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*(Notices)*NOTICES FROM EUROPEAN UNION INSTITUTIONS, BODIES, OFFICES AND
AGENCIES

COUNCIL

EU ACTION PLAN ON DRUGS 2017-2020

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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 demand for 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 dissemination of monitoring, research and evaluation results and 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, available 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 I. 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, the first Action Plan implementing the current drugs strategy was adopted in 2013 and expired in 2016. In 2016, an external mid-term assessment of the EU Drugs Strategy and the implementation of the EU Drugs Action Plan 2013-2016 was completed. The evaluation concluded that most of the actions foreseen in this Action Plan were concluded or in progress. The results of the evaluation also demonstrated the need for the second Action Plan to implement the EU Drugs Strategy 2013-2020, which should be the updated version of the EU Action Plan on Drugs 2013-2016. The EU Drugs Action Plan 2017-2020 as provided below takes into account the results of this evaluation and the major changes in drug situation and policies since the adoption of the last Action Plan.

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
<p>1. Prevent drug use and, secondly, delay the onset of drug use</p>	<p>1. Improve the availability and effectiveness of evidence-based ⁽¹⁾ prevention measures that take account of risk and protective factors as outlined below</p> <p>a. population factors such as age; gender; education, cultural and social factors;</p> <p>b. situational factors such as homelessness; migration and asylum seeking, drug use in nightlife and recreational settings; the workplace; and driving under the influence of drugs; and</p> <p>c. individual factors such as mental health; behaviour and psychosocial development; and other factors known to affect individual vulnerability to drug use such as genetic influences and family circumstances</p>	<p>Ongoing</p>	<p>MS</p>	<ul style="list-style-type: none"> — Over-arching indicators 1, 11, 12 — Availability and level of provision at MS level of evidence-based universal and environmental prevention measures — Availability and level of provision at MS level of evidence-based targeted prevention measures, including family and community based measures — Availability and level of provision at MS level of evidence-based indicated prevention measures 	<p>EMCDDA Reporting/ Reitox network national reporting package</p> <p>MS reporting on results of measures</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	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 and other psychoactive substances	Ongoing	MS	<ul style="list-style-type: none"> — Over-arching indicators 1, 5, 11, 12 — Availability and 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 	EMCDDA Reporting MS reporting on results of measures
	3. Exchange of best practices of all forms of prevention actions targeting children and young people, parents and, educational environments whilst also taking into account gender-specific needs, including educational activities, community based programmes, programmes using internet and social media.	Ongoing	MS EMCDDA	<ul style="list-style-type: none"> — Overview of exchanges of best practices between MS — Positive evaluations of behavioural outcomes of best practice interventions (where available) 	EMCDDA Best Practice portal COM Reporting MS Reporting Civil Society Forum on Drugs reporting
	4. Raise awareness of the risks and consequences associated with the use of illicit drugs and other psychoactive substances and improve skills and competences for preventing drug use.	Ongoing	MS COM EMCDDA	<ul style="list-style-type: none"> — Over-arching indicators 5, 12 — 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 and level of the skills and competences of those involved in the prevention of drug use 	EMCDDA Reporting Eurobaro-meter surveys ESPAD HBSC/WHO Europe

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	5. Enable a more informed response to the challenge of the misuse of psychoactive medicines.	2017-2020	MS Council WP (HDG Pharmaceuticals and Medical Devices) EMA EMCDDA	<ul style="list-style-type: none"> — Number of initiatives that focus on the promotion of appropriate use of psychoactive medicines — Collation of evidence and international examples on how to reduce the risks of diversion and misuse of psychoactive medicines — Number of courses for medical practitioners and other health care professionals in the use of medication to control pain and treat suffering 	MS Reporting EMCDDA Reporting EMA
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.	6. Develop and expand the diversity, availability, coverage and accessibility of evidence-based comprehensive and integrated treatment services. Ensure that these services address polydrug use (combined use of illicit and licit substances including psychoactive medicines, alcohol and tobacco) and the emerging needs of the ageing drug-using population and gender-specific issues. a. Implement and improve training for health care and social care professionals in addictive behaviours.	Ongoing	MS	<ul style="list-style-type: none"> — Over-arching indicators 1, 6, 11 — Extent and diversity of evidence-based comprehensive and integrated treatment services at MS level including those which address polydrug use and the needs of the ageing drug-using population — MS data on treatment retention and outcomes 	EMCDDA Reporting/ Reitox network national reporting package EMCDDA Best Practice Portal EU Drugs Strategy and Action Plan final evaluation MS Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	b. Develop and implement early detection and intervention, brief intervention and treatment programmes for children and young people using drugs.				
	<p>7. Expand the provision of rehabilitation/reintegration and recovery services with an emphasis on services that:</p> <p>a. focus on providing a continuum of care through case management and interagency collaboration for individuals;</p> <p>b. focus on supporting the social re/integration (including the employability and housing) of problem and dependent drug users including prisoners and ageing drug users, where relevant;</p> <p>c. Strengthen the diagnostic process and the treatment of psychiatric and physical co-morbidity involving drug use, for e.g. with rapid testing for hepatitis B and C and HIV as well as other sexually transmitted infections and tuberculosis;</p> <p>d. take account of gender-specific needs; and</p> <p>e. reach out to vulnerable communities/populations.</p>	Ongoing	MS	<p>— Over-arching indicator 11</p> <p>MS data on:</p> <p>— Extent of increase in rehabilitation/reintegration and recovery services adopting case management and inter-agency approaches</p> <p>— Extent of increase in the number of gender specific rehabilitation/reintegration and recovery programmes</p> <p>— Extent of increase in the number of community care and prison programmes, specifically targeted at drug users with co-morbidity, involving partnerships between both mental health and drug rehabilitation/reintegration and recovery services</p> <p>— Level and duration of abstentions from consumption of illicit and/or licit drugs by people leaving drug treatment</p> <p>— Availability of treatment options to meet needs of people who experience relapses to drug use and of ageing drug users</p>	<p>EMCDDA Reporting</p> <p>MS Reporting on results of services</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>8. a. Scale up where applicable, availability, coverage and access to risk and harm reduction services e.g. needle and syringe exchange programmes, opioid substitution treatment, opioid overdose management programmes, to lessen the negative consequences of drug use and to prevent 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 in accordance with the WHO recommendation on the comprehensive package of health services for people who inject drugs</p> <p>b. Better prevent drug related deaths according to national circumstances as for example in the case of opiates, by providing access to authorised pharmaceutical dosage forms of medicinal products containing naloxone specifically certified to treat opioid overdose symptoms by trained laypersons in the absence of medical professionals</p>	Ongoing	MS EMCDDA COM	<ul style="list-style-type: none"> — Over-arching indicators 2, 3, 4, 11 — Extent of increased availability of and access to evidence-based risk and harm reduction measures in MS where applicable — Overview of exchanges of best practices on risk and harm reduction measures — Number of MS reaching the WHO recommendation on the comprehensive package of health services for people who inject drugs: <ul style="list-style-type: none"> — Needle/Syringe programmes — Opioid substitution treatment — HIV testing and counselling — HIV treatment and care — Condom programmes — Behavioural interventions — Prevention and management of hepatitis, tuberculosis and mental health — Sexual reproductive health interventions — Naloxone training for laypersons as an irreplaceable prerequisite for safe take-home programmes 	<p>EMCDDA Reporting/ Reitox network national reporting package</p> <p>MS Reporting</p> <p>Civil Society Forum on Drugs</p> <p>Civil Society Forum on HIV/AIDS, Viral Hepatitis and Tuberculosis</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>c. Identify and overcome barriers in detection and access to treatment for HIV and hepatitis C among people who inject drugs, including prisoners and other vulnerable groups</p> <p>d. Exchange of information and where applicable best practice on risk and harm reduction measures such as, needle and syringe exchange programmes, opioid substitution treatment, drug consumption rooms, naloxone programmes, peer-based interventions, outreach treatment programmes, hepatitis C treatment, pill testing, self-testing for HIV/AIDS, in accordance with national legislation</p>			<ul style="list-style-type: none"> — Coverage of opioid substitution treatment programmes among people with opioid dependence — The extent of availability, where applicable, of harm reduction services such as naloxone programmes, nightlife harm reduction measures and programmes targeting vulnerable communities/populations — Number of programmes facilitating the access of people who inject drugs into treatment for the hepatitis C virus (HCV) and people covered — Degree of implementation of ECDC/EMCDDA guidance on prevention and control of infectious diseases among people injecting drugs 	
	<p>9. 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</p>	Ongoing	MS	<ul style="list-style-type: none"> — Over-arching indicator 10 — Availability of services for drug users in prisons (such as opioid substitution treatment and if applicable, naloxone programmes and needle and syringe exchange programmes in accordance with national legislation and prevention and management of HIV, Hepatitis B, Hepatitis C and TB) 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 	<p>EMCDDA Reporting/Reitox network national reporting package</p> <p>MS Reporting on services</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
				<ul style="list-style-type: none"> — 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 	
<p>3. Embed coordinated, best practice and quality approaches in drug demand reduction</p>	<p>10. Implement the EU minimum quality standards adopted by the Council in 2015 ⁽²⁾ that help bridge the gap between science and practice, for:</p> <p>a. environmental, universal, selective and indicated prevention measures;</p> <p>b. early detection and intervention measures;</p> <p>c. risk and harm reduction measures; and</p> <p>d. treatment, rehabilitation, social integration and recovery measures</p> <p>and monitor their implementation.</p>	2017-2020	<p>Council Council WP (HDG) MS COM EMCDDA</p>	<ul style="list-style-type: none"> — Evidence review of drug demand reduction measures and programmes implemented in accordance with the standards; — Number of specialist training programmes available for practitioners in drug demand reduction and/or estimated number of practitioners reached by specialist training programmes; — Involvement of civil society in the implementation of the standards, including in planning and introduction — Number of projects and programmes supported at EU level that promote the exchange of best practices in the implementation of these standards — Engagement in inter-ministerial cooperation to support implementation of these standards. 	<p>EMCDDA Best Practice Portal MS Reporting EU Drugs Strategy and Action Plan final evaluation</p>

⁽¹⁾ Evidence-based should be read in this context as 'based on available scientific evidence and experience'.

⁽²⁾ Council conclusions on the implementation of the EU Action Plan on Drugs 2013-2016 regarding minimum quality standards in drug demand reduction in the European Union 11985/15.

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	11. 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 Council WP (COSI)	<ul style="list-style-type: none"> — Over-arching indicator 7, 15 — 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 — Increased use of drug-related information-sharing, analysis and expert systems of Europol or other law enforcement authorities — Results achieved from EMPACT projects and bilateral and multilateral initiatives — Number of drug-related cases referred to Eurojust and Europol, including qualitative, contextual information about the cases 	Europol Reporting Eurojust Reporting EMCDDA Reporting EMPACT Driver Reports
	12. Identify and prioritise the most pressing threats associated with drug-related organised crime	2017	Council Council WP (COSI) Europol MS COM	<ul style="list-style-type: none"> — EU Policy Cycle for organised and serious international crime for the period 2018-2021 in place 	EU SOCTA Multi-annual Strategic Plans (MASPs) Operational Plans EMPACT Driver Reports Europol Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>13. Strengthen CEPOL's training for law enforcement officers in relation to illicit drug production, trafficking and financial crime, particularly training methods and techniques</p> <p>a. to address the use of new communication technologies in illicit drug production and trafficking;</p> <p>b. to enhance asset confiscation;</p> <p>c. to counter money laundering;</p> <p>d. to detect and dismantle illicit clandestine laboratories and cannabis cultivation sites.</p>	2017-2020	<p>MS</p> <p>CEPOL</p> <p>Europol</p> <p>Council WP (COSI)</p> <p>COM</p>	<p>— Training needs assessment carried out regularly</p> <p>— Availability and uptake of relevant training courses</p> <p>— Number of law enforcement officers trained and effectively deployed as a result</p>	<p>CEPOL Annual Report</p> <p>CEPOL Curricula</p> <p>EMPACT Driver Reports</p>
	<p>14. 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</p>	Ongoing	<p>COM</p> <p>MS</p> <p>Europol</p> <p>Council WP (COSI)</p> <p>Regional Information-Sharing Platforms</p> <p>Regional Security-Sharing Platforms</p>	<p>— Over-arching indicator 7</p> <p>— Number of intelligence-led activities leading to the disruption and suppression of drug trafficking routes</p> <p>— Level of information sharing through effective activity of the liaison officer network</p>	<p>Security/Information - sharing Platforms and Evaluation Reports</p> <p>EMCDDA Reporting</p> <p>EU SOCTA</p> <p>EMPACT Driver Reports</p> <p>Europol Reporting</p> <p>MAOC(N) ⁽¹⁾</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	15. Strengthen actions to prevent the diversion of drug precursors and pre-precursors for use in the illicit manufacture of drugs	Ongoing	MS Europol COM Council WP (CUG COSI)	<ul style="list-style-type: none"> — 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 	<p>Reports from EU and MS Law Enforcement Agencies</p> <p>EMPACT</p> <p>Driver Reports</p> <p>Europol Reporting</p>
	16. Counter cross-border drug trafficking, including through container and parcel shipments, 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 authorities	Ongoing	MS Europol Council WP (CCWP COSI)	<ul style="list-style-type: none"> — Number of multi-disciplinary/multi-agency joint operations and cross border cooperation initiatives — Intensified information exchange for example such as Memoranda of Understanding (MOU) agreed between law enforcement authorities and relevant bodies such as airlines, air express couriers, shipping companies, harbour authorities and chemical companies — Results achieved from EMPACT projects — Improved intelligence and information sharing on cross-border drug trafficking utilising, inter alia, available border surveillance systems — Implementation of the EU Passenger Name Record (PNR) directive 	<p>EMPACT Driver Reports</p> <p>Europol Reporting</p> <p>Reports from the CCWP</p> <p>MS Reporting</p> <p>MAOC(N)</p> <p>Frontex</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	17. Implement the key indicators on drug supply reduction adopted by the Council in 2013 ⁽²⁾	2017-2020	COM MS Council Council WP (HDG) EMCDDA Europol	Extent of the implementation of the following indicators: — number and quantity of drug seizures — purity and content of drugs — drug prices — drug production facilities dismantled — drug law offences — drug availability in population surveys — market size estimates	Overview of existing national drug supply data collection in MS EMCDDA Reporting Europol Reporting
5. Enhance effective judicial cooperation and legislation within the EU	18. Strengthen EU judicial cooperation in targeting cross-border drug trafficking, money laundering, and in the confiscation of the proceeds of drug-related organised crime	2017-2020	Council COM MS Eurojust	— Timely implementation of agreed EU measures and legislation on (a) confiscation and recovery of criminal assets ⁽³⁾ ; (b) money laundering ⁽⁴⁾ ; (c) approximation of drug trafficking offences and sanctions across the EU ⁽⁵⁾ — Increased number of financial investigations and confiscations in relation to the proceeds of drug-related organised crime through EU law enforcement authorities and judicial cooperation — Timely and effective responses to mutual legal assistance requests and European Arrest Warrants in relation to illicit drug trafficking	Eurojust Reporting MS Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	19. Adopt and implement new EU legislative measures to address the emergence, use and rapid spread of new psychoactive substances	2017-2020	COM Council Council WP (HDG) MS EMCDDA Europol EUROJUST	<ul style="list-style-type: none"> — EU legislation in place — Implementation of EU legislation in MS — Updating of EU guidelines for the information exchange and risk assessment procedures — Monitor the effects of new legislative measures with a special focus on the replacement-effect in the illegal drug market 	MS Reporting EMCDDA Reporting COM (EU measures)
	20. Implement EU legislation on drug precursors to prevent their diversion without disrupting lawful trade	Ongoing	Council COM MS	<ul style="list-style-type: none"> — Information on 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. 	Annual INCB Precursor report European Commission and EMCDDA reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>21. Address the use of certain pharmacologically active substances (as defined in Directive 2011/62/EU) as cutting agents for illicit drugs</p>	Ongoing	<p>MS COM EMA Europol</p>	<ul style="list-style-type: none"> — Information on 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 	<p>Reports from the CCWP and CUG MS Reporting</p>
	<p>22. Members States to provide and apply, where appropriate and in accordance with their legal frameworks, alternatives to coercive sanctions for drug using offenders, such as:</p> <p>a. Education</p> <p>b. (Suspension of sentence with) treatment</p> <p>c. Suspension of investigation or prosecution</p> <p>d. Rehabilitation and recovery</p> <p>e. Aftercare and social reintegration</p>	2017-2020	<p>MS Council WP (HDG DROIPEN)</p>	<ul style="list-style-type: none"> — Increased availability and implementation of alternatives to coercive sanctions 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 — Type and number of alternatives to coercive sanctions provided for and implemented by MS — Information on the effectiveness of the use of alternatives to coercive sanctions 	<p>EMCDDA Reporting/ Reitox network national reporting package MS Reporting</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
6. Respond effectively to current and emerging trends in illicit drug activity	23. Identify strategic responses to address the role of new information communication technologies (ICT) and the hosting of associated websites, in the production, marketing, purchasing and distribution of illicit drugs and new psychoactive substances at national and EU level.	2017-2020	Council COM Council WP (HDG COSI CCWP) MS Europol CEPOL EMCDDA EUROJUST	<ul style="list-style-type: none"> — Results achieved from law enforcement actions targeting drug-related crime via the internet — Increased number of joint operations and cross border cooperation initiatives — Number and impact of funded research projects and tools developed to support law enforcement — Number of agreements/discussions with relevant industry partners — Setting up of a glossary of terms — Setting up of an inventory of monitoring tools — Numbers of training sessions for relevant stakeholders — Number of meetings with international partners in which the action was discussed 	Interim Review of the EU Policy Cycle EMPACT Driver Reports Europol Reporting CEPOL Statistics/Annual Report EMCDDA Reporting MS Reporting Reports from EU Agencies COM

(¹) MAOC (N), based in Lisbon, is an initiative by seven EU Member countries: France, Ireland, Italy, Spain, Netherlands, Portugal and the UK, and is co-funded by the Internal Security Fund of the European Union. The Centre provides a forum for multi-lateral cooperation to suppress illicit drug trafficking by sea and air.

(²) Council conclusions on improving the monitoring of drug supply in the European Union 15 November 2013.

(³) Directive 2014/42/EU of the European Parliament and of the Council on the freezing and confiscation of instrumentalities and proceeds of crime in the European Union; Council Decision 2007/845/JHA concerning cooperation between Asset Recovery Offices of the Member States in the field of tracing and identification of proceeds of, or other property related to, crime; Council Framework Decision 2006/783/JHA on the application of the principle of mutual recognition to confiscation orders. Council Framework Decision 2003/577/JHA on the execution in the European Union of orders freezing property or evidence, Commission proposal for a Regulation of the European Parliament and of the Council on the mutual recognition of freezing and confiscation orders COM(2016) 819; Council Framework Decision 2005/212/JHA on confiscation of crime-related proceeds, instrumentalities and property; Council Framework Decision 2003/577/JHA on the execution in the European Union of orders freezing property or evidence.

(⁴) Directive (EU) 2015/849 of the European Parliament and of the Council on the prevention of the use of the financial system for the purposes of money laundering or terrorist financing, amending Regulation (EU) No 648/2012 of the European Parliament and of the Council, and repealing Directive 2005/60/EC of the European Parliament and of the Council and Commission Directive 2006/70/EC; Council Framework Decision 2001/500/JHA on money laundering, the identification, tracing, seizing and confiscation of instrumentalities and the proceeds of crime. Commission proposal for a Directive of the European Parliament and of the Council on countering money laundering by criminal law COM(2016) 826. Regulation (EU) 2015/847 of the European Parliament and of the Council on information accompanying transfers of funds and repealing Regulation (EC) No 1781/2006; Regulation (EC) No 1889/2005 of the European Parliament and of the Council on controls on cash entering or leaving the Community. Commission proposal for a Regulation of the European Parliament and of the Council on controls on cash entering or leaving the Union and repealing Regulation (EC) No 1889/2005.

(⁵) Council Framework Decision 2004/757/JHA of 25 October 2004 laying down minimum provisions on the constituent elements of criminal acts and penalties in the field of illicit drug trafficking, as regards the definition of drug.

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	24. Enhance information-sharing between the HDG and other relevant Council Working Parties and in particular COSI to enhance coordination as regards the drug supply reduction pillar Enhance information sharing between the HDG and other relevant geographical and thematic Council Working Parties including such as COSI, COAFR, COASI, COEST, COLAC, COTRA, COWEB, CONUN, COHOM, CCWP, COSCE, CUG and DROIPEN	Ongoing	PRES Council EEAS Council WP (HDG)	— Extent to which the EU Drugs Strategy/and Action Plan are taken into account in the Programmes of other Council Working Parties such as COSI, COAFR, COASI, COEST, COLAC, COTRA, COWEB, CONUN, COHOM, CCWP, COSCE, CUG and DROIPEN. — Regular information point on the HDG agenda on (1) activities linked to drug-related priorities of the EU Policy Cycle (based on EMPACT reporting, once per Presidency); and (2) relevant activities of other Council Working Parties, in the presence of other relevant Working Party Chairs, where appropriate	Council Working Party (HDG) reporting Presidency Reporting
	25. 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
	26. 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) Ongoing (b) Annually	PRES Council WP (HDG) MS COM EMCDDA Europol	— Extent of implementation of the Action Plan — Number of actions from the Action Plan addressed in thematic debates in the HDG — Timeliness of dialogue at the HDG on latest drug-related trends and data	Presidency Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	27. 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	Ongoing	PRES PRES Trio MS COM Council WP (HDG) EMCDDA Europol	<ul style="list-style-type: none"> — Extent of consistency and continuity of actions across Presidencies — Advancement in implementation of EU Drugs Strategy priorities across Presidencies 	Presidency Reporting
	28. Ensure coordination of EU drugs policies and responses, to support international cooperation between the EU, third countries and international organisations	Ongoing	EEAS COM Council WP (HDG) MS	<ul style="list-style-type: none"> — Level of consistency and coherence in the objectives, expected results and measures foreseen in EU actions on drugs — Inclusion of drug-related priorities in strategies of relevant EU bodies — Intensified cooperation between the HDG and the geographical/regional and thematic Council Working Parties, including COSI, COAFR, COASI, COEST, COLAT, CONTRA, COWEB, CONUN and COHOM, CCWP, COSCE, CUG and DROIPEN — Number of reports by Dublin Group 	Periodical reporting by EEAS and COM to the Council Working Party (HDG) Dublin Group

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>29. a. Achieve a coordinated and appropriate level of resources at EU level and Member State level to fulfil the priorities of the EU Drugs Strategy</p> <p>b. Strengthen the cooperation to tackle the rising trend of stimulant addiction, in particular methamphetamine, between relevant government bodies and the NGO sector, focusing on creating and sharing best practices in preventing the spread from local epidemics, including demand and supply reduction efforts, and sharing information on the prevention of misuse of medicinal products for methamphetamine production.</p>	Annually 2017-2020	MS COM EEAS Council Council WP (HDG)	<ul style="list-style-type: none"> — Over-arching indicator 14 — Amount of funding at EU level, and where appropriate, MS level — Extent of coordination on drugs-related financial programmes across Council Working Parties and COM — Level of networking between professionals from both statutory and non-statutory sector — Availability of accessible interventions — Number of developed interventions 	EMCDDA Reporting/ Reitox network national reporting package COM Reporting EMCDDA Best Practice portal
8. Ensure effective coordination of drug-related policy at national level	30. 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"> — Over-arching indicator 14 — Effectiveness of a horizontal drug policy coordination mechanism at MS level — Number of cross-cutting actions in drug demand and supply reduction at Member State level 	EMCDDA Reporting/ Reitox network national reporting package MS Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
9. Ensure the participation of civil society in drugs policy	31. Promote and strengthen dialogue with, and involvement of, civil society and the scientific community in the formulation, implementation, monitoring and evaluation of drug policies at MS and EU levels	Ongoing	MS COM Council WP (HDG) PRES	<ul style="list-style-type: none"> — Timely dialogues between EU Civil Society Forum on Drugs and the HDG during each Presidency period — Engagement of EU Civil Society Forum in reviewing implementation of the EU Drug Action Plan — Level of involvement of civil society and the scientific community in MS and EU drug policy formulation, implementation, monitoring and evaluation — Timely dialogue between the scientific community (natural and social sciences, including neuroscience and behavioural research) and the HDG 	<p>Feedback from EU Civil Society Forum on Drugs and from Civil Society Representatives at MS and EU level</p> <p>MS Reporting</p> <p>Feedback from Scientific Community through the EMCDDA Scientific Committee</p>

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	32. Ensure policy coherence between the internal and external aspects of the EU drug policies and fully integrate drug 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 Council WP (HDG) MS	<ul style="list-style-type: none"> — Over-arching indicator 13 — Drug policy priorities increasingly reflected in EU's external policies and actions — Inclusion of drug-related priorities in EU strategies with third countries and regions — Number of agreements, strategy papers, action plans in place 	EEAS Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>33. Ensure that the policy priorities and the balance between demand and supply reduction are well reflected in policy options and in the programming, implementation and monitoring of external assistance, particularly in source and transit countries, through projects involving:</p> <p>a. development of integrated, balanced and evidence-based drug policies;</p> <p>b. supply reduction;</p> <p>the prevention of the diversion of drug precursors and pre-precursors;</p> <p>c. drug demand reduction; and</p> <p>d. alternative development measures</p>	Ongoing	COM MS EEAS	<ul style="list-style-type: none"> — Extent to which EU's Drug policy priorities, especially the balance between demand and supply reduction, are reflected in funded priorities and projects — Level of implementation of coordinated actions in action plans between the EU and third countries and regions — Number of third country national strategies and action plans that incorporate integrated drug policies 	COM, EEAS and MS programming programme monitoring and evaluation reports
	<p>34. Improve capacity and strengthen the role of EU Delegations to enable them to proactively engage on drug policy issues and effectively report back on the local situation on drugs</p>	2017-2020	EEAS COM MS	<ul style="list-style-type: none"> — Relevant expertise, training and policy guidance provided to EU Delegations — Regional networking among EU Delegations on drug issues enhanced — Coordination with MS enhanced 	EEAS and COM Reporting EU Delegations Dublin Group Reports

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>35. Promote and implement the EU approach to alternative development (consistent with the EU Drug 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, gender aspects 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 who were previously, or are currently, involved in illicit drug crop cultivation</p>	Ongoing	MS COM EEAS	<ul style="list-style-type: none"> — Number of third country national policies, strategies and action plans that incorporate: <ul style="list-style-type: none"> — integrated approaches to the problem of illicit drug crop cultivation and — effectively organised alternative development initiatives — Number of evaluated projects that demonstrate positive outcomes relating to sustainable, legal and gender sensitive livelihoods — Improvements in human development indicators — Number of rural development projects and programmes, funded by the EU and MS in regions where illicit drug crop cultivation is taking place, or in regions at risk of illicit drug crop cultivation — Reported local decrease in illicit drug crop cultivation in the long-term 	<p>UNODC and INCB reports on drug policies in non-EU countries</p> <p>EU and MS Project and Programme Monitoring and Evaluation Reports</p> <p>UNDP Human Development Reports</p> <p>Dublin Group reporting on non-EU countries</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>c. providing an appropriate level of EU and MS funding and expertise to further strengthen and support non-EU countries' efforts in addressing and preventing illicit drug crop cultivation, through rural development measures and strengthening the rule of law in order to deal with the challenges of poverty reduction, public health, safety and security</p>				
	<p>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</p>	Ongoing	MS COM EEAS	<ul style="list-style-type: none"> — 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 	<p>WHO Reports Dublin Group reporting on non-EU countries EEAS, COM and MS exchanges on the policies of non-EU countries</p>
	<p>37. Support third countries to tackle drug-related organised crime, including drug trafficking, by:</p> <p>a. intelligence-sharing and the exchange of best practices;</p> <p>b. strengthening counter-narcotics capacity and developing expertise of source and transit countries;</p>	Ongoing	MS EEAS COM Europol	<ul style="list-style-type: none"> — Number and effectiveness of projects and programmes by the EU and the MS in non-EU countries — Sustained reduction in drug trafficking 	<p>COM and MS Reporting Europol Reporting EEAS Reporting UNODC Annual World Drug Report</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>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;</p> <p>d. strengthening cooperation in the field of asset identification and recovery, in particular through the creation of dedicated national platforms; and</p> <p>e. intensifying regional and intra-regional cooperation</p> <p>f. incorporating rule-of-law and international human rights standards and principles in drug-related law enforcement measures</p>				
	<p>38. a. Reinforce cooperation and/or conduct dialogue with partners, including:</p> <ul style="list-style-type: none"> — Accessing countries, candidate countries and potential candidates — European Neighbourhood Policy countries — United States of America — Russian Federation 	Ongoing	PRES Trio COM EEAS MS	<ul style="list-style-type: none"> — Over-arching indicator 13 — Strengthened cooperation in the field of drugs with relevant partners — Dialogues organised — Declarations agreed — Programmes and Action Plans implemented 	EEAS Reporting Implementation Reports of the relevant action plans where available

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<ul style="list-style-type: none"> — Other countries or regions of priority notably: <ul style="list-style-type: none"> — Afghanistan, Pakistan and Iran — Central Asian Republics — China — Latin American and the Caribbean (CELAC) — Africa, in particular West Africa — Other countries depending on national and international developments b. Explore possibilities for engagement (such as bilateral dialogues, joint projects) with other non-EU countries on serious drug-related issues 				
	39. Improve the Dublin Group consultative mechanism through intensified EU coordination and participation, better formulation, implementation and dissemination of its recommendations	Ongoing	Dublin Group COM EEAS MS	<ul style="list-style-type: none"> — Level of activity across Dublin Group structures including number of Dublin Group recommendations effectively implemented — Achieved modernisation of the Dublin Group's working methods 	Dublin Group Reports
	40. Hold an annual dialogue on EU and MS drugs-related assistance to third countries accompanied by a written update	From 2017	COM EEAS MS	<ul style="list-style-type: none"> — Presentation by COM and EEAS to the Horizontal Drugs Group, at least once a year 	COM and EEAS Reporting MS Reporting Project and Programme Monitoring and Evaluation System and Reports

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>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 implementation of the rights-based approach (RBA) and of tailored human rights guidance and impact assessment tool</p>	Ongoing	COM COHOM/EEAS MS	<ul style="list-style-type: none"> — Human rights effectively mainstreamed into EU external drug-related policies and actions — Human rights guidance and assessment tool implemented 	EU Annual Report on Human Rights MS Reporting
<p>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</p>	<p>42. Contribute to shaping the agenda on international drugs policy, including through:</p> <p>a. More affirmative action by EU and MS Delegations at the UN General Assembly and the Commission on Narcotic Drugs (CND);</p> <p>b. Coordinated action by EU and MS delegations in all other UN fora addressing drug-related matters (e.g. World Health Assembly, Human Rights Council, High Level Political Forum on Sustainable Development)</p>	Ongoing	EEAS PRES MS COM Council Council WP (HDG)	<ul style="list-style-type: none"> — Over-arching indicator 13 — Number of EU statements delivered at CND and other UN fora — Number of EU common positions supported by other regions and international bodies — Number of EU common positions concerning CND decisions on scheduling of substances — Outcome of the CND decisions on scheduling of substances 	EEAS Reporting Convergence Indicator 2019 review Outcome The Sustainable Development Goals annual reports

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>c. preparation, coordination and adoption of EU common positions and joint resolutions in the UN General Assembly and the CND, including, ahead of the CND, on scheduling of substances, and ensuring that the EU speaks with one strong voice in these and other international fora;</p> <p>d. promotion and monitoring the implementation of the recommendations of the 2016 UNGASS Outcome Document as a pivotal reference document for discussions of relevance to international drug policy in all pertinent fora</p> <p>e. the ministerial segment to be held during the sixty-second session of CND, in Vienna in 2019; and</p> <p>f. ensure the meaningful involvement of civil society and the scientific community in the review process</p>			<ul style="list-style-type: none"> — Level of successful adoption of EU resolutions at UN including at the CND — Effective promotion of EU policies in the UN, including at the CND — Adoption of an EU Common Position Paper for the 2019 review process; EU contribution to the definition by the CND on the modalities for the 2019 process — Implementation of EU common position on the post-UNGASS process — Outcome of the 2019 review of the UN Political Declaration and Action Plan on International Cooperation towards an Integrated and Balanced Strategy to Counter the World Drug Problem — Progress in implementation of drug-related Sustainable Development Goals (SDGs) 	

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	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 Council WP (HDG) EMCDDA	— Over-arching indicators 13, 15 — Number of information exchanges and activities between the EU and relevant international and regional bodies and organisations and initiatives — Effectiveness of partnerships with relevant bodies	MS, EEAS, COM Reporting
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	— Over-arching indicator 15 — Increased compliance by countries with EU <i>acquis</i> — Number and quality of completed projects — National Drug Strategies and national drug coordinating structures established	EMCDDA Reporting 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)	2017-2020	MS COM	— Amount and type of EU funding provided across the different programmes and projects	COM Reporting at annual research dialogue

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>46. Ensure that EU-supported projects:</p> <p>a. take account of the priorities of the EU Drug Strategy and Action Plan on Drugs;</p> <p>b. take account of gaps in policy formulation;</p> <p>c. deliver clear added value and ensure coherence and synergy; and</p> <p>d. avoid duplication with research under other programmes and bodies</p> <p>e. take account of the importance of behavioural research and neuroscience ⁽¹⁾</p> <p>f. include clear indicators for measuring their impact</p>	2017-2020	COM EMCDDA	<ul style="list-style-type: none"> — The inclusion of the priorities of the EU Strategy and Action Plan on Drugs in the funding and assessment criteria of EU-funded drug-related research — Number, impact, complementarity and value of EU-funded drug-related research grants and contracts awarded — Number of EU-funded drug- related articles and research reports published in peer-reviewed journals with high impact factors — Annual debate at the HDG on drug-related research projects funded by the EU including EMCDDA Scientific Committee recommendations on research priorities 	<p>Research project reports</p> <p>EMCDDA Scientific Committee recommendations on research priorities</p> <p>Science Citation Index and similar bibliometric tools</p> <p>Strategic research agenda developed by ERANID</p>
	<p>47. Promote evidence-based evaluations of policies and interventions at national, EU and international level</p>	2017-2020	COM MS EMCDDA	<ul style="list-style-type: none"> — Over-arching indicator 14 — EMCDDA guide on evaluation used to support national process — Delivery of dedicated studies into the effectiveness and impacts of EU and international drug policies 	<p>EMCDDA Reporting/ Reitox network national reporting package</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>48. Reinforce analysis (including mapping information sources) and information sharing on the relationship between drugs trafficking and:</p> <p>a. financing of terrorist groups and activities, including any overlap between the established routes for drug production and trafficking areas and conflict zones; and financing sources of terrorist cells in the EU from illicit activities, including drug trafficking;</p> <p>b. migrant smuggling (building synergies with the EU Action Plan against migrant smuggling (2015-2020) that foresees research and risk analysis between smuggling and other crimes such as drug trafficking) including:</p> <ul style="list-style-type: none"> — A focus on vulnerable migrants and their potential exploitation for drug trafficking purposes and/or as end-users of drugs, in particular minors and women. — Exploration of any overlap between drug trafficking and migrant smuggling criminal rings, <i>modi operandi</i> and routes. 	2017-2020	MS Commission EU ATC EMCDDA Europol Frontex FRA EIGE Council WP (COSI COTER TWP HLWG)	<ul style="list-style-type: none"> — Extent to which understanding is increased of the potential connections between drug trafficking and: <ul style="list-style-type: none"> — Terrorist financing — Migrant smuggling — Trafficking in Human Beings — EU and national outputs (such as reports, studies and articles addressing these topics) 	MS reporting COM reporting EU agencies reporting (EMCDDA Europol Frontex and FRA in the framework of their regular reporting activities EIGE in the framework of their regular reporting activities FATF Risk Assessments

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>c. trafficking in human beings building synergies with the EU legal and policy framework addressing trafficking in human beings including the EU Strategy towards the Eradication of Trafficking in Human Beings 2012–2016</p>				
<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</p>	<p>49. In collaboration with relevant parties continue to provide comprehensive analyses of:</p> <p>a. the EU drug situation;</p> <p>b. the dynamics of drug use within general populations and target groups</p> <p>c. responses to drug use</p> <p>and in due course to provide an update by the EMCDDA of the 2017 overview of cannabis legislation in the EU as well as continue to monitor and report on cannabis legislations at national level and in third countries</p>	<p>Ongoing</p>	<p>EMCDDA Europol MS COM</p>	<p>— Over-arching indicators 1-15</p> <p>— Current deficits in the knowledge base established and an EU level framework developed to maximise analyses from current data holdings</p> <p>— Number of overviews and topic analyses on the drug situation</p>	<p>EMCDDA Reporting MS Reporting Civil Society Forum on Drugs COM</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	50. Enhance evidence-based training for those involved in responding to the drug phenomenon	2017-2020	MS EMCDDA CEPOL	<ul style="list-style-type: none"> — Number of initiatives at MS and EU level to train professionals in aspects of drug demand reduction and drug supply reduction — 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 	MS Reporting CEPOL Annual Report EMCDDA Reporting/ Reitox network national reporting package
	51. Enhance data collection, research, analysis and reporting on: <ul style="list-style-type: none"> a. drug demand reduction; b. drug supply reduction; c. emerging trends, such as polydrug use and misuse of psychoactive medicines, that pose risks to health and safety; 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; e. psychiatric and physical co-morbidity; 	Ongoing	MS COM EMCDDA Europol ECDC EMA	<ul style="list-style-type: none"> — Increased availability and implementation of evidence-based and scientifically sound indicators on drug supply reduction and drug demand reduction — At MS level, extent of new research initiated on emerging trends such as polydrug use and the misuse of psychoactive 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 problems and consequences related to both licit and illicit substances 	EMCDDA Reporting EMA Reporting MS Reporting Harmonised data reports from EU bodies including EMCDDA EU SOCTA

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<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 problems and consequences related to illicit substances as well as to polydrug use (combined use of illicit and licit substances including psychoactive medicines, alcohol and tobacco)</p> <p>h. compliance of drug policies with international human rights standards and principles</p>			<ul style="list-style-type: none"> — 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 — Adoption of evidence-based and scientifically sound indicators on drug problems among prisoners 	
	<p>52. 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	COM MS EMCDDA Europol	<ul style="list-style-type: none"> — Over-arching indicator 6 — Extent of new epidemiological, pharmacological and toxicological research initiated on new psychoactive substances and supported by MS and EU Research programmes — Extent of information, best practice and intelligence exchange — Extent of sharing by toxicology laboratories and by Research Institutes of toxicological and health data analyses on new psychoactive substances 	<p>EMCDDA Reporting/Reitox network national reporting package</p> <p>EMCDDA-Europol Implementation Report</p> <p>Reports by laboratories and research institutes</p>

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
	<p>53. Strengthen efforts to share forensic science data, including support on the identification of new psychoactive substances, laboratory reference standards on new psychoactive substances, and the development of a common methodology for the identification of new substances by enhancing cooperation with the Commission's Joint Research Centre, and 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 and the Customs Laboratories European Network</p>	2017-2020	COM MS EMCDDA	<ul style="list-style-type: none"> — Over-arching indicator 15 — Extent of sharing of forensic science data on new psychoactive substances, supporting the identification of new psychoactive substances — Ease of access to laboratory reference standards by forensic science laboratories, customs laboratories and institutes — Progress on development of a common methodology for the identification of new psychoactive substances 	EMCDDA/Europol Reporting COM Reporting
	<p>54. Improve and increase the ability to identify, assess and respond at MS and EU levels to (a) behavioural changes in drug consumption; and (b) to drug-related epidemic outbreaks</p>	Ongoing	MS EMCDDA ECDC	<ul style="list-style-type: none"> — Number and effectiveness of new drug-related public health initiatives developed and implemented — Number and effectiveness of existing measures and initiatives that are adjusted to take account of drug consumption or epidemic outbreaks — Number and impact of early warning reports, risk assessment and alerts 	Early Warning System reports EMCDDA Reporting/ Reitox network national reporting package EMA Reporting

Objective	Action	Timetable	Responsible party	Indicator(s)	Data collection/assessment mechanisms
15. Enhance dissemination of monitoring, research and evaluation results at EU and national level	<p>55. Member States continue to support EU monitoring and information exchange efforts, including cooperation with, and adequate support for, Reitox National Focal Points</p> <p>a. Organisation of European events focused on the transfer and dissemination of knowledge from research to policy makers and professionals</p>	Ongoing	MS EMCDDA COM	<ul style="list-style-type: none"> — Open-access outputs from EU funded studies disseminated — Extent to which Reitox National Focal Points funding and other resources match requirements — Number and effectiveness of Reitox National Focal Points dissemination initiatives — Number of EU events organised on the transfer and dissemination of knowledge from research to policy makers and professionals 	<p>Web Dissemination including OpenAire, Cordis</p> <p>EMCDDA website</p> <p>EMCDDA Reporting/ Reitox network national reporting package</p>

(¹) Under Horizon 2020 (2014-2020), some EUR 27 million have already been allocated to projects addressing drug addiction and include behavioural research and neuroscience.

ANNEX I

15 over-arching indicators for the EU Action Plan on Drugs 2017-2020 ⁽¹⁾

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 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 vs 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 (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) and Risk Assessment on new psychoactive substances (EMCDDA)

⁽¹⁾ These indicators are based on existing reporting systems that pre-date the objectives of the current EU drug strategy and action plan, but provide the most comprehensive set of EU-level resources to support their monitoring and evaluation.

ANNEX II

Glossary of acronyms

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
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
COLAC	Council of the EU — Working Party on Latin America
COM	European Commission
CONUN	Council of the EU — United Nations Working Party
COSCE	Council of the EU — Working Party on OSCE and the Council of Europe
COSI	Council of the EU — Standing Committee on Operational Cooperation on Internal Security
COTRA	Council of the EU — Working Party on Transatlantic Relations (Canada and the USA)
Council WP	Council Working Party
COTER	Council of the EU — Working Party on Terrorism (International Aspects)
COWEB	Council of the EU — Working Party on the Western Balkans Region
CUG	Council of the EU — Customs Union Group
DROIPEN	Council of the EU — Working Party on Substantive Criminal Law
ECDC	European Centre for Disease Control
EEAS	European Union 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
ERANID	European Research Area Network on Illicit Drugs
ESPAD	European School Survey Project on Alcohol and Drugs
EU	European Union
EUROJUST	European Judicial Cooperation Unit
EUROPOL	European Union Agency for Law Enforcement Cooperation
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

HBSC	Health Behaviour in School Aged Children survey
HCV	Hepatitis C virus
HDG	Council of the EU — Horizontal Working Party on Drugs
HIV	Human immunodeficiency virus
HLWG	Council of the EU — High-Level Working Group on Asylum and Migration
INCB	International Narcotics Control Board (UN)
JHA	Justice and Home Affairs
LGBTI	Lesbian, Gay, Bisexual, Transgender/Transsexual and Intersexed
LSD	Lysergic acid diethylamide
MAOC (N)	The Maritime Analysis and Operations Centre
MASPs	Multiannual Strategic Plans (Europol)
MOU	Memorandum of Understanding
MS	Member State
NPS	New psychoactive substances
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
TWP	Council of the EU — Working Party on Terrorism
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
UNDP	United Nations Development Programme
WHO	World Health Organisation (UN)
