Three-year work programme (1998-2000):

(EMCDDA/27/97 REV.3)

Summary

The second three year work programme of the EMCDDA (1998-2000) should allow the EMCDDA to consolidate, enhance and develop the accomplishments of its first three year work programme (1995-1997), creating the conditions for the achievement of the long-term objectives set up in its founding regulation.

In accordance with the decision taken by the Management Board at its last meeting, the present draft has been prepared revising the previous draft presented in June 1997, taking into account the written comments submitted afterwards on this document by 2 Members of the Management Board. It takes into account also the comments expressed by the Bureau of the EMCDDA in its meeting on July 30th, 1997.

The structure and the content of the proposed work programme can be summarised in the following way:

- **the legal framework**, according to which the work programme is built on the accomplishment of the EMCDDA's four fundamental tasks to be implemented in its priority areas as set out in its founding regulation;
- **the proposed objectives** (set out in detail in annex), **for 1998-2000** (including the implementation of the EU Joint Action concerning an early warning system on new synthetic drugs). ;

Decision

The Bureau endorses the amended draft three-year work programme and asks the Director of the Centre to send it to the Members of the Management Board and, in accordance with article 8 of the founding regulation of the EMCDDA, to consult formally on this basis the Scientific Committee of the EMCDDA and to seek the opinions of the Commission and the Council. The Director will then submit to the Management Board a final draft for formal adoption, in order to ensure a proper preparation and adoption of the annual work programme 1998.

Budgetary effect

The 3 year work programme will be financed according to the respective annual work programme and the decision taken annually by the Budgetary Authority on each of them.

For 1998 the point of reference is represented by the preliminary draft budget of the EMCDDA (amounting to ECU 7.000.000) adopted by the Management Board of the EMCDDA on 9-10 January 1997.

Draft Three-year work programme (1998-2000):

INTRODUCTION

The second work programme of the EMCDDA (1998 - 2000) should allow the EMCDDA to consolidate, enhance and develop the accomplishments of its first work programme (1995 - 1997), creating the conditions for the achievement of the long-term objectives set up in the founding regulation of the EMCDDA.
In this context the Centre should make considerable progress towards its objective to provide the decision - makers, the specialists and the general public with reliable and comparable information at European level concerning drugs and drug addiction.

1. OUTLINES AND OBJECTIVES

1.1. LEGAL FRAMEWORK

The work programme of the EMCDDA is built on the accomplishment of its 4 fundamental tasks (article 2 of the founding regulation):

Tasks	
A.	Collection and analysis of existing data
B.	Improvement of data-comparison methods
C.	Dissemination of data
D.	Co-operation with European and international bodies and organisations and with non-Community countries

This tasks are subdivided in 13 specific sub-tasks, which have to be implemented in the framework of the 5 priority areas listed in article 4 and in the Annex of the founding regulation:

The founding regulation of the EMCDDA also provides that:

- "During the first three-year period special attention will be given to demand and demand reduction."
  (Annex - point C)

and

- "The Centre shall progressively carry out its tasks in the light of the objectives adopted in the three-year and annual work programmes and with due regard to the available resources."

(article 3, para 1).

1.2. OBJECTIVES FOR THE 1998 - 2000 PERIOD

With regard to the above, the second three-year work programme must determine the goals to be reached between 1998 and 2000, in view of the preceding facts and on the basis of the achievements of the first three-year period.

In this context a special attention will be paid to the **consolidation and development of the instruments identified during the first three year period**

- **in the priority area of activity n° 1 of the EMCDDA (Demand and demand reduction)**
- **and progressively in the priority area of activity n° 2 (National and community strategies and policies).**

The priority objectives of the EMCDDA for the 1998-2000 period are the following:

PRIORITY OBJECTIVES FOR 1998-2000

Consolidating and enhancing the achievements: Priority area n° 1
(Demand and demand reduction)

1. Consolidating and improving THE EPIDEMIOLOGICAL AND DEMAND REDUCTION INFORMATION SYSTEMS on the basis of agreed sets of core data

a) Current trends and patterns : monitoring traditional illicit drugs

Main Output:

- agreed lists of core data
- increased capacity and improved quality and accessibility of the information system on demand reduction activities of the EMCDDA.

b) New trends: setting up and developing an "Early warning system on new synthetic drugs"

Main Output:

- Operational mechanism for the implementation by the EMCDDA of the EU Joint action concerning the information exchange, risk assessment and the control of new synthetic drugs (O. J. L 167 - 25.06.1997).

2. Consolidating and enhancing THE REITOX NETWORK in accordance with the decisions taken by the Management Board of the EMCDDA

Main Output:

- clear definition of the role, contribution rights and duties of the main actors involved (EMCDDA, National focal points, Member states, EC focal point)
- simplified working methods and priorities (definition of the main gaps requiring further work, transparent co-financing system entailing a clear commitment by Member States, selected core-tasks and specific projects, including particularly new synthetic drugs)

3. Improving and developing RELIABLE AND COMPARABLE METHODS, DATA

SYSTEMS AND KEY-INDICATORS

Main Output:

- agreed methodology to reach these targets
- agreed set of reliable and comparable methods, data systems and 5 key-indicators *(treatment demand, drug-related deaths, mortality rates among drugs users, drug use prevalence in population surveys, estimates of addiction prevalence)*, compliance with which should be recommended by the EMCDDA.
- guidelines for evaluation of demand reduction interventions.
- appropriate early warning indicators on new synthetic drugs

4. Improving the quality of the ANNUAL REPORT ON THE STATE OF THE DRUGS PROBLEM in the EU, the visibility of the work of the EMCDDA and REITOX and the DISSEMINATION OF THE INFORMATION COLLECTED AND PRODUCED by the EMCDDA

Main Output:

- Simplified structure, better comparability and reliability of the information presented, enhanced readability, improved comparative analysis, focus on priority topics at EU level, recommendations to decision-makers.
- Improved process for the preparation/publication of the Report, in accordance with the decisions taken by the Management Board of the EMCDDA (contribution of the National focal points, earlier publication in the 11 official EU languages, evaluation process).
- Increased and better "presence" in the written and electronic media
- Increased production and dissemination of publications and information on current trends and patterns and on new trends, particularly in the field of new synthetic drugs.

5. Developing STRUCTURED CO-OPERATION WITH THE INTERNATIONAL PARTNERS OF THE EMCDDA and ensuring synergies and complementarity with the EU programmes and activities, avoiding any duplication of work

Main Output:

- Mechanism for the implementation by the EMCDDA of the EU Joint action on an "Early Warning system on new synthetic drugs".
- Structured mechanism for co-operation and exchange of information (especially in order to channel through the EMCDDA any request for "European data")
- Structured mechanism for co-ordination ensuring synergies and avoiding any duplication of work

Developing the achievements: Priority area n° 2
(National and Community strategies and policies)

6. Gradually developing tools and methodologies towards the COMPARISON OF INTERVENTIONS, LEGISLATIONS, STRATEGIES AND POLICIES IN THE EU (including cost effectiveness evaluation)

Main Output:

- Development of an easily accessible and comparable database on existing instruments, covering the field of new synthetic drugs.

The specific objectives aiming at the achievement of the above mentioned priority objectives and relating to the four fundamental tasks of the EMCDDA are set out in detail in annex with the respective implementing actions and the expected output.

2. BUDGETARY IMPLICATIONS

i. The consolidation and enhancement of the achievements of the first 3 year period (1995-1997) and the gradual development of new tools, as described in point 1.2 above, imply a **reinforcement of the EMCDDA's budget over the 3 coming years. In particular, the setting up from 1998 onward of the "Early warning system on new synthetic drugs" will require adequate resources** both in human and financial terms, at EMCDDA's level, as well as at National Focal Points level.

ii. In this context, **the amount of the financial resources to be allocated to the implementation of the present three-year work programme will be decided annually in the framework of the current procedure for the adoption of the budget of the EMCDDA,** taking into account the budgetary constraints affecting Community budget.

iii. **For 1998, the Preliminary Draft Budget (PDB) of the EMCDDA (amounting to 7.000.000 ECU** and adopted by its Management Board on 9-10 January 1997) represents a point of reference, even if it doesn't take into account the budgetary effect of the implementation by the EMCDDA of the EU Joint action on an "Early warning system on new synthetic drugs" (as this Joint action was adopted on 16th of June 1997 cf. O.J. L 167 - 25.06.1997).

This implementation will entail supplementary costs as it requires a significant development of the existing instruments and working methods as well as an increase in the technical working capacity of the Centre and of the REITOX network, in order to ensure a rapid collection, reporting and assessment of information on new synthetic drugs (rapid and specialised reporting and assessment system built on the existing REITOX structures and including specific mechanisms for central co-ordination, exchange of information with EDU and other relevant bodies, co-ordination and data collection at national and local level, risk assessment).

The global annual budgetary implication of this implementation can be estimated at ECU 1.500.000 and can be broken down as follows :

ESTIMATED ANNUAL COSTS OF THE EARLY WARNING SYSTEM ON NEW SYNTHETIC DRUGS

a) *Implication at EMCDDA level*

Central co-ordination (staff + technical and scientific support, co-operation with EDU and other relevant bodies)	ECU	125.000
Development of data collection and reporting instruments (studies, technical meetings)	ECU	175.000
Risk assessment (special high level expert meetings under the auspices of the Scientific Committee of the EMCDDA)	ECU	150.000
Reports, translation and dissemination of information	ECU	150.000
Subtotal a)	**ECU**	**600.000**
b) *Implication at national level: REITOX*		
National co-ordination (national co-ordinators and support x 15 MS)	ECU	750.000 (50.000 x 15)
Local data collection (support in 15 MS)	ECU	150.000 (10.000 x 15)
Subtotal b)	**ECU**	**900.000**
GENERAL TOTAL a)+b)	**ECU**	**1.500.000**

iv The resources required to carry out properly this task could be provided as follows:

1) **entirely by the annual budget of the EMCDDA** (the resources provided by the current preliminary draft budget for 1998 would have to be increased consequently);
2) **both by the annual budget of the EMCDDA and by the budget of the Member States,** in accordance with a co-financing scheme taking into account the participation required from Member States in the implementation of the above mentioned Joint action (taking into account that ECU 600.000, equivalent to 40 % of the total necessary resources, are required in order to cover costs at EMCDDA level, while ECU 900.000 are needed for co-ordination and data-collection at national and local level);

3) **by drawing on available funds of existing Community or other programmes** which cover the activities entailed by the implementation of the EU Joint action (particularly the Community programme on the prevention of drug dependence 1996-2000 which considers as a high priority the collection and dissemination of information and risk assessment in the field of synthetic drugs).

v In the case it is not possible to secure all the above mentioned necessary resources, taking into account the high priority given by the EU and its Member States to the implementation of the "Early warning system on new synthetic drugs", it will be necessary to implement a **"contingency-planning"**, which will necessarily affect the main components of the current allocation for operational expenditure of the EMCDDA (ECU 750.000 for support to REITOX national focal points, ECU 1.500.000 for studies and surveys relating to the epidemiological and demand reduction information systems, ECU 330.000 for the Annual Report on the state of the drugs phenomenon in the EU and other publications)

vi Finally, in view of the lack of resources, the EMCDDA should implement an **active policy of sales of its marketable products so as to self finance a part of its activities, particularly in the area of diffusion of the information and publications**. A feasibility study and "simulation" should be completed in 1997, so as to become operational at the start of the 2nd three-year work programme.

ANNEX

SECOND THREE-YEAR WORK PROGRAMME (1998 - 2000)

OBJECTIVES/ACTIONS/OUTPUT

Detailed version

A. COLLECTION AND ANALYSIS OF EXISTING DATA

1. Collecting, registering and analysing information

2. Carrying out surveys, preparatory studies, feasability studies, pilot projects: Organising meeting of experts and ad hoc working parties; setting up and making available scientific documentation and assisting in the promotion of information activities

3. Providing an organizational and technical system capable of supplying information on similar or complementary programmes/action pursued by the Member States

Specific Objectives 1998 - 2000	Action	Expected output
• Develop, manage and regularly update an integrated and comprehensive **epidemiological information system** on drugs	This involves: • design and implementation of linked databases to register information collected from national focal points, literature reviews, pilot projects, studies and other sources • regular updating of databases (bibliographical, statistics, research findings, sources, etc.) • extending geographical coverage to relevant third countries • checking content and quality • improving accessibility (including implementation of new technology, broadening linguistic cover) • monitoring new developments in information collection techniques and research methods. These tasks are time-consuming and involve systematic monitoring of different sources of information. In particular, more attention needs to be given to the quality of the information received before entering it into the system. The process of peer review will be used where possible.	Accessible integrated epidemiological information system of linked databases. The four main types of database are: • epidemiological data from National Reports and research studies • information sources and definitions (from Information Maps) • references and inventories (bibliography, researchers, research projects) • guidelines for epidemiological methods, research and data gathering instruments
• **Analyse and synthesise** existing epidemiological	• Analysis of epidemiological information provided by national focal points and other sources for the Annual	• Chapter for the Annual Report on the

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3. *Providing an organizational and technical system capable of supplying information on similar or complementary programmes/action pursued by the Member States*

Specific Objectives 1998 - 2000	Action	Expected output
information	Report on the state of the drug problem in the European Union • Reviews and analyses of research and other data on specific topics that arise as priorities	state of the drug problem in the European Union • Reviews of specific topics
• **Improve methods for analysing and using** existing epidemiological data	It is necessary to go beyond description to deal with key questions of Why? and How? This involves the following specific lines of work: • **Early warning indicators of new trends**. This will involve extensive networking, establishing rapid reporting mechanisms, collecting and analysing quantitative and qualitative data, and promoting rapid investigations to help assess possible risks associated with new drugs or new trends • Inclusion of **qualitative researchers and research studies** in order to understand better the meaning of statistical data and their social context, and to interpret information on emerging trends so that is more relevant and useful to planners and service providers.	Specific outputs expected are: • Early warning system on synthetic drugs in close collaboration with REITOX network, EDU and other partners. • Regular reports on new trends • A network of qualitative researchers producing periodic analytic reports on specific topics (e.g. possible reasons for new trends amongst youth or differences in risk behaviours by drug injectors)
• **Improve methods for analysing and using** existing epidemiological data **(continued)**	• **Analysis of processes of change and projection of future trends** through in-depth analyses of existing data, including secondary and meta-analysis and the	• Models that can be used to 'map' the geographical and temporal diffusion of drug use within and between countries

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Specific Objectives 1998 - 2000	Action	Expected output
	development of dynamic models that combine different indicators and sources of data to give a more dynamic and multi-dimensional picture of drug use patterns and trends over time.	• Other outputs depend on the results of a feasibility study currently in progress and on resources, but could include the assessment of costs linked to drug use and health consequences, models to project trends from multiple indicators, or 'scenario analyses' to assess the possible impact of different policies.
	• **Analysis of social and socio-economic factors and consequences linked to drug use and drug addiction.** This is an important area which would be approached initially through a feasibility study to identify priority topics on which adequate data is available, followed by studies focusing on more specific issues.	• Report of feasibility study followed by reports on specific topics concerning social and socio-economic factors identified in consultation with partners and experts, including the Scientific Committee.
	• Analysis of **hypotheses about differences and changes in prevalence and consequences** in different parts of Europe. This would also be approached through an initial feasibility study followed by specific studies.	• As with the previous action, specific outputs would depend on the result of a feasibility study and consultation with partners and scientific experts.
• **Improve methods for analysing and using** existing epidemiological data **(continued)**	• Study of **risk and protective factors for drug use and drug addiction**. This is an important topic on which there is a considerable amount of epidemiological data that should be analysed in more depth	• Report from expert review of available studies and analyses of research findings
	• Analysis of **longitudinal studies**, including "natural	• Review of results of longitudinal studies

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Specific Objectives 1998 - 2000	Action	Expected output
	history" methods for studying the evolution of drug users' lives over time and controlled trials for assessing the impact of different events on drug users or drug addicts in a more rigorous scientific fashion.	and controlled trials and their implications for aetiological hypotheses and the impact of interventions.
	• Epidemiological analyses of **indicators of drug demand and of the availability of drugs** based on law enforcement sources to add an essential dimension to the global overview of the drug situation. These include data on police arrests, drug users in the penal system, and indicators of the availability of drugs such as the perceived availability, seizures and price/purity.	• Technical reports on the value and limitations of using existing data from law enforcement sources as epidemiological indicators. Available data will be used to illustrate trends, but extensive analysis will not be undertaken.
	Work on the first three lines has already started. The others follow naturally from the development of the overall work programme in epidemiology and progressively improve the capacity of the programme to give a global overview and to provide information that is relevant to the partners and customers of the EMCDDA.	The general outcome will be a more global analysis of the drug situation and of factors associated with different patterns of use, trends and consequences, as well as methods to increase the value of data to professionals and policy makers when they wish to plan or evaluate their policies and actions.
• **Improve methods for analysing and using** existing epidemiological data **(continued)**	One other activity that would need relatively substantial additional resources to implement concerns a structured analysis of **urban drug-related crime**, following a pilot study carried out in 1996. The proposals resulting from that preliminary work would entail further work to develop concrete activities.	• Clarification of the drugs-crime relationship and the implications for local multi-sector strategies • Improved exchange of experience and information on problems and responses to drug-related crime

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Specific Objectives 1998 - 2000	Action	Expected output
• Establish an **Information System on Demand Reduction Activities** as a major source of information to policy and decision makers, professionals and practitioners.	• The REITOX Focal Points will be requested to enter projects into the Information System as a **core task**. Information on demand reduction activities are often local or regional, or carried out by NGOs. The Focal Points will be given assistance to build up **networks** to ameliorate the information flow. The REITOX Focal Points will receive **training** in developing quality criteria for information collection and in managing the Information System.	• A database, available on the **Internet**, containing at least 1000 high quality, operational demand reduction programmes by the year 2000.
	• Further development work to expand and optimise the system in terms of quality and quantity: optimise **entering procedures** and **accessibility**, provide linguistic facilitation by continuing the work on **linguistic equivalents,** systematic analyses of **specific intervention areas** (settings, target groups, methodologies) and of activities and practises evolving from or responding to **new trends in drug use** (new drugs, new patterns of use, new consumer groups).	• A **workable**, easily **accessible** and **flexible** Information System on Demand Reduction Activities. • A set of **definitions** and **linguistic equivalents** of demand reduction terms in different EU languages • Studies, expert meetings, reports
… Information System on Demand Reduction activities	• **Quantitative and qualitative analysis** of the	• Quantitative and qualitative **analyses** of

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Specific Objectives 1998 - 2000	Action	Expected output
(continued) ...	information collected, e.g. regarding different patterns of activities in different countries, assessment of quality criteria such as evaluation, theoretical developments, etc. Routine data, e.g. information on types of programmes, target groups, etc., will be analysed on a continuous basis. More profound, qualitative analyses can be conducted according to specific information needs, e.g. on new approaches or socio-cultural aspects, as well as exploratory analyses aiming at hypothesis testing and theory building.	the information collected through the Information System.
• Establish an **Inventory of training facilities** in drug demand reduction in the EU Member States. • Improve the **knowledge** and **skills** of professionals in the field of demand reduction	• Systematic collection of **different types of training available in Europe**, encompassing basic and vocational training, further training, in-service training etc., and including training using new technologies, e.g. distance training and interactive, electronic training facilities. The information collected will give information on accessibility, curriculum, obtainable qualification, training material, etc. Assessment of evaluation of training quality criteria, possibly in cooperation with other international organisations (Pompidou Group, WHO).	• An inventory, provided in a database format on the **Internet**, to serve potential students and trainees to choose appropriate training facilities in all EU Member States. • An opportunity for networking and exchange of information among persons in charge of training at different levels, which will facilitate communication and cooperation.
• Define and classify **roles, structures and cooperation of drug related services**.	• Overview of the specific configuration, objectives and approaches, at local, regional and national levels, of the health, social, educational and criminal justice sectors,	• Definition and classification of the concepts and processes behind cooperation and interaction practises and patterns between drug demand reduction services at

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Specific Objectives 1998 - 2000	Action	Expected output
	NGOs and others,as well as the interplay with services offered to drug users and groups at risk by non-drug specific, generic services such as general health services, social services, unemployment services, the educational system, family and youth services, or (non-specialised) NGOs. The interplay between all these actors must be seen in a holistic way. Drug users (or potential drug users) may be influenced by or in contact with these different actors or services at different points in time and under different circumstances.	different levels.
	• Development of methods and criteria to analyse and compare the implications of different cooperation patters from health-related, socio-economic, and public safety points of view.	• Methods and criteria to compare the implications of different drug service cooperation patters.
	• Analysis of implications for demand reduction strategies and policies and the influence on efficacy and efficiency as well as costs.	• Analyses of implications of different drug services cooperation patterns.
• Collecting with Europol Drugs Unit (EDU) information on the production, traffic and use of new synthetic drugs and communicating this information to EDU, to Europol National Unit, to the representatives of the Member States in the REITOX network, to the Commission and	• Creation of a central mechanism of co-ordination at the EMCDDA • Mechanism for co-operation and exchange of information with EDU and other relevant European bodies and networks	• Mechanism for rapid exchange of information on new synthetic drugs

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Specific Objectives 1998 - 2000	Action	Expected output
to the European Agency for the Evaluation of Medical Products (cf. article 3 of the EU Joint action)	• Instruments and mechanisms for data collection, data exchange, analysis and dissemination • Reporting system • Creation of a mechanism for national co-ordination and data collection and dissemination, building on REITOX network	
• Assessing the possible risks, including the health and the social risks, caused by the use of - and traffic in - new synthetic drugs and possible consequences of prohibition and reporting the results of the risk assessment (cf. article 4 of the EU Joint action)	• Preparation of the meetings under the auspices of the Scientific Committee of the EMCDDA for the carrying out of risk assessment	• Mechanism for the assessment of the risks caused by new synthetic drugs in order to permit the application of the measures of control on psychotropic substances, applicable in the Member states, equally to new synthetic drugs.

A. COLLECTION AND ANALYSIS OF EXISTING DATA

4. Establishing and coordinating the REITOX network.

5. Facilitating exchanges of information between decision-makers, researchers specialists and those involved in combating drugs in governmental and non-governmental organisations

Special Objectives 1998 - 2000	Action	Expected output
• Quality improvement of EMCDDA Annual Report	• Further implementation of new reporting structures & standards of Information Map and National Reports • Developing quality procedures at first level of data collection (= original sources) and at the level of the reported information to the Centre • Further development of computing and telematics infrastructure	• Higher quality Annual Reports and Highlights • Amelioration of the dissemination infrastructure through REITOX
• Establish an information System on Demand Reduction activities	• Collect and enter information on demand reduction activities into the Information System as a core REITOX task • Promote the information System nationally	• A database, available on the Internet, containing at least 1.000 entities by the year 2000
• Accomplishment REITOX tasks under best circumstances	• Definition of terms of reference for REITOX National Focal Points and pinpoint of financial & human needs • Designation of conditions to ensure REITOX activities on long-term basis in each Member State • Audit of co-financing system of 15 *NFP*'s will be provided to MB at each end of the year	• Accomplishment of REITOX tasks respecting national conditions and by meeting the Centre's requirements • Conditions fitting with flexibility of REITOX network to best possible cost/benefit ratio
• Execution of specialised tasks in relation to 2nd three-year work programme	• Integration of REITOX in the settlement of an early warning system on synthetic drugs • Reinforcement of general capacity of REITOX *NFP*'s by providing training, technical and organisational support • Development of contractual relations between *NFP*'s and specialised centres • Implementation of agreed standards for comparable data gathering	• Valorisation of REITOX as network capable of centralising specialised collecting systems • REITOX linked with specialised centres & information systems of international or European bodies co-operating with the Centre • Improved comparability of core data
• Contribute to avoiding duplication of work	• Integration of data from MS & Community programmes + promotion special mechanisms + systematic participation in co-ordination structures (National & EU level)	• Greater uniformity of measurements methods used by MS and Community + systematic reduction of duplication of work
• Availability and further development of **information**	• Evaluation of the feasibility study for the creation of a	• Access to comparable information on

A. COLLECTION AND ANALYSIS OF EXISTING DATA

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Special Objectives 1998 - 2000	Action	Expected output
systems as major resources for researchers, practitioners, policy makers and the general public **(continued)**	**legal database**, and, if appropriate, conception, set-up and management of the system	drugs legal texts, case-law and circulars in the EU Member States' juridical texts, in international agreements and in the legislation of third countries
	• Development of an **Information System on Drug-related Urban Crime** based on European networks of cities, researchers and other actors • Development of already existing data bases on national and EU strategies and actions in the field of drugs, including new synthetic drugs	• Availability of information on the state and the development of the drug-crime problem and responses in European major cities • Easily accessible core of comparable data on those subjects
• **Promotion of evaluation** to assess and demonstrate **evidence of effectiveness** of different types of demand reduction and harm reduction activities, including cost-benefit and cost-effectiveness estimates	• Building on the work related to process and outcome evaluation, the EMCDDA will investigate further into scientific measurements of the effects of demand reduction strategies and policies by using health and socio-economic research methods	• Criteria for the comparison of the efficacy and effectiveness of strategies and policies

B. IMPROVEMENT OF DATA - COMPARISON METHODS

6. *Establishing indicators and common criteria of a non-binding nature, compliance with which may be recommended by the Center*

7. *Facilitating and structuring excahnge of information in terms of both quality and quantity (databases)*

Special Objectives 1998 - 2000	Action	Expected output
• Promote the adoption and implementation of instruments and standards for 5 **key epidemiological indicators** developed by the EMCDDA and its REITOX partners in the first triennial programme.	Promoting instruments and standards for collecting core data on key indicators will focus on **health consequences**. This will entail continuing work with the national focal points to consolidate and improve the comparability and quality of key epidemiological indicators and to formulate recommendations for the implementation of these indicators at national level. The specific actions are as follows.	The expected output from the specific actions is as follows.
	• Actively promote the implementation of the **treatment demand** reporting protocol, including training in its application and standards, and evaluation of its implementation and of the quality of the results. This will be done in co-operation with the Pompidou Group.	• Instruments and standards on treatment demand indicator for adoption by Member States. • Regular, standardised reporting from, if possible, all Member States. • Comparative analysis of European patterns of treatment demand.
	• Continue to develop and, when feasible, promote standards for core data on **drug-related deaths** (routine statistics) taking account of work in Eurostat and other international organisations, notably WHO	• As far as possible, instruments and standards for data on drug-related deaths for adoption by Member States. • Improved and more comparable reporting of data on drug-related deaths from Member States
	• Continue to develop standard methodology for cohort studies using general population death registries to measure **mortality rates and causes of death among drug users**.	• Implementation of methodology and standard reporting of mortality rates among drug users in as many Member States as possible.
• Develop appropriate methods and instruments for the implementation of the EU Joint action on an "Early	• Establishment of rapid reporting and risk assessment mechanism	• Appropriate early warning indicators on new synthetic drugs

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Special Objectives 1998 - 2000	Action	Expected output
warning system on new synthetic drugs"		
• Consolidate structured instruments for exchanging core information on sources of epidemiological data (**Information Map**) and on the drug situation in Member States (structure for **National Reports**)	• This will involve continuing close co-operation with the REITOX network of focal points, and increasing co-operation with relevant third countries, especially Norway and PHARE will be important. This includes continuing work on **definitions** and **linguistic equivalents** of terms used in the Information Map and National Report structure.	• Improved comparability in reporting of information by national focal points • Ongoing contribution to the epidemiology information system described in task A.
• Consolidate the methodological work and pilot studies to improve the comparability and quality of data from epidemiological research on the **prevalence of drug use** and of problematic patterns of use ('addiction').	The actions aim to extend the results of the pilot work on measuring prevalence to all EU countries and to third countries who co-operate with the EMCDDA and who are able to apply the same standards. This will involve continuing work on the following. • **Prevalence and characteristics of drug use and drug users in the general population (population surveys).** This includes: (a) consolidation of a core data set and standardised framework for analysing and reporting results. The aim is to promote, on a step by step basis, the inclusion of these minimum standards into general population surveys carried out in Member States and relevant third countries in the future, and (b) methodological studies to assess the differences in results that arise from different methods of data collection and sampling and from different cultural contexts and social attitudes to drugs.	• Guidelines for general population surveys, including core data set, definitions, analysis to produce standard output tables for core data • More comparable output from, and synthesis of, surveys in Member States that are able to incorporate some or all of the guidelines. • Methodological report on methods and sampling and implications for the comparability of surveys.
• Consolidate the methodological work and pilot studies	• **Estimates of the prevalence of problematic drug use** ('addiction'). This includes:	• More reliable, well-defined and comparable national estimates of the prevalence of problematic drug use

B. IMPROVEMENT OF DATA - COMPARISON METHODS

6. Establishing indicators and common criteria of a non-binding nature, compliance with which may be recommended by the Center

7. Facilitating and structuring excahnge of information in terms of both quality and quantity (databases)

Special Objectives 1998 - 2000	Action	Expected output
to improve the comparability and quality of data from epidemiological research on the **prevalence** of drug use and of problematic patterns of use ('addiction'). **(continued)**	(a) continuing, on a step by step basis, to improve the availability, comparability and quality **of national estimates** of the prevalence of 'addiction' in all Member States and relevant third countries, and (b) development and dissemination of methodologies and guidelines for **local estimates** of 'addiction'.	• Practical handbook for prevalence studies • More comparable local estimates in those cities applying the methods.
• Improve the comparability of **other key indicators of the demand for drugs** and its consequences	In the area of health consequences, apart from the key indicators on which work is more advanced (treatment demand, drug-related deaths, mortality - see above) the aim is to develop the preliminary work started on other indicators in the first triennial programme. • **Drug-related infectious diseases** (notably HIV/AIDS and hepatitis B and C) taking account of work carried out by other European and international groups and organisations Other priority health indicators identified in the next three years could be added (depending on resources).	• Proposals for filling information gaps and for improving the comparability of data on drug-related infectious diseases and their value as indicators.
• Improve the comparability of **other key indicators of the demand for drugs** and its consequences	It is important to improve the comparability of indicators based on existing data in areas other than health consequences. These indicators, which refer to important areas of the demand for drugs, concern existing data that is described in task A above. It is important to start some methodological work to assess and improve the quality and comparability of the data. These include the following. • Indicators of the social and economic correlates and	• Reports on availability, comparability,

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(continued)	consequences of drug use and drug addiction. • Epidemiological indicators of drug demand and drug availability at user level from law enforcement sources • Methodological studies to assess the quality of early warning indicators. These complement the work described in Section A (Collection and analysis of exiting data) by providing the opportunity to evaluate in more systematic fashion the reliability and comparability of the data collected by the EMCDDA. The **promotion of training in epidemiology** and in particular in the application of the instruments and standards developed will be necessary to improve their quality and comparability when they are implemented.	value and limitations of these indicators, and proposals for improving their comparability and quality. The general outcome of the actions described above will be a broadening of the range of methods, instruments and standards available in Europe for collecting comparable, good quality data on a wider range of key indicators relevant to drug demand. The results will be of value both to the EMCDDA regarding its task of improving data collection methods, and to REITOX and other partners in terms of facilitating information collection, exchange and comparison.

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Special Objectives 1998 - 2000	Action	Expected output
• **Promotion of scientific evaluation** of demand reduction activities. Demonstrate evidence of effectiveness of demand reduction activities. • Develop and disseminate **know-how** to professionals.	• Assess and develop process and outcome evaluation **criteria**, **methodologies**, and **instruments** in different fields of demand reduction and harm reduction, notably prevention and assistance to drug users, and responses to new trends in drug use. Attention will be given to aspects such as management, work satisfaction and work place climate of drug related services and their influence on the effectiveness of programmes. Wherever possible, the highest scientific standards will be implemented, e.g. random controlled trials and meta-analyses. Investigation into cost-benefit and cost-effectiveness estimates. Attempt to establish criteria for the comparison of the efficacy of measures and strategies and combinations thereof, considering methodological, organisational and structural aspects.	• **Guidelines** for evaluation of demand reduction activities. • **Evaluation Instrument Bank** • Feasibility studies
	• Co-operation with WHO, COST A6, UNDCP, the Pompidou Group and other international networks in order to complement the work of each other and avoid duplication of effort.	• Mechanisms for co-operation
	• Organise conferences on evaluation of **treatment**, evaluation of **outreach work**, etc.	• **Conferences** and seminars on evaluation of treatment, outreach work, etc. • **Monographs** and other publications
	• Coordinate the implementation of the Guidelines for Evaluation of Drug Prevention. Organise a **second conference on evaluation of drug prevention**	• Second **conference** on evaluation of drug prevention • Second **monograph** on evaluation of drug prevention

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Special Objectives 1998 - 2000	Action	Expected output
• **Promote qualitative research** in the field of demand reduction to better understand the psychological, sociological, socio-economic, and cultural/anthropological mechanisms operating in the context of programmes and services in different settings and cultures, aiming at more targeted interventions and better evaluation. • Improve the **knowledge** of professionals and promoting their **skills**	• Establish an **overview** of existing qualitative research, **facilitating exchange** between researchers, and **promoting collaborative studies**. The task will wherever feasible be coordinated with the work of the epidemiology department in order to ensure synergy of the different approaches, and help in strategy finding.	• **Bibliography** of qualitative research in drug demand reduction interventions. • Set the stage for larger research projects to be considered within the **European Commission Framework Programme for Research** • Seminars and expert studies

C. DISSEMINATION OF DATA

8. Making the information produced available to the Community, the Member States and competent organisations

9. Ensuring wide dissemination of work done in Member States and by the Community and, where appropriate, by non-Community countries or international organisations

10. Ensuring wide dissemination of reliable non-confidential data
Publishing a yearly report on the state of the drugs problem

Special Objectives 1998 - 2000	Action	Expected output
• Production and publication of the EMCDDA's **Annual Report on the State of the Drugs Problem in the European Union** • Production of other **publications and materials**	• Continuation of **existing series** of publications and development of **new series** (on paper, CD-ROM or other multi-media support) • Publication of **articles** on the EMCDDA and its activities externally in general and scientific journals, etc • Dissemination of information via the **Internet:** maintenance, permanent updating and further development of the EMCDDA web-site, including its on-line discussion/communication forums	• **Yearly publication** of the Annual Report on the State of the Drugs Problem in the EU and of the General Report of Activities of the EMCDDA • **Bi-monthly** publication of the newsletter DrugNet Europe • **Frequent publication** of Scientific Monographs, booklets on studies and conferences, factsheets etc. as well as of articles and ad hoc materials • **Increased visibility** of EMCDDA and REITOX activities through the EMCDDA web-site

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Special Objectives 1998 - 2000	Action	Expected output
• **Broader visibility** for the EMCDDA and REITOX among media professionals and the general public (in the European Union and beyond)	**Maintenance and further enlargement of contacts** with media professionals and media groups, the scientific community and the general public: • Targeting professionals from the print and electronic media and raising awareness on the EMCDDA and the drugs issue in general. • Making the **press launch of the Annual Report a tradition** by presenting it at the same time of the year and using common presentation approaches. • Assurance of the EMCDDA's visibility in **drugs and media campaigns** at European, national and international level. • **Maintenance and further development of media contacts** with the press units of the European institutions, the press and information divisions of UNDCP, the Pompidou Group, WHO, Europol, Interpol, the World Customs Organisation and other International Organisations.	• High level of **presence** of the EMCDDA's activities and work results in the written and electronic **media** • **EMCDDA** to be considered as **"the" EU-information body** competent in the field of Drugs and Drug Addiction • Yearly press launch of the **Annual Report on the State of the Drugs Problem in the EU** and the General Report of Activities • **Press launches** of the key EMCDDA publications
• Availability and functioning of a **high quality**	• Installation and further development of a **telematic**	• Secure messaging and document exchange

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Special Objectives 1998 - 2000	Action	Expected output
infrastructure for the dissemination and exchange of information	**network** linking the EMCDDA and REITOX with its partners and the outside world (IDA-project)	systems for all partners • Additional facilities for the partners using the telematic network on a daily basis for their technical work, such as facilities for file sharing, intensive use of databases and data dissemination.
	• Identification and use of high quality and cost-effective **dissemination channels**	• High quality and low cost dissemination
	• Installation of a **distributed documentary database** (virtual library) by linking existing National databases to common WWW search and consulting systems	• Access through the EMCDDA web-site to information about existing documents, independently of their physical locations in different National documentation centres

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Special Objectives 1998 - 2000	Action	Expected output
• Availability and further development of **information systems** as major resources for researchers, practitioners, policy makers and the general public	• Conception, installation and management of an **Epidemiological Information System**	**Access to information** on • data sources (bibliography, researchers, research projects) • on statistical and other data on drugs and drug addiction • epidemiological methods and research instruments **Production of reviews and analysis** and monitoring of new developments in information collection and research techniques • **Networking** between researchers, other European Institutions and international organisations concerned with epidemiological research and data gathering
	Implementation **by the EMCDDA** of the "Joint Action concerning the information exchange, risk assessment and the control of new synthetic drugs". (Council Decision: 16 June 1997): Installation of an **Early warning system for synthetic drugs** • Identification and Development of a network of "key informants" in close cooperation with REITOX and other partners • Establishment of a mechanism for rapid transmission, analysis and assessment of information	• Rapid exchange and analysis of information on new synthetic drugs • Assessment of their risks and dissemination of information
• Availability and further development of **information systems** as major resources for researchers, practitioners, policy makers and the general public **(continued)**	• Management and further content-related, technological and linguistic development of the **Information System on Demand Reduction activities**	• Dissemination of information on high quality demand reduction activities, covering prevention, outreach work,

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Special Objectives 1998 - 2000	Action	Expected output
		treatment, rehabilitation, harm reduction activities etc., in different settings and for different target groups • Networking between actors working in the field and formation of partnerships, e.g. for common proposals to the European Commission Action Programme for the Prevention of Drug Dependence
	• Management and further development of the **Inventory of training programmes** in demand reduction	• Database, available on the Internet, containing information on training facilities in demand reduction in the EU • Availability for potential students and trainees of appropriate information on training facilities in the EU Member States • Networking and exchange of experience between trainers and institutions offering training

D. COOPERATION WITH EUROPEAN AND INTERNATIONAL BODIES AND ORGANISATION AND WITH NON-COMMUNITY COUNTRIES

11. Contributing to improving coordination between national and Community action in the areas of activity of EMCDDA problem

12. Promoting the incorporation of data gathered in the Member States and emanating from the Community into international monitoring and drug-control programmes particularly those established by the UNO and its agencies

13. Cooperating actively with international organisation and other, particularly European, governmental and non-governmental agencies competent in the sector of drugs (especially Pompidou Group, UNDCP, WHO, WCO, INTERPOL, EUROPOL)

Special Objectives 1998 - 2000	Action	Expected output
• **Contributing to the definition of an anti-drugs strategy** at the EU level	• Full participation and contribution of the EMCDDA to the definition and to the implementation of the EU strategies and in particular to the following specific actions and programmes: ■ EU Joint action on an "Early warning system on new synthetic drugs" ■ EU "Global action plan" ■ EC action programme on prevention of drug dependence ■ EC action programme on health monitoring ■ EC RTD programmes ■ EC IDA programme ■ Phare Multi-country drug programme	• Mechanism for the implementation by the EMCDDA of the "Early warning system on new synthetic drgus" • Structured synergies and mechanisms of co-ordination ensuring complementarity and avoiding any duplication of work. • Increased inputs into definition of proposals for legislative and political measures at EU level
• **Strengthening co-operation with the main International organisations** (Pompidou Group, UNDCP, WHO, WCO, INTERPOL and EUROPOL)	• Development of a close permanent and complementary co-operation • Coordinate and simplify reporting to international organisations • Implement collaborative projects in order to avoid duplication of efforts	• Structured mechanisms for co-operation and exchange of information. • Memorandum of understanding between the EMCDDA and each of the six main international partner organisations • Co-ordinated and simplified procedures and data at national level to be forwarded to partners international organisations • Collaborative projects
• **Developing co-operation with Third countries**	• Progressive participation of Norway in the activities of	• Full participation in the EMCDDA

D. COOPERATION WITH EUROPEAN AND INTERNATIONAL BODIES AND ORGANISATION AND WITH NON-COMMUNITY COUNTRIES

11. *Contributing to improving coordination between national and Community action in the areas of activity of EMCDDA problem*

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13. *Cooperating actively with international organisation and other, particularly European, governmental and non-governmental agencies competent in the sector of drugs (especially Pompidou Group, UNDCP, WHO, WCO, INTERPOL, EUROPOL)*

Special Objectives 1998 - 2000	Action	Expected output
	the EMCDDA (particularly in the REITOX core tasks and specific projects) and contribution to the output of the EMCDDA (Annual Report on the state of the Drugs Problem)	activities
	• Further involvement of the CEECs in the activities of the EMCDDA and REITOX (concerted participation to the implementation of the work programme) in the framework of the PHARE multi-country drug programme	• Common methodology of work • Contribution to the main outputs of the EMCDDA • Closer co-operation with partner countries particularly in the perspective of the possible EU enlargement
	• Mutual information exchange	• Structural links between the REITOX network and the PHARE Information system on drugs
• **Developing co-operation with the other partners of the EMCDDA**	• Exchange of information, experiences and methodologies	• Increased participation in international co-operation schemes, exchanges of experiences and methodologies with other key regions (Mediterranean, Latin America …) and countries (USA, …) and with European and international NGO's.