet by combating illegal and harmful content on global networks.¹⁸ The action plan covers a period of four years from 1 January 1999 to 31 December 2002. with a total appropriation of 25 million EURO. The implementation of the Internet Action Plan will in particular aims at (i) the creation of a safer environment by the setting up of a European network of hot-lines where improvement of the co-operation between industry and law enforcement authorities will be essential for developing the full potential of the hot-lines and (ii) the encouragement of awareness actions. Responsibility for prosecuting and punishing those responsible for illegal content remains with the national law enforcement authorities, assisted by Europol in particular.

¹⁸ Decision n° 276/1999/EC OJ n° L 33 of 6.02.99

3.2. Synthetic drugs

The Dublin European Council in December 1996 highlighted the necessity to give priority attention to synthetic drugs both within the EU and in other countries, in particular in Central and Eastern Europe and to tackle the problem at three levels: (a) legislation; (b) practical co-operation against production and trafficking, including improved co-operation between national authorities and the chemical industry and (c) international co-operation.¹⁹

The recently established early warning system for new synthetic drugs²⁰, co-ordinated by Europol and the EMCDDA, should help in meeting the new challenges presented by the consumption and production of these new drugs.

In its Communication on the control on new synthetic drugs²¹, the Commission indicated that a later stage additional instruments might enhance the effectiveness of the fight against the illicit trafficking in and use of synthetic drugs, based perhaps on a discussion of the relative merits of the "emergency list" approach, the "generic approach" or the "analogue approach" mentioned in the Communication.

3.3. Implementation of Title VI of the Amsterdam Treaty

The Treaty of Amsterdam

The new legal framework provided by the Treaty of Amsterdam is described under chapter III section D. In its communication of 14 July 1998 "Towards an Area of Freedom, Security and Justice"²², the Commission indicated that the Treaty of Amsterdam will further enhance the Commission's ability to make its contribution to the Union's fight against drugs, also in areas where it previously had no formal right or initiative.

The Action Plan on an area of freedom, security and justice

Our approach in the abovementioned communication has been taken into consideration in the Action Plan of the Council and the Commission on how best to implement the provisions of the Treaty of Amsterdam establishing an area of freedom, security and justice, which was endorsed by the European Council of Vienna.

Drugs are especially mentioned in the Action Plan when referring to the area of security. Concretely, the Action Plan mentions that drugs constitute a threat to collective and individual security in numerous ways, often but not always linked to organised crime. It indicates that it is an area to which Europe has brought a distinctive and influential approach through its insistence on a comprehensive policy,

¹⁹ The joint EC/EP Presidency conference on synthetic drugs (Brussels, 27-28.11.97) issued a number of recommendations on how to tackle the problem on all fronts (prevention, information, research, health promotion and treatment, supply reduction and law enforcement). LIBE 103 EN. PE 167.784

²⁰ Joint Action adopted by the Council on 16 June 1997 on the control of new synthetic drugs (OJ N° L 167 of 25.06.1997)

²¹ COM(1997) 249 final of 23.05.1997, p. 5

²² COM(1998) 459 final

based on shared responsibility between consumer and producer countries. Within that comprehensive framework, it is clear that a major component will be the mobilisation of all available judicial and law enforcement resources against the traffickers and criminal organisations.

Co-operation at EU level between police, customs and other law enforcement services of the Member States deserves special attention. The Action Plan implementing an area of freedom, security and justice supports and enhances the co-operation between all these law enforcement services as this is what precisely will contribute to the effectiveness of the Union's efforts to counter the drug problem.

In the aspects of law enforcement co-operation and judicial co-operation in criminal matters, the Action Plan implementing an area of freedom, security and justice contains a timing of measures to be adopted in two and five years after the ratification of the Treaty of Amsterdam. Those measures to be developed and implemented will have a real impact on drug trafficking and illegal drug related activities, such as money laundering.

In the area of drugs, all the measures proposed in the Action Plan are extremely important but perhaps most significant are those which are referred as needing to be taken within two years of the entry into force of the Treaty. These measures cover both police co-operation and judicial co-operation in criminal matters.

*Under police co-operation, the Action Plan focuses on Europol work on operational co-operation.*²³ Other police and customs co-operation measures comprise:

- the common evaluation of particular investigative techniques in relation to the detection of serious forms of organised crime (e.g. controlled deliveries, surveillance);
- consideration of the arrangements under which a law enforcement service from one Member State could operate in the territory of another, taking into consideration the Schengen acquis.

Equally significant, in the aspect of co-operation within the framework of Europol, are the following measures to be accomplished within the period of five years:

- to promote liaison arrangements between prosecuting/investigating officials specialising in the fight against organised crime;
- to establish a research and documentation network on cross-border crime;
- to improve statistics on cross-border crime;
- to set up a system for the exchange of information and analysis on money laundering.

²³ One of the priorities stated by the Treaty of Amsterdam is to determine the nature and scope of the operational powers of Europol, which will have to be able to "ask the competent authorities of the Member States to conduct and co-ordinate (their) investigations" and also to act within the framework of "operational actions of joint teams".

Under judicial co-operation in criminal matters, the Action Plan refers to the establishment of minimum rules relating to the constituent elements of criminal acts and penalties in the field of drug trafficking as a measure to be taken within two years of the entry into force of the Treaty of Amsterdam.

The integration of the Schengen Acquis in the field of drugs will constitute an important element taking into account the operational activities and measures undertaken in the framework of Schengen which have led to an increase of the general efforts to curb drugs trafficking.

Finally, the Action Plan makes a reference to the enlargement process linking it with the pre-accession strategy. Justice and Home Affairs matters are a priority for the European Union. The measures proposed by the Action Plan will contribute to reinforcing the Justice and Home Affairs Acquis, setting out for the benefit of the applicant countries a clear and comprehensive statement on the Union's priorities in this area.

4. *Action at International level*

The international dimension of the fight against drugs requires more intensive co-operation. This co-operation needs to be developed with target countries and regions in support of national and/or regional plans (master plans), where they exist, on the basis of guiding principles, using to the full all existing instruments (development, technical, financial and trade, political dialogue, co-operation in justice and home affairs). Co-operation of the EU with industrialised countries and with UNDCP and other relevant international fora and groups will need to be continued and enhanced.

- Basic principles of the international co-operation

The seriousness and the common threat that drugs pose to both the developed and developing countries, requires a more intensive co-operation at country, regional and global level. The 1998 United Nations General Assembly Special Session on Drugs (UNGASS) recognised that international drug control co-operation needs to be seen as part of overall efforts to foster social and economic development in a broader sense.

Through the adoption of the Political Declaration by UNGASS, the international Community, including the EU, has subscribed to some basic principles:

- **Shared responsibility:** action against drugs is a common and shared responsibility requiring an integrated and balanced approach;
- **Integrating drugs control into mainstream development:** demand/supply reduction efforts must be integrated and supportive of existing socio-economic development policies,
- **Balanced approach between demand and supply reduction:** demand reduction has for the first time been recognised as one of the main pillars of a global drugs strategy;

- **Respect for human rights,**

- **Support for multilateral approaches:** drugs control problems are to be addressed in a multilateral setting; the UN (UNDCP) is hereby reconfirmed as a centre of excellence and valuable focal point for knowledge about drug related issues. Other specific international organisations can also provide valuable experiences.

• Implementation of UNGASS

At the meeting of the UN Commission on Narcotic Drugs (CND) which took place in Vienna on March 1999 important steps have been taken by the international community including the European Union to support the implementation of the various Action Plans and other measures adopted in June 1998 by the Special Session on Drugs of the United Nations General Assembly (UNGASS). The Action Plans concern (i) the International Co-operation on the Eradication of Illicit Drug Crops and Alternative Development, (ii) the Guiding Principles of Drug Demand Reduction and (iii) the Illicit Manufacture, Trafficking and Abuse of Amphetamine-type Stimulants and their Precursors. The other measures relate to the control of precursors, judicial co-operation and money laundering.

• Integration of EU international co-operation in the fight against drugs into the broader objectives of EU external relations

The EU has recognised the important role of drug concerns also in foreign policy by applying two broad categories of action. Firstly, multilateral action is undertaken through (i) active support for global policy-making, (ii) strengthening of strategy setting by UN institutions and (iii) effective functioning of informal bodies. Secondly, bilateral action and regional actions are carried out through three types of instruments for co-operation with third countries: political dialogue, trade policy and technical and financial assistance. The EU will need to continue to integrate international co-operation in the fight against drugs into the broader objectives of EU external relations.

• Full use of EC instruments for international co-operation (development, technical and financial assistance and trade instruments such as the Generalised System of Preferences)

The EC will need to make full use of EC instruments for international co-operation (development, technical and financial assistance and trade instruments such as the Generalised System of Preferences) in the context of third countries and/or regions strategies and development plans. This implies that drugs control needs to be seen as an integral part of EU development co-operation. As far as GSP is concerned, the Commission deems it useful to continue the special commercial arrangements in support of the efforts to address illicit crop production, provided that the countries concerned continue their efforts to combat drugs and that results are achieved. Based on an evaluation of the GSP impact on combating drugs, the agricultural EC GSP scheme granted to the Andean and Central American countries was extended until 31 December 2001 and the industrial scheme was also granted to Central America for the first time.

- Full use of CFSP instruments in bilateral co-operation and within the multilateral framework including political dialogue, common positions and joint actions

The Treaty offers scope for stronger overall external action against drugs, through the common foreign and security policy (CFSP), which provides for the use of joint action in particular areas in which Member States have important interests in common, and for the establishment of systematic co-operation in the European Union in areas of general interest. So far, EU actions have mainly taken the form of political dialogue with third countries. The dialogue has been further advanced by the systematic inclusion of drugs clauses in co-operation agreements. Furthermore, the EU has regularly co-ordinated its activities in international fora.

These activities must be continued and enhanced as an integral part of the EU co-operation with third countries both in multilateral and bilateral fora. As far as bilateral relations are concerned, further emphasis should also be given to the link between development co-operation and third countries' political commitment to promote good governance, the rule of law and respect of human rights.

- Development of international co-operation in JHA matters

There is an increasing need to develop a coherent approach concerning the issue of how the EU should co-operate with third countries and regions in combating illicit drug trafficking. This aspect is already an important component of the major drugs initiatives carried out by the EU in Latin America, the Caribbean and Central Asia. Provisions also exist for co-operation in this field in a large number of co-operation (and partnership) agreements with third countries and regions. Combined efforts of all competent authorities in the EU will be needed, with a particular role for Europol in the areas of intelligence gathering and analysis and in helping to co-ordinate national investigations. The Commission will contribute to these common efforts mainly through effective co-ordination with first pillars instruments (money laundering, precursors) and through availability of existing funds, whenever possible.

- Operational co-ordination between the Commission and the Member States in identified third countries/regions for the purpose of joint assessment and implementation of programmes

The effective implementation of a comprehensive and integrated response to the drugs phenomenon at the level of the Union will call for action at different levels. Equally it involves a wide range of players both governmental and non-governmental. The implementation of this Action Plan will require an ongoing co-ordination effort to assess jointly and to implement the programmes.

- Main target countries and regions

Main target regions are the candidate countries²⁴; Latin America/ Caribbean and Central Asia extended to Transcaucasia.

²⁴ See description of the Phare Drugs Programme on pages 8-9

As far as Latin American countries are concerned, the EU expects to further strengthen the dialogue on this matter with the different sub-regional groups, as well as the specialised dialogue on drugs with the Andean countries. Furthermore, the EU expects that Latin American countries will play a key role in the new mechanism on drug co-operation/co-ordination between Europe and Latin American/Caribbean countries, whose first meeting took place in April 1999. In the field of co-operation, a comprehensive Action Plan for Latin America has been adopted. This Plan stresses the importance for both sides to maintain a balanced approach to the problem, reaffirms the importance of the principle of shared responsibility and defines a list of topics on which the Commission and the Members States' aid should focus in the future with a view, in particular, to reinforce the inter-regional co-operation between Latin America and the Caribbean as well as between the various Latin American sub-regional groups.

The EU Caribbean drugs initiative has significantly improved co-operation and co-ordination of drugs control actions both among the Caribbean countries, as well as among donor countries, to the benefit of the region. The establishment of a Commission Drugs Control Office in Barbados has ensured a high visibility of the EU in the area of drugs control and has improved the monitoring of Community funded drugs control activities, amounting to approx. 20 million EURO, in support of the Barbados Plan of Action. In this context, the setting up of the EU/Caribbean/US maritime co-operation office (PMO) has facilitated a closer dialogue and enhanced co-operation in the field of maritime co-operation to address the problems relating to drugs trafficking.

There is a high level of movement of drugs from Afghanistan and its neighbours through the NIS, mainly directed at the EU. Co-operation in the framework of Tacis, related to drugs issues, is covered by three programmes: (i) Customs Co-operation, (ii) Border Crossing Programme, and (iii) Justice and Home Affairs, a programme that is now under development. The *Customs programme* in Central Asia, particularly but not exclusively, assists in establishing effective border controls, and the use of investigative methods, including profiling and risk analysis in identifying the movement of drugs. The *Border Crossing Programme* provides support and infrastructure for all agencies working at specified crossings between the West of the NIS and Central Europe and the EU. It provides assistance to all enforcement agencies at the crossings and is expected to have an impact on trade facilitation, while increasing detection rates in the movement of illicit substances. The *JHA programme* targets in addition other agencies, such as Ministries of the Interior and police forces, particularly in Central Asia and the Caucasus, with support to institutional strengthening, with activities foreseen at the operational level, at airports and border crossings in particular. Emphasis is also being given to money laundering in Russia, Ukraine and Moldova. Moreover programme activities are currently being developed in close co-ordination with, inter alia, UNDCP and UNDP.

Another main objective is to further progress the dialogue with North African countries (especially Morocco) and Middle Eastern countries under Euro-Med, as well as to promote co-operation with countries of the SADC region (Southern Africa) and the West African region. Southern Africa is a new target region for EU co-operation in the field of drugs. The start was launched in Mmabatho/South Africa in November 1995 and the political commitment was reconfirmed at the EU/SADC Drugs Control

Conference of Gaborone in February 1998. At the EU-SADC Ministerial meeting in Vienna in November 1998, the EU committed itself to support the implementation of the SADC Regional Drugs Control Action Plan. Regional programmes have been launched in 16 West African countries, aimed at supporting the development of national masterplans, adequate institutional structures, as well as appropriate legislation to counter the drugs threat in the region.

Another region where co-operation should be developed and enhanced in the coming years, is Asia, in particular with China and with the Asian ASEM partners. As regards China, the Commission's Communication, "Building a Comprehensive Dialogue with China", of March 1998, underlines the necessity to promote a substantial dialogue and encourage co-operation with this country on various issues, including combating illegal drug trafficking. This commitment should be developed and China should be involved in the international activities for combating drugs trafficking. The first step in developing a constructive dialogue with China is the identification of the nature and magnitude of the problems related to illegal drugs trafficking in the country. The issue should then be discussed with China in the framework of the EU -China Political Dialogue.

Co-operation with the Asian countries in the framework of ASEM should be enhanced. Initiatives such as the exchange of senior customs officials and seminars for customs officials should be continued and similar actions should be developed on a wider basis.

- Continuation of bilateral co-operation with the industrialised countries (USA, Canada, Japan) and strengthening of multilateral co-operation in relevant international fora, such as the G8 and the Dublin Group

Co-operation with our industrialised partners should be strengthened both bilaterally and within multilateral fora. Our first objective should be the support of implementation of integrated and/or regional policies and programmes, with the overall aim of promoting dialogue and ownership on the part of the recipient country.

At the same time, we should aim at enhancing complementarity of our actions. Complementary is best ensured when co-operation is based on commonly agreed needs-assessment at country and sectoral level. Assistance may then be allocated on the basis of the comparative advantages of individual donors and in respect of potential political concerns and interests

At the bilateral level we should establish strong channels of communication to ensure the exchange of information on illegal drug trafficking and related organised crime.

The best example of successful co-operation with an industrialised partner, is the comprehensive EU -US co-operation under the New Transatlantic Agenda (NTA). This relationship should be continued and strengthened. In the coming years the two partners will continue working on joint projects, such as the Caribbean Initiative, and will look for other constructive actions in other regions of the world, notably in Southern Africa, Nigeria, Eastern Europe, Central Asia, Latin America/Andean region.

The EU –US will also continue co-operation between American and European law enforcement agencies and will continue to work together on the implementation of international Conventions.

Our co-operation with Canada and Japan should also be enhanced. Co-operation with Canada will take on new dimensions in the next few years since Canada has recently finalised its internal drugs policy and is now working on the definition of an international policy on drugs. In this framework, co-operation with the EU on drug related issues will be broadened.

Japan has expressed its intention at the EU-Japan Summits, to set up a dialogue in the field of combating drug trafficking, which could develop into a regular exchange of information within an expert group. The possibility of concluding a precursors agreement with Japan should also be noted.

Discussions within the G8 framework should be continued and enhanced. G8 have recognised the link between drugs and wider international and domestic crime and have committed to partnership and shared responsibility in the international community to combat illicit drugs. This should include reinforced co-operation to curb illicit trafficking in drugs and chemical precursors, action to reduce demand, including through policies to reduce drug dependency, and support for a global approach to eradicating illicit crops.

Another important forum where the industrialised countries can discuss drug related issues, is the Dublin Group. It is an informal consultation mechanism of major world players, which regroups the EU Member States and the Commission, Australia, Norway, Canada, Japan and the US. The United Nations Drugs Control Programme (UNDCP) also participates in the meetings. The main global meetings are held twice a year. Their discussions are based on regional reports collated from reports prepared at national (local) level by the so-called “mini-Dublin” groups.

- Co-operation with international organisations

Co-operation with international organisations competent in the field of drugs should be continued and enhanced. The European Community sees in particular UNDCP as a centre of excellence and a valuable focal point for knowledge about drugs related issues. UNDCP is an important partner that can offer comparative advantages in its services, while representing the main co-ordinating tool for co-ordination of international drugs control activities. Other specific international organisations can also provide valuable experience and partnership, such as for example CICAD.

5. Co-ordination, integration and simplification

<p>Co-ordination is essential due to the multi-facets of the drugs phenomenon and the “inter-pillar” aspects of action taken by the EU. Co-ordination should be enhanced at all levels and involve all EU institutions and entities.</p>
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5.1. Co-ordination at Council level

Co-ordination of drugs activities of the EU is carried out by the **Horizontal Drugs Group** (HDG), set up by COREPER in February 1997. Its mandate is to monitor and co-ordinate all cross-pillar activities in the field of drugs and to report back to COREPER. The remit of its activities includes international cross-pillar drug control initiatives carried out by the EU in specific geographic areas which have been targeted by successive European Councils (i.e. Caribbean, Latin America, Central Asia). Given the variety of interest of Member States towards the different regions where drugs initiatives are taken, it can be appropriate, in some cases, to follow a flexible and pragmatic approach in terms of co-ordination. The setting up of specific informal co-ordination groups between concerned Member States, in the framework of the HDG, has significantly improved co-ordination between Community funded and Member States bilateral drugs control activities. Informal co-ordination groups have been set up for the Caribbean, Latin America and Central Asia.

The HDG can draw on the experience of specific Working Groups of the Council which look at particular aspects of the drugs phenomenon such as:

-the **Common Foreign and Security Policy (CFSP) Council Working Group on Drugs (CODRO)** which is engaged in co-ordinating and taking forward foreign-policy initiatives related to drug control co-operation with third countries. In this context, the EU has in particular urged those countries that have not yet signed or ratified the three UN Conventions, to do so.

- the **Health Group** that examines issues linked in particular to the Community Action Programme on the Prevention of Drug Dependence.

- the **Economic Question Group** that examines issues linked to the control of chemical precursors.

- the **General System of Preferences Group** responsible for following the implementation of the GSP system.

- **various working groups set up under Title VI of the TEU** such as the customs co-operation group and the police co-operation group.

5.2. Co-operation between the institutions and other entities of the EU

In general, co-ordination between the EU institutions and other entities of the EU on drugs issues should be encouraged in order to ensure a coherent and consistent approach at EU level to drugs policies and strategies.

The informal co-ordination on drugs issues initiated in 1995 by the European Commission with the European Parliament, the Presidency of the Council, the Economic and Social Committee and the Committee of the Regions made a valuable contribution to the mutual understanding of drugs policies undertaken in the EU Member States and to the identification of common trends on how drugs issues are dealt with in practice in the EU.

IV. CONCLUSIONS

The ambition of this Action Plan is to provide the EU with appropriate means and tools to combat drugs. Taking into account the need for co-ordinated action at all levels, it should contribute to ensure a truly comprehensive and balanced approach towards the drugs phenomenon and to concentrate on high priority targets. It will benefit from its strengthened collection of information tools and co-ordination structures.

The systematisation of evaluation and the improvement of the monitoring of the drugs problems will contribute to ensure cost efficiency and facilitate rapid decision making at appropriate levels.

In the area of demand reduction, the Action Plan stresses that the EU should put the highest priority on prevention, relating to health, education, research and training activities and on instruments to combat social exclusion. It encourages the exchange of experience and best practices and the support to networks at city levels and to networks of professionals. It emphasises that adequate resources should be made available for these activities.

The next few years will be crucial in the development of a coherent approach to combating drugs in sport. The Member States and the Commission have announced their willingness to help in setting up an international agency to deal with this problem in co-operation with sports organisations.

In the field of supply reduction and action against the illicit trafficking of drugs, priority should be given by the EU to enhancing measures and instruments related to the control of chemical precursors diversion within the EU and in third countries, to the prevention and the fight against money laundering, to the effective co-operation between police, customs and judicial authorities, to the integration of Schengen drug related activities, to the implementation of the EU Action Plan on Organised Crime and to co-operation with third countries and regions in the fight against illicit drugs trafficking.

In the field of international co-operation, the EU will systematically integrate drugs control components into its development co-operation policies. Always under the principle of shared responsibility, the EU intends to place a high priority to drugs control in the context of its development co-operation with national governments and regional organisations, which take appropriate measures to set up national plans for drugs control and which show a strong political commitment to the fight against illicit drugs. Control and monitoring of all drugs control activities, including alternative development, is important.

In parallel with relevant development co-operation activities, drugs issues should be regularly addressed in the context of the political dialogue with the countries and regions concerned. Furthermore the EU will continue to actively participate in international fora in order to enhance the effectiveness and efficiency of global and regional drugs control efforts. Co-ordination of international donors drugs control efforts is essential. In this context our established relationship with industrialised partners should be enhanced. We should work together in the identification, financing and implementation of projects in regions of the world most affected by drug-related problems, ensuring thereby complementarity of our actions.

TOWARDS AN EVALUATION OF EXISTING EC AND EU INSTRUMENTS AND PROGRAMMES

The Commission took itself the commitment to present a report on the implementation of the 1995-1999 Action Plan and to come up with appropriate proposals for the five-year period 2000-2004.²⁵ Evaluating the various Community and European Union instruments and programmes related to the drugs phenomenon and covered by the Action Plan has only been achieved partially as demonstrated below.

I INFORMATION

Since 1995, the EMCDDA in close collaboration with the "REITOX" National Focal Points in each Member State produced three reports on the drug situation in Europe, developed five common key indicators for data collection. It also published research reports on specific topics, such as Epidemiological Trends and responses to the use of new synthetic drugs. Efforts were concentrated on four main principles with respect to demand reduction (prevention, harm reduction, care and rehabilitation):

- the definition of a suitable terminology, methodology and technology for the effective exchange of information on the scale of the Union,
- the promotion of systematic and scientific evaluation and the provision of tools and guidelines to be used by researchers and professionals;

The EMCDDA jointly with the REITOX Focal Points has developed other tools, including the EDDRA database, an information system on demand reduction activities, which not only has great potential as an instrument for policy-making, but also as a resource for experts interested in comparing methodologies and good practice or to initiate partnerships with initiatives in other Member States. Currently, EDDRA carries information on more than 100 projects operating in Member States. All of the projects registered have to fulfil quality standards established in collaboration with Member States.

Another initiative implemented by the EMCDDA has been the Early Warning System on new synthetic drugs, constituting a relevant and timely tool for the rapid adoption of prevention strategies and activities particularly directed at young people.

An independent external evaluation study of the EMCDDA will be launched in 1999 and results are expected before the end of the year.

²⁵ Communication from the Commission to the Council and the European Parliament on a European Union Action Plan to combat Drugs (Com(94) 234 final of 23.06.94; page 33.

II. ACTION ON DEMAND REDUCTION

2.1 The first five-year programme of Community action on the prevention of drug dependence (1996-2000)²⁶

The Treaty on European Union identified drug dependence as a priority for Community action in the field of public health. The Commission considered that the best way to consolidate and develop existing achievements was to launch a specific drug prevention programme. The five-year Community programme for the prevention of drug dependence (1996-2000) was adopted in December 1996 by the European Parliament and the Council, after consultation with the Economic and Social Committee and the Committee of the Regions. It was launched in January 1997, for a period extending to the end of the year 2000 and with an overall budget of 27 million ECU.

The Programme fits within a dual context, namely the framework for Community action in the field of public health²⁷ and the European Union Action Plan to combat drugs (1995-1999) to which it contributes to the section on "Action on demand reduction".

The aims of the programme are to encourage co-operation between Member States, to provide support for their actions and to promote co-ordination of their policies and programmes with a view to preventing drug dependence. The programme also strives to enhance co-operation with third countries and international organisations active in the field of drug prevention. The actions are implemented in close co-operation with Member States, and the Commission is assisted by a committee of officials from Member States and the EEA countries.

16 priority actions are to be implemented by the year 2000, grouped under two main headings: (a) Data, research and evaluation and (b) Information, health education and training.

On the basis of annual programmes of activities which identify priorities, the main characteristics of the projects funded involve exchanges between professionals and encouragement of interaction between researchers and practitioners; improvement of methods for identifying needs (prevention/treatment) and factors favouring prevention and treatment; and the common testing and assessment of prevention tools. In this context, a number of transnational networks have been set up, such as the European Addiction Training Institute (EATI) with Focal Training Points in Athens, Amsterdam and Helsinki, the European Network of Drug and HIV/AIDS services in Prisons (ENDHASP), the European Peer Support Project (EPSP), Drug Addiction-Europe-Exchange-Training (T3E), the Federation of European Professionals working in the field of drug abuse (ERIT), the European Foundation of Drug Help lines (FESAT), EURO-METHWORK, forum for exchange of expertise between providers of methadone in European countries, IREFREA, network for research and evaluation on prevention.

²⁶ OJ N° 19 of 22.01.97

²⁷ Art 129 and Commission Communication of 24.11.1993, COM (93) 559 final.

All this is with a view to defining, improving and implementing prevention models for particular target groups or particular environments. Many projects have a strong focus on multidisciplinary co-operation and co-ordination between the public and private sectors.

Of particular interest are the following projects:

- Development of co-operation between cities: exchanges of experiences on local prevention and risk reduction strategies; encouragement of and support for multidisciplinary co-operation; setting up of a pool of European experts on specific themes and promotion of innovative projects; diagnoses and pilot projects concerning the social and health aspects of drug tourism between cities particularly affected by the phenomenon;
- Improvement of strategies and practices aimed at specific and/or particularly vulnerable groups:
 - (a) promotion and evaluation of programmes for the treatment of drug addicts in prison; pilot projects in this domain; drafting of guidelines on preventive measures and risk reduction measures in prisons; training prison and extra-prison personnel in managing drug dependence problems in the prison environment and in improving practices;
 - (b) promotion of research and of the use of research results relating to the treatment of drug-dependent parents and parents-to-be and their children;
 - (c) diagnosis, promotion and evaluation of strategies for reaching groups identified as particularly vulnerable, such as ethnic minorities, migrant populations, certain groups of addicts;
 - (d) development of expertise on drug substitution programmes (methadone in particular), and creation of a reference network for persons travelling in Europe while in the process of treatment for addiction; evaluation of the impact of syringe distribution programmes in the Mediterranean basin.
- Adaptation and improvement of practices targeting young persons and new forms of drug use: comparison, evaluation, testing and dissemination of new approaches for preventing ecstasy use; use of new technologies for preventive ends, including in the world of education; promotion, improvement and adaptation of services, including drug help lines services;
- Identification and exploitation of promising approaches in the field of primary prevention, with the development of exchanges and co-operation between responsible local bodies, education professionals, social workers, etc..., testing and promotion of prevention tools of approaches based on involving citizens, including young persons, in local prevention strategies;
- Training: On the basis of the result of a seminar organised by the European Commission in November 1997, it is envisaged to promote initiatives to improve the drug prevention aspect of vocational training programmes for

teachers and those responsible for young people and to encourage exchanges of students. Priority will also be given to support to the development of further training programmes, teaching materials and modules for those likely to come into contact with drug users and groups at risk.

The third European Drug Prevention Week was held in November 1998, under the motto: "Talking is the first step". In the field of awareness raising in the society and partnerships a wide range of activities was implemented in the 16 countries participating, as well as on a transnational level. Several of the national projects were implemented on a long-term basis and will consequently have impact in the future.

After a call for tender was published, an extensive communication campaign was set up by Publicis Etoile, Paris, in close co-operation with the national coordinators and the Commission. The campaign included a 30-second TV spot, a radio commercial, a press advertisement, a booklet in 16 languages and a poster. The week was launched by a two-day international conference on drug prevention and policy, organised by the city of Vienna in co-operation with UNDCP and with the support from the Commission.

External evaluation of the Community Action Programme on the Prevention of Drug Dependence is ongoing. A mid-term report will be transmitted to the Parliament and the Council during the first half of 1999.

Some main results from the mid-term evaluation are:

Implementation of most of the actions of the Programme commenced during the first two years of the 5-year programme. However, much remains to be achieved in areas such as: relapse prevention and rehabilitation; evaluating the effectiveness of information and health education campaigns; tools with polysubstance dependence; the extension of European network of 'test towns' and promoting initiatives to improve the drug prevention aspect of vocational training of teachers; and, health and social care professions and other professionals responsible for young people.

Much also depends on follow up of the projects and on opportunities for the EMCDDA and other European institutions to disseminate results, because dissemination by the project contractors often remains quite restricted. In the same vein, funding of European networks in the field of public health action related to drug dependence should be a priority, with the aim to disseminate project results.

There are quite impressive results from a number of projects. Many of the multinational networks and teams supported by the programme seem to be a quite cost-effective way of creating Community Added Value. However, the project reports of the networks quite often fail in giving a convincing picture of their actual capacity to gather expertise and experience from all the Member States and from all the relevant agencies in the Member States, as well as to disseminate information when provided through these networks. A positive development is the number of networks that have proceeded in providing electronic information channels such as websites, electronic databases and other uses of the Internet.

The projects funded seem to emphasise approaches targeted directly to individuals, contrasted with a lack of projects with a broader public policy approach towards public health problems related to drugs. Such projects would be needed to increase knowledge about the impact of the larger public policy context on the drug phenomenon and on the feasibility of specific intervention models in different public policy contexts.

As there are large political debates, both at the international and EU levels and at the national and municipal levels, on future public policy strategies with regard to drug problems, there is a great need for research-based evidence to help policy makers to choose between different strategic alternatives.

2.2 Employment initiatives (Employment-Integra and Youthstart)

Employment is one of the initiatives adopted by the European Commission and led by the Social Fund for the period 1995 - 1999. The total budget for the five years of the *Employment* Community Initiative, including both EU and Member State contributions is almost 3500 million ECU. The *Employment* Initiative aims at helping people with special difficulties in finding or keeping a suitable job or career. *Employment* has four different strands:

- YOUTHSTART (for disaffected young people)
- INTEGRA (for people excluded from the labor market)
- NOW (for women)
- HORIZON (for people with disabilities)

Of these, the first two are of particular interest here. Like all the four *Employment* Initiatives, INTEGRA and YOUTHSTART fund projects that are innovative and have a high degree of local involvement. All the projects work in transnational partnerships with projects from other Member States and a number of good practice projects participate in group work led by the Member States at national and European level that aims at further developing the project products. The ultimate aim of the projects is to bring about positive changes in training and employment policies and practices and to share the information and experiences with all interested. Projects encourage the people concerned to take more active control of their lives and to play a full and recognized part in their local communities.

EMPLOYMENT-YOUTHSTART aims to bring about positive changes in training and employment policies and practices for young people, and to share the information and experiences with all interested. In overall there are not many YOUTHSTART projects that deal directly with drug addiction but many are developing strategies and approaches, which are relevant in relation to prevention of drug abuse. These include, in particular, individualized approaches, which require the active involvement of young people themselves in finding the most appropriate solution to their problems.

The experience of the projects shows that the active involvement of young people is essential to their success and that the problems of the young need to be approached on an individualistic basis. This approach has been the core activity of the majority of YOUTHSTART projects and they can therefore offer many new insights and

examples of good practices. The idea of empowerment is closely related to that of active involvement.

A good example Youthstart's preventive action is a project called the Phoenix Centre in Dublin that is primarily targeting adolescents living in the South Dublin Inner City, who, through a combination of drug misuse, juvenile crime, and truancy, have become severely marginalised in their community. The project aims to provide a comprehensive retraining programme suitable to the needs of the target group, which will ensure their development as peer educators (locum workers) in their own communities. The target group will develop, through the use of information technology, a preventive programme of educational inputs for schools in their own communities. The second objective is to promote drugs awareness among the wider youth population and to address the role which drug misuse plays in rendering young people vulnerable within the educational system.

EMPLOYMENT-INTEGRA is the biggest single initiative in terms of financial means addressing the drug problem and it has launched projects focusing on the integration into employment of the groups that are excluded or at risk of exclusion from the labor market. As a result of two calls for projects (1995 and 1997), a total of 1559 projects have been chosen to be financed by the European Social Fund with co-financing by public or private sources in the Member States.

INTEGRA puts special emphasis on migrants and refugees possibly discriminated in labor market as a consequence of e.g. racism or xenophobia. More than half of the projects concern mainly the integration of migrants or the reduction of racial or xenophobic discrimination. INTEGRA also works to support people in disadvantaged urban areas. Substance abusers form a significant proportion of the people who benefit from INTEGRA (more than 20% of the projects). Other big target groups are groups like (Ex)-offenders, long-term unemployed and the homeless people. Many projects involve several target groups and develop transversal approaches.

Within INTEGRA, priority is given to pilot projects which, among other things:

- ensure that people know about and can use the local services available
- help people to have better control of their own lives and to have an active role in making decisions affecting themselves
- encourage self-employment and public-private partnership, hence creating new jobs.

A good illustration of this approach is an INTEGRA project in Athens called "Action for the socio-economic integration of drug addicts". It is led by an NGO in collaboration with a number of other local and national organizations. A particular preventive objective of the project is to help, through local intermediary actors, former drug dependent persons in helping them not to fall back to drug dependency. Overall, the project aims to integrate substance abusers into employment developing a range of integrated provisions:

- development of self-help groups at neighborhood level, which deliver information
- counseling

- social skills training and training both to the needs of the substance abusers and to those of local labor market
- collaboration with local authorities in a number of preventive activities and awareness-raising actions.

The project is part of a transnational partnership with other INTEGRA projects in Spain, Belgium and Ireland. This transnational partnership has produced a manual covering methodological issues for socially excluded groups. The very fact that several Member States have been involved in developing the manual has ensured that it is applicable throughout the Union.

2.3 The educational and vocational training programmes (Youth for Europe, Leonardo da Vinci and Socrates)

- *Youth for Europe*

Youth for Europe is a Community action programme adopted in 1995. It covers the years 1995 – 1999 and has a budget of 126 million ECU. The objective of the Youth for Europe Programme is to contribute to the educational process of young people. This is done by e.g. facilitating youth exchanges (within the Community and with third countries), encouraging local youth actions and in particular the access of disadvantaged young people to the Programme's activities.

The projects funded by the programme share aims such as:

- promoting the awareness of the dangers relating to exclusion, including racism and xenophobia, through socio-educational measures for and by young people,
- encouraging young people to take an active part in society via non profit making associations and organisations,
- encouraging independence, creativity and entrepreneurial spirit among the young people,
- allowing young to express their opinion and encouraging authorities involved to take heed thereof,

The Programme activities are both complementary to those implemented by the Member States and to those envisaged by Community programmes on Education and Training (Socrates and Leonardo da Vinci). The implementation is partially decentralised in order to take action as close as possible to the beneficiaries and to adapt to the diversity of national systems and situations.

Combating drugs is not one of the major focus points of this programme but is eligible within the activities: facilitating youth exchanges, encouraging local actions and in particular the access of disadvantaged young people. Youth for Europe has financed several small projects related to the drugs problem.

- *Leonardo da Vinci*

The Leonardo da Vinci programme, adopted for a period of 5 years (1995-1999) has a key objective of supporting the development of policies and innovative action in the

Member States, by promoting transnational projects which involve organisations with an interest in training. The programme is open to the 15 Member States and to most of the Central and Eastern European pre-accession countries.

It is concerned with enabling vocational training to prepare for the professions of tomorrow, to anticipate change, to prepare and experiment with new ways and new methods. Vocational training finds itself at the heart of Member States' strategies to respond to the economic and social challenges of tomorrow.

Combating drugs is not one of the major focus points of the programme but it could be included in the measures concerning action against social exclusion. The programme would enable preparation of, for example, pedagogic material to raise awareness of students and trainers. Within this context, Leonardo da Vinci has already financed projects related to the drugs problem:

- (i) the development of flexible educational tools and methodologies targeted at assisting the re-integration of young offenders through the training process,
- (ii) the design, experimentation and implementation of an interactive continuous training programme on drug addiction related information aimed at communication professionals,
- (iii) vocational training for young people leaving the penal system,
- (iv) the improvement of the quality of health and social vocational training.

- *Socrates*

The SOCRATES programme, adopted for a period of 5 years (1995-1999) aims to improve the quality and relevance of education for children, young people and adults, by enhancing European co-operation and increasing access to the range of learning opportunities available across the Union. It is applicable to the 15 Member States of the EU and to the candidate countries as well as to Iceland, Liechtenstein and Norway.

Combating drugs is not one of the major focus points of the programme and there is no specific action with this aim but it can be eligible as an educational theme at most levels of education and actions within Socrates.

Under the higher education, ERASMUS can contribute to prevention and research through Thematic Network projects.

In the field of school education, COMENIUS may contribute to make teachers and educational staff aware of the problem of drug abuse, to promote school partnerships, training activities for teachers and intercultural educational projects.

2.4 The Framework Programmes on Research, Technological Development and Demonstration

In the context of the Fourth Framework Programme for Research and Technical Development (1994-1998), research on drug demand reduction has been conducted

mainly under the Biomed 2 Programme. Under Area 3 *Brain Research*, three projects have been financed to study brain receptors and the physical mechanisms of pain and drug addiction. One additional project has been financed in the field of doping in sports, concerning the use by athletes of growth hormones.

Also in the context of the Fourth Framework Programme for Research and Technological Development research was conducted in the following areas:

- *social costs and cost effectiveness*: the programme on Targeted Socio-Economic Research provided the possibility of financing the development of methodological tools for analysing data such as social costs and cost-effectiveness of policies, analysis of different policy scenarios and the setting up of networks of scientists from different disciplines to develop socio-economic analyses of drug use, consequences and interventions.

- *roadside testing*: two research projects on roadside drug testing (entitled ROSITA and CERTIFIED) were initiated. Rosita concentrates on state-of-the-art equipment for testing the presence of drugs and medicines in urine, saliva and sweat, as well as operational, legal, institutional and user requirements. CERTIFIED will concentrate on psychophysiological (perceptual and motor skills) detection methods for drugs. These projects will run into 2000.

In the context of COST (European co-operation in the field of scientific and technical research) an action on "the evaluation of action against drug abuse" was set up in 1992 which produced its evaluation report in August 1998. Also financed in the framework of COST, a study on "Quality and ethical aspects of interventions against drug abuse in Europe" has recently started.

Further to a joint initiative with the Dutch and Luxembourg Presidencies of the Council, a High level Workshop on Priorities for Research in the field of synthetic drugs took place in Brussels on 16 September 1997 which identified the research priorities in the field.

Research on drug related issues has received specific attention in the Fifth Framework Programme for research, technological development and demonstration activities (1998 to 2002), in particular in the programme "Quality of life and management of living resources". The priority areas are indicated in chapter IV.B.3 of the main document.

2.5 Granting of aid to growers of hemp

In June 1998 the Council adopted Regulation (EC) n° 1420/98²⁸ amending Regulation (EC) n° 619/71 laying down general rules for the granting of aid to growers of flax and hemp. The amendment limits the granting of aid to any hemp grower who has concluded a contract with an approved primary processor of hemp or who processes hemp into straw. The aid will only be granted if the weight of THC (tetrahydrocannabinol) in the weight of a sample maintained at constant weight is no more than:

- 0.3% for the purposes of the grant of aid until the 2000/2001 marketing year
- 0.2% for the purposes of the grant of aid for subsequent marketing years.

III. ACTION ON REDUCTION OF ILICIT TRAFFICKING IN NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES

3.1 Diversion of precursors and psychotropic substances

In the field of precursor control the Community is responsible for proposing legislation and policy. Member States are responsible for implementing both legislation and policy.

In the field of **intra-Community surveillance**, Directive 92/109/EEC of 14 December 1992 on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances constitutes the legislative framework which is implemented by the Member States. Close contacts are maintained with the chemical trade associations with a view to improving the necessary co-operation in the sharing of information concerning the diversion of the chemical precursors listed under Annex 1 of the Directive.

This co-operation mechanism between the trade associations and the competent authorities of the Member States could be extended to substances not listed under Annex 1 of the Directive when the amendment to the existing legislation is adopted in 1999 to cover precursors to new synthetic drugs.²⁹

In the field of **control on the external trade of chemicals**, the Community legal instruments are: Council Regulation 3677/90 and Commission Regulation 3769/92 along with a number of precursor control agreements which the Community has concluded on a bilateral basis with eight countries of the Organisation of American States (OAS). Furthermore, on the basis of these agreements, the Community may provide technical assistance in chemical control to the Andean countries (Bolivia, Colombia, Ecuador, Peru, Venezuela), Chile and Mexico.

Regular meetings at expert level take place between the Commission and the Member States in the context of the drug precursors committee under Article 10 of

²⁸ OJ n° L 190 of 4 July 1998

²⁹ Proposal for a European Parliament and Council Directive amending Council Directive 92/109/EEC (COM(1998) 22 final of 21.01.98)

Regulation 3677/90 and Directive 92/109/EEC. These meetings allow the discussion of Community precursor legislation and its implementation by the Member States. It is in this forum that an evaluation of Community precursor control instruments is made. No external evaluation has been made of the effectiveness of such Community instruments.

A Council mandate provided in September 1995 the basis for the Commission to negotiate bilateral precursor control agreements with the OAS countries. The relevant negotiations led to the conclusion of eight agreements with: a) the Andean countries (Bolivia, Colombia, Ecuador, Peru, Venezuela) in December 1995; b) Mexico in March 1997; c) the US in May 1997; d) Chile in November 1998. Negotiations have taken place with the MERCOSUR countries.

In September 1993 a Council mandate provided the basis for the Commission to negotiate precursor control agreements with the ASEAN countries. Discussions at service level have taken place with Indonesia, Malaysia, the Philippines and Thailand.

At United Nations level, the Community has actively contributed to several meeting and international negotiations on precursor control. These concerned inter alia: a) the UNGASS-drugs negotiation sessions for the Action Plan on precursors in 1997 and 1998; b) the annual sessions of the Commission on Narcotic Drugs (CND) where precursor control issues were addressed; c) a number of seminars convened by the International Narcotics Control Board (INCB) on precursor control; d) the meetings of the Heads of National Drugs Law Enforcement Agencies-Europe (HONLEA) as organised by the United Nations Drug Control Programme (UNDCP).

The Commission and US-DEA jointly organised a number of meetings gathering the largest precursor producing and trading nations have been organised in order to draw up common guidelines for the informal and voluntary exchange of information (Multilateral Chemical Reporting Initiative). The most recent meetings were held in Prague (February 1997) and Lisbon (November 1997).

In 1994-1997, the Commission organised training seminars since 1994 aimed at getting officials in the Member States better acquainted with precursor control. In 1997, those seminars were also conducted at national level.

In 1994, the Commission created PREXCO as a valuable database on precursors to help Member States set up the appropriate legislative structures on precursor control, as this very technical activity was brand new for many Member States. After the entry into force of Regulation 515/97³⁰, PREXCO became no longer a useful tool; however, PREXCO data will be maintained in the Customs Information System (CIS) for access to relevant authorities in the Member States.

³⁰ This created the legal base for the Customs Information System: a central Community data-base allowing administrative authorities in the Member States to investigate and prosecute offences in customs and agricultural matters, including precursors.

3.2 Money laundering

The Commission's Second Implementation Report adopted on 1 July 1998 concerning the Directive on the prevention of the use of the financial system for the purpose of money laundering³¹ has been forwarded to the Council and Parliament. It records that all the Member States have implemented the Directive. The one current infringement procedure concerns Austria's anonymous savings books. The report also makes a fairly positive assessment of the impact of the Directive. However, an important aim of the Directive is preventive in nature and it is impossible to assess how much money laundering may have been prevented. On the other hand the data on suspicious transaction reports shows that the financial sector has responded fairly well to its responsibilities under the Directive.

Enhanced measures need however to be taken as requested by the European Parliament and by the Organised Crime Action Plan. Steps are being taken in particular to widen the scope of the Directive to non-financial sectors.

3.3 Judicial, customs and police co-operation under Title VI of the Treaty on European Union (TEU)

Since the entry into force of the Treaty on European Union, the co-operation in the fight against illicit drug trafficking has led to the adoption by the Member States under Title VI of the TEU of a great number of legal instruments. These include Programmes related to the training and exchange of law enforcement personnel. Since the adoption of the EU Action Plan to Combat Organised Crime many concrete measures referred to in the Action Plan's recommendations are being implemented.

The impact of Title VI legal instruments have not yet been evaluated. Indeed these legal instruments and programmes have been recently adopted and implemented. The Commission intends in future to contribute to the monitoring of the implementation of Title VI instruments and Programmes. External evaluation of the Title VI Programmes will be carried out in 1999.

3.3.1 General frameworks for co-operation.

- JUDICIAL CO-OPERATION :

Extradition

Member States' extradition arrangements are guided by a number of international agreements, in particular the European Convention of 1957 relating to Extradition. To facilitate and improve these arrangements, the EU Convention on simplified extradition was adopted in 1995³² followed by a more general convention on extradition in 1996³³. The 1996 Convention provides for the extradition of nationals and although Member States are permitted to derogate by way of declaration to this

³¹ OJ N° 166 of 28.06.91

³² OJ N° C 78 of 30.03.95.

³³ OJ N° C 313 of 23.10.96

rule, such declarations are time-limited and subject to review. However this Convention has not yet entered into force.

Mutual legal assistance

Mutual Legal assistance between Member States is mainly provided through the 1959 European Convention on Mutual Assistance. Work is currently ongoing on a new Convention and Protocol to further facilitate and improve the mutual assistance provisions of the 1959 Convention between Member States. The new Convention will provide for direct contact between judicial authorities and includes a number of provisions to meet the needs of modern means of investigation and prosecution, including the use of controlled deliveries, interception of telecommunications and video link. Further work will be pursued on the use of other special investigative measures in the context of a later protocol to the Convention.

European judicial network

The EU Joint Action of 29 June 1998 on the creation of a European Judicial Network provides a framework for contact and exchange of experience between magistrates to improve judicial co-operation between the Member States.³⁴ The network came into existence in 1998 and has now established contact points in each Member States. The network provides a forum for periodic meetings of the contact points as well as providing for up to date information. The contact points are available to the judicial authorities in their own country and in other states to assist in judicial co-operation requests.

• POLICE AND CUSTOMS CO-OPERATION

The global framework for co-operation in police matters has been dominated by the adoption of the Convention of 26 July 1995 on the establishment of a **European Police Office (Europol)** which entered into force on 1 October 1998.³⁵ Also of major importance is the adoption of the Joint Action of 14 October 1996 providing for a common framework of the initiatives of the Member States of the EU concerning **liaison officers**.³⁶ The general framework for police co-operation is also enhanced through the creation and maintenance of a **directory of specialised competence, skills and expertise in the fight against international organised crime**, in order to facilitate law enforcement co-operation between the Member States.³⁷

Close working relationship between police forces and customs services and definition of their respective roles in the context of drug law enforcement activities with a view to enabling them to work together more efficiently and effectively has been the subject of a Council Resolution on **police/customs agreements in the fight against drugs** on 29 November 1996³⁸.

³⁴ OJ N° L 191 of 7.07.98

³⁵ OJ N° C 316 of 27.11.95

³⁶ OJ N° L 62 of 20.03.95

³⁷ OJ N° L 342/2 of 31.12.96

³⁸ OJ N° C 375 of 12.12.96

Additionally the Council Joint Action of 9 June 1997 concerning the **refining of targeting criteria, selection methods**, etc., and collection of customs and police information aims at optimising the use of targeting criteria and structured selection methods, and at the collection of customs and police information on the combating of drug trafficking³⁹.

- DRUGS

The Joint Action of the Council of 17 December 1996 concerning the **approximation of the laws and practices** of the Member States of the EU to combat drug addiction and to prevent and combat illegal drug trafficking⁴⁰ aims at enhancing co-operation in the fight against drug addiction and at the approximation of national legislation *“to make them mutually compatible to the extent necessary to prevent and combat illegal drug trafficking in the Union”*. Member States also need to endeavour to make the practices of their police, customs services and judicial authorities more compatible with each other and ensure that under their legal systems the penalties imposed for serious drug trafficking are among the most severe penalties available for crimes of comparable gravity.

In this latter area, the Council adopted on 20 December 1996 a **Resolution on Sentencing for Serious Illicit Drug Trafficking**⁴¹ which confirms that Member States should ensure that their national laws provide for the possibility of custodial sentences for serious illicit drug trafficking which are within *“the range of the most severe custodial penalties imposed by their respective criminal law for crimes of comparable gravity”*.

In many cases, successes in the fight against drugs trafficking implied a high level of co-operation between law enforcement services and business organisation. In order to consolidate the already co-operative relationship between customs authorities and the business organisations the Council adopted a Joint Action on 29 November 1996 on co-operation⁴² which calls on Member States to establish or further develop **Memoranda of Understanding between customs authorities and business organisations**.

The Council has decided to set up a mechanism for the exchange of information on the **chemical profiling of drugs** through the adoption of the Joint Action of 29 November 1996⁴³. The Drugs Unit of Europol has been designated as the authority to which information from Member States concerning chemical profiling is to be transmitted.

On 16 June 1997, the Council adopted the Joint Action concerning the information exchange, risk assessment and the control of **new synthetic drugs**⁴⁴ which aims at the setting up of an early warning system for new synthetic drugs linking the Member States, Europol, the EMCDDA and the European Commission. Up to now two new

³⁹ OJ N° L 159 of 17.06.97

⁴⁰ OJ N° L 342/6 of 31.12.96

⁴¹ OJ N° C 10 of 11.01.97

⁴² OJ N° L 322 of 12.12.96

⁴³ OJ N° L 322 of 12.12.96

⁴⁴ OJ N° L 167 of 25.06.97

synthetic drugs have been the subject of the early warning system, MBDB and 4-MTA. It is necessary to use to the full this new instrument before deciding if a more pro-active instrument would do better.

3.3.2 Programmes under Title VI of the TEU

OISIN

The OISIN programme has been established in the framework of the EU by the Joint Action of 20.12.1996⁴⁵. It provides a framework to develop and enhance co-operation between police, customs and other law enforcement authorities⁴⁶ of Member States and to provide such authorities with a greater insight into the working methods of their counterparts in other Member States.

A large number of the projects supported by OISIN have been related to the fight against drug trafficking which has been repeatedly at the top of the priority actions as enumerated by the annual working programme of OISIN.

The expected results are to make law enforcement authorities better acquainted with the working methods of their counterparts throughout the European Union.

To meet these aspirations, the following actions are supported:

- provision of training,
- exchange of personnel and provision of operational expertise,
- research, operational studies and evaluation,
- operational projects (including, briefings and debriefing meetings),
- information exchange.

It is worth noting that special attention will continue to be given to projects open to candidate countries, in accordance with the Commission's Agenda 2000 and with Article 7 § 4 of the Council Joint Action establishing this programme, that states that "the projects may involve those responsible in the applicant countries with a view to making them familiar with the achievement of the European Union in this area and contributing to their preparation for accession, or in other third countries where it serves the aims of the projects."

FALCONE

On 19 March 1998 the Council of the European Union adopted the multiannual Falcone programme of exchanges, training and co-operation for persons responsible for action to combat organised crime⁴⁷. This programme focuses on activities contributing to the implementation and monitoring of the Action Plan to combat organised crime, adopted by the Council on 28 April 1997.

The Falcone programme is intended, through a multidisciplinary approach to prevention and enforcement, to support projects of benefit to the European Union and

⁴⁵ OJ N° L 007 of 10.01.97

⁴⁶ - For the purpose of this programme, "law enforcement authorities" means all public bodies existing in Member States which are responsible under national law for preventing, detecting and combating criminal offences.

⁴⁷ OJ N° 099 of 31.03.98

involving participants from more than one Member State. In particular it will support training measures and exchanges, joint projects to improve skills and operational methods in co-operation in the fight against organised crime, research and studies and other ways of improving skills, with the aim of strengthening and facilitating the struggle against organised crime and reducing such obstacles as may exist to co-operation between the Member States.

These measures are directed towards those responsible for the fight against organised crime, namely judges, public prosecutors, police and customs departments, civil servants, public tax authorities, authorities responsible for the supervision of financial establishments and public procurement, including the fight against fraud and corruption, and representatives of professional circles who may be involved in the implementation of some of the recommendations in the Action Plan, as well as the academic and scientific world. The projects may involve those responsible in the applicant countries, with a view to helping them prepare for accession, or in other non-member countries where it serves the aims of the projects.

Co-operation projects on drugs to be financed under the FALCONE programme should concentrate on the multidisciplinary approaches to be developed to prevent and fight the activities of the criminal organisations involved.

GROTIUS

The Grotius Programme was established by a joint Action of 28 October 1996⁴⁸ and provides incentives and exchanges for legal practitioners in order to foster mutual knowledge of legal and judicial systems and to facilitate judicial co-operation between Member States. The programme establishes a framework for training, information, study and exchange programmes for legal practitioners.

3.4 Schengen activities in the field of illicit drugs

The Schengen Member States have carried out different compensatory measures and co-operation. Particularly important have been the activities of the Schengen Narcotic Drugs working group, whose initiatives and proposals have obtained good results in the fight against illicit drugs. The measures aimed at improving external border controls and the extension of cross-border co-operation with a view to combating drug trafficking deserve special attention in the framework of Schengen. Equally, the strengthening of the direct and practical co-operation between police and customs authorities and those measures aimed at facilitating judicial assistance and co-operation between judicial authorities should be emphasised.

In the area of drug demand control, the measures adopted to monitor cross-border traffic in legal drugs as contained in the Schengen Convention should be mentioned. In 1993 the setting up of a certificate for crossing the border with drugs required for medical treatment was approved. In 1998, the list of competent authorities for issuing or authenticating this certificate was updated.

⁴⁸ OJ n° L 287 of 8.11.96

IV. ACTION AT INTERNATIONAL LEVEL

4.1 North-South Context

- The various instruments and programmes

The implementation of the CFSP, the growing awareness of the drugs threat and the 1995-1999 EU Action Plan have led to a very much enhanced EU activity in the fight against drugs both in international fora and in relation with third countries and regions.

With increased recognition of shared responsibility as a cornerstone for international co-operation in the fight against drugs, specific clauses have been introduced in EU agreements with third countries and regions. In the context of CFSP, drugs issues have become a prominent subject in the EU's political dialogue with numerous countries and regions. This is already the case in the EU's relations with the CEECs, Cyprus, Russia and other NIS, the USA, the Andean, Central American and Rio Group countries, the Caribbean, West African and Southern Africa regions, and is gaining importance in ASEM meetings as well. In 1998, the EU adopted a Co-operation mechanism with Latin American and Caribbean countries whose first meeting has taken place in April 1999. CFSP actions to press for specific results, e.g. by démarches, have however been relatively rare.

Both bilateral and multilateral fora are witness to the respect and interest raised by the Community's balanced and solid approach to drug fighting. The recent financing agreement signed by the Community and the Andean Community, a result of the ongoing dialogue between both regions, provides further evidence of what the Community can achieve through its positive measures and dialogue with beneficiary countries in the field of harmonisation of legislation, money laundering and precursors, rather than through the application of unilateral measures. A European Council initiative and Community support has allowed the development and implementation of a coherent and concerted Action Plan in the Caribbean region. In 1999, the EU adopted a comprehensive Action Plan for Latin America, including inter-regional co-operation with the Caribbean.

Trade policy comprises a special 'Drugs regime' granted under the EC GSP scheme to the Andean and Central American countries granting free access to the EU market for most exports of interest to these countries. The scheme provides significant room for the diversification of the beneficiary economies away from drug production and towards alternative sources of employment and income. The preferences, originally granted in the early 1990s, have been renewed on the commitment by beneficiary countries that they will continue implementing policies conducive to both drug eradication and sustainable development. Based on a evaluation of the GSP impact on combating drugs, the agricultural EU GSP scheme to the Andean and Central American countries was extended until 31 December 2001 and the industrial one was also granted for the first time to Central America. Recent ministerial meetings with both the Central American Andean countries have confirmed the political usefulness of the scheme and the high value attached to this instrument by beneficiary countries.

- The budget lines

There is considerable financing of drug control projects in developing countries. This is the case with regard to the ACP, and thanks to the budget line for financial and technical co-operation with Latin America, as is the case of a major project for alternative development in Bolivia (Chapare) and Peru (Pozuzo-Palcazu) and Colombia, as well as of a regional capacity building programme in Southern Africa.

A further important instrument for financing drug projects in developing countries has been the Community's budget line for North-South co-operation in the fight against drugs. The limited funds available under this budget line and the wide range of requests for funds has led to choosing projects that are relatively small and have a catalytic/pilot role and effect. The Mediterranean, the Latin American, the Asian and ACP countries can each count on a little more than 2 Mio ECU per year from the North/South budget line.

The funds used over the years have gone to institution building (Master Plan development), demand reduction efforts, and supply reduction activities. Regarding demand reduction, most efforts have been channelled through NGOs and have covered the prevention-treatment-rehabilitation spectrum and will support the creation of a national observatory on drugs (Venezuela). Supply reduction efforts are generally geared towards the prevention of money laundering and chemical precursor's diversion, rather than to law-enforcement measures defined in a strict sense.

- Assessment

Any indication of success in the EC external efforts at drug fighting must be measured by a two-tiered yardstick. Firstly, the intensity of the challenge which, in this case, it must be recognised, is particularly overwhelming. Secondly, the means placed at disposal, which are generous in terms of trade policy, yet limited as regards financial resources. Furthermore, the evaluation of success must recognise that EC action can only act as a complement to and, in the best of cases, as a catalyst for beneficiary countries' actions. From this triple perspective it can be argued that EC efforts have met with considerable success.

4.2 Phare Multi-Beneficiary Drugs Programme

The programme had the following impact in the region:

- In the field of *policy development*: the programme (a) increased the awareness of drug issues in the CEECs, and promoted the development of multi-disciplinary and co-ordinated drug policies, (b) increased the capacity in the countries concerned to develop drug information systems and strategies, along the methodology of the EMCDDA, and (c) provided a more accurate picture of the situation in the CEECs, the measures taken by them and of their priorities for assistance in the field of drugs.

- In the field of *drug demand reduction*: the programme (a) promoted the importance of drug demand reduction in order to ensure a balanced approach in the CEECs, (b)

increased the awareness of the importance of a multi-sectoral and integrated approach in demand reduction, (c) increased the capacities of professionals in this field.

- In the field of *drug supply reduction*, the programme facilitated the approximation of legislation and standards in field of precursors monitoring and money laundering.

An external evaluation took place in 1996 of the drug demand reduction pilot project, which provided recommendations to define the follow-up phase of this project. In 1997, an external assessment took place by the Office for Monitoring and Assessment (OMAS) of the overall 1992 and 1993 programmes. This assessment acknowledged the large amount of activities implemented by the programme. However, it concluded that 'the programmes have yet not achieved the desired objectives' mainly due to the fact that the programmes set up unclear or unrealistic objectives. It also pointed out the fact that programmes seem to focus more on the development of projects, than on the achievement of clear drug control objectives. The results of an external evaluation of the 1996/1997 programmes are envisaged to be available by the end of 1999.

4.3 The European Conference Experts Group on Drugs/Organised Crime

In the framework of the European Conference, an Experts Group was set up whose objective was, by means of cross-border co-operation, to combat jointly corruption, organised crime, illegal trafficking and money laundering in Europe. On the basis of its work, the German Presidency of the Council prepared a set of recommendations which refer in particular to the need for the EU Drug Action Plan (2000-2004) to make provisions for appropriate resources intended for measures to combat drugs in Central and Eastern Europe and Central Asia.

4.4 Relations with industrialised countries

In our relations with our industrialised partners co-operation on drugs has focused on the exchange of data as well as upon co-operation on different programmes for regions most affected by drug related problems. Both at bilateral and at multilateral level drug trafficking has been recognised as an important area of co-operation, one meriting further development and strengthening.

- **USA**

The most significant co-operation has developed with the US. Under the New Transatlantic Agenda (NTA) the EU-US co-operation on counter-narcotics has intensified over the last years. Within this framework, a bilateral agreement between the US and EU on controlling chemical drug precursors was concluded in the Hague, on May 1997. Another outcome of EU/US co-operation under the NTA is the jointly financed regional money laundering programme and maritime co-operation in the framework of the Barbados Action Plan. The EU Caribbean Drugs Initiative has contributed significantly to the improved co-operation to counter drug trafficking, money laundering and organised crime in the region. The Parties have pledged to continue and develop the existing co-operation in the Caribbean and, where possible, to extend it to other regions, such as Latin America, Africa and Central Asia. In addition, the EU/US relationship consisted of close co-operation between US and European law enforcement agencies and the participation of the US in the EU

multidisciplinary Group on Organised Crime. Both actions will continue in the upcoming years.

- **Canada**

Among the undertakings of the parties in the EU-Canada Joint Action Plan, signed on 17 December 1996, were co-operation to enhance the effectiveness of the Dublin Group as the informal forum for co-ordination of international assistance in the fight against drugs, to endeavour to reach an agreement on the diversion of precursor chemicals and to co-operate in the counter-narcotics assistance projects in the Caribbean and in other regions of the world (Africa). Discussions on the possibility of concluding a precursor agreement with Canada took place during 1997, but an agreement has not yet been concluded.

- **Japan**

During the EU-Japan Ministerial Meeting, in October 1998, it was recognised that efforts should be made to encourage exchange of experience and information between the two partners. Former Japanese Prime Minister has set up a Committee for the promotion of measures to prevent drug abuse. This Committee has announced a five-year strategy for the prevention of drug abuse, which will help to set guidelines for medium term measures in this area. Intentions were expressed on the occasion of the EU-Japan Summits, to set up a dialogue in this field, which could develop into a regular exchange of information within an expert group. This has been stressed in particular at the Asian Drug Law Enforcement Conference organised by the Government of Japan in February 1999 with the participation of representatives of Cambodia, China, Laos, Burma, Thailand, Vietnam, UNDCP, the USA and the European Commission.

- **G8**

At the multilateral level, in the Birmingham Summit of May 1998, the G8 Heads of State welcomed the UNGASS on drugs and reiterated their commitment to develop a comprehensive strategy to tackle all aspects of the drugs problem. The G8 reaffirmed their commitment to partnership and shared responsibility in the international community to combat illicit drugs, including reinforced co-operation to curb illicit trafficking in drugs and chemical precursors, action to reduce demand in the G8 countries, including policies to reduce drug dependency and support for a global approach to eradicate illicit crops. The G8 welcomed the UNDCP's recent initiatives, which imply the preparation of alternative and reliable development programmes and benchmarks within existing funding arrangements.

- **China**

The Commission's Communication, "Building a Comprehensive Dialogue with China", of March 1998, underlines the necessity to promote a substantial dialogue and encourage co-operation with China on various issues including combating illegal drug trafficking.

V. GLOBAL ASSESSMENT

The following global assessment can be made:

- Internal policies

The drugs policies applied so far have not succeeded in eradicating the drugs problem itself. Crime connected with drug trafficking and offences related to secure personal supplies of drugs still constitute a serious problem throughout the EU. Enhanced application of law enforcement measures has led to the overcrowding of prisons with drug-related offenders. The response of the EU Member States has been to devote increasing efforts and resources to prevention policies. The spread of AIDS has played a major part in the development of projects designed to reduce the risks associated with the consumption of injected drugs. These prevention policies have proved to be efficient. It is necessary to stress that major reduction of financial commitment by Member States to social sector activities could undermine the balanced approach between supply and demand reduction.

In the field of criminal justice, Member States have been trying for several years now to integrate within the law enforcement system certain measures particularly aimed at demand reduction. The range of action of the criminal justice system (police, prosecution, courts and penitentiary system) is indeed no longer limited to purely repressive measures. The majority of Member States have established structures aimed at informing and counselling persons convicted of a drug offence. All Member States have provisions to propose under certain circumstances alternatives to a prison sentence for drug-related convicted persons. The comparison between the effectiveness of compulsory and voluntary treatment is the subject of evaluation studies but is still the subject of divergent opinions.

- External policies

With regard to international drugs control co-operation, the EU has made significant progress. Co-ordination of drugs control at policy level, as well as of co-ordination of activities has improved but should be further enhanced. Jointly launched EU initiatives have laid the groundwork for closer co-operation within the EU and in relation to third countries. These new political initiatives resulted in the elaboration and adoption of commonly agreed Action Plans for the Caribbean, Latin America and Southern Africa. The Action Plans have provided useful instruments, enabling an improved co-ordination while ensuring complementarity of operational activities and thereby avoiding duplication and overlapping of individual donor assistance.

CURRENT TRENDS IN DRUG DEMAND REDUCTION

On the basis of information collected by the EMCDDA, it can be stated that:

- a) there is a general trend towards diversification in the prevention field, employing a two-pronged strategy – broad education and health promotion targeting the general population – supplemented by specific actions targeting vulnerable and at-risk groups;
- b) support for drug users in Europe has increasingly taken the form of differentiated services oriented towards the individual, while seeking simultaneous co-ordination of existing services and the improvement of co-operative structures.

In the prevention field there has been an increased emphasis on initiating education programmes at an early age as a means of establishing protective factors against subsequent drug use. However, comprehensive community prevention programmes remain rare in Europe. Evaluation results in Europe provide evidence that improved interpersonal relationships, autonomy and resistance to peer pressure as being critical protective factors.

In this context, peer projects have shown their utility as a means of incorporating primary prevention within the leisure time activities of young people.

Although there has been little evaluation of mass media campaigns, some evidence suggests that these may have the effect of raising awareness.

The Internet is increasingly used for dissemination of information. In this the EMCDDA plays a crucial role by offering Internet based services to programmes and practitioners in the field of evaluation and mutual exchange of experience.

Early intervention and at-risk groups: Throughout the EU there is an increasing harm reduction focus on groups experimenting with ecstasy and other drugs in the dance scene. This seems to be a particularly European approach, which permits the rapid development of further special intervention techniques for dance culture settings. Specific measures have included guidelines on 'safe raves', including free drinking water, rest areas, information and counselling, as well as the initiation of on-site testing facilities.

Outreach strategies, as well as targeted self-help and peer group work, have accessed 'at risk' and marginalised groups, often in the context of natural social support networks.

Such strategies achieved encouraging results both for changing health and risk behaviours, in the context of a harm reduction strategy, and in reaching groups experimenting with drugs at an early stage.

Prevention of infectious diseases: The decline in new cases of HIV has been accompanied by identification of an alarming rise in Hepatitis C among Intravenous Drug Users. Harm reduction measures have played an important role in combating the spread of HIV. A range of strategies – from maintenance prescription of substitute medication such as methadone, syringe and needle exchange schemes, easily accessed ('low threshold') services, and education and information campaigns – have combined to make a positive impact in a number of EU countries. However, there is no evidence of an impact on Hepatitis C transmission or changes in the sexual behaviours of drug users with respect to the transmission of HIV infection. Tuberculosis infection among drug users is also of concern.

Substitution and treatment programmes: Increases in the availability of substitute programmes in many EU countries have been accompanied by the need for consistency in provision and clear markers for outcome effectiveness. Although the efficacy of methadone in terms of health and social integration is recognised, the expanding practice of substitution treatment also brings issues of quality control to the fore.

The limitations of methadone have led to the exploration of a number of alternatives – of LAAM, buprenorphine and prescribed heroin. All EU countries recognise the importance of a range of substitution and drug-free outpatient and residential treatment options, tailored to individual needs. There is also widespread recognition of the need for effective aftercare, and co-operation between treatment facilities and general health and social service providers.

Criminal Justice Policy: In addition to their traditional role in supply reduction, the police are increasingly involved in demand reduction and education, and in strategies to support community partnership. All EU members provide alternatives to custody for drug offenders, based on diversion of the individual from prison to treatment, or to work in the community.

Specific target groups: A number of countries have recognised the need for gender-specific approaches to prevention, while facilities that address the specific treatment needs of women - motherhood, sexual violence and prostitution - are becoming increasingly common throughout Europe. Some countries have attempted to address the needs of addicts from particular ethnic and cultural backgrounds. Finally, provision for the care of children of users has also become increasingly significant in prevention and treatment programmes.

CURRENT DEVELOPMENT IN LEGISLATION AND PRACTICES

A. Overview of convergence and differences in drugs legislation and practices in the EU Member States

The complex relationship between drug abuse and criminal attitude and the methods of reducing and, possibly, eliminating negative consequences are debated by policy makers and scientists with positions which sometimes tend to become polarised. The debate also involves a whole series of different aspects of the problem such as socio-economic factors (e.g. illegal market production, trafficking, organised crime), attitudes and behaviour (e.g. lifestyles), bio-medical effects of the drugs, cultural and political aspects. It is this complexity that makes an objective and clear approach to the problem so difficult.

Since 1995, conferences and seminars organised jointly by the Commission, the European Parliament and the Presidency of the Council have identified areas in which closer co-operation at Union level is necessary to enhance the effectiveness of the fight against drugs. These meetings have shown that there is a considerable degree of harmonisation between national narcotic drugs legislation in the EU as they are all in conformity with the UN Conventions on narcotic drugs. Effective transposition of EC legislation on precursor chemicals and money laundering also provides a common legal framework between the 15 Member States.

These findings⁴⁹ show however that differences exist at the level of national law mainly in relation to:

- the wide range of sanctions for trafficking and for possession;
- the approach in relation to drug use;
- the distinction introduced in some Member States legislation between Cannabis and its derivatives on the one side, and on the other side, other drugs (which are described in many forms) as far as definition of offences and penalties/sanctions for drug use, possession and trafficking are concerned.

These differences become smaller when considering the convergence existing at the level of practical implementation by the judicial authorities, such as:

- medical or social measures are preferred to prison sentence, in particular for those drug addicts who wish to undergo treatment;
- in case of occasional use with no aggravating circumstances, the drug user is approached, is invited to refrain in future from taking drugs, receives a fine or is subject to administrative sanctions;

⁴⁹ Conference on Drugs Policy in Europe (Brussels, 7-8 December 1995) and Follow-up workshop on the application of national drugs legislation (25-26 March 1996). Summary discussions and conclusions. Brochure available on Internet (Europa web site of the EU).

- prison continues to play a repressive role only when important quantities are concerned or in the presence of aggravated circumstances;
- in the case of cannabis offences, lower sanctions are applied;
- illicit trafficking is severely repressed in all Member States;
- lower penalties are applied in the case of addict-pushers (users supplying drugs to finance their own consumption).

Nevertheless, the considerable degree of discretion enjoyed by the judicial authorities in sentencing policy means that large differences may exist not only between Member States but also between regions of the same Member States.

Based on the comparative study prepared by the Commission for the joint EC/EP/ Presidency conference and seminar in 1995/96, an updated comparative study on drugs legislation in Europe has been prepared for the Vienna European Council. In future, the EMCDDA could provide a helpful contribution to the updating of this work.

Taking all these elements into consideration, it can be said that there already exists a considerable degree of legislative harmonisation and that for the moment more harmonisation of national laws is not a feasible objective, except when there is a need to fill some legal vacuum. This was the case for the control of synthetic drugs where the gap has been filled by the adoption of the Joint Action of 16 June 1997 concerning the information exchange, risk assessment and the control of new synthetic drugs.⁵⁰

The focus of the attention should however be more on how to reduce the demand for drugs. Greater efforts and allocation of funds are needed for the prevention, education and rehabilitation sides of the fight against drugs as there seems to be some misperception by the young of the risks incurred by drug abuse.

It is also important to have effective and practical co-operation between the Members States' police, judicial and customs authorities. Emphasis should equally be put on the implementation of a multidisciplinary and partnership approach to the problem, with an active contribution from all the players at national, regional and city levels.

These conclusions were shared by the Dublin European Council and more recently by the European Parliament in its resolution of 6 October 1998 concerning European co-operation in the framework of the UN General Assembly Special Session on Drugs (UNGASS).⁵¹

The situation in the EU Member States is now regularly examined at the level of the Council since the adoption of the Joint Action of 17 December 1996 concerning the approximation of the laws and practices of the Member States of the EU to combat drug addiction and to prevent and combat illegal drug trafficking.⁵²

⁵⁰ OJ N° 167 of 25.06.97

⁵¹ Report of Mrs d'Ancona. Doc. A4-0211/98

⁵² OJ N° 342 of 31.12.96

This instrument will contribute to the identification of common trends and differences in legislation and practices and will form the basis for the promotion of the exchange of information and best practices.

B. Prescription of drugs to drug addicts

Some topical drug issues have been widely covered in the media and there is a need to present the objective situation in this regard. This concerns, in particular, the specific issue of prescription of narcotic drugs and particularly of heroin to drug addicts.

It is worthwhile remembering that the UN Single Convention on Narcotic Drugs of 1961, as amended by the 1972 Protocol, recognises that the medical use of narcotic drugs continues to be indispensable for the relief of pain and suffering and that adequate provision must be made to ensure the availability of narcotic drugs for such purposes, while also recognising that addiction to narcotic drugs constitutes a serious danger for the individual.

Parties to the 1961 Single Convention are required to take such legislative and administrative measures as may be necessary to limit exclusively to medical and scientific purposes the production, manufacture, export, import, distribution of, trade in, use and possession of narcotic drugs. The international drug control Conventions do not contain any definition of the expression "medical and scientific purposes". Since each Party to the Conventions must introduce its own implementing legislation, it is possible for States to reach different conclusions as to what legitimate scientific and medical purposes are.

An overview of current practices in the prescription of narcotic drugs in different countries shows that such drugs are prescribed to address the long-term problem of chronic drug addiction and to respond to a sharp increase in injecting drug use. Methadone is the most commonly used substitution agent in opioid dependence. However, buprenorphine (brand name, Subutex) has been studied for many years as a potentially useful substitution agent and has been introduced to treat opioid addicts in France and more recently in some other Member States, including in the UK and in Finland. Heroin is prescribed to drug addicts in only a few States. Apart from Switzerland, where the decision was taken by referendum to continue with the heroin prescription project after the experimental phase, the UK has already been prescribing heroin for years, though on a smaller scale. Prescription of heroin in the UK is being legally restricted to physicians specially licensed by the Home Secretary for that purpose. The Netherlands is presently experimenting with heroin prescription under strict medical control for chronic addicts.

1998 COMMUNITY FUNDING IN THE FIELD OF DRUGS

BUDGET ITEMS	TYPE OF ACTIONS ⁵³	BUDGET ALLOCATION IN 1998
Internal		
<i>Specific drug related items</i>		
B3-4302: Programme of Community Action on the Prevention of Drug Dependence (1996-2000)	16 priority actions to be implemented by the year 2000, grouped under two main headings: (a) data, research and evaluation and (b) information, health education and training.	5 MECU
B3-441: EMCDDA	The objective of the EMCDDA is to contribute to the harmonisation of drug related data collection at EU level. The REITOX National Focal Points fulfil a key role in the implementation of this network.	7.6 MECU

⁵³ Based on data available in the EC-REITOX database.

<i>Non-Specific drug related items</i>		
B3-1001: Socrates	Combating drugs is not one of the major focus points of the Socrates Education programme and there is no specific action with this aim but it can be eligible as an educational theme at most levels of education and actions within the programme.	± 0.01 MECU (1 project)
B3-1010/B-3-1011: Youth for Europe/European Voluntary Service	Combating drugs is not one of the major focus points of the Youth for Europe programme, but it is eligible within the activities : facilitating youth exchanges, encouraging local actions and in particular the access of disadvantaged young people.	B3-1010: ± 0.19 MECU (30 projects) B3-1011: ± 0.05 MECU (10 projects)
B3-1021: Leonardo da Vinci	Combating drugs is not one of the major focus points of the Leonardo da Vinci vocational training programme but it is eligible within the measures concerning combating social exclusion.	± 0.3 MECU (3 projects)
B6-7142: BIO-MED	In the framework of the Fourth Framework Biomed 2 Programme, five research projects were funded for a total amount of 2.9 MECU. They are related to the following issues: the development of a methodology for the detection of doping with growth hormone, analysis of mechanisms of chronic pain in order to develop treatment strategies, the dopamine D3 receptor in drug addiction, the opioid system and its role in drug addiction, etc. The projects started in 1996 and will be finished at the end of 1999.	1 MECU (estimated 1998 budget on the basis of a total budget of 2.9 MECU for a period of 3 years)
B2-1422: Employment-INTEGRA	In 1998, as a result of a call for tender in 1997, 230 projects (total budget around 55 MECU) were funded focusing on the reintegration of marginalised groups, including addicts, into the working place. The projects run over a period of 3 years (1998-2000)	Estimated annual budget for 1998 15-20 MECU
B5-800: Co-operation in the field of Justice and Home Affairs (OISIN, FALCONE, GROTIUS)	In 1998, in the field of JHA, 18 projects related to the issue of drugs and trafficking were funded from OISIN (reinforcement of the co-operation between law enforcement bodies). FALCONE (co-operation against organised crime) funded 6 projects and GROTIUS (strengthening of co-operation between practitioners of the judicial system) funded 1 project.	OISIN: 0.74 MECU FALCONE: 0.36 MECU GROTIUS: 0.031 MECU

External		
<i>Specific drug-related items</i>		
B7-6210: North-South Co-operation in the field of drugs and drug addiction.	This budget item allows funding of drug demand reduction and supply reduction projects in developing countries. The 1998 budget was equally divided (about 2 MECU each over the following regions: Central and Latin America, Asia, the Caribbean, Africa and the Mediterranean region (including Magreb and Mashrak). About 1 MECU was allocated to the African Region.	8.9 MECU
B7-5000: PHARE: Multi-Country Programme for the fight against drugs	In light of the pre-accession strategy, the 1998 programme aims primarily to facilitate the progressive adoption and implementation of the EU acquis in the field of drugs. Within this context, the priorities are (i) the approximation of legislation and measures and the establishment of the necessary institutional structures, in compliance with the EU standards and (ii) the strengthening of the administrative and operational capacities of the competent authorities to apply the acquis in the field of drugs.	11 MECU
B7-520: TACIS:	General Programme for Customs co-operation with the NIS (total budget 1998 5.8 MECU): some activities are directly related to drugs detection. Programme for the construction, equipping and technical assistance at 5 Border Crossings (total budget 11.82 MECU). Programme for JHA activities targeted mainly at Drugs and Immigration issues (total budget 3 MECU).	0.5 MECU (estimation) 1.34 MECU (estimation) 2.6 MECU (estimation)
<i>Non-specific drug related budget items</i>		
B7-3100: Financial and technical co-operation with Latin American developing countries	Two projects related to alternative development will be funded: - Colombia: upgrading of Colombian mapping System of illicit crops, - Peru: development alternative program in Pozuzo y Palcazu region.	8 MECU over 4 years 28 MECU over 6 years
European Development Fund (EDF)	The EDF allocated in 1998 a budget of 5.41 MECU for drug related projects: 21 % of this budget was spent in the African Region (West Africa, Zambia, Botswana), 79 % in the Caribbean.	5.41 MECU