KOMMISSIONEN FOR DE EUROPÆISKE FÆLLESSKABER

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# MEDDELELSE FRA KOMMISSIONEN TIL RÅDET OG EUROPA-PARLAMENTET

## om gennemførelsen af EU's narkotikahandlingsplan (2000-2004)

## 1. INDLEDNING

I lyset af det fortsat store narkotikamisbrug og den fortsat omfattende narkotikahandel samt de skader, narkotikaen forårsager i vores samfund som følge af narkotikarelateret kriminalitet, sundhedsproblemer og social udstødelse, har løsningen af narkotikaproblemet topprioritet i EU, hvilket EU-borgerne også mener bør være tilfældet.

Der skete betydelige fremskridt for nylig, da man på Det Europæiske Råds møde i Helsingfors stadfæstede EU's narkotikastrategi (2000-2004). På Det Europæiske Råds møde i Feira blev EU's narkotikastrategi omsat til en detaljeret EU-narkotikahandlingsplan (2000-2004), hvori det klart fastsættes, hvilke aktioner EU-institutionerne og medlemsstaterne skal iværksætte de næste fem år. Foranstaltningerne omfatter begrænsning af såvel efterspørgslen efter som udbuddet af narkotika, og behovet for internationalt samarbejde og en effektiv oplysning samt evaluering og koordinering på alle niveauer understreges. Målsætningerne i narkotikastrategien og -handlingsplanen er som følger:

- at afstikke retningslinjerne for alle aktører i EU, når de skal foretage en prioritering på narkotikaområdet de kommende fem år

- at sikre, at narkotikabekæmpelse får den nødvendige støtte på højt plan til trods for, at der er tale om et kompliceret og sammensat problem

- at skabe et solidt grundlag for de midtvejsevalueringer (2002) og den endelige evaluering af EU's aktiviteter inden for narkotikabekæmpelse over den femårige periode, som Kommissionen skal gennemføre.

I narkotikastrategien fastsættes 11 overordnede mål og 6 hovedmål for EU i denne periode[1], og der ses nærmere på nogle af de spørgsmål, der i den forbindelse dukker op. I aktionsplanen omsættes narkotikastrategiens mål til ca. et hundrede konkrete aktiviteter, der skal gennemføres i det pågældende tidsrum for at sikre gennemførelsen af narkotikastrategien.

Formålet med meddelelsen, der er baseret på bidrag fra Kommissionen, Det Europæiske Overvågningscenter for Narkotika og Narkotikamisbrug (EONN) og Europol, er at sikre, at EU vil være i stand til inden for den fastsatte tidsramme at opfylde de ambitiøse målsætninger i handlingsplanen. Meddelelsen sigter navnlig mod:

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[1] De 11 overordnede mål for EU's strategi er: a) at sikre, at narkotika fortsat er et højt prioriteret tema i EU, b) at sikre, at aktionerne evalueres, c) at videreføre den afbalancerede narkotikastrategi, d) at opprioritere forebyggelse af narkotikamisbrug, begrænsning af efterspørgslen og begrænsning af de skadelige virkninger af narkotikamisbrug, e) at styrke bekæmpelse af narkotikahandel og optrappe politisamarbejdet mellem medlemsstaterne, f) at tilskynde til et samarbejde mellem flere myndigheder og inddragelse af det civile samfund, g) fuldt ud at udnytte de muligheder, Amsterdam-traktaten giver, særlig artikel 31, litra e), om mindsteregler for narkotikahandel, h) at sikre indsamling og formidling af pålidelige og sammenlignelige oplysninger om narkotikaproblemet i EU, i) gradvis at integrere ansøgerlandene og intensivere det internationale samarbejde, j) at fremme internationalt samarbejde på grundlag af de principper, der blev vedtaget af UNGASS, og k) at understrege, at gennemførelsen af strategien forudsætter passende ressourcer.
De seks hovedmål er: a) i løbet af fem år at opnå en betydelig begrænsning af udbredelsen af narkotikamisbrug, b) at opnå en betydelig begrænsning af de narkotikarelaterede sundhedsskader, c) i væsentlig grad at øge antallet af narkotikamisbrugere, hvis behandling lykkes, d) at opnå en betydelig begrænsning af den mængde ulovlig narkotika, der er til rådighed, e) at opnå en betydelig begrænsning af antallet af narkotikarelaterede forbrydelser og f) at opnå en betydelig begrænsning af omfanget af hvidvaskning af penge og ulovlig handel med prækursorer.

(i) at fremsætte forslag til et redskab i form af et opfølgningsskema med henblik på at se på, hvilke fremskridt der er gjort i forbindelse med gennemførelsen af handlingsplanen

(ii) at redegøre for den metode, Kommissionen har til hensigt at anvende ved gennemførelsen af evalueringerne af narkotikastrategien og -handlingsplanen

(iii) at redegøre for, hvorledes Kommissionen har til hensigt at sikre, at ansøgerlandene så effektivt som muligt tager fat på narkotikaproblemet, og at foreslå, at Kommissionen ajourfører en database over alle EU-aktiviteter, som Kommissionen eller medlemsstaterne finansierer i ansøgerlandene

(iv) at foreslå, at EU ser nærmere på, hvordan det bedst er muligt at styrke udvekslingen af oplysninger om projekter i ikke-ansøgerlande; disse oplysninger skal danne grundlag for drøftelser hvert år om det internationale samarbejde på narkotikaområdet

(v) at se på, hvorledes det er muligt at forbedre koordineringen på EU-plan.

## 2. OVERSIGT OVER DE FREMSKRIDT, DER ER GJORT I FORBINDELSE MED GENNEMFØRELSEN AF EU'S NARKOTIKAHANDLINGSPLAN

I EU's narkotikahandlingsplan understreges behovet for en global, tværfaglig og integreret strategi baseret på følgende fire nøgleelementer: (i) begrænsning af efterspørgslen, (ii) begrænsning af udbuddet og bekæmpelse af ulovlig narkotikahandel, (iii) internationalt samarbejde og (iv) koordinering på nationalt plan og EU-plan.

Kommissionen har udarbejdet et opfølgningsskema (jf. bilag 1) for at holde øje med, om de i handlingsplanen fastsatte aktiviteter gennemføres inden for de fastsatte frister og overvåge de fremskridt, der gøres. EONN og Europol har i fællesskab bidraget hertil. For hver af handlingsplanens aktiviteter, der kræver en indsats af Kommissionen, EONN eller Europol, angives det i opfølgningsskemaet, hvor langt man er kommet, aktionens tidsramme og hvor højt aktionen prioriteres.

Efter Kommissionens mening bør opfølgningsskemaet ajourføres i partnerskab med alle berørte aktører for derved at sikre overvågningen af hver enkelt aktion i handlingsplanen. Kommissionen opfordrer derfor de øvrige aktører, der er involveret i gennemførelsen af handlingsplanen, navnlig medlemsstaterne, til at også at udforme opfølgningsskemaer. Når alle opfølgningsskemaerne er blevet udarbejdet, vil Kommissionen overveje, hvorledes den bedst kan samle dem. Kommissionen går ind for at fremlægge ét enkelt opfølgningsskema baseret på medlemsstaternes bidrag, som:

- vil udgøre et fleksibelt redskab til at registrere og evaluere de fremskridt, der gøres i forbindelse med gennemførelsen af EU's handlingsplan

- vil bidrage til en bedre fordeling af de menneskelige og finansielle ressourcer med henblik på en effektiv gennemførelse af handlingsplanen

- vil hjælpe alle aktører med at foretage midtvejsevalueringen og den endelige evaluering.

## 3. EVALUERING AF EU'S NARKOTIKASTRATEGI

I narkotikastrategien og -handlingsplanen opfordres Kommissionen til at foretage en evaluering af den overordnede narkotikastrategi og virkningerne heraf. I EU's narkotikahandlingsplan fastsættes tre evalueringsfaser:

- Fase 1: vurdering af resultaterne af gennemførelsen af aktiviteterne i handlingsplanen.

- Fase 2: vurdering af, i hvilket omfang handlingsplanen opfylder målsætningerne i narkotikastrategien.

- Fase 3: vurdering af virkningerne af de aktioner, der gennemføres i medfør af narkotikahandlingsplanen og -strategien, for narkotikaproblemet, navnlig for så vidt angår de seks hovedmål i narkotikastrategien.

*Med hensyn til første fase* vil det forhold, at alle involverede vedtager fælles evalueringsmetoder og opfølgningsskemaer, sætte Kommissionen i stand til at vurdere de fremskridt, der gøres i forbindelse med gennemførelsen af aktionerne i handlingsplanen. EONN er ved at udvikle fælles metodologiske redskaber til overvågning af narkotika-bekæmpelsesaktiviteterne. Det vil være meget nyttigt, hvis alle involverede aktører anvendte disse redskaber, når de evaluerer deres aktiviteter og færdiggør deres opfølgningsskemaer, fordi resultaterne fra de forskellige aktører i EU derved bliver sammenlignelige. Opfølgnings-skemaet skal ajourføres med jævne mellemrum og navnlig midtvejs gennem handlingsplanen og ved slutningen af den.

*Anden fase* vil kræve, at Kommissionen sammenligner resultaterne af gennemførelsen af aktionerne i handlingsplanen med målene i narkotikastrategien. Det bliver derved muligt at vurdere, i hvor stort omfang målene i narkotikastrategien er blevet opfyldt.

*I tredje fase* vil virkningerne af gennemførelsen af aktionerne for narkotikaproblemet blive vurderet, navnlig for så vidt angår hovedmålene i narkotikastrategien. For at kunne afgøre, hvorvidt disse mål er nået, har Kommissionen behov for oplysninger om efterspørgels- og udbudstendenser. Det er EONN og Europol, der skal tilvejebringe disse oplysninger.

De oplysninger, som EONN og dets partnere først og fremmest vil anvende i forbindelse med deres arbejde de næste tre år, navnlig med hensyn til de tre første mål, er sammenfattet i bilag 2. I overensstemmelse med punkt 2.2.2 i handlingsplanen har EONN og Europol sammen nedsat to arbejdsgrupper vedrørende kriterierne for evaluering af virkningerne, der på grundlag af medlemsstaternes ekspertise skal finde frem til de kriterier og metoder, der kan bidrage til gennemførelsen af den endelige evaluering af virkningerne og sikre sammenhængen mellem EONN's og Europols indsats for så vidt angår evaluering. Europol arbejder med statistik over narkotikarelateret kriminalitet. I sit arbejdsprogram for 2001-2003 fokuserede EONN på overvågningen af udviklingen i narkotikaproblemet ved hjælp af et sæt epidemiologiske indikatorer og relevante grundlæggende data. For at lette sammenligningerne på EU-plan har EONN allerede udarbejdet en række retningslinjer for anvendelsen i

medlemsstaterne af de fem epidemiologiske nøgleindikatorer[2], som dets bestyrelse vil vedtage i september 2001. Nøgleindikatorerne bør snarest muligt tages i anvendelse, hvilket vil kræve et stærkt engagement fra medlemsstaternes side.

Kommissionen vil forsøge at tage hensyn til alle parters synspunkter i denne fase, men vil selvfølgelig have det endelige ansvar for indholdet af evalueringen. Målsætningen er at forsøge at vurdere virkningen af gennemførelsen af narkotikastrategien og -handlingsplanen for narkotikaproblemet. På grundlag af denne vurdering vil Kommissionen overveje, hvorvidt den skal fremsætte forslag til eventuelle ændringer af den fremtidige narkotikapolitik.

*Desuden* ønsker Kommissionen at meddele sine partnere, at på grund af den nuværende mangel på pålidelige og sammenlignelige oplysninger om epidemiologiske og kriminelle aspekter af narkotikaproblemet har den til hensigt at begrænse midtvejsevalueringen (dvs. i 2002) til ovennævnte første fase. Europol og EONN skulle være i stand til at tilvejebringe oplysninger ved udgangen af det tidsrum, narkotikastrategien og -handlingsplanen dækker, således at alle tre faser vil være gennemført i 2004.

## 4. UDVIDELSEN

Kommissionen finder, at optrapningen af narkotikabekæmpelsen i ansøgerlandene skal prioriteres.

I henhold til førtiltrædelsespagten vedrørende organiseret kriminalitet, hvori betydningen af oplysning og operationelt samarbejde blev påpeget, forpligter EU og ansøgerlandene (de central- og østeuropæiske lande og Cypern - pagten forventes at blive udvidet til også at omfatte Malta og Tyrkiet) sig til hvert år med bistand fra Europol at fastlægge en fælles strategi med henblik på at indkredse de væsentligste trusler i forbindelse med organiseret kriminalitet, herunder narkotikarelateret kriminalitet.

Støtten til ansøgerlandene omfatter integrering af EF-retten, udvikling af handlingsplaner og deltagelse i EONN's aktiviteter. Der vil blive lagt særlig vægt på samarbejdet med Tyrkiet.

I EU's narkotikastrategi 2000-2004 lægges der vægt på bekæmpelse af narkotikamisbrug og -handel i ansøgerlandene. EU's to hovedmålsætninger er at sætte ansøgerlandene i stand til at gennemføre EF-retten på narkotikaområdet og få EU og ansøgerlandene til at indgå et tættere samarbejde på narkotikaområdet. Kommissionen er fuldt og helt enig heri.

EU's og ansøgerlandenes fælles narkotikahandlingsplan skal dække hele rækken af problemer i forbindelse med udbud og efterspørgsel og skal lette samarbejdet med hvert ansøgerland om overvågningen og evalueringen af narkotikabekæmpelsesprogrammerne. Kommissionen er helt enig i denne strategi.

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[2] Nøgleindikatorerne er som følger:
- omfanget af og mønstrene i narkotikamisbruget i befolkningen generelt
- narkotikamisbrugets udbredelse
- narkomaners efterspørgsel efter behandling
- antallet af narkotikarelaterede dødsfald og dødeligheden blandt narkomaner
- omfanget af narkotikarelaterede smitsomme sygdomme (hiv og hepatitis).

I marts 2001 vedtog Rådet en beslutning, der giver Kommissionen bemyndigelse til at forhandle om ansøgerlandenes deltagelse i EONN's Reitox-net. Kommissionen finder, at ansøgerlandenes deltagelse i EONN udgør et meget vigtigt skridt fremad i forbindelse med integreringen af EF-retten på narkotikaområdet; forhandlingerne om dette emne vil blive iværksat i midten af 2001.

Siden 1992 er der i alt blevet afsat 53 mio. EUR til Phare-programmet på narkotikaområdet. I slutningen af 1999 besluttede Europa-Kommissionen at integrere narkotikakontrollen i de nationale Phare-programmer. Inden for disse rammer besluttede Kommissionen at yde en særlig støtte på 1 mio. EUR til hvert ansøgerland med henblik på at udvikle et særligt organ for narkotikabekæmpelse. De væsentligste spørgsmål, der tages op i de nationale Phare-programmer på narkotikaområdet i 2000, er institutionaliseringen af de nationale narkotikainformationscentre med henblik på ansøgerlandenes fremtidige deltagelse i EONN's aktiviteter og styrkelsen af de nationale narkotikastrategier og den interministerielle koordinering. De fleste projekter gennemføres som tvillingeprojekter.

Der er blevet afsat et budget på 2 mio. EUR fra Phare-flerlandeprogrammet for bekæmpelse af narkotika i 1998 til et fælles projekt mellem EONN og de central- og østeuropæiske lande med henblik på at lade EONN bistå ansøgerlandene direkte i forbindelse med forberedelsen af deres deltagelse i EONN's opgaver.

Endvidere har Kommissionen besluttet at afsætte 10 mio. EUR til gennemførelsen af Phare-flerlandeprogrammet for bekæmpelse af narkotika i 2000, der sigter mod at styrke mulighederne for og øge effektiviteten af regionalt samarbejde mellem ansøgerlandene og EU-landene vedrørende begrænsning af udbuddet, navnlig med henblik på at bekæmpe syntetiske narkotika og hvidvaskning af penge samt styrke det retshåndhævende samarbejde. Kommissionen vil også se nærmere på finansieringen af samarbejdet om narkotika-bekæmpelse med de ansøgerlande, der er ikke er omfattet Phare-programmet (Malta, Cypern og Tyrkiet). Kommissionen har til hensigt at styrke navnlig samarbejdet med Tyrkiet og snart at indlede forhandlinger om en aftale mellem EU og Tyrkiet med henblik på at forhindre, at kemiske prækursorer anvendes til andre formål end de oprindeligt påtænkte.

For at undgå overlapninger og huller i bistanden på narkotikaområdet til ansøgerlandene foreslår Kommissionen at oprette en database over alle bistandsprojekter i ansøgerlandene, der finansieres af medlemsstaterne eller Kommissionen, på grundlag af de oplysninger, medlemsstaterne regelmæssigt fremlægger.

## 5. EKSTERNE FORANSTALTNINGER

Kommissionen finder, at internationalt samarbejde er et nøgleelement i forbindelse med narkotikabekæmpelse. Kommissionen vil på dette område lægge særlig vægt på de væsentligste handelsruter, ad hvilke EU forsynes med narkotika.

Kommissionen gennemfører på nuværende tidspunkt en række narkotikarelaterede projekter i 100 lande til en samlet værdi af 100 mio. EUR. Projekterne dækker en lang række aktiviteter, herunder forebyggelse, behandling, social og arbejdsmarkedsmæssig indslusning af narkomaner, epidemiologi, alternativ udvikling, kontrol med kemiske prækursorer, samarbejde mellem politi og toldmyndigheder, institutionel støtte til udviklingen af nationale politikker, hvidvaskning af penge og udformning af ny lovgivning.

Som anført i handlingsplanen vil Kommissionen koncentrere sin indsats om produktions- og transitlandene, navnlig de to hovedruter til EU, nemlig heroinruten fra Afghanistan til EU via Centralasien, Iran, Kaukasus, Tyrkiet, Østeuropa og Balkanlandene og kokainruten fra Latinamerika via Caribien. Som planlagt i reformen af den eksterne bistand vil bevillingen af ressourcer til narkotikarelaterede aktiviteter være omfattet af de flerårige programmer. I planlægningen vil der blive taget hensyn til behovet for en overordnet strategi for hver narkotikarute.

Ved at fokusere på de to vigtigste narkotikaruter på denne måde vil Kommissionen kunne anvende en sammenhængende strategi og koncentrere indsatsen om begrænsning af udbuddet via hovedruterne, ad hvilke mere end 80 % af forsyningerne af de ulovlige narkotika kommer ind i Europa.

I forbindelse med kokainruten har Kommissionen allerede iværksat en række vigtige programmer: 20 mio. EUR til Barbados-handlingsplanen og 60 mio. EUR til alternative udviklingsprojekter i Peru og Bolivia. Det forhold, at EU lægger vægt på alternativ udvikling, som omfatter en overordnet indsats for at gøre det lettere at sikre befolkningen et andet levebrød end narkotikaproduktion og -handel, gør, at EU's eksterne aktiviteter på narkotikaområdet adskiller sig fra andre partneres aktiviteter. Med hensyn til Colombia har Kommissionen til hensigt at blive en nøgleaktør i forbindelse med støtten til fredsprocessen og lovede 105 mio. EUR til det formål inden for rammerne af en samlet EU-bistandspakke. Ud af dette beløb vil 30 mio. EUR blive afsat til støtte til alternative udviklingsprogrammer. På regionalt plan støtter Kommissionen også adskillige initiativer til gavn for Andeslandene vedrørende hvidvaskning af penge, kontrol med prækursorer og harmonisering af lovgivningen. I de seneste år har ni latinamerikanske lande modtaget en støtte på ca. 2 mio. EUR fra Kommissionen til forebyggelsesprojekter. Det seneste fællesskabsinitiativ gik ud på at støtte den venezuelanske regering med at oprette et nationalt narkotikaovervågningscenter (2 mio. EUR). Herudover skal det påpeges, at Andeslandene og Centralamerika med henblik på at støtte deres indsats for at bekæmpe narkotikaproblemet får særbehandling inden for rammerne af den generelle toldpræferenceordning (GSP narkotika). Sammen med mestbegunstigelsesklausulen sikrer denne behandling op til 80 % af eksporten fra Andeslandene toldfri adgang til EU's marked. EU, USA og UNDCP arbejder tæt sammen om gennemførelsen af Barbados-handlingsplanen, hvori der tages fat på narkotikaproblemet i Caribien.

Der er allerede blevet iværksat en række aktioner vedrørende heroinruten i Centralasien og Kaukasus, Østeuropa og Tyrkiet for at nå frem til et "filtreringssystem" mellem Afghanistan og Vesteuropa. De vil blive videreudviklet gennem supplerende programmer vedrørende begrænsning af såvel udbuddet som efterspørgslen. Det forventes, at EU's narkotika-handlingsplan for Centralasien vil blive undertegnet i nær fremtid; den vil udgøre rammen for EU's narkotikarelaterede aktiviteter i dette område. EU er også opmærksom på Indiens problemer, fordi landet ligger så tæt på Afghanistan og Myanmar, de to største producenter af ulovlig heroin, og behovet for yderligere samarbejde. Endvidere drøftes narkotikaproblemet også inden for partnerskabet og samarbejdsdialogen med Rusland, Ukraine og Moldova, navnlig i forbindelse med udviklingen på det retlige og indre område. I de fælles strategier for Den Russiske Føderation og Ukraine samt EU's handlingsplan for en fælles indsats for Den Russiske Føderation om bekæmpelse af organiseret kriminalitet understreges bl.a. den fælles interesse i at fremme samarbejdet om bekæmpelse af narkotikahandel. På nuværende tidspunkt er EU's handlingsplan vedrørende retlige og indre anliggender for Ukraine ved at blive behandlet. Man har for nylig indkredset en række aktiviteter med henblik på at støtte Belarus', Moldovas og Ukraines indsats for at bekæmpe narkotikaproblemet, som er ved at skulle gennemføres. I Iran er der i partnerskab med UNDCP ved at blive tilrettelagt projekter

med henblik på at støtte Irans omfattende indsats for at bekæmpe narkotikamisbrug og -handel. Samarbejdet med Tyrkiet vil finde sted inden for rammerne af udvidelsen. På Balkan vil der ved gennemførelsen af Cards-programmet i forbindelse med retlige og indre anliggender blive taget fat på narkotikaproblemet, navnlig narkotikasmugling, som et prioriteret område; man vil for det første øge muligheden for overordnet at bekæmpe kriminalitet (det retlige, efterforskningsmæssige og retslige samarbejde samt lokalt samarbejde) og for det andet sikre specialiseret undervisning vedrørende narkotika, herunder støtte til et narkotikarelateret regionalt efterforskningsnet.

Med hensyn til Middelhavsområdet bør nævnes cannabisruten, som hovedsagelig forbinder Marokko, der er den største producent og eksportør af cannabis, med EU, hvor cannabis fortsat er det mest udbredte og mest almindeligt anvendte narkotikum.

For så vidt angår hvidvaskning af penge støtter Kommissionen sammen med USA og Det Forenede Kongerige inden for rammerne af Barbados-handlingsplanen et program til 8 mio. EUR i Caribien. Den har derudover for nylig iværksat et program for Sydvestasien. Endelig er man kommet langt med det forberedende arbejde i forbindelse med et nyt program for Ukraine, Rusland, Belarus, Moldova og Kazakhstan.

Den politiske dialog, som EU fører med mange regionale og subregionale grupper (herunder Latinamerika, Caribien, Middelhavslandene og forskellige asiatiske partnere) viser, at der i EU klart er vilje til at fremkomme med dets synspunkter for så vidt angår narkotika. Særlig vigtig i den forbindelse er den specialiserede dialog med Andeslandene og koordinerings- og samarbejdsmekanismen på narkotikaområdet mellem EU, Latinamerika og Caribien.

Kommissionen vil fortsat mobilisere EU's ekspertise til at styrke det europæiske islæt i EU's eksterne narkotikarelaterede indsats og støtte udviklingen af forbindelser mellem tredjelande og EU.

Kommissionen er en af de største bidragydere til UNDCP og vil fortsat samarbejde med alle relevante FN-afdelinger på narkotikaområdet samt med andre donorer. Syntetiske narkotika udgør et nyt område, hvorpå der er indledt samarbejde med USA.

Med hensyn til overvågning af narkotikamisbrug vil Kommissionen i særlig grad prioritere udviklingen af indikatorer og metoder, der kan anvendes i mindre udviklede lande.

Gennemførelsen af narkotikahandlingsplanen kan føre til en bedre koordinering af de eksterne narkotikarelaterede aktiviteter, som Kommissionen og medlemsstaterne iværksætter på grundlag af klart definerede og aftalte målsætninger og med en klar fordeling af ansvaret mellem alle aktører.

## 6. STYRKELSE AF KOORDINERINGEN

En væsentlig forudsætning for narkotikabekæmpelse, der er et kompliceret og sammensat problem, er en god koordinering mellem EU-institutionerne og alle involverede aktører. Koordinering har været et meget væsentligt spørgsmål for EU siden vedtagelsen af EU's anden narkotikahandlingsplan i 1995.

I punkt 1.1.7 i den seneste handlingsplan anmodes Kommissionen med bistand fra EONN om at rapportere om de nuværende koordineringsordninger og eventuelle forbedringer heraf. I marts 2001 fremlagde EONN sit bidrag til rapporten om koordineringsordningerne i medlemsstaterne for Kommissionen. Kommissionen har til hensigt på grundlag af EONN's arbejde at fremlægge sin rapport i nær fremtid.

Kommissionen råder i forbindelse med finansieringen af narkotikarelaterede aktiviteter ikke over en centraliseret budgetpost, men kan trække på en lang række forskellige budgetposter. Handlingsplanen i sig selv giver ikke nye finansielle forpligtelser. Bilag 3 indeholder en oversigt over budgetposter og de til rådighed stående beløb i november 2000. Kommissionen har til hensigt at ajourføre disse oplysninger hvert år. I punkt 1.4.1. i handlingsplanen opfordres Rådet og Kommissionen til på grundlag af den nuværende indsats i forbindelse med EONN og Pompidou-gruppen at se nærmere på en strategi, der går ud på at etablere en liste over det offentliges samlede udgifter på narkotikaområdet. Når EONN og Pompidou-gruppen fremsætter deres henstillinger til, hvorledes udgifterne kan klassificeres, vil Kommissionen forsøge at tilpasse sine budgetmæssige oplysninger således, at henstillingerne afspejles heri. Kommissionen vil opfordre medlemsstaterne til at se nærmere på dette emne og udveksle alle de oplysninger, de kan, snarest muligt og i hvert tilfælde i tide til midtvejsevalueringen.

Kommissionen vil bidrage til de årlige drøftelser af alle de projekter vedrørende narkotikabekæmpelse, som EU støtter, og fortsat tilvejebringe hensigtsmæssige oplysninger om EU's samarbejdsprojekter på narkotikaområdet med tredjelande og ansøgerlandene.

Der er imidlertid behov for en øget koordinering af den eksterne indsats mellem medlemsstaterne og Kommissionen. Der bør lægges særlig vægt på koordineringen af EU's indsats vedrørende de to væsentligste narkotikaruter, som forsyner EU og ansøgerlandene med narkotika. Der bør endvidere sikres en øget koordinering af samarbejdet med multilaterale eller internationale organisationer.

Selv om Kommissionen og medlemsstaterne skal informere hinanden om alle projekter i tredjelande, er der ikke afstukket retningslinjer herfor. Som følge heraf fungerer udvekslingen af oplysninger ikke rigtig. Kommissionen vil fremsætte forslag herom i Rådets horisontale narkotikagruppe med henblik på at enes om de praktiske retningslinjer.

## 7. KONKLUSION

Kommissionen:

- opfordrer alle andre aktører i EU's narkotikastrategi og narkotikahandlingsplan for 2000-2004, navnlig medlemsstaterne, til at udarbejde og regelmæssigt ajourføre opfølgningsskemaer som det, Kommissionen, EONN og Europol har udarbejdet

- anmoder Europa-Parlamentet og Rådet om at stadfæste princippet om ét enkelt opfølgningsskema, der dækker alle de aktiviteter, der er omhandlet i handlingsplanen

- opfordrer Europa-Parlamentet og Rådet til at overveje den metode, Kommissionen har til hensigt at anvende til gennemførelsen af evalueringerne af narkotikastrategien og -handlingsplanen og fremkomme med bemærkninger hertil

- anmoder de øvrige involverede aktører, navnlig medlemsstaterne, om at tilvejebringe så fuldstændige og præcise oplysninger som muligt om deres gennemførelse af narkotikastrategien og -handlingsplanen, navnlig midtvejs gennem og ved slutningen af dem, således at Kommissionen kan foretage en tilbundsgående evaluering heraf

- henstiller, at medlemsstaterne anvender de overvågnings- og evalueringskriterier og -metoder, som EONN og dets nationale partnere har udarbejdet, når de evaluerer alle deres aktiviteter for derved at sikre, at resultaterne er sammenlignelige

- opfordrer Europa-Parlamentet og Rådet til at bemærke sig og støtte dens strategi på narkotikaområdet og for så vidt angår udvidelsen af EU

- anmoder medlemsstaterne om at tilvejebringe oplysninger om alle deres bistandsprojekter i ansøgerlandene, således at Kommissionen råder over en præcis og ajourført matrice

- foreslår, at Europa-Parlamentet og Rådet noterer sig de nuværende koordinerings-ordninger på EU-plan, og at alle EU-institutioner træffer hensigtsmæssige foranstaltninger til at øge den nuværende interinstitutionelle koordinering.

## ANNEX 1

## IMPLEMENTATION OF THE EU ACTION PLAN ON DRUGS (2000-2004):

## FOLLOW-UP TABLE FOR THE COMMISSION, THE EMCDDA AND EUROPOL

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| **1. Co-ordination**<br>**1.1 To ensure that the issue of drugs is kept as a major priority for EU internal and external action (Strategy aim 1)** | | | |
| 1.1.1 The European Union institutions to ensure good inter-institutional co-ordination and, in particular, each in-coming Presidency of the Council to forward its work programme in the field of drugs to the Parliament, Economic and Social Committee and Committee of Regions. | Commission services intend to implement the framework agreement signed in July 2000 by the European Parliament and Commission. Active participation of the Commission services to the relevant working group of the Council. Europol and the EMCDDA co-operate on a regular basis. | Continuous process | The Commission should play an active role in ensuring such an inter-institutional coordination.<br>Europol and the EMCDDA co-operate on a regular basis:<br>- Through annual co-ordination meetings at directorate level;<br>- In the framework of the Joint Action on new synthetic drugs;<br>- Through the exchange of information relating to the production of synthetic drugs in general;<br>- By making use, on a reciprocal basis, of relevant information that is available in either organisation, to be included in bulletins, situations reports etc.<br>- In developing a harmonised database on drug seizures in the Member States.<br>Discussions are underway to conclude a Co-operation Agreement between Europol and the EMCDDA.<br>Where appropriate, Europol and OLAF co-operate, for instance:<br>- In developing a European Union Training Course for trainers on the combating of illicit synthetic drug laboratories.<br>- In the framework of the global (UNINCB) monitoring initiative on Acetic Anhydride.<br>Europol contributes to the PHARE programme: |
| 1.1.2 When appropriate, and anyhow in 2002 (mid-term review) and 2004 (final evaluation) the Presidency of the Council to consider the possibility of organising a high level meeting of those involved in implementation of present plan. | | 2002 and 2004 | The Commission should appoint a representative for this high level meeting. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 1.1.3 The Presidency of the Council to provide regular opportunities in principle twice a year for national drugs co-ordinators or those responsible for the co-ordination of drugs policies to meet in the framework of the Horizontal Working Party on Drugs to exchange information on national developments and to review opportunities for increased co-operation. | First meeting held in Paris, November 2000.<br><br>The Swedish Presidency organised the second meeting in March 2001. | Twice a year | The Commission and the EMCDDA participated in these two meetings. Europol was present at the meeting in Paris. |
| 1.1.6 The Council and the Commission to integrate the issue of drugs in the broader objectives of EU external relations, including development co-operation making full use of the CFSP instruments as well as trade policy instruments and technical and financial assistance. | (Ongoing discussion between relevant Cabinets and services.) | Continuous process | The global and balanced approach to drugs should be taken into account, where possible, in all external activities. |
| 1.1.7 The Commission with the assistance of the EMCDDA to organise a study to be completed by March 2001 to test whether the co-ordination arrangements that are in place could be improved and if so in what way. | A draft contribution from the EMCDDA was presented at the meeting of the Drugs coordinators in March 2001. | March 2001 | The Commission and the EMCDDA will present the final result of their study for the end of the year. |
| **1.2 To continue the EU global, multidisciplinary, integrated and balanced strategy, in which supply and demand reduction are seen as mutually reinforcing elements, as underlined by the United Nations General Assembly Special Session on Drugs (UNGASS) (Strategy aim 3).** | | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 1.2.3 The Council to ensure that full use is made of the EU agencies, particularly Europol and the European Monitoring Centre of Drugs and Drug Addiction, in their respective fields of competence. | Several Council Decisions have been adopted, or are in the process of being developed, to initiate or strengthen the role of Europol, e.g.<br><br>- The extension of the Europol mandate;<br><br>- Joint investigative teams;<br><br>- Co-operation with Eurojust and the European Police Chiefs Task Force;<br><br>- Combating drug-related crime committed via the Internet and other forms of modern technology;<br><br>- The profiling of synthetic drugs.<br><br>EMCDDA, in cooperation with the Commission, EUROPOL and EMEA, implements the Decisions of the Council in the framework of the Joint action on new synthetic drugs (art. 3 and 4) | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 1.2.4 The Commission, the Council and the Member States to ensure that the balanced and multidisciplinary approach is taken into account and implemented in their drugs programmes and policies. | | Continuous process | To be monitored through the Interservice Drugs Group. |
| **1.3 To encourage multi-agency co-operation and the involvement of civil society (Strategy aim 6)** | | | |
| 1.3.2 All Member States and the Commission to establish a strategy for the co-operation with civil society and community and voluntary groups from areas most affected by the problem of drug abuse. | | Continuous process. | A very comprehensive and complex task. Involves all kinds of services. Both demand reduction and supply reduction approaches. To be elaborated. |
| **1.4 To provide appropriate resources for drugs related actions (Strategy aim 11) and social consequences of drug abuse.** | | | |
| 1.4.1 The Council and the Commission to study, in the light of current efforts in this field of the EMCDDA and Pompidou group, an approach to establish a list of all public expenditure on drugs. | In November 2000 the Commission put forward an overview of all the drug-related budget lines at the Horizontal Drugs Group of the Council. | This process will be useful for the mid-term and final evaluation of the EU Action Plan. | It would be useful to have regular follow up from the EMCDDA and Pompidou Group on the drug expenditure of Member States. Information on public expenditure on drugs in Member States shall be collected regularly in a comparable format prepared by the EMCDDA. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 1.4.2 Member States and the Commission to encourage the provision of appropriate funding for proactive measures, including the prevention of drug use, the prevention of drug related crime, and the reduction of the negative health and social consequences of drugs. | Council and Parliament approved the extension of the Drug Prevention programme(2001-2002) in January 2001. The Commission put forward a proposal for the creation of a new program on crime prevention (Hippokrates). Two Eurobarometers on Urban Safety linked in particular to drugs dependence were carried out by the Commission in 1996 and in 2000. The results of the 2000 Eurobarometer have been made available in March 2001. | Continuous process | This is a major concern also of the European Parliament and the Council. |
| **2. Information and evaluation**<br><br>**2.1 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 (Strategy aim 8)** | EMCDDA 2001 annual report is being finalised;<br><br>EMCDDA 2001-2003 work programme adopted;<br><br>EMCDDA guidelines for data collection in Member States have been provided to REITOX Focal Points | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 2.1.1. The Member States according to technical tools and guidelines provided by EMCDDA to give reliable information on the five key epidemiological indicators in a comparable form drawn up by the EMCDDA and adopted by the Council:<br><br>1. extent and pattern of drug use in the general population<br><br>2. prevalence of problem drug use<br><br>3. demand for treatment by drug users<br><br>4. drug-related deaths and mortality of drug users<br><br>5. drug-related infectious diseases (HIV, hepatitis) | EMCDDA guidelines finalised and transmitted to the members of its Management Board in Member States.<br><br>Formal adoption of the guidelines by EMCDDA Management Board by September 2001.<br><br>Questionnaire from the President of Management Board to Member States on national situations regarding support for implementing the 5 key indicators | | The Commission is considering the best way to support the implementation of the five key indicators. |
| 2.1.3. The EMCDDA to develop indicators on drugs related crime, the availability of illicit drugs (including at street level) and drug related social exclusion. | Conceptualisation and definition process launched under EMCDDA 2001 Work Programme | | |
| 2.1.4. The Member States and the EMCDDA, within existing financial limits, to ensure that the National Focal Points have the necessary political and financial support to implement the five harmonised key indicators. | Annual financial contribution from EMCDDA to REITOX Focal Points;<br><br>External evaluation of REITOX to be achieved (2001). | | |
| 2.1.6 The Commission, in co-operation with the Monitoring Centre, to launch a Eurobarometre study on attitudes of the public, especially youth, to drugs throughout the EU every two years. | A meeting on this issue will be organised by the first semester 2001 between the concerned services and EMCDDA. | End of 2002 and 2004 | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 2.1.7 The Commission to promote the establishment of a European system to assess and to encourage Member States to develop a network of national expert centres in the field of toxicological analysis as well as clinical database and experimental, clinical or epidemiological studies. | Continuous promotion of European networks through relevant Community programmes, in particular the drug prevention programme and Research and Development Framework Programme | End 2004 | Such a system will need a regular follow up and this implies the necessity of adequate human and financial resources. |
| 2.1.8 Europol and the EMCDDA to develop a standardised database on drug seizures, to be introduced in all Member States and based upon harmonised criteria and indicators. | In co-operation with experts of volunteering Member States and the EMCDDA, the parameters of a harmonised database system on drug seizure statistics have been developed and agreed upon. An inventory takes place with a view to identifying the appropriate system for handling data in accordance with the agreed parameters. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| **2.2 To ensure that actions against drugs are evaluated (strategy aim 2).** | | | |
| 2.2.1 The Commission to organise appropriate evaluations at mid-term and completion of the Drugs Strategy (2000-2004) on the basis of the present Action Plan, and to present the reports to the Council and the Parliament. | The Commission, EMCDDA and Europol as well as Member States should carry out their own evaluations, on the basis of a list of criteria prepared by the Commission with the help of EMCDDA and approved by the Council. The Commission to draft a global evaluation at mid term and completion of the Action Plan. | End 2002 and 2004 | This is a major concern also of the European Parliament and the Council. |
| 2.2.2 Work should be taken forward by EMCDDA/Europol drawing on expertise from Member States to underpin the EU drugs strategy with measurable targets so that assessments can be made of progress in achieving objectives. This work could be completed, if possible by the end of 2000. | EMCDDA produced a preliminary set of bench marks applicable on the basis of its data analysis process.<br><br>Preliminary contacts have been made with Europol and selection of Member States (REITOX Focal Points and Europol National Units) with a view to draw a complete list of potential bench marks covering the EU Action Plan. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 2.2.3 The Council, on the basis of the work done by the Horizontal Working Party on Drugs to identify best practices of the Member States and the **Commission** in the field of drugs in co-operation notably with the Drug Trafficking group, the Multidisciplinary group on organised crime and the Health group. | A peer evaluation on drugs trafficking will be completed by the end 2001.<br><br>A final evaluation of the Drug Prevention Programme is expected to be completed in 2003 | End 2003 | The Commission to be assisted by the EMCDDA in identifying best practices in the field of demand reduction (EDDRA database) |
| 2.2.5 The Commission to organise an appropriate assessment of :<br><br>- the effectiveness of the Joint Action on synthetic drugs of June 1997 taking into account the evaluation by the EMCDDA of the early warning system.<br><br>- community legislation and its implementation in the field of control of the trade in chemical precursors. | The Commission will launch in the first semester of 2001 with the help of EMCDDA and Europol a global assessment of the effectiveness of the Joint Action on synthetic drugs. | End 2001 | |
| 2.2.6 Member States and Europol, assisted by scientists, to assess the effectiveness of preventing and combating organised drug-related crime and to develop crime and policy indicators. | Europol and the Commision have carried out a study on the prevention of organised crime, including organised drug-related crime. The study contains proposals for a strategy on preventive measures against organised crime. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 2.2.7 Member States and Europol, assisted by scientists, to draft an annual assessment on the role of organised crime groups involved in drug trafficking. | Europol produces the annual 'Situation Report on Organised Crime in the European Union'. This report is based on contributions by the Member States, also taking into account reports received from countries outside the European Union. One aspect of the report covers the activities of organised crime groups involved in drug trafficking. A Contact and Support Network of Member States' representatives, some of whom have a scientific background, assists in the drafting of the report. | | |
| **3. Reduction of Demand, Prevention of Drug use and of Drug Related Crime**<br><br>**3.1 To give greater priority to drug prevention and demand reduction, particularly new recruitment to drug use, as well as the reduction of the adverse consequences of drug use (Strategy aim 4)** | | | |
| 3.1.1 to reduce significantly over five years the prevalence of drug use, as well as new recruitment to it, particularly among young people under 18 years of age (Strategy target 1) | | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 3.1.1.1 Member States and the Commission to develop comprehensive prevention programmes for both licit and illicit drugs and also covering poly-drug use. | The Drug Prevention Programme (2001-2002) has been extended until the adoption of the new Public Health Programme | Continuous process | The Commission will support comprehensive programmes and disseminate the best practices and results with the support of the EMCDDA (EDDRA Database). |
| 3.1.1.2 The Commission to ensure that full use is made of the existing Community programmes to counter social exclusion and urban delinquency, and foster social reintegration. | | Continuous process | The European Social Fund and the URBAN programme are used for these purposes. |
| 3.1.1.4 Member States and the Commission further to develop innovative approaches to the prevention of the abuse of synthetic drugs, taking into account the specificities of synthetic drug users. | Included among the activities undertaken in the Drug Prevention Programme | Continuous process | Selection of projects of innovative character in this area |
| 3.1.2 to reduce substantially over five years the incidence of drug-related health damage (HIV, hepatitis, TBC, etc.) and the number of drug-related deaths (Strategy target 2) | | | |
| 3.1.2.2 Member States and the Commission to plan and implement innovative awareness raising campaigns on the dangers related to drug use and programmes on the reduction of risks and adverse consequences related to drug use. These campaigns must be well targeted and implemented in co-operation with the target groups. | Among the actions in the framework of the Drug Prevention Programme. | End 2002 | Internet could also be used for such campaigns. |
| 3.1.2.3 Member States and the Commission to make use of new means of communication (eg the internet) to provide objective, reliable and accessible information on drugs and the dangers associated with them. | Among the activities in the framework of the Drug Prevention Programme | Continuous process | |
| 3.1.2.5 The Commission and Member States to undertake research into the effects of driving under the influence of illicit drugs and pharmaceuticals. | | Continuous process | The Commission should continue to study this issue and if appropriate to bring forward proposals. The recommendations of the Working Party on 'Alcohol, Drugs, Medicine and Driving' should be taken into account. It is proposed to include this issue in the Research and Development Framework Programme for 2002-2006. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 3.1.3 to increase substantially the number of successfully treated addicts (Strategy target 3) | | | |
| **3.2. To make full use of the new possibilities offered by the Treaty, particularly the articles on health protection and research (Strategy aim 7)** | | | |
| 3.2.1 The Commission to ensure that drug prevention is identified as a key component of the future public health programme. | The Commission adopted on 16th May 2000 a proposal on the future public health programme. This proposal is currently under discussion in the Council and the EP. | 2002 | |
| 3.2.2 Member States and the Commission to provide adequate resources for research into the biomedical and social causes of addiction, the prevention and origins of addiction, and behavioural patterns of drug consumption. The Commission to support the inclusion of this area of research as a priority in the Community Programme for Research and Development. | Three projects were funded under the current Research and Development Programme. The second round of application is now under evaluation. | Continuous process | |
| 3.2.3. The Commission and Member States to identify new areas, such as the spread of best practice, training and networking, where action at the European level could help reduce drug related harm. | | Continuous process | To be elaborated on the basis of existing Community programmes on training and drug prevention and on contribution from the EMCDDA |
| **3.3 To adopt a comprehensive approach** | | | |
| 3.3.1 The Commission and the Member States to develop and implement preventive actions and strategies for all age groups, particularly children and young people. | The Drug Prevention Programme aims at all age groups, in particular young people. | Continuous process | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 3.3.2 The Commission and Member States within their respective competences to address in this connection and when appropriate, risk behaviour and addiction in general, including aspects of alcohol, medicine, substances used for doping in sport, and tobacco use. | Recommendation on prevention and reduction of drug related risks is under preparation. Parliament and Council have agreed on a Joint Text for tobacco directive. | 2002/2003 | |
| **3.4 To prevent crime linked to drugs, notably juvenile and urban delinquency** | | | |
| 3.4.1 to reduce substantially over five years the number of drug related crimes (Strategy target 5) | | | |
| 3.4.1.1 The Commission and Member States to set up programmes to promote best practice in the prevention of criminal activities linked among other issues to drugs, juvenile and urban delinquency. | The Commission put forward a proposal for the creation of a new program on crime prevention (Hippokrates) on 29.11.2000. Currently under discussion in the Council and the EP, a French-Swedish initiative to create a Crime Prevention Network, whose priorities are urban, juvenile and drug-related crime. | Continuous process | This is also one of the priority of the Tampere European Council (Conclusion 42). |
| 3.4.1.2 The Council and the Commission to develop a common comparable definition of the term drug related crimes on the basis of work by Europol and EMCDDA in order to enable a serious comparison of the number of drug related crimes. | Contribution of EMCDDA foreseen in the framework of its 2001 working programme. | 2002 | Crime and policy indicators should be defined in order to assess progress in the prevention and control of crime. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 3.4.4 The Commission and Member States to consider the results of a study by the EMCDDA into the law and practice in the EU Member States on the handling of drug addicts in the justice system, including issues such as identification of drug addicts following arrest, alternatives to prison, and treatment facilities within the penal system. On this basis, the Commission and Member States to consider how to share best practice in the area of handling of drug addicts in the justice system. | The EMCDDA has finalised the study in March 2001. | End of 2001 | The Commission to consider follow-up to the EMCDDA study. |
| **3.5 Training and Interchange of experience in the prevention of drug use** | | | |
| 3.5.2 Member States and the Commission to develop and implement a network of trainers and professionals in the health and social sector who work with drug users. | Several European networks of professionals are established in Europe, co-financed by the Drug Prevention Programme. | Continuous process | The Leonardo da Vinci Programme could be used for this purpose on the basis of projects presented by Member States.<br><br>To further encourage a closer co-operation between the networks set up in this field . |
| 3.5.3 Member States to promote the exchange of best practice in the area of prevention and to ensure that all successful programmes are brought to the attention of other Member States and the Commission. | | Continuous process | EDDRA Database |
| **4. Supply Reduction**<br><br>**4.1 To reinforce the fight against organised crime, illicit drug trafficking and related organised crime as well as other drug-related crime, and to step up police, customs and judicial co-operation between Member States (Strategy aim 5)** | | | |
| 4.1.1 To reduce substantially over five years the availability of illicit drugs (Strategy target 4) | | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 4.1.1.2 The Council and the Commission, with the assistance of Europol, to prepare EU guidelines for combating illicit drugs activities via new technologies and in particular the internet. | The Commission put forward a Communication on Cybercrime. The Council Working Party on Drug Trafficking has developed proposals to enhance actions against drug-related offences through the use of Information and Communication Technology, including the Internet. The Council has been invited to adopt the proposals, which give a co-ordinating role to Europol. | 2002 | |
| 4.1.1.3 Member States, with the assistance of Europol, taking into account the existing EU systems for exchange of information, to work together in the relevant Council bodies, to reinforce their efforts against maritime drug trafficking, including the provision of training on the identification and surveillance of suspicious vessels and establishing procedures for boarding and searching vessels where appropriate. Member States should recognise the importance of implementing the principles laid down in Article 17 of the UN Convention against Illicit Traffic in Narcotic Drugs and Psychotropic substances. | In June 2000, the Portuguese authorities organised a conference on maritime trafficking, which resulted in several recommendations. An action plan for their implementation should be drafted, with emphasis on operational activities. | Continuous process | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 4.1.1.4 Member States, with the assistance of Europol, to further consider the possibilities of combining forensic and law enforcement information, with a view to identifying the production and trafficking of synthetic drugs, the composition of such drugs, and those involved in their production and trafficking. To that extent, Member States' forensic laboratories should exchange information on the analysis of samples taken from synthetic drugs seizures. If appropriate the results should be made available to relevant health authorities in the Member States. | Based on a Swedish proposal, the Council and the Parliament are considering a Council Decision establishing a system for the special forensic profiling analysis of synthetic drugs. The outcome should result in an EU-wide co-ordination by Europol of law enforcement and forensic information. | 2001 | A second Swedish proposal is currently under discussion at Parliament and Council level concerning the transmission of samples of illegal narcotic substances. |
| 4.1.1.5 The Commission to support, as appropriate, efforts by Member States to improve police, customs and judicial co-operation, notably through exchange and training programmes, taking advantage of the experience and results of the existing third pillar programmes. | A proposal for the extension until 2002 of the existing programmes has been put forward by the Commission. A discussion on the Third Pillar Programmes from 2002 onwards is taking place. | End 2002 | The creation of the European Judicial Network creates a new framework for action. The possibility to link it to Europol should be further analysed. |
| 4.1.1.6 Member States and Europol to implement the project-based EU law enforcement strategy against transnational organised crime to combat drug trafficking. | The strategy is being implemented by Europol and the Member States in the framework of Analysis Work Files as provided for by the Europol Convention. Further implementation may take place in other forms of international law enforcement and judicial co-operation, e.g. joint investigative teams. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 4.1.2.To reduce substantially over five years money-laundering and illicit trafficking of precursors (Strategy target 6) | | | |
| 4.1.2.1 The Commission to report regularly to the Council on the control of money laundering in the EU, actions undertaken in the previous year, and proposed action in the year to come. | The Commission proposed on 14.07.1999 an extension and update of the '91 Directive.<br><br>The mandate of Europol has been recently extended to money laundering. | Continuous process | Money laundering is also one of the priorities set up by the Tampere European Council (Conclusions 51-58). |
| 4.1.2.4 The Commission to report regularly to the Council on the control of the diversion of illicit chemical precursors, actions undertaken in the previous year, and proposed action in the year to come. | | Continuous process | Commission should study the possibility to enhance the cooperation with industry and the conclusion of precursor control agreement with more risk countries. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 4.1.2.5 The Commission to establish, in co-operation with the Member States, a procedure for the voluntary monitoring of the non-scheduled chemical precursors of synthetic drugs in co-operation with the chemical industry. | The Commission has put forward: 1. A proposal for the modification of the Council Regulation (EEC) No 3677/90 of 13 December 1990 laying down measures to be taken to discourage the diversion of certain substances to the illicit manufacture of narcotic drugs and psychotropic substances.<br><br>2. A new draft of the proposal for the modification of the Council 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 | By the end of 2001 the proposals for the modification of the Regulation and the Directive should be approved by the Parliament and the Council. | Guidelines have been produced to assist chemical industry. These have been disseminated to Member States and will sent out to the chemical industry shortly. They have also been made available to the candidate countries through the Phare Program. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 4.1.2.6 Member States, with the assistance of the Commission and Europol where appropriate, to provide training for customs and police in combating the diversion of chemical precursors. | Europol, in co-operation with Member States' experts and the Commission, has developed and organised a European Union Training Course for trainers on the combating of illicit synthetic drug laboratories. As a result, trained trainers organised courses in two Member States, (with the assistance of Europol) for police, customs officers, forensic experts and members of the fire brigade. | Continuous process | |
| **4.2 To make full use of the new possibilities offered by the Treaty of Amsterdam, particularly the articles on drug control, police co-operation and judicial co-operation as well as the common minimum standards in legislation (Strategy aim 7)** | | | |
| 4.2.2 Member States, with the assistance of Europol where appropriate, to reinforce their co-operation against drug trafficking and in particular to establish, within the appropriate legal framework, joint teams when dealing with drug trafficking between Member States. | The Council has adopted two Recommendations to the Member States in respect of:<br><br>- requests made by Europol to initiate criminal investigations in specific cases;<br><br>- Europol's assistance to joint investigative teams set up by the Member States. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
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| 4.2.4 The Commission, having consulted the EMCDDA and taken account of existing, relevant sources of information, to launch a study into the definitions, penalties and practical implementation of laws by the courts and law enforcement agencies for drug trafficking within the Member States. On the basis of that study, the Commission to propose measures establishing minimum rules relating to the constituent elements and penalties for illicit drug trafficking in accordance with the relevant provisions of the TEU. The study should be completed by the end of 2000 and proposals should be brought forward by 31 March 2001. | The study was completed in March 2001. The Commission will put forward a proposal by April/May 2001. | 1st semester of 2001. | This is also one of the Tampere Conclusions (n° 48) |
| 4.2.5 Member States and Europol to promote new investigation techniques and research and documentation of drug-related crime. | Europol has created and maintains a Centres of Excellence Directory, which contains information on expertise and best practises. The system contains sources of information relating to new investigative techniques. In addition, the Europol Drugs Group collects and stores documentation on drug-related crime. Relevant information is being disseminated through regular Drug Intelligence Bulletins. | | |
| **5. International**<br><br>**5.1 To progressively integrate the candidate countries and to intensify international co-operation with other countries and international organisations (Strategy aim 9)** | | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 5.1.1 The Commission and the Council to ensure that the candidate countries adopt the Community acquis and best practice in the field of drugs, and that their implementation is satisfactory. The Member States and the Commission to draw up an action plan on drugs with the candidate countries which set out the ground they need to cover to meet the acquis as soon as possible. | | 2001 | The Commission proposes to discuss the idea of an Action Plan on drugs for Candidate Countries with the Member States during the Swedish Presidency. |
| 5.1.2 The Commission to negotiate with the candidate countries to allow them to participate in the work of the European Monitoring Centre for Drugs and Drug Addiction. The Commission to propose to the Council a draft mandate for these negotiations as soon as possible. | The Council adopted the negotiating mandate in March 2001. | 1st semester 2001 | Negotiations should start as soon as possible. |
| 5.1.3 The Commission and the Member States to continue to support, with technical assistance and finance where necessary, the candidate countries in their to counter drug abuse and drug trafficking. Particular attention should be given, including under PHARE, towards the development of national strategies, national drugs units, focal points for the EMCDDA and effective controls on drugs entering the EU and candidate countries. For countries not covered by PHARE, assistance mechanisms should include provision for counter-drugs work. The Commission should seek out, within existing ceilings, new sources of funding for co-operation with Turkey and include co-operation on drugs issues in the forthcoming drafting of the Accession Partnership. Consideration should also be given to targeted drugs twinning, and making available specialist pre-accession drugs advisers. | In total 20M€ has been made available for drug control activities within the Phare Program for 2000.<br><br>Financed from the Phare Multi-beneficiary Drugs Programme 1998 a 2 M€ have also been allocated to a joint EMCDDA-Phare project. | Continuous process | The commitment of the Phare Program should be maintained.<br><br>Phare Regional Drugs Programme 2000 of 10M€ has been adopted by the Phare Management Committee in October 2000.<br><br>Attention will be paid to synthetic drugs, money laundering, and diversion of precursors.<br><br>Resources for the non-Phare candidate countries will be made available.<br><br>Activities to be closely coordinated with those under point 5.2.1. |
| 5.1.4 The Council to have an annual debate on all EU assistance projects in the candidate countries in the field of drugs. | | Annual debate | Commission should be able to provide global information. Commission will organise a Conference focusing on drugs issue with the candidate countries in April 2001. |
| 5.1.5 The Commission and Member States to implement the Pre-accession pact on organised crime and extend it to all applicant countries. | Ongoing discussion within the Pre-accession Pact Expert Group. | | |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| **5.2 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 the UNGASS in June 1998 (Strategy aim 10)** | | | |
| 5.2.1 The Commission and the Council to give priority in the international efforts to counter the drug problem to the candidate countries and those regions of the world that either produce drugs or through which drugs transit on their way to the EU. | Actions already undertaken on the heroin route in Central Asia, Caucasus, Iran, Balkans, and are under preparation for Belarus, Moldova, Russia and Ukraine. Important action undertaken in the Caribbean to counter cocaine trafficking | Continuous process | Commission to develop an overall strategy covering the two main trafficking routes fuelling EU (heroin route from Afghanistan to Europe via Central Asia, Iran, Caucasus, Turkey, Balkans; cocaine route from Latin America via the Caribbean).<br><br>Activities to be closely co-ordinated with above point 5.1.3. |
| 5.2.2 Member States and the Commission to co-ordinate their projects in third countries and regions to enable joint assessment and implementation of their action. | Coordination is ongoing for some actions in the Caribbean | Continuous process | The Commission and Member States to consider extension of certain aspects of this co-ordination model to cover the trafficking routes. |
| 5.2.3 Member States and the Commission to strengthen co-operation with multilateral and international organisations, where this would increase the effectiveness of their actions. | Member States and the Commission are considering how best to co-operate with these organisations | Continuous process | Effectiveness of EU co-operation with multilateral and international organisations to be increased by better co-ordination and earlier involvement in programme and projects design. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 5.2.4 The Commission and the Member States to continue to make available adequate resources for the implementation of programmes and projects for supply reduction (for example combating drug trafficking and supporting alternative development) and demand reduction. Member States and the Commission to report annually to the Council (Horizontal Working Party on Drugs) on all assistance projects undertaken in third countries in the field of drugs, and for a matrix to be kept up to date. The Commission and the Member States to inform each other of all assistance projects for third countries in the field of drugs, whenever possible and necessary already in the preparatory process. | | Continuous process | Resources: Drugs to be incorporated in the multi-annual programming, inter-regional characteristic of the trafficking routes will be taken into account.<br><br>Mutual information: The Commission and the Member States should consider how best to collect information on planned and ongoing projects and present EU action in an operational, synthetic and analytic form so as to provide an overall vision of EU international action against drugs. |
| 5.2.6 The Member States and the Commission to draw up action plan on drugs co-operation with North Africa, and to implement fully the action plans on Latin America and the Caribbean and Central Asia. | Implementation of the Caribbean part of the LAC action plan well advanced.<br><br>EU Central Asia Action Plan should be formally adopted by the countries of the region under the Swedish Presidency. Commission has appointed an EU Drugs-Coordinator for the region.<br><br>Activities are starting in Iran. Support to ECO co-ordination is strengthening. | | Central Asia Action Plan should be extended to cover neighbouring regions.<br><br>Co-ordination of the actions implemented in the framework of the regional action plans should be strengthened (see 5.2.2). |
| 5.2.7 The Commission and Member States to help non-EU countries and regions to develop their anti-money laundering systems. | Ongoing activities in the Caribbean and ASEAN countries, and under preparation for Russia, Ukraine and Moldova. Activities are under preparation for Belarus and Kazakhstan | Continuous process | Countries should be assisted in developing their anti-money-laundering activities through budget lines EDF, North-South cooperation in the fight against drugs and TACIS. |

| Action as agreed in the EU Action Plan | State of play | Timeframe/ Priority | Comments |
|---|---|---|---|
| 5.2.8 Member States and the Commission to support the development of a common international set of indicators in the field of demand reduction, and to promote a common standard for national reporting to international organisations. | EMCDDA and UNDCP reached an agreement on the indicators to be used in third countries. | Continuous process | Commission to develop methodologies adapted to less advanced countries through the pilot project in Venezuela |
| 5.2.9 The Commission and the Member States to integrate drugs as a cross-sectional issue into their supranational co-operation schemes (particularly with the developing countries). | | Continuous process | Drugs to be incorporated in the multi-annual programming process and inter-regional coordination to be ensure. |
| 5.2.10 The EU will continue its support for national efforts to eliminate illicit cultivation of drug crops, according to the principle of shared responsibility. | Ongoing Alternative development project in Morocco and Latin America. | Continuous process | To strengthen complementarity of these projects with action on the main trafficking routes. |

## ANNEX 2

# EMCDDA Indicators and core data and their links to the evaluation of the EU Drug Strategy (2000-2004)

| EU strategy Target(s) of reference | EMCDDA Indicator (ki) or core data (cd) | Potential performance or impact bench marker |
|---|---|---|
| 1. To reduce significantly over five years the prevalence of illicit drug use, as well as new recruitment to it, particularly among young people under 18 years of age. | Drug use in general population (ki) | 1. Prevalence in general population and school surveys:<br>– Recent use (Last Year, Last Month )<br>– Cannabis and (less precision) cocaine, amphetamines<br>1999-2004 comparison possible only in some countries<br>2. Initiation to drug use (incidence):<br>– Age first use of cannabis (very limited data on other substances)<br>In a few countries only. Planned but not yet available in others.<br>Age ranges to be monitored<br>- General Population surveys: 15-24 years<br>- School surveys: 15-16 years |
| | Prevalence of problematic drug use (ki) | 1. Prevalence estimates of numbers of 'problematic drug users' per 1000 population aged 15-64<br>2. Changes over the time in other indirect indicators that may reflect the prevalence or incidence of problem drug use (will vary between MS depending on the availability and quality of existing data). |
| | Primary prevention in schools (cd) | 1. Number of countries where prevention is included in school curricula<br>2. Number of schools covered by prevention programmes<br>3. Number and degree of detail of available programme material<br>4. Number of minimally evaluated programmes with their outcomes |
| | Primary prevention in local communities (cd) | 1. Number of minimally evaluated programmes with their outcomes<br>2. Degree of conceptualisation of "community programme" |
| 2. To reduce substantially over five years the incidence of drug-related health damage (HIV, hepatitis B and C, TBC, etc.) and the number of drug-related deaths. | Drug related infectious diseases (ki) | 1. Prevalence rates (% infected) of HIV and hepatitis C among injecting drug users (IDUs) from different sources (e.g. IDUs in drugs treatment, prisons, low-threshold services, street-recruited samples)<br>2. AIDS incidence rates related to injecting drug use in the general population |

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| | Drug related deaths and mortality (ki) | 1. Acute Drug-related Deaths (numbers, rates, proportional change relative to index year) in<br>- General Mortality Registries<br>- Special Registries<br>In some MS by substance and age<br>In general with 1-3 years delay in reporting<br>2. Mortality rate (all causes, and by cause of death) among groups of drug users.<br>In some cities or countries |
| | Outreach Work (cd) | 1. Concepts and approaches existing in MS<br>2. typology of on-site pill testing interventions |
| | Needle exchange (cd) | 1. estimations of syringes distributed<br>2. mode of distribution |
| | Early health responses (cd) | 1. Availability and typology of secondary prevention interventions. |
| 3. To increase substantially the number of successfully treated addicts. | Demand for treatment (ki) | Key Indicator does not provide a straightforward performance indicator for this target. Conceptual work on definition of successful treatment is at starting point with REITOX partners.<br><br>Some useful sub indicators (not readily available) could be:<br>- Proportion of problem drug users admitted to treatment.<br>- Retention of clients in treatment<br>- Compliance of clients with some treatment outcomes (decreased illicit drug use, reduced criminal behaviour, improved labour status, etc.)<br><br>Sub indicators based on the Key indicator:<br>• Annual number of admissions to drug treatment<br>• Annual number of new admissions (“first treatments”) to drug treatment<br>• Profile of clients starting treatment (age, gender, drug, injection)<br><br>Annual numbers are based on variable coverage of treatment centres. Careful monitoring of changes is needed. |
| | Availability of treatment facilities (cd) | 1. Services offered and their characteristics,<br>2. Objectives,<br>3. Admission criteria,<br>4. Co-ordination between services.<br>5. Evaluation of treatment services<br>6. EDDRA and QED entries |

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| 4. To reduce substantially over five years the availability of illicit drugs. | Global availability of illicit drugs (cd)<br>Availability of illicit drugs at street level (cd) | Potential measures to be defined on basis of conceptualisation and definition of core data (in conjunction with NFPs) |
| | Interdiction measures (cd) | Pending on future discussions with EU and international partners |
| 5. To reduce substantially over five years the number of drug related crime. | Drug-related petty crime (cd) | Potential measures to be defined on basis of conceptualisation and definition of core data (in conjunction with NFPs) |
| | Drug-related social exclusion (cd)) | Potential measures to be defined on basis of conceptualisation and definition of core data (in conjunction with NFPs) |
| | Prevention of drug related crime (cd) | 1. Characteristics of urban security policies.<br>2 Availability and characteristics of alternatives to prison interventions.<br>3. Availability and characteristics of prevention, treatment and harm reduction interventions in prison. |
| | Social rehabilitation and reintegration (cd) | 1. Organisation,<br>2. Accessibility,<br>3. Education,<br>4. Employment,<br>5. Housing, and,<br>6. Evaluation of Social Rehab services |
| 6. To reduce substantially over five years money-laundering and illicit trafficking of precursors. | Drug related financial flows (cd) | Pending on future discussions with EU and international partners |
| | Flow of diverted chemical precursors (cd) | Pending on future discussions with EU and international partners |
| | Anti money laundering measures (cd) | Pending on future discussions with EU and international partners |
| | Measures against the diversion of chemical precursors (cd) | Pending on future discussions with EU and international partners |

| **Complementary bench marks** | | |
|---|---|---|
| | National Strategies and Co-ordination arrangements in Member States. | State and description of National Strategies and Coordination systems |
| | Legislation and practice | State and description of drug-related laws and judicial practices |
| | Public expenditure on drugs. | Overview and breakdown of public expenditure on drugs. |

**ANNEX 3**

**November 2000**

## Overview of the programmes and actions in the fight against drugs and the budget lines which can be drawn upon

| Type of action | Budget Line | Amount / Financial Year | Remarks |
|---|---|---|---|
| ***Internal activities*** | | | |
| **European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)** | B5-830N | 8,25 M€ in 2000<br>8,75 M€ in 2001 | The 0.5 M€ placed in reserve at the request of the Parliament will be unblocked after the implementation by the EMCDDA of a convincing plan for internal reform |
| **Health aspects of drug abuse** | B3-4302 (pour 2000)<br>B3-4308 (pour 2001) | 5,6 M€ in 2000<br>5,7 M€ in 2001 | A proposal to extend this programme was adopted by the Commission and sent to the Parliament and the Council for consideration. |
| **Training, exchange and cooperation programmes in the fields of JHA** | B5-820 | | In the framework of the OISIN programme (cooperation between law enforcement authorities) and the FALCONE programme (cooperation against organised crime) 13 drugs projects worth 0,8 M€ were financed in 1999. |

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| **Preparatory Actions in the fight against drug trafficking** | B5-831 | Commitment<br><br>1M€ in 2001 | New budget line for actions to prepare for a possible programme against drug trafficking. |
| **5th research framework programme (1999/2002):**<br><br>**- quality of life and management of living resources**<br><br><br><br>**- competitive and sustainable growth** | <br><br><br><br>B6-6111<br><br><br><br>B6-6131 | <br><br><br><br>The sub-rubrik health / drugs has a budget of roughly 2,5 M€ per year<br><br><br>±10M€ in the period 1999/2002 for projects concerning development of methods of measurement and the detection of prohibited substances.<br><br>The amounts actually allocated depend on the quality of the projects presented in response to calls for tender. | <br><br><br><br>In 1999 three projects with a total budget of 2,5M€ were selected.<br><br>A first project of 1M€ on the development of methods to measure endogenous hormones has been financed. Negotiations are underway for support to the accreditation of laboratories of the CIO (1M€) and for the financing of the activities of the world anti-doping agency (0,84M€) |

| *External activities* | | | |
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| The projects selected in the framework of cooperation with third countries do not in general reflect a sectoral choice but instead depend on the priorities of the beneficiary countries. As a result it is not possible to predict the amounts that will be available for any given sector and country and so the information concerning 2001 is purely indicative. | | | |
| **Assistance to partner countries in Eastern Europe and Central Asia** | B7-520 | **Central Asia :**<br>- Drugs coordinator (1M€ financed from the 1997 and 1998 budgets) | Implementation 2000-2002 |
| | | - control of ports and airports (1M€ financed from the 1997 and 1998 budgets) | Implementation 2000-2002 |
| | | - drugs information network (1M€ financed from the 2000 budget) | Implementation 2001-2003 |
| | | - projects still to be identified (±1,5 M€ from the 2001 budget) | Implementation 2002-2003 |
| | | **Southern Caucasus:**<br>- supply reduction (1,5M€ financed from the 1998 budget) | Implementation 2001-2002 |
| | | - demand reduction (0,5M€ financed from the 2000 budget) | Implementation 2001-2003 |
| | | - judicial assistance and a police information system (1,5M€ from the 2001 budget) | Implementation 2002-2003 |
| | | **Ukraine, Moldova, Belorussia:**<br>- 1,5M€ under preparation from the 2001 budget | Implementation 2002-2003 |

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| **Economic aid to the associated countries of central and eastern Europe** | B7-030 | - drug information system (2M€ from the 1998 budget)<br><br>- PHARE regional drugs programme (10M€ from the 2000 budget)<br>- PHARE national drugs programmes (1M€ / beneficiary country with a total of 10M€ from the 2000 budget) | Implementation 2000-2001 / implementation of the project passed to the EMCDDA<br><br>Implementation 2000-2004<br><br>Implementation 2001-2002 (or 2001-2003) according to the beneficiary countries. |
| **Preaccession strategy for Malta** | B7-040 | | New budget line |
| **Preaccession strategy for Cyprus** | B7-041 | | New budget line |
| **Preaccession strategy for Turkey** | B7-050 | | New budget line with just a pm |
| **Latin America** | B7-310 and B7-311 | **Bolivia**<br>Alternative development project of 30M€<br>**Andean Region**<br>Assistance project in the area of precursors, legislation and money laundering with a total of 0,65M€<br>**Peru**<br>Alternative development project of 28M€<br>**Colombia**<br>Alternative development project of 8M€ | Projet signed in 1997, with a duration of 6 years<br><br>Projet signed in 1998, with a duration of 3 years<br><br>Projet signed in 1999, with a duration of 6 years<br><br>Projet signed in 1999, with a duration of 4 years |

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| **Africa** | 7th EDF<br><br>7th EDF<br><br>B7-320 (EPRD) and 7th EDF (regional indicative programme) | **- West Africa (PAAD)**<br>5,1M€<br><br>**- Nigeria**<br>5M€<br><br>**- Southern Africa**<br>SADC regional programme on drug control: ±4M€ | This programme covers 16 countries in West Africa. Financing will stop in 2001.<br><br>Drug control programme which is under preparation and which should be completed by Spring 2001.<br><br>Financed more or less equally through budget line B7-320 and the regional indicative programme |
| **Caribbean** | 7th EDF | - demand reduction programmes: 5,5€<br>- fight against money laundering 4M€<br>- forensic laboratoires 1,2M€ | The national indicative programmes of the Caribbean countries foresee that 10 percent of the budget available should be used for projects to reduce drug addiction. |
| **Mediterranean** | B7-410 (MEDA) | | The commentary on this budget line states that amongst other things the funds allocated can be used ot pay for preparatory actions and pilot projects to improve information and training in particular in the field of drugs. |

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| **Iran** | B7-432 | 2 projects in cooperation with the UNDCP are being considered (assistance to establish a drugs coordination unit in the Economic Cooperation Organisation and support for the development of a programme on drug control) | These two projects, of 0,5M€ each, are foreseen for 2001 |

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| **North / South Cooperation in the fight against drugs** | B7-6210 | **Projects underway:**<br><br>- Venezuela: national drugs observatory (2M€)<br><br>- Caribbean:<br><br>. PMO (1,3 M€)<br><br>. epidemiological survey 1M€<br><br>. prison reform 1M€<br><br>. EC Drugs Control Office (ECDCO) 1M€<br><br>. system of regional customs cooperation (CCCLEC) O,7 M€<br><br>. treatment and rehabilitation O,7M€<br><br>**Programming for 2000**<br><br>5,2M€ are available in 2000 | Project signed in 2000, financed under the 1999 budget, with a duration of three years. |