

## IV

(Notices)

## NOTICES FROM EUROPEAN UNION INSTITUTIONS, BODIES, OFFICES AND AGENCIES

## COUNCIL

## EU ACTION PLAN ON DRUGS 2013-2016

(2013/C 351/01)

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**Introduction**

The use of illicit drugs and the misuse of drugs generally, is a major problem for individuals, families and communities across Europe. Apart from the health and social implications of drug misuse, the illicit drugs market constitutes a major element of criminal activity across European society and, indeed, on a global level.

In December 2012, the Council adopted the EU Drugs Strategy for 2013-2020. The Strategy aims to contribute to a reduction in drug demand and drug supply within the EU. It also aims to reduce the health and social risks and harms caused by drugs through a strategic approach that supports and complements national policies, that provides a framework for coordinated and joint actions and that forms the basis and political framework for EU external cooperation in this field. This will be achieved through an integrated, balanced and evidence-based approach.

The objectives of the Strategy are:

- to contribute to a measurable reduction of the use of drugs, of drug dependence and of drug-related health and social risks and harms,
- to contribute to a disruption of the illicit drugs market and a measurable reduction of the availability of illicit drugs,
- to encourage coordination through active discourse and analysis of developments and challenges in the field of drugs at EU and international level,

- to further strengthen dialogue and cooperation between the EU and third countries, international organisations and fora on drug issues,
- to contribute to a better understanding of all aspects of the drugs phenomenon and of the impact of interventions in order to provide a sound and comprehensive evidence-base for policies and actions.

This EU Drugs Action Plan, like the EU Drugs Strategy, is based on the fundamental principles of EU law and it upholds the founding values of the Union — respect for human dignity, liberty, democracy, equality, solidarity, the rule of law and human rights. It is also based on the UN conventions that provide the international legal framework to address, inter alia, the use of illicit drugs, as well as on the Universal Declaration on Human Rights.

The Plan sets out the actions that will be implemented to achieve the objectives of the Strategy. Actions are set out under the two policy areas of the Strategy:

- drug demand reduction, and
- drug supply reduction;

and the three cross-cutting themes of the Strategy:

- coordination,
- international cooperation, and
- information, research, monitoring and evaluation.

Actions are aligned to objectives of the EU Drugs Strategy 2013-2020. In drawing up the actions, account was taken of the need to be evidence-based, scientifically sound, realistic, time-bound and measurable with a clear EU relevance and added value. This Action Plan indicates timetables, responsible parties, indicators and data collection/assessment mechanisms.

Based on existing reporting mechanisms, a number of over-arching indicators are set out in Annex 1. These facilitate the measurement of the overall effectiveness of this EU Drugs Action Plan and do not involve an additional reporting burden. A number of these are referenced, as appropriate, across the Plan. Furthermore, throughout the Plan, indicators are set out that draw on programme, evaluative and other data sources. Utilisation of these indicators is dependent on data collection processes in each Member State or at EU institution level.

In line with the Strategy stipulation that its detailed implementation should be set out in two consecutive Action Plans, this Action Plan covers the four years from 2013 until 2016. A second Action Plan for the period 2017-2020 will be prepared following an external mid-term assessment of the EU Drugs Strategy by 2016 and taking account of any other relevant strategies and evaluations.

## 1. Drug demand reduction

**Contribute to a measurable reduction in the use of illicit drugs, in problem drug use, in drug dependence and in drug-related health and social harms as well as contributing to a delay in the onset of drug use**

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
1. Prevent drug use and, secondly, delay the onset of drug use	1. Improve the availability and effectiveness of prevention measures that take account of:  (a) population risk factors such as age; gender; cultural and social factors;  (b) situational risk factors such as homelessness; drug use in nightlife and recreational settings; the workplace; and driving under the influence of drugs; and  (c) individual risk factors such as mental health; problem behaviour and psychosocial development; and other factors known to affect individual vulnerability to drug use such as genetic influences and family circumstances	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicators 1, 12</li> <li>— Level of provision at MS level of evidence-based universal and environmental prevention measures</li> <li>— Level of provision at MS level of targeted prevention measures, including family- and community-based measures</li> <li>— Level of provision at MS level of indicated prevention measures</li> </ul>	EMCDDA reporting Reitox national reports MS reporting on results of measures
	2. In addition to the prevention of drug use, strengthen and better target prevention and diversionary measures to delay the age of first use of illicit drugs	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicators 1, 5, 12</li> <li>— Level of provision at MS level of evidence-based prevention and diversionary measures that target young people in family, community, and formal/non-formal education settings</li> </ul>	EMCDDA reporting MS reporting on results of measures
	3. Raise awareness of the risks and consequences associated with the use of illicit drugs and other psychoactive substances	Ongoing	MS COM EMCDDA	<ul style="list-style-type: none"> <li>— Overarching indicators 5, 12</li> <li>— Level of awareness in general and youth populations of healthy lifestyles and of the risks and consequences of the use of illicit drugs and other psychoactive substances</li> </ul>	EMCDDA reporting Eurobarometer surveys ESPAD HBSC

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	4. Enable a more informed response to the challenge of the misuse of prescribed and 'over the counter' opioids and other psychoactive medicines	2014-2016	MS HDG EMA EMCDDA	<ul style="list-style-type: none"> <li>— Collation of data by MS on levels and patterns of prescribing of psychoactive medicines by end-2014</li> <li>— Number of initiatives that focus on the promotion of appropriate use of prescribed and 'over the counter' opioids and other psychoactive medicines</li> </ul>	MS reporting Report of ALICE RAP project
2. Enhance the effectiveness of drug treatment and rehabilitation, including services for people with co-morbidity, to reduce the use of illicit drugs; problem drug use; the incidence of drug dependency and drug-related health and social risks and harms and to support the recovery and social re/integration of problematic and dependent drug users	5. Develop and expand the diversity, availability, coverage and accessibility of comprehensive and integrated treatment services including those which address polydrug use (combined use of illicit and/or licit substances including alcohol)	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicators 1, 6, 11</li> <li>— Extent of the diversity of comprehensive and integrated treatment services at MS level including those which address polydrug use</li> <li>— MS data on treatment retention and outcomes</li> </ul>	EMCDDA reporting Reitox national reports EMCDDA Best practice portal
	6. Expand the provision of rehabilitation/recovery services with an emphasis on services that: <ul style="list-style-type: none"> <li>(a) focus on providing a continuum of care through case management and interagency collaboration for individuals;</li> <li>(b) focus on supporting the social re/integration (including the employability) of problem and dependent drug users; and</li> <li>(c) strengthen the diagnostic process and the treatment of psychiatric and physical co-morbidity involving drug use</li> </ul>	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicator 11</li> </ul> MS data on: <ul style="list-style-type: none"> <li>— Extent of increase in rehabilitation/recovery services adopting case management and inter-agency approaches</li> <li>— Extent of increase in the number of programmes, specifically targeted at drug users with co-morbidity, involving partnerships between both mental health and drug rehabilitation/recovery services</li> <li>— Level and duration of abstentions from consumption of illicit and/or licit drugs by people leaving drug treatment</li> <li>— Availability of treatment options to meet needs of people who experience relapses to drug use</li> </ul>	EMCDDA reporting MS reporting on results of services

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	7. Ensure that treatment and outreach services incorporate greater access to risk and harm reduction options to lessen the negative consequences of drug use and to substantially reduce the number of direct and indirect drug-related deaths and infectious blood-borne diseases associated with drug use but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicators 2, 3, 4, 11</li> <li>— Extent of increased availability of and access to evidence-based risk and harm reduction measures in MS</li> </ul>	EMCDDA reporting Reitox national reports MS reporting on services
	8. Scale up the development, availability and coverage of health care measures for drug users in prison and after release with the aim of achieving a quality of care equivalent to that provided in the community	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicator 10</li> <li>— Availability of services for drug users in prisons and the extent to which prison health care policies and practices incorporate care models comprising best practices in needs assessment and continuity of care for prisoners during imprisonment</li> <li>— Extent of decrease in drug-related physical and mental health problems amongst prisoners</li> <li>— Extent to which prison-based services and community-based services provide continuity of care for prisoners upon release with particular emphasis on avoiding drug overdoses</li> </ul>	EMCDDA reporting Reitox national reports MS reporting on services
3. Embed coordinated, best practice and quality approaches in drug demand reduction	9. Agree and commence the implementation of EU minimum quality standards, that help bridge the gap between science and practice, for: <ul style="list-style-type: none"> <li>(a) environmental, universal, selective and indicated prevention measures;</li> <li>(b) early detection and intervention measures;</li> </ul>	2014-2016	Council HDG MS COM EMCDDA	<ul style="list-style-type: none"> <li>— Consensus achieved by MS on minimum quality standards building on previous EU preparatory studies</li> </ul>	EMCDDA Best practice portal COM biennial progress report

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	(c) risk and harm reduction measures; and (d) treatment, rehabilitation, social integration and recovery measures				

## 2. Drug supply reduction

### Contribute to a measurable reduction of the availability and supply of illicit drugs in the EU

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
4. Enhance effective law enforcement coordination and cooperation within the EU to counter illicit drug activity, in coherence, as appropriate, with relevant actions determined through the EU policy cycle	10. Utilise to best effect available intelligence and information-sharing law enforcement instruments, channels and communication tools used to collate and analyse drug-related information	Ongoing	MS Europol Eurojust COSI	<ul style="list-style-type: none"> <li>— Overarching indicator 7</li> <li>— Extent of high impact intelligence led and targeted activities, of joint operations, joint investigation teams and cross-border cooperation initiatives focusing on criminal organisations engaged in illicit drug activity</li> <li>— Increased use of Europol's drug-related information sharing, analysis and expert systems</li> <li>— Results achieved from EMPACT projects and bilateral and multilateral initiatives</li> </ul>	EMCDDA reporting EU agencies reporting EMPACT driver reports
	11. Identify and prioritise the most pressing threats associated with drug-related organised crime	2014	Council COSI Europol MS COM	<ul style="list-style-type: none"> <li>— EU policy cycle and crime priorities for 2014-2017 in place</li> </ul>	Council conclusions on EU policy cycle EU SOCTA EMPACT evaluation
	12. Strengthen CEPOL's training for law enforcement officers in relation to illicit drug production and trafficking, particularly training methods and techniques:	2014-2016	MS CEPOL Europol COSI COM	<ul style="list-style-type: none"> <li>— Training needs assessment carried out by end-2014</li> <li>— Availability and uptake of relevant training courses</li> <li>— Number of law enforcement officers trained and effectively deployed as a result</li> </ul>	COM biennial progress report CEPOL annual report CEPOL Curricula EMPACT evaluation

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	(a) to combat the use of new communication technologies in illicit drug production and trafficking; (b) to enhance asset confiscation; (c) to combat money laundering; and (d) to detect and dismantle illicit clandestine laboratories and cannabis cultivation sites				
	13. Improve counter narcotic activities through strengthening and monitoring the effectiveness of regional information-sharing platforms and regional security-sharing platforms with the aim of disrupting and suppressing emerging threats from changing drug trafficking routes	Ongoing	COM MS Europol COSI Regional information-sharing platforms Regional security-sharing platforms	— Overarching indicator 7 — Number of intelligence led activities leading to the disruption and suppression of drug trafficking routes — Level of information sharing through effective activity of the liaison officer network	EMCDDA reporting Security/information-sharing platforms and evaluation reports EU SOCTA EMPACT evaluation
	14. Strengthen actions to prevent the diversion of drug precursors and pre-precursors for use in the illicit manufacture of drugs	Ongoing	MS Europol COM CUG COSI	— Number of cases and quantity of stopped or seized shipments of precursors intended for illicit use — Results achieved from EMPACT projects — Use of Pre-Export Notification (PEN) Online System and increased use of the Precursors Incident Communication System (PICS) — Number of joint follow-up meetings and other activities linked to the prevention of the diversion of precursors and pre-precursors	Reports from EU and MS law enforcement agencies EMPACT evaluation Driver reports

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	15. Counter cross-border drug trafficking and improve border security notably at EU seaports, airports and land border crossing points through intensified efforts, including information and intelligence sharing, by relevant law enforcement agencies	Ongoing	MS Europol CCWP COSI	<ul style="list-style-type: none"> <li>— Increased number of multi-disciplinary/multi-agency joint operations and cross-border cooperation initiatives</li> <li>— Number of effective memoranda of understanding (MOU) agreed between law enforcement agencies and relevant bodies such as airlines, air express couriers, shipping companies, harbour authorities and chemical companies</li> <li>— Results achieved from EMPACT projects</li> <li>— Improved intelligence and information sharing on cross-border drug trafficking utilising, inter alia, available border surveillance systems</li> </ul>	COM biennial progress report EMPACT evaluation and driver reports MS reporting
	16. Develop and progressively implement key indicators on drug supply by standardising, improving and streamlining data collection in this field, building on currently available data	2013-2016	COM MS Council HDG EMCDDA Europol	<ul style="list-style-type: none"> <li>— Roadmap developed and agreed on the implementation of key drug supply indicators</li> <li>— MS agreement reached on key drug supply indicators</li> </ul>	Overview of existing supply data collection in MS EMCDDA reporting COM biennial progress report
5. Enhance effective judicial cooperation and legislation within the EU	17. Strengthen EU judicial cooperation in targeting cross-border drug trafficking, money laundering, and in the confiscation of the proceeds of drug-related organised crime	2013-2016	Council COM MS Eurojust	<ul style="list-style-type: none"> <li>— Adoption and timely implementation of agreed EU measures and legislation on (a) confiscation and recovery of criminal assets; (b) money laundering; (c) approximation of drug trafficking offences and sanctions across the EU</li> <li>— Increased number of financial investigations and confiscations in relation to the proceeds of drug-related organised crime through EU judicial cooperation</li> <li>— Timely and effective responses to mutual assistance requests and European Arrest Warrants in relation to illicit drug trafficking</li> </ul>	Eurojust reporting COM biennial progress report



Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	18. Introduce and adopt new EU legislative measures to address the emergence, use and rapid spread of new psychoactive substances	2013-2016	COM Council HDG MS	— EU legislation in place — Implementation of EU legislation in MS	COM biennial progress report
	19. Strengthen EU legislation on drug precursors to prevent their diversion without disrupting lawful trade	Ongoing	Council COM MS	— Adoption and implementation of regulations of the European Parliament and of the Council on drug precursors amending both Council Regulation (EC) No 111/2005 and Regulation (EC) No 273/2004	COM biennial progress report EU annual report on drug precursors
	20. Combat the use of certain pharmacologically active substances (as defined in Directive 2011/62/EU) as cutting agents for illicit drugs	Ongoing	MS COM EMA EMCDDA Europol	— Number of seizures of active substances used as cutting agents for illicit drugs — Timely implementation of new EU legislative requirements aimed at securing the supply chain for active substances under Directive 2011/62/EU, the Falsified Medicines Directive	Reports from the CCWP and CUG MS reporting
	21. Members States to provide, where appropriate and in accordance with their legal frameworks, alternatives to coercive sanctions (such as education, treatment, rehabilitation, aftercare and social integration) for drug-using offenders	2015	MS	— Increased availability and implementation of alternatives to prison for drug-using offenders in the areas of education, treatment, rehabilitation, aftercare and social integration — Increased monitoring, implementation and evaluation of alternatives to coercive sanctions	Reitox national reports
6. Respond effectively to current and emerging trends in illicit drug activity	22. Identify strategic responses to address the role of new communication technologies and the hosting of associated websites, in the production, marketing, purchasing and distribution of illicit drugs, including controlled new psychoactive substances	Ongoing	Council COM HDG MS Europol COSI	— Results achieved from law enforcement actions targeting drug-related crime via the Internet — Increased number of joint operations and cross-border cooperation initiatives	Progress review of EU policy cycle priorities EMPACT evaluation and driver reports MS reporting Reports from EU agencies

### 3. Coordination

#### Member States and EU to effectively coordinate drugs policy

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
7. Ensure effective EU coordination in the drugs field	23. Enhance information sharing between the HDG and other relevant Council Working Groups	Ongoing	PRES Council EEAS HDG	— Extent to which the EU Drugs Strategy/and Action Plan are taken into account in the programmes of other Council Working Groups including COAFR, COASI, COEST, COLAT and COWEB	Council Working Group reporting
	24. Each presidency may convene meetings of the National Drugs Coordinators, and of other groupings as appropriate, to consider emerging trends, effective interventions and other policy developments of added value to the EU Drugs Strategy and to MS	Biannually	PRES MS	— Extent to which National Drug Coordinators' meeting agenda reflects developments, trends and new insights in policy responses and provides for improved communication and information exchange	Presidency reporting
	25. The HDG will facilitate: (a) monitoring of the implementation of the Action Plan through thematic debates; and (b) an annual dialogue on the state of the drugs phenomenon in Europe	(a) Biannually (b) Annually	PRES HDG MS COM EMCDDA Europol	— Extent of implementation of the Action Plan — Timeliness of dialogue at the HDG on latest drug-related trends and data	Presidency reporting
	26. Ensure consistency and continuity of MS and EU actions across presidencies to strengthen the integrated, balanced and evidence-based approach to drugs in the EU	Biannually	PRES PRES Trio MS COM HDG EMCDDA Europol	— Extent of consistency and continuity of actions across presidencies — Advancement in implementation of EU Drugs Strategy priorities across presidencies	Presidency reporting
	27. Ensure coordination of EU drugs policies and responses, to support international cooperation between the EU, third countries and international organisations	Ongoing	EEAS COM HDG MS	— Level of consistency and coherence in the objectives, expected results and measures foreseen in EU actions on drugs	Annual EEAS report to the HDG COM biennial progress report

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
				<ul style="list-style-type: none"> <li>— Inclusion of drug-related priorities in strategies of relevant EU bodies</li> <li>— Intensified cooperation between the HDG and the geographical/regional working groups, including COAFR, COASI, COEST, COLAT and COWEB</li> </ul>	
	28. Achieve a coordinated and appropriate level of resources at EU level and Member State level to fulfil the priorities of the EU Drugs Strategy	Annually	MS COM EEAS Council HDG	<ul style="list-style-type: none"> <li>— Overarching indicator 14</li> <li>— Amount of funding at EU level, and where appropriate, MS level</li> <li>— Extent of coordination on drugs-related financial programmes across Council Working Groups</li> </ul>	EMCDDA reporting COM biennial progress report
8. Ensure effective coordination of drug-related policy at national level	29. Coordinate actions on drugs policy between government departments/ministries and relevant agencies at MS level and ensure appropriate multi-disciplinary representation on, or input to, HDG delegations	Ongoing	MS	<ul style="list-style-type: none"> <li>— Overarching indicator 14</li> <li>— Effectiveness of a horizontal drug policy coordination mechanism at MS level</li> <li>— Number of cross-cutting actions in drug demand and supply reduction at Member State level</li> </ul>	EMCDDA reporting Reitox national reporting COM Biennial Progress Report MS reporting
9. Ensure the participation of civil society in drugs policy	30. Promote and support dialogue with, and involvement of, civil society and the scientific community in the development and implementation of drugs policies at MS and EU levels	Ongoing	MS COM HDG PRES	<ul style="list-style-type: none"> <li>— Timely dialogues between EU Civil Society Forum on Drugs and the HDG during each Presidency period</li> <li>— Engagement of EU Civil Society Forum in reviewing implementation of the EU Drugs Action Plan</li> <li>— Level of involvement of civil society in MS and EU drugs policy development and implementation with particular regard to the involvement of drug users, clients of drug-related services and young people</li> <li>— Timely dialogue between the scientific community (natural and social sciences, including neuroscience and behavioural research) and the HDG</li> </ul>	COM biennial progress report Feedback from EU Civil Society Forum on Drugs and from civil society representatives at MS level MS reporting Feedback from scientific community through the EMCDDA Scientific Committee

#### 4. International Cooperation

##### Strengthen dialogue and cooperation between the EU and third countries and international organisations on drugs issues in a comprehensive and balanced manner

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
10. Integrate the EU Drugs Strategy within the EU's overall foreign policy framework as part of a comprehensive approach that makes full use of the variety of policies and diplomatic, political and financial instruments at the EU's disposal in a coherent and coordinated manner	31. Ensure policy coherence between the internal and external aspects of the EU drugs policies and fully integrate drugs issues within the political dialogues and framework agreements between the EU and its partners and in the EU advocacy on global issues or challenges	Ongoing	COM EEAS PRES HDG MS	<ul style="list-style-type: none"> <li>— Overarching indicator 13</li> <li>— Drug policy priorities increasingly reflected in EU's external policies and actions</li> <li>— Inclusion of drug-related priorities in EU strategies with third countries and regions</li> <li>— Number of agreements, strategy papers, action plans in place</li> </ul>	EEAS reporting Mid-term review of EU Drugs Strategy COM biennial progress report
	32. Ensure that the policy priorities and the balance between demand and supply reduction are well reflected in policy options and in the programming and implementation of external assistance, particularly in source and transit countries, through projects involving: <ul style="list-style-type: none"> <li>(a) development of integrated, balanced and evidence-based drug policies;</li> <li>(b) supply reduction;</li> <li>(c) the prevention of the diversion of drug precursors and pre-precursors;</li> <li>(d) drug demand reduction; and</li> <li>(e) alternative development measures</li> </ul>	Ongoing	COM MS EEAS	<ul style="list-style-type: none"> <li>— Extent to which EU's drug policy priorities, especially the balance between demand and supply reduction, are reflected in funded priorities and projects</li> <li>— Level of implementation of coordinated actions in action plans between the EU and third countries and regions</li> <li>— Number of third country national strategies and action plans that incorporate integrated drug policies</li> </ul>	COM biennial progress report EEAS reporting on programming Monitoring and evaluation by MS
	33. Improve capacity and strengthen the role of EU Delegations to enable them to proactively engage on drugs policy issues	2013-2016	EEAS COM MS	<ul style="list-style-type: none"> <li>— Relevant expertise, training and policy guidance provided to EU Delegations</li> <li>— Regional networking among EU Delegations on drug issues enhanced</li> </ul>	EEAS reporting on EU Delegations

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
				— Coordination with MS enhanced	
	<p>34. Ensure an appropriate level of EU and MS funding and expertise to further strengthen and support third countries' efforts in addressing and preventing illicit drug crop cultivation, through rural development measures, in order to deal with the challenges to public health, safety and security</p>	Ongoing	MS EEAS COM	<ul style="list-style-type: none"> <li>— Number of third country national policies, strategies and action plans that incorporate integrated approaches to the problem of illicit drug crop cultivation</li> <li>— Improvements in human development indicators in drug-cultivating areas</li> <li>— Number of rural development projects and programmes funded by the EU and MS in regions where illicit crop cultivation is taking place, or in regions at risk of illicit crop cultivation</li> <li>— Reported local decrease in illicit drug crop cultivation in the long term</li> </ul>	<p>EU and MS project and programme monitoring and evaluation systems and reports</p> <p>UNDP human development reports</p> <p>Third country reports</p>
	<p>35. Promote and implement the EU approach to alternative development (consistent with the EU Drugs Strategy 2013-2020; the EU Approach to Alternative Development and the United Nations Guiding Principles on Alternative Development 2013) in cooperation with third countries, taking into account human rights, human security and specific framework conditions, including:</p> <p>(a) incorporating alternative development into the broader agenda of Member States, encouraging third countries that wish to do so to integrate alternative development into their national strategies;</p> <p>(b) contributing to initiatives that aim to reduce poverty, conflict and vulnerability by supporting sustainable, legal and gender sensitive livelihoods for people</p>	Ongoing	MS COM EEAS	<ul style="list-style-type: none"> <li>— Number of third country national policies, strategies and action plans that incorporate: <ul style="list-style-type: none"> <li>— integrated approaches to the problem of illicit drug cultivation, and</li> <li>— effectively organised alternative development initiatives</li> </ul> </li> <li>— Number of evaluated projects that demonstrate positive outcomes relating to sustainable, legal and gender sensitive livelihoods</li> <li>— Improvements in human development indicators</li> </ul>	<p>Third countries' implementation reports of national drugs strategies</p> <p>EU and MS project and programme monitoring and evaluation system and report</p> <p>UNDP human development reports</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	who were previously, or are currently, involved in illicit drug production				
	36. Support third countries, including civil society in those countries, to develop and implement risk and harm reduction initiatives particularly where there is a growing threat of transmission of drug-related blood-borne viruses associated with drug use including but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis	Ongoing	MS COM EEAS	— Number and quality of risk and harm reduction initiatives developed  — Prevalence of drug-related deaths in third countries and drug-related blood-borne viruses including but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis	Third country reports  COM biennial progress report  WHO reports
	37. Support third countries to tackle drug-related organised crime, including drug trafficking, by:  (a) intelligence sharing and the exchange of best practices;  (b) strengthening counter-narcotics capacity and developing expertise of source and transit countries;  (c) working with international partners to tackle the enablers of drug trafficking such as corruption, weak institutions, poor governance and lack of financial regulatory controls;  (d) strengthening cooperation in the field of asset identification and recovery, in particular through the creation of dedicated national platforms; and  (e) intensifying regional and intra-regional cooperation	Ongoing	MS EEAS COM Europol	— Number and effectiveness of projects and programmes  — Sustained reduction in drug trafficking	COM biennial progress report  MS reporting  Europol reporting  EEAS reporting  UNODC annual world drug report

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>38. Reinforce cooperation and update and implement dialogues, declarations and EU Drugs Action Plans with partners, including:</p> <p>(a) acceding countries, candidate countries and potential candidates;</p> <p>(b) European Neighbourhood Policy countries;</p> <p>(c) United States of America, the Russian Federation;</p> <p>(d) other countries or regions of priority notably:</p> <ul style="list-style-type: none"> <li>— Afghanistan and Pakistan,</li> <li>— Central Asian republics,</li> <li>— China,</li> <li>— Latin American and the Caribbean (CELAC),</li> <li>— Africa, in particular West Africa</li> </ul>	Ongoing	PRES Trio COM EEAS MS	<ul style="list-style-type: none"> <li>— Overarching indicator 13</li> <li>— Strengthened cooperation in the field of drugs with relevant partners</li> <li>— Dialogues organised</li> <li>— Declarations agreed</li> <li>— Programmes and action plans implemented</li> </ul>	<p>EEAS reporting</p> <p>Mid-term review of EU Drugs Strategy</p> <p>COM biennial progress report</p> <p>EU reporting matrices</p> <p>Implementation reports of the relevant action plans</p>
	<p>39. Improve the Dublin Group consultative mechanism through intensified EU coordination and participation, better implementation and dissemination of the recommendations of the Mini Dublin Group reports</p>	Ongoing	Dublin Group COM EEAS MS	<ul style="list-style-type: none"> <li>— Level of activity across Dublin Group structures including number of Dublin Group recommendations effectively implemented</li> </ul>	Dublin Group reports
	<p>40. Hold an annual dialogue on EU and MS drugs-related assistance to third countries accompanied by a written update</p>	From 2014	COM EEAS MS	<ul style="list-style-type: none"> <li>— Annual dialogue on funding held</li> </ul>	<p>COM biennial progress report</p> <p>MS reporting</p> <p>EEAS reporting</p> <p>Project and programme monitoring and evaluation system and reports</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	41. Ensure that the promotion and protection of human rights are fully integrated in political dialogues and in the planning and implementation of relevant drugs-related programmes and projects including through the development of a human rights guidance and impact assessment tool	Ongoing	COM EEAS MS	<ul style="list-style-type: none"> <li>— Human rights effectively mainstreamed into EU external drugs action</li> <li>— Human rights guidance and assessment tool developed and implemented</li> </ul>	COM biennial progress report COHOM annual human rights report MS reporting
11. Improve cohesiveness of EU approach and EU visibility in the United Nations (UN) and strengthen EU coordination with international bodies related to the drugs field	42. Contribute to shaping the agenda on international drugs policy, including through: <ul style="list-style-type: none"> <li>(a) action by EU and MS Delegations at the UN General Assembly and the Commission on Narcotic Drugs (CND);</li> <li>(b) preparation, coordination and adoption of EU common positions and joint resolutions in the UN General Assembly and the CND and ensuring that the EU speaks with one strong voice in these and other international fora;</li> <li>(c) the mid-term review process of the 2009 UN Political Declaration and Action Plan on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem; and</li> <li>(d) the 2016 UN General Assembly Special Session on Drugs</li> </ul>	Ongoing	EEAS PRES MS COM Council HDG	<ul style="list-style-type: none"> <li>— Overarching indicator 13</li> <li>— Effective promotion of EU policies in the UN, including at the CND</li> <li>— Number of EU common positions supported by other regions and international bodies</li> <li>— Frequency with which EU speaks with a single effective voice in international fora and in dialogues with third countries</li> <li>— Level of successful adoption of EU resolutions at UN including at the CND</li> <li>— Outcome of the mid-term review of the 2009 UN Political Declaration and Action Plan on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem</li> <li>— Adoption of an EU Joint Position Paper for the 2016 UNGASS and reflection of the EU positions in the UNGASS outcome</li> </ul>	EEAS reporting Mid-term review of the EU Drugs Strategy COM biennial progress report Convergence indicator Mid-term review UNGASS outcome
	43. Strengthen partnerships with the UNODC, WHO UNAIDS and other relevant UN agencies, international and regional bodies and organisations and initiatives (such as the Council of Europe and the Paris Pact Initiative)	Ongoing	Council EEAS COM PRES HDG	<ul style="list-style-type: none"> <li>— Overarching indicator 13</li> <li>— Number of information exchanges and activities between the EU and relevant international and regional bodies and organisations and initiatives</li> <li>— Effectiveness of partnerships with relevant bodies</li> </ul>	EEAS reporting Mid-term review of the EU Drugs Strategy COM biennial progress report



Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
12. Support the process for acceding countries, candidate countries, and potential candidates to adapt to and align with the EU <i>acquis</i> in the drugs field, through targeted assistance and monitoring	44. Provide targeted technical assistance, and other assistance and support as necessary, to acceding countries, candidate countries, and potential candidates to facilitate their adaptation to and alignment with the EU <i>acquis</i> in the drugs field	Ongoing	COM MS EMCDDA Europol Eurojust Frontex EEAS	<ul style="list-style-type: none"> <li>— Increased compliance by countries with EU <i>acquis</i></li> <li>— Number and quality of completed projects</li> <li>— National Drugs Strategies and national drugs coordinating structures established</li> </ul>	COM biennial progress report Acceding countries, candidate countries and potential candidates reports

### 5. Information, research, monitoring and evaluation

**Contribute to a better understanding of all aspects of the drugs phenomenon and of the impact of measures in order to provide sound and comprehensive evidence for policies and actions**

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
13. Ensure adequate investment in research, data collection, monitoring, evaluation and information exchange on all aspects of the drug phenomenon	45. Promote appropriate financing of EU-level drug-related multi-disciplinary research and studies including through EU related financial programmes (2014-2020)	2014-2016	MS COM EMCDDA	— Amount and type of EU funding provided across the different programme and projects	COM biennial progress report
	46. Ensure that EU-supported projects: <ul style="list-style-type: none"> <li>(a) take account of the priorities of the EU Drugs Strategy and Action Plan on Drugs;</li> <li>(b) take account of gaps in policy formulation;</li> <li>(c) deliver clear added value and ensure coherence and synergy; and</li> <li>(d) avoid duplication with research under other programmes and bodies;</li> <li>(e) take account of the importance of behavioural research and neuroscience</li> </ul>	2014-2016	COM EMCDDA	<ul style="list-style-type: none"> <li>— The inclusion of the priorities of the EU Strategy and Action Plan on Drugs in the funding and assessment criteria of EU-funded drugs-related research</li> <li>— Number, impact, complementarity and value of EU-funded drugs-related research grants and contracts awarded</li> <li>— Number of EU-funded drugs-related articles and research reports published in peer-reviewed journals with high impact factors</li> <li>— Annual debate at the HDG on drug-related research projects funded by the EU</li> </ul>	COM biennial progress report Research project reports EMCDDA Scientific Committee recommendations on research priorities Science Citation Index and similar bibliometric tools Strategic research agenda and projects stemming from the ERA-net on drug demand and supply reduction

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	47. Promote scientific evaluations of policies and interventions at national, EU and international level	2013-2016	COM MS EMCDDA	<ul style="list-style-type: none"> <li>— Overarching indicator 14</li> <li>— Regular progress review to the Council and European Parliament on Strategy and Action Plan implementation</li> <li>— External mid-term assessment of the Strategy/Action Plan completed — 2016</li> <li>— European guidelines for the evaluation of national drug strategies and action plans published</li> <li>— Delivery of dedicated studies into the effectiveness and impacts of EU and international drug policies</li> <li>— Completed evaluation of the implementation of the 2003 Council Recommendation on the prevention and reduction of health-related harm associated with drug dependence</li> </ul>	<p>EMCDDA reporting</p> <p>COM biennial progress report</p> <p>Mid-term assessment report of EU drugs strategy</p> <p>EMCDDA reporting</p> <p>EMCDDA Scientific Committee reporting</p> <p>Reports of ALICE RAP and LINKSCH and ERA-net</p> <p>Reitox national reports</p>
14. Maintain networking and cooperation and develop capacity within and across the EU's knowledge infrastructure for information, research, monitoring and evaluation of drugs, particularly illicit drugs	48. In collaboration with relevant parties as appropriate, continue to provide comprehensive analyses of: <ul style="list-style-type: none"> <li>(a) the EU drugs situation;</li> <li>(b) the dynamics of drug use within general populations and target groups; and</li> <li>(c) responses to drug use</li> </ul>	Ongoing	EMCDDA Europol MS	<ul style="list-style-type: none"> <li>— Overarching indicators 1-15</li> <li>— Current deficits in the knowledge base established and an EU level framework developed to maximise analyses from current data holdings</li> <li>— Number of overviews and topic analyses on the drug situation</li> </ul>	<p>EMCDDA reporting</p> <p>MS reporting</p>
	49. Enhance training for those involved in responding to the drugs phenomenon	2014-2016	MS EMCDDA CEPOL	<ul style="list-style-type: none"> <li>— Number of initiatives at MS and EU level to train professionals in aspects of drug demand reduction and drug supply reduction</li> <li>— Number of initiatives at MS and EU level implemented to train professionals related to data collection and reporting of drug demand reduction and drug supply reduction</li> </ul>	<p>MS reporting</p> <p>EMCDDA training report</p> <p>CEPOL annual report</p> <p>Reitox annual reports</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>50. Enhance data collection, research, analysis and reporting on:</p> <p>(a) drug demand reduction;</p> <p>(b) drug supply reduction;</p> <p>(c) emerging trends, such as polydrug use and misuse of prescribed controlled medicines, that pose risks to health and safety;</p> <p>(d) blood-borne viruses associated with drug use including but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis;</p> <p>(e) psychiatric and physical co-morbidity;</p> <p>(f) drug problems among prisoners and the availability and coverage of drug demand reduction interventions and services in prison settings; and</p> <p>(g) other drug-related consequences</p>	Ongoing	<p>MS</p> <p>COM</p> <p>EMCDDA</p> <p>Europol</p> <p>ECDC</p> <p>EMA</p>	<p>— Increased availability and implementation of evidence-based and scientifically sound indicators on drug supply reduction and drug demand reduction</p> <p>— At MS level, extent of new research initiated on emerging trends such as polydrug use and the misuse of prescribed controlled medicines; blood-borne diseases associated with drug use including but not limited to HIV and viral hepatitis, as well as sexually transmittable diseases and tuberculosis; psychiatric and physical co-morbidity; and other drug-related consequences</p> <p>— EU-wide study carried out on drug-related community intimidation and its impact on individuals, families and communities most affected and effective responses to it</p> <p>— Adoption of evidence-based and scientifically sound indicators on drug problems among prisoners</p>	<p>EMCDDA reporting</p> <p>MS reporting</p> <p>Harmonised data reports from EU bodies including EMCDDA</p> <p>EU SOCTA</p>
	<p>51. Improve the capacity to detect, assess and respond effectively to the emergence and use of new psychoactive substances and monitor the extent to which such new substances impact on the number and profile of users</p>	Ongoing	<p>COM</p> <p>MS</p> <p>EMCDDA</p> <p>Europol</p>	<p>— Overarching indicator 6</p> <p>— Extent of new epidemiological, pharmacological and toxicological research initiated on new psychoactive substances and supported by MS and EU research programmes</p> <p>— Extent of information, best practice and intelligence exchange</p> <p>— Extent of sharing by toxicology laboratories and by research institutes of toxicological and health data analyses on new psychoactive substances</p>	<p>EMCDDA reporting</p> <p>EMCDDA-Europol implementation report</p> <p>Reports by laboratories and research institutes</p> <p>Reitox national reports</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	52. Strengthen efforts to share forensic science data, including laboratory reference standards, on new psychoactive substances, by enhancing co-operation through existing networks, such as the Drugs Working Group of the European Network of Forensic Science Institutes in the framework of the JHA Council conclusions on the vision for European Forensic Science 2020	2016	COM MS EMCDDA	<ul style="list-style-type: none"> <li>— Overarching indicator 15</li> <li>— Extent of sharing of forensic science data on new psychoactive substances</li> <li>— Ease of access to laboratory reference standards by forensic science laboratories and institutes</li> </ul>	EMCDDA/Europol reporting COM biennial progress report
	53. Improve the ability to identify, assess and respond at MS and EU levels to (a) behavioural changes in drug consumption and (b) to epidemic outbreaks	Ongoing	MS EMCDDA ECDC EMA	<ul style="list-style-type: none"> <li>— Number and effectiveness of new drug-related public health initiatives developed and implemented</li> <li>— Number and effectiveness of existing initiatives that are adjusted to take account of drug consumption or epidemic outbreaks</li> <li>— Number and impact of early warning reports, risk assessment and alerts</li> </ul>	Reitox national reports Early Warning System reports EMCDDA reporting
15. Enhance dissemination of monitoring, research and evaluation results at EU and national level	54. Member States continue to support EU monitoring and information exchange efforts, including cooperation with, and adequate support for, Reitox national focal points	Ongoing	MS EMCDDA	<ul style="list-style-type: none"> <li>— Open-access outputs from EU-funded studies disseminated</li> <li>— Extent to which Reitox national focal points funding and other resources match requirements</li> <li>— Number and effectiveness of Reitox national focal points dissemination initiatives</li> </ul>	Web dissemination including OpenAire, Cordis EMCDDA website Reitox national reports

## ANNEX 1

**15 over-arching indicators for the EU Action Plan on Drugs 2013-2016 (existing reporting mechanisms)**

1. Percentage of population who use drugs currently (within last month), used drugs recently (within last year), and who have ever used (lifetime use) by drug and age group (EMCDDA General population survey)
  2. Estimated trends in the prevalence of problem and injecting drug use (EMCDDA Problem drug use)
  3. Trends in drug-induced deaths and mortality amongst drug users (according to national definitions) (EMCDDA Drug-related deaths)
  4. Prevalence and incidence, among injecting drug users, of infectious diseases attributable to drug use, including HIV and viral hepatitis, sexually transmittable diseases and tuberculosis (EMCDDA Drug-related infectious diseases)
  5. Trends in the age of first use of illicit drugs (European School Survey Project on Alcohol and Other Drugs (ESPAD), Health Behaviour in School-aged Children (HBSC) and General Population Drug Use Survey (EMCDDA Key epidemiological indicator))
  6. Trends in numbers of people entering drug treatment (EMCDDA Treatment demand) and the estimated total number of people in drug treatment (EMCDDA Treatment demand and health and social responses)
  7. Trends in number of and quantities of seized illicit drugs (EMCDDA Drug seizures: cannabis incl. herbal cannabis, heroin, cocaine, crack cocaine, amphetamine, methamphetamine, ecstasy, LSD and other substances)
  8. Trends in retail price and purity of illicit drugs (EMCDDA Price and purity: cannabis incl. herbal cannabis, heroin, cocaine, crack cocaine, amphetamine, methamphetamine, ecstasy, LSD, other substances and composition of drug tablets)
  9. Trends in the number of initial reports of drug law offences, by drug and type of offence (supply v use/possession) (EMCDDA Drug offences)
  10. Prevalence of drug use amongst prisoners (EMCDDA Drug use in prisons)
  11. Assessment of availability, coverage and quality of services and interventions in the areas of prevention, harm reduction, social integration and treatment (EMCDDA Health and social responses)
  12. Evidence-based interventions on prevention, treatment, social integration and recovery and their expected impact on drug use prevalence and problem drug use (EMCDDA Best practice portal)
  13. Strong dialogue and cooperation, in the drugs-related field, with other regions, third countries, international organisations and other parties (External Mid-Term Evaluation of Strategy/Action Plan; EEAS reporting)
  14. Developments in national drug strategies, evaluations, legislation, coordination mechanisms and public expenditure estimates in EU Member States (EMCDDA)
  15. Early warning system on new psychoactive substances (EMCDDA/Europol)
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## ANNEX 2

**Glossary of acronyms**

Alice RAP	Addiction and Lifestyles in Contemporary Europe — Reframing Addictions Project
ASEAN	Association of South-East Asian Nations
CCWP	Council of the EU — Customs Cooperation Working Party
CELAC	Comunidad de Estados Latinoamericanos y Caribeños (Community of Latin American and Caribbean States)
CEPOL	European Police College
CICAD	La Comisión Interamericana para el Control del Abuso de Drogas (The Inter-American Drug Abuse Control Commission)
CND	Commission on Narcotic Drugs (UN)
COAFR	Council of the EU — Africa Working Party
COASI	Council of the EU — Asia-Oceania Working Party
COEST	Council of the EU — Working Party on Eastern Europe and Central Asia
COHOM	Council of the EU — Working Party on Human Rights
COLAT	Council of the EU — Working Party on Latin America
COM	European Union Commission
COSI	Council of the EU — Standing Committee on Operational Cooperation on Internal Security
COWEB	Council of the EU — Working Party on the Western Balkans Region
CUG	Council of the EU — Customs Union Group
ECDC	European Centre for Disease Prevention and Control
ECOWAS	Economic Community of West African States
EEAS	European External Action Service
EMA	European Medicines Agency
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
EMPACT	European Multidisciplinary Platform against Criminal Threats
ENFSI	European Network of Forensic Science Institutes
ERA-net	European Research Area — Network
ESPAD	European School Survey Project on Alcohol and Other Drugs
EU SOCTA	EU Serious and Organised Crime Threat Assessment
Frontex	European Agency for the Management of Operational Cooperation at the External Borders of the Member States of the European Union

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HBSC	Health Behaviour in School-aged Children Survey
HDG	Council of the EU — Horizontal Working Group on Drugs
INCB	International Narcotics Control Board (UN)
JHA	Justice and Home Affairs
LINKSCH	The LINKSCH project is a comparative study of two major drug markets, cannabis and heroin, through the prism of the transit chains operating between Central Asia and the EU and those between North Africa and the EU
MS	Member State
PEN	UNODC/INCB developed Pre-Export Notification Online System
PICS	Precursors Incident Communication System
PRES	Rotating presidency of the Council of the European Union
PRES Trio	Grouping of three consecutive rotating presidencies of the Council of the European Union
Reitox	Réseau Européen d'Information sur les Drogues et les Toxicomanies
SOCTA	Serious and Organised Crime Threat Assessment
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNGASS	United Nations General Assembly Special Session
UNODC	United Nations Office on Drugs and Crime
WCO	World Customs Organisation
WHO	World Health Organisation (UN)

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