



European Monitoring Centre  
for Drugs and Drug Addiction

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# **General Report of Activities**

Key achievements and governance:  
a year in review

2014





European Monitoring Centre  
for Drugs and Drug Addiction

# | General | Report of | Activities

INCLUDING THE ANNUAL ACTIVITY REPORT  
OF THE EMCDDA'S AUTHORISING OFFICER

2014

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(\*) Available online at: [emcdda.europa.eu/publications/gra/2014](http://emcdda.europa.eu/publications/gra/2014)





## | Foreword

I am pleased to introduce the 20th *General Report of Activities* of the European Monitoring Centre for Drugs and Drug Addiction, which provides an account of the EMCDDA's activities and accomplishments in 2014.

The EMCDDA's mission is to provide the European Union (EU) and its Member States with factual, objective, reliable and comparable information at European level on drugs, drug addiction and their consequences, and a solid evidence base to support the drug policies of Member States.

A key tool to achieve these objectives is the European information network on drugs and drug addiction (Reitox). Reitox consists of one focal point in each Member State, Norway and Turkey, and was established by the EMCDDA about 20 years ago. This network allows the Centre to collect and analyse information on drugs and drug addiction, as well as on policies and solutions applied, bringing together experience and expertise from different sectors — health, justice, law enforcement — and from all EU countries. This places the EMCDDA in a unique position to advise institutions, governments and non-governmental organisations in the EU and around the world about the effectiveness and unintended consequences of various approaches to the drugs problem. Basing its analyses on scientific evidence and reliable data, the EMCDDA plays a key role in improving understanding of the drug phenomenon. The agency also makes an essential contribution to strengthening the capacity of non-EU countries to monitor the drug situation. The EMCDDA provides added value through its ability to support sound decision-making and by putting scientific evidence at the heart of policymaking.

During 2014, the second year of the EMCDDA's three-year strategy and work programme for 2013–15, the EMCDDA launched the 2014 edition of its flagship publication, the *European Drug Report* (EDR), at a press conference at the EMCDDA headquarters on 27 May. The report provides an annual overview of the European drug situation. It was subsequently presented by the Director to a meeting of the Justice and Home Affairs ministers at the Council of the EU on 5 June, following an invitation from the Greek Presidency, and to the Committee on Civil Liberties, Justice and Home Affairs of the European Parliament on 25 September. The EDR was widely disseminated, including through presentations in various Member States.

In 2014, the EMCDDA faced, for the first time since the agency was established in 1993, a cut to its EU subsidy, of 5 %. At the same time, as a result of developments in the drug phenomenon, work in various areas, and especially on the implementation of the EU Early Warning System on new drugs, increased significantly. The EMCDDA has nevertheless

managed to carry out the actions set out in its founding regulation and to continue providing support to the EU institutions and Member States in their various activities in the drugs field.

I would like to express my gratitude to all my colleagues on the Management Board for their fruitful cooperation. In December 2014, the EMCDDA welcomed representatives from Turkey onto the Board (as full members, albeit without the right to vote) for the first time, as the Agreement between the European Community and the Republic of Turkey on the participation of Turkey in the work of the EMCDDA entered into force on 1 June 2014.

I would also like to sincerely thank the Chair and members of the new Scientific Committee, appointed for the period 2014–16, for their work and commitment.

My special thanks also go to Wolfgang Götz, Director, and the staff of the agency, as well as to the heads of the Reitox national focal points and their staff for their dedication and expertise, which helped us to achieve the results presented here despite last year's challenges.

**João Goulão**

Chairman of the EMCDDA Management Board



## Introduction

In 2014, some positive developments in the evolution of the drug phenomenon emerged. However, our monitoring systems had been warning us for a few years that the threats posed to Europe by the use of drugs are becoming increasingly diverse and disturbing, and 2014 brought confirmation of this.

In this context, more than ever, the agency played a key role in supporting sound decision-making at European Union (EU) level. This was most evident in the area of new drugs, where upwards trends in both the number of new psychoactive substances identified and their associated harms manifested themselves fully.

The EU institutions reacted promptly in response to the evidence produced by the EMCDDA and its Scientific Committee, and four new substances were subjected to control measures across the EU. The decision was made in September by the Council of the EU, based on a recommendation from the European Commission that was informed by risk assessment reports submitted by the EMCDDA. This was the ultimate outcome of a complex process which has at its heart the Early Warning System on new drugs managed by the EMCDDA in close cooperation with Europol and the European information network on drugs and drug addiction (Reitox) under the terms of Council Decision 2005/387/JHA.

Threats to EU citizens were not posed only by new drugs. The EMCDDA, jointly with another EU partner, the European Centre for Disease Prevention and Control, carried out a mission to Latvia, following a request for support from the country's government. The two agencies provided scientific advice to national experts on key actions to be taken in order to strengthen national services that were challenged by high levels of HIV infection among injecting drug users.

Further evidence for decision-making and action was provided by our 2014 *European Drug Report* package as well as by the impressive number of other scientific publications which were released during the year in all relevant areas, including health consequences, treatment, policy, public expenditure and emerging trends. A rich collection of reviews on the effectiveness of interventions was provided by our revamped Best practice portal, which was launched in October and which we will continue to improve in the years to come.

As our continuously growing reputation brought an increasing number of requests, during the year we made a major effort to disseminate our knowledge also through ongoing provision of input to our stakeholders and partners, by providing training and capacity-building activities in Member States and third countries, as well as by means of presentations at some key external events and at our headquarters, where experts from all over Europe and beyond gathered for our technical meetings, and where other guests, including policymakers, academics, professionals and journalists, visited us.

In an unfortunate coincidence, however, while our workload increased significantly during the year, our resources decreased. This was the consequence of a reduction of some 5 % in the EU subsidy received by the EMCDDA in 2014, the first year marked by a budget cut in the history of the agency. The effects that this significant resource shortage might have on the Centre were anticipated, and a complex network of measures was put in place by the second half of 2013; however, this could not fully mitigate the impact of the budget cut, especially in the context of the huge burden placed on the agency by the alarming evolution in new drugs, which is one of the key priority areas of the EMCDDA. There was,

therefore, a need to shift resources from other areas, which, of course, had a negative effect on the overall implementation rate of the annual work programme.

Nevertheless, we managed to fulfil our legal obligations and achieve our core objectives. This was facilitated by the implementation of a prioritisation exercise with regard to the activities in the annual work programme.

Furthermore, we were supported, as in every year, by our partners and networks, without which our work would not be possible. This is particularly true of our main partners in the Member States, the Reitox national focal points. In a joint effort, in 2014 we finalised the revision of the national reporting package, completing a large-scale project which started in 2012. This will result, we hope, in a more efficient reporting system, one which is better suited to modern European drug monitoring.

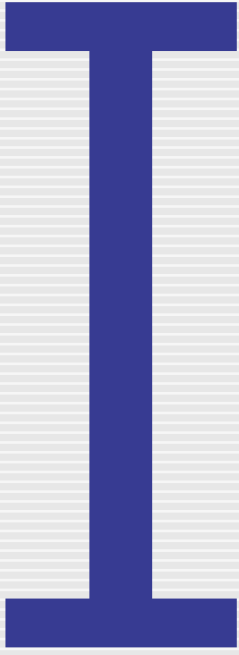
I would like to extend my gratitude to the members of the two statutory bodies of the EMCDDA, the Management Board and the Scientific Committee, for their ongoing guidance and support.

As always, my thanks go also to my staff, who, despite the challenges faced during the year, made possible the remarkable achievements which are presented to you in this report.

**Wolfgang Götz**

Director





# PART I

## Report of activities: key achievements and governance

CHAPTER 1

**Management Board's analysis and  
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the drugs problem in Europe**

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# CHAPTER 1

## Management Board's analysis and assessment of the Authorising Officer's (Director's) *General Report of Activities* for the financial year 2014

The Management Board has analysed and assessed the Authorising Officer's (Director's) *General Report of Activities* for the financial year 2014.

The Management Board appreciates the results achieved by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and notes in particular the following.

### On the content of the report

The EMCDDA made significant progress in the implementation of its work programme for most planned activities. Of particular note are the Centre's achievements in the following areas:

- Data collection, analysis and quality assurance: in May 2014, the EMCDDA presented its annual overview of the European drug situation, the *European Drug Report* (EDR), together with a multimedia package. In terms of data collection tools and processes, a key development during the year was the completion of the revision of the national reporting system, which marked the end of an extensive EMCDDA–European information network on drugs and drug addiction (Reitox) joint project. The Board adopted the EMCDDA Internal Statistics Code of Practice, a reference document aimed at strengthening the quality assurance framework for data collection, analysis and reporting.
- Key epidemiological indicators: the focus in 2014 was on enhancing analysis and network development, and methodological work was also carried out to underpin this core area of business. Among other activities, the EMCDDA published the first common questionnaire on drug use among prisoners at European level. Activities were also undertaken to ensure closer collaboration between the Centre and the European School Survey Project on Alcohol and Other Drugs (ESPAD). The EMCDDA hosted the kick-off meeting of the Joint Action on Reducing Alcohol-Related Harm (RARHA) project, funded by the European Commission, in which the agency is also a collaborating partner. The new concept for key epidemiological indicators annual expert meetings, which was initiated in 2013, was further improved in 2014.

- Demand reduction responses: two of the EDR's 'Perspectives on drugs' (POD) analyses, on drug treatment issues, were launched as part of the EDR package. In addition, an in-depth review on the role of therapeutic communities and an overview of the options for residential treatment in Europe were published. The EMCDDA launched a revamped Best practice portal, its unique online collection of reviews of evidence on the effectiveness of interventions in the European Union (EU). In 2014, the agency continued to work with its partners in the field of harm reduction at European and international levels, offering its expertise in the prevention of infectious diseases among people who inject drugs (PWID), with a main focus on HIV and the hepatitis C virus (HCV).
- Supply and supply reduction interventions: in 2014, the EMCDDA focused primarily on developmental work to improve tools and concepts for reporting on drug supply (drug markets, drug-related crime and drug supply reduction). Significant progress was made on the revision of instruments for reporting on drug prices and drug law offences, which were finalised and endorsed by the heads of the Reitox national focal points (NFPs). The instruments for reporting on drug production facilities were also advanced, in close cooperation with Europol. The continuity of the EMCDDA European reference group on drug supply issues was ensured.
- New trends and developments: the work of the Early Warning System (EWS) is both dynamic and increasingly challenging, with 101 new psychoactive substances (NPS) formally notified in 2014. The Centre produced, sent to the European Commission, the Council of the European Union and the European Medicines Agency (EMA), and published EMCDDA–Europol joint reports on two NPS: 4,4'-DMAR and MT-45. Six risk assessment exercises were carried out by the EMCDDA's extended Scientific Committee, on MDPV, methoxetamine, 25I-NBOMe, AH-7921, 4,4'-DMAR and MT-45. The agency organised the Third International Multidisciplinary Forum on New Drugs and was one of the co-organisers of the Third International Conference on Novel Psychoactive Substances. The EMCDDA further strengthened its links with the informal forensic science and toxicology networks, and the first expert meeting on toxicovigilance for NPS was organised. The results of the 2013 trendspotter study on methamphetamine in Europe were also prepared, ready for publishing in 2015, and a new trendspotter meeting, on the Internet and drug markets, took place.
- Drug policy analysis: two new analyses, in the area of drugs and public expenditure, and two drug policy profiles, on Austria and Poland, were published in 2014. The agency also released an EMCDDA Paper entitled *Regional drug strategies across the world*. Ongoing support was provided to the Member States, upon request. The legal correspondents meeting was organised, with a focus on emerging topics such as NPS and cannabis legislation.
- Scientific coordination and content support: the redefinition of the national reporting system, in close consultation with the Reitox national focal points (NFPs), aims to further improve the quality and coherence of the EMCDDA's information collection and reporting system. The third EMCDDA summer school, 'Drugs in Europe: Demand, Supply and Public Policies', took place, and preparatory work for the First European conference on addictive behaviours and dependencies (Lisbon Addictions), which will take place in Lisbon on 23–25 September 2015, started in 2014.

At the same time, the Centre faced more external demands and consequently needed to prioritise its tasks and reallocate resources in order to remain responsive to the rapid developments in the drug situation and to meet the needs of its stakeholders.

The year 2014 saw continued collaboration with key external partners, especially other EU agencies. This included work in the framework of the Justice and Home Affairs (JHA)



agencies cluster, and enhanced cooperation with Europol, the European Police College (CEPOL), Eurojust (the European Union's Judicial Cooperation Unit) — a Memorandum of Understanding (MoU) signed in July — and the Fundamental Rights Agency (FRA), as well as continued collaboration with the EMA and the European Centre for Disease Prevention and Control (ECDC). The EMCDDA also continued to strengthen cooperation and build synergies with its neighbour agency, the European Maritime Safety Agency (EMSA), to be more cost-efficient.

Cooperation with candidate and potential candidate countries continued within the framework of the Instrument for Pre-Accession Assistance (IPA) technical assistance project IPA 4, which was successfully completed in 2014. The first technical assistance project for European Neighbourhood Policy (ENP) beneficiary countries was kicked off. Capacity-building was achieved in 2014, mainly through several regional and national Reitox Academies. The Board gave the Director a mandate to sign a MoU with the National Security Council of the Republic of Armenia and to negotiate a MoU with the Ministry of Justice of Georgia. The Director further signed a MoU in Jerusalem with the Israel Anti-Drug Authority (IADA).

Implementation of the new EMCDDA integrated communication strategy helped enhance the Centre's core communications values, namely relevance, quality, efficiency, transparency and consistency.

The agency made significant efforts to further improve its operational efficiency. One indicator of these efforts was the outstanding budget execution rate achieved at the end of the year.

### On the structure of the report

The 2014 *General Report of Activities* reflects the agency's achievements in terms of the implementation of the work programme adopted by the Management Board. The Board commends the structure of the document, which presents the most important achievements in each of the 12 main areas of work, together with a more detailed presentation of the implementation of the 2014 work programme, by objectives, activities and expected outputs/results (Annex 5). Furthermore, the Management Board welcomes the addition to this activity report of Annex 6 on key performance indicators (KPIs), and of Annex 9, presenting the follow-up plan to the third external evaluation of the EMCDDA, carried out in June 2012.

The Management Board appreciates in particular the fact that the report follows the common template for annual activity reports produced by EU agencies, as requested by the European Commission as one of the items on the roadmap which was put in place to implement the *Joint Statement of the European Parliament, the Council of the EU and the European Commission on decentralised agencies*. This common template (*Guiding principles across agencies for a consolidated annual activity report*) was produced by the Performance Development Network of the EU agencies and endorsed by the heads of agencies in June 2014.

In conclusion, the Management Board finds the report to be a detailed and transparent overview of the implementation of the work programme.

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# CHAPTER 2

## Executive summary

This report presents the implementation of the activities in the EMCDDA's work programme for 2014 <sup>(1)</sup>. This is the second year of the agency's triennial strategy 2013–15.

The work of the Centre is built on the core tasks of collecting, managing and analysing the data provided by the NFPs in the 30 countries reporting to the EMCDDA — the 28 Member States, Turkey and Norway. The findings gathered through this impressive collective effort form the basis for many outputs during the year.

In 2014, 55 scientific and institutional publications were released by the EMCDDA (including some products published jointly with our partners), and 21 scientific articles authored or co-authored by EMCDDA staff were published in prestigious journals. The complete list of publications is presented in Annex 3, and brief overviews are given in the relevant sections of this report.

On 27 May, the EMCDDA launched its flagship publication, the 2014 *European Drug Report*, at a press conference in Lisbon. The event opened with a video message from the European Commissioner for Home Affairs, Cecilia Malmström, who expressed her concerns about the fact that drugs consumed in Europe today appear to be increasingly damaging to the health of their users.

The multimedia EDR package offered an interlinked range of products, with the *European Drug Report: Trends and developments* at its centre. The report was complemented by the online interactive POD analyses, which explored emerging concerns relating to stimulant use; new developments in Europe's cannabis market; advances in Internet-based treatment; and wastewater analysis. A more detailed perspective on the national data was provided by the *European Drug Report: Data and statistics (Statistical bulletin)*, which in 2014 came with improved web functionality and access to national data, and the 30 country overviews.

During the year, the EDR was widely disseminated, including at presentations to policymakers in seven Member States, as well as presentations to the Council of the EU, to the European Parliament and to the permanent correspondents of the Pompidou Group.

The year also saw the Centre produce an impressive list of thematic publications. In the area of drug treatment, this included an in-depth review on the role of therapeutic communities and an overview of the options for residential treatment in Europe. These were complemented by a series of evidence reviews on issues such as strategies for opioid substitution treatment during pregnancy; treatment for cocaine dependence; and multidimensional family therapy for adolescent drug users. Further evidence on the effectiveness of interventions, including a new module on partygoers, featured on the EMCDDA's Best practice portal, a revamped version of which was launched in October.

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<sup>(1)</sup> Available at: [emcdda.europa.eu/publications/work-programmes/2014](http://emcdda.europa.eu/publications/work-programmes/2014)

Professionals and policymakers alike were provided further analyses on harm associated with the use of opioids, amphetamines and cocaine, and emergency health consequences of cocaine use.

For policymakers, the EMCDDA published an estimate of public expenditure on drug law offenders at European level, based on a study which included 22 Member States. An analysis on how austerity measures affected responses to the drug problem showed the challenges of financing drug policy in Europe in the wake of the economic recession.

For the same audience, two new policy profiles, on Austria and Poland, were produced.

Marking the international day against drug abuse and illicit trafficking, 26 June, the EMCDDA published an update of its in-depth topical review on drugs and driving.

The EMCDDA also published an impressive number of outputs (15, compared with two in 2013) related to the implementation of the Council Decision on new psychoactive substances (2005/387/JHA) (see Main Area 5). This extraordinary number of outputs reflects the significant developments which took place in 2014 in the area of new drugs. In this area, within the framework of Council Decision 2005/387/JHA, the EMCDDA has the critical role of implementing the EWS, together with Europol and its EWS partners in the Member States, the Reitox network.

During the year, 101 NPS were reported for the first time within the EU, which represents a 25 % increase on 2013 (81 NPS), and accounts for more than one fifth of the total number of NPS which have been identified, formally notified to and monitored by the EWS since 1997, its first year of operation (i.e. around 450 NPS, of which three quarters were notified in or after 2010).

Furthermore, six risk assessments were carried out in 2014 by the extended Scientific Committee of the EMCDDA, at the request of the Council, on NPS which had been associated with more than 200 deaths and more than 700 non-fatal intoxications; this represents twice the number of risk assessments requested during the entire preceding four-year period. Following the decision adopted by the Council on 25 September, in response to a recommendation formulated by the European Commission on the basis of risk assessment reports received from the EMCDDA, four of these substances, namely MDPV, methoxetamine, AH-7921 and 25I-NBOMe, will be subject to control measures and criminal penalties throughout the EU and their manufacturing and marketing will become illegal.

Given this dynamic evolution of the drug phenomenon, early warning and threat assessment are priority areas for the EMCDDA. In addition to implementing the EWS on new drugs, a key task is to monitor new trends in the drug phenomenon. To this end, a trendspotter case study on Internet drug markets in Europe was undertaken in 2014. This culminated in an expert meeting which brought together leading specialists in IT, research and monitoring, and law enforcement. Their perspective on the Internet and drug use will be explored in a report to be published in 2015.

The results of the 2013 trendspotter study on methamphetamine trends in Europe were also published during the year.

In addition, methamphetamine was the subject of a threat assessment exercise conducted jointly by the EMCDDA and Europol as part of the operational action plan (OAP) on synthetic drugs within the EMPACT (European Multidisciplinary Platform against Criminal Threats) framework. This framework was developed under the EU policy

cycle for organised and serious international crime 2013–17 within the Council’s Standing Committee on Operational Cooperation on Internal Security (COSI). The report will be published for a law enforcement audience early in 2015.

As an information agency, disseminating knowledge is a core activity for the EMCDDA. This is achieved by means of the outputs and online tools that the agency makes available to its audiences, but also through training and capacity-building activities.

In terms of training, a further step was taken to consolidate the EMCDDA’s activities in this area: an options paper on an integrated training strategy for external audiences was completed based on the agency’s experience and lessons it has learned from other JHA agencies. During the year, several training programmes took place. These included the third summer school, ‘Drugs in Europe: demand, supply and public policies’, which was co-organised by the EMCDDA and Instituto Superior das Ciências do Trabalho e da Empresa — Instituto Universitário de Lisboa (ISCTE-IUL).

Furthermore, the Reitox Academies training programme implemented by the EMCDDA has been an important vehicle for building capacity for drug monitoring both in Member States and in third countries which are a priority for the EU, namely the candidate and potential candidate countries and ENP <sup>(?)</sup> countries. Within this framework, cooperation continued with the College of Europe in Bruges and Charles University in Prague, and two multi-country training sessions for experts from ENP countries were implemented. In addition, the Centre helped organise six Reitox Academies for EU Member States, candidate and potential candidate countries and ENP partner countries. They covered topics such as prevention, drug laws, drug supply indicators, public expenditure, harm reduction in prisons and evaluation of national strategies.

For several years now, the agency has been contributing to the training programme implemented by CEPOL for law enforcement professionals. In 2014, the EMCDDA contributed to webinars organised by CEPOL on issues such as the EU response to NPS (i.e. the EWS on new drugs) and participated in a meeting on synthetic drugs.

Experience exchange and knowledge sharing are also achieved through network development and management. The EMCDDA relies on various networks of experts, which contribute their national expertise to the EMCDDA’s European drug information and analysis systems. The agency’s interaction with these networks is ongoing, through regular contact and technical support, and culminates in several annual expert meetings organised by the Centre in Lisbon. These have become, over the years, valuable networks of excellence.

In 2014, this interaction included the key epidemiological indicators expert meetings (June, September and October); the EMCDDA reference group on drug supply issues (November); the EWS network meeting (June); and the legal correspondents meeting (June).

During the year, the new concept for the organisation of the EMCDDA’s major expert meetings, which was introduced in 2013, was further improved and four of the five key epidemiological indicators annual meetings were organised back to back. This integrated approach aims to bring several meetings together with the intention of promoting cross-discipline analysis of the drug situation and responses to it. Efficiency gains are also pursued.

<sup>(?)</sup> The ENP aims to forge closer ties with countries to the south and east of the European Union. Through this policy, the EU seeks to strengthen the prosperity, stability and security of all countries concerned.

Furthermore, ad hoc (non-regular) technical meetings were organised on various priority thematic areas, such as analysis of the national treatment systems (June); drug prices (July); trendspotting (November); and toxicovigilance for NPS (December); there were also satellite meetings on a general population survey (GPS) harmonised database (June) and naloxone (October).

The two annual meetings of the HFPs took place in May and November. Two technical meetings were also organised by the agency with the participation of the NFPs, as part of the revision of the national reporting package, in May and October.

Participation in external events is another important vehicle for knowledge dissemination. The EMCDDA contributed its expertise to almost 300 key scientific meetings and conferences, as well as institutional events. Moreover, together with its partners, the agency co-organised one of the biggest drugs conferences of the year, namely the Third International Conference on Novel Psychoactive Substances, in Rome in May. Another event was the conference of the EU project Spice II, which was organised by the EMCDDA in conjunction with the annual meeting of the EWS network in June. A list of events organised or attended by EMCDDA staff is provided in Annex 4.

The agency also received more than 400 visitors during the year, which was 50 % more than in 2013. Among the guests were high-level policymakers from the EU institutions, the Member States and third countries; practitioners; academics; and journalists.

In performing its work and achieving its objectives, the EMCDDA relies not only on its networks, but also on its other EU and international partners. At EU level, priority is given to the institutions (the European Parliament, the Council of the EU and the European Commission) and the Member States.

The EMCDDA provided ongoing technical support to the EU institutions during the year, on issues such as NPS, which remained one of the most important topics on the policy agenda; harm reduction, including infection with HIV and HCV among PWID; and minimum quality standards for demand reduction interventions. The EMCDDA provided written input, attended hearings at the European Parliament and meetings at the Horizontal Drugs Group (HDG) of the Council, and participated in various other meetings with the Commission's services, as requested (see Main Area 8).

The agency also contributed its expertise to several EU-funded projects, such as Euro-DEN, I-TREND and Spice II Plus, funded by the Drug Prevention and Information Programme; Response, funded under the Prevention of and Fight against Crime (ISEC) 2014 call; and ALICE RAP (Addiction and Lifestyles in Contemporary Europe — Reframing Addictions Project), ERANID (European Research Area Network on Illicit Drugs) and SEWPROF ('A new paradigm in drug use and human health risk assessment: sewage profiling at the community level'), funded under the Seventh Framework Programme for Research and Development (FP7). Another important project funded by the European Commission is COPOLAD (Cooperation Programme between Latin America and the European Union on Drugs Policies). In 2014, the EMCDDA provided input to the Commission on the project fiche for COPOLAD II and held a coordination meeting with the project coordinator.

Furthermore, as part of its efforts to strengthen monitoring of polydrug use, in 2014 the EMCDDA became a collaborating partner and member of the advisory group of the RARHA project, funded by the European Commission and led by the Portuguese General Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD). With the same aim, the agency further enhanced its cooperation with ESPAD (see Main Area 2).

Cooperation with the Member States is key to the successful implementation of the EMCDDA's activities. The monitoring systems of the agency rely on the information provided by the 30 reporting countries, including the 28 Member States. Throughout the year, ongoing contact and technical support was offered to national data providers (see Main Areas 1–7 and 10). In addition, there were a number of events organised by national authorities where the EMCDDA was invited to provide input. These included several hearings and panel reviews at the Swedish Government, on drug-related deaths, and at the British Home Office, on NPS. The agency also received visits from several high-level delegations from Denmark, Finland, Germany, Hungary, Norway and Portugal (see Main Area 10).

Other important partners are EU agencies and international organisations. The year was rich in joint activities and events. Cooperation was particularly fruitful with Europol, on the EWS on new drugs and on the OAPs on synthetic drugs, heroin and cocaine within the EU policy cycle for organised and serious international crime 2013–17 of the COSI (see Main Area 4); with ECDC, in the context of joint interventions in the harm reduction area; with the EMA, on the implementation of the relevant EU pharmacovigilance legislation; with CEPOL, on its law enforcement training programme; and with Eurojust, with which a MoU was signed in July.

Synergies were further pursued with EMSA, in the area of support services, which was acknowledged by the European Commission as a 'pioneering' approach, which sets an 'example that other EU agencies should look at', and with FRA, in the area of tools to support organisational performance management.

The international organisations with which the Centre undertook most joint work were the World Health Organization (WHO), in the areas of prison health and infectious diseases; the United Nations Office on Drugs and Crime (UNODC), in the areas of data collection and analysis, NPS and other major drug trends, and standards of treatment; the Joint United Nations Programme on HIV/AIDS (UNAIDS), on HIV infection among PWID; the Inter-American Drug Abuse Control Commission (CICAD) under the Organization of American States (OAS); and the Pompidou Group.

In terms of cooperation with third countries, 2014 marked the successful completion of the IPA 4 technical assistance project started in 2012 with the objective of building the capacity for drug monitoring of several candidate and potential candidate countries (Albania, Bosnia and Herzegovina, Croatia (until 1 July 2013), the former Yugoslav Republic of Macedonia, Kosovo (\*), Serbia, Montenegro and Turkey). In January, the EMCDDA embarked on a new two-year technical cooperation project within the framework of the ENP. The EC-funded project, which will run until December 2015, is designed to boost the capacity of ENP partner countries (Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine) to react to fresh challenges posed by the drug phenomenon (see Main Area 8).

As already mentioned, the EMCDDA's complex core monitoring system is at the heart of its work. This encompasses data collection tools and processes which support the entire annual reporting system of the agency. This includes the five key epidemiological indicators, the health and social responses instruments, the supply key indicators and the tools to monitor research, policies and laws. The data collection and management is supported by Fonte, the online platform through which the agency collects the information from the NFPs, and by the data warehouse.

(\*) This designation is without prejudice to positions on status, and is in line with UNSCR 1244/99 and the ICJ Opinion on the Kosovo declaration of independence. It applies to all mentions of Kosovo in this report and its annexes.

Maintaining and further developing these tools and processes to keep pace with the evolution of the drug phenomenon is, therefore, a constant priority for the Centre.

In 2014, methodological improvements were made to the key epidemiological indicators, especially concerning the treatment prevalence module and the monitoring of drug use among prisoners.

The implementation of the new treatment data collection and analysis strategy was advanced through the development, with support from an expert group, of a methodological toolkit to improve national estimates and the definition of core criteria that will enable comparison of treatment systems within the EU.

An area where significant progress was achieved in 2014 was the development of key indicators for monitoring drug markets, drug crime and drug supply reduction (see Main Areas 1 and 4). The EMCDDA has a leading role in the process, in terms both of conceptualising the work and of developing and reaching consensus on the mechanisms needed to implement it. During the year, revised reporting instruments were finalised for drug seizures, drug law offences and drug production facilities (in close collaboration with Europol), which are data sets (subindicators) that are relevant to more than one area (the other being drug markets, drug-related crime and drug supply reduction, respectively) and, therefore, have been given priority. Pilot implementation will be carried out for all these instruments in 2015 and further progress will be made in the development of the other data sets (drug prices, drug purity and contents, and drug supply reduction), in line with resources.

In terms of data collection tools and processes, a key development during the year was the completion of the revision of the national reporting system. This determines how data are reported from the Member States to the EMCDDA in order to provide an overall picture of Europe's drug phenomenon. Work was carried out throughout 2014, in close coordination with the NFPs, and the final proposal received the seal of approval from the HFPs at their meeting in November. This marked the end of an extensive EMCDDA–Reitox joint project to revise the existing reporting system. This started in 2012 as part of the systemic review of tools initiated by the EMCDDA. The process gained a new momentum at the end of 2013 and in 2014 in the context of the cutting of the EU subsidy allocated to the EMCDDA, which triggered a reduction in funding to the NFPs. The aim of the new package is to match priorities and resources and better address the information needs of European and national stakeholders while ensuring efficiency and reducing the reporting burden.

At corporate level, 2014 marked a troubling first: this was the first year since the EMCDDA was established in 1993 that its EU subsidy was cut, by almost 5 %. At the same time, as shown in this report, as a result of developments in the drug phenomenon, work in various areas, especially the implementation of the EWS on new drugs, increased significantly. The agency mobilised all its internal mechanisms to cope with this situation. Resources were shifted where possible to level-one priority projects (see Annex 5)

Once again, the EMCDDA's performance in carrying out its mission was accompanied by an outstanding budget execution rate. By the end of the year, 99.6 % of the budget had been committed and 94.9 % of payments had been made.

In spite of the increased constraints experienced in 2014, the agency continued to be forward-looking and prepare for future challenges. To this end, work started on the next EMCDDA three-year strategy and work programme for the period 2016–18. Given the increasing strain on resources projected in the medium term, one of the main challenges for the agency will be to continue its work on prioritising investments. This will enable it to



fulfil its legal obligations and safeguard the achievements accrued, while remaining responsive to emerging trends and developments in the drug situation in Europe. To help draw up the document, the EMCDDA launched an extensive consultation exercise, calling for thoughts and ideas on the possible focus of its work for the next strategic programming period. Among those consulted were key stakeholders and partners from the EU Member States; the EMCDDA Scientific Committee; the EU institutions; international organisations; third countries; and the general public. The valuable contributions received in the process will play an important role in defining the EMCDDA's medium- to long-term direction. This will be reflected in the 2016–18 strategy and work programme, scheduled to be adopted by the Management Board in December 2015.

The structure of this report of activities was aligned with the template for annual activity reports developed by the working group of the Performance Development Network at the request of the European Commission, which was adopted by the heads of agencies in June 2014. The initiative is part of the efforts to achieve the roadmap which implements the Joint Statement on decentralised agencies adopted by the European Parliament, the Council of the EU and the European Commission on 18 June 2012 <sup>(3)</sup>.

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<sup>(3)</sup> Available at: [http://ec.europa.eu/commission\\_2010-2014/sefcovic/documents/120719\\_agencies\\_joint\\_statement\\_en.pdf](http://ec.europa.eu/commission_2010-2014/sefcovic/documents/120719_agencies_joint_statement_en.pdf)

3

# CHAPTER 3

## Core business: monitoring and reporting on the drugs problem in Europe

### Data collection, analysis and quality assurance (Main Area 1)

Monitoring the drug situation through the standardised collection of data is central to the work of the agency. Data collection and analysis, along with the associated tasks to ensure reliability, validity and transparency, are a resource for our external stakeholders and are the foundations on which the outputs of the agency are built.

### Highlights and main achievements

The activities in 2014 continued earlier work to ensure a robust data collection system which is coherent and results in reliable and valid data. Formalising quality assurance procedures and meeting the demands of a changing set of outputs were underlying themes of the work, although many activities are interrelated and address both issues.

A central element, which encompasses the work carried out in all the other core business areas, was the development of the 2014 EDR package, the EMCDDA's annual flagship publication.

The 2014 *European Drug Report* (EDR) <sup>(1)</sup> presents the EMCDDA's yearly top-level overview of the long-term drug-related trends and developments at European level.

Rooted in a comprehensive review of European and national data, the multimedia EDR package offers an interlinked range of products, with the *European Drug Report: Trends and developments* at its centre (available in 23 languages).

Presented alongside the report were the innovative Perspectives on drugs (POD) analyses, online interactive windows on key aspects of the European drug situation. The 2014 PODs explored emerging concerns relating to stimulant use; new developments in Europe's cannabis market; advances in Internet-based treatment; and wastewater analysis.

The *European Drug Report: Data and statistics* and 30 country overviews completed the picture, presenting explanatory graphics and national-level data.

The full EDR 2014 package was launched to the media on 27 May at a press conference, held at the EMCDDA, which opened with a video message from the European Commissioner for Home Affairs, Cecilia Malmström (see also Main Area 9).

Furthermore, the EMCDDA participated in national launches organised in seven EU Member States (Belgium, the Czech Republic, Greece, Lithuania, Poland, Romania and Slovakia) <sup>(2)</sup>.



<sup>(1)</sup> Available at: [emcdda.europa.eu/publications/edr/trends-developments/2014](http://emcdda.europa.eu/publications/edr/trends-developments/2014)

<sup>(2)</sup> Another Member State, Portugal, organised a national launch on 7 January 2015.

To enable the EDR to be launched in May, the production and analysis of the data, which were begun in 2013, were maintained and consolidated.

Furthermore, the revision of the structure of the *European Drug Report: Data and statistics (Statistical bulletin)* <sup>(4)</sup>, which started in 2013, was completed during the year. This is one of the main components of the EDR package, providing access to the data the EMCDDA use to report on the drug situation. The new structure will become fully apparent in 2015; however, improved web functionality and access to national data were already in place in 2014.

Another important component of the EDR package is the country overviews <sup>(5)</sup>. They consist of a summary of the national drug situation, key statistics at a glance and a barometer showing the drug use prevalence position for each of the 30 countries reporting to the EMCDDA.

During the year, work also started on preparing the 2015 EDR package.

To this end, the cyclical work of revising the data collection tools and adjusting the templates continued, with a focus on the instruments related to supply indicators (see Main Area 4) and on the implementation of the treatment data collection strategy (see Main Area 3).

With regard to drug supply, priority was given to the revision of the data collection tools for seizures and for drug law offences. The draft revised instruments were discussed at the second annual meeting of the EMCDDA reference group on drug supply issues and adopted by the HFPs at their meeting in November. Following agreement, a pilot implementation of the two revised tools will take place in 2015.

In addition, a joint project with Europol to design and develop a tool for the collection of data on the number and characteristics of sites related to the production of synthetic drugs and precursors dismantled by law enforcement agencies (European Reporting on Illicit Synthetic Substances Production Sites (ERISSP)) was completed in 2014. The EMCDDA also gave assistance to the Czech Republic and the Netherlands, which are major producers of synthetic drugs, in providing their data. Furthermore, the EMCDDA started the analysis of the data collected by Europol from the Member States with the support of this tool. Analytical work will be completed in 2015 by experts from the two agencies.

These are important elements of the process of developing key indicators in the areas of drug markets, drug-related crime and drug supply reduction; significant conceptual, consensus-reaching and implementation efforts will be required to continue this work in the years to come.

The revised treatment data collection tools were also adopted by the HFPs. This will support the implementation of the EMCDDA treatment strategy, the objective of which is to improve national estimates of the total number of people in treatment (see Main Area 3).

In order to develop and improve the agency's information collection and reporting system, a systemic review of tools was begun in 2011, focusing on the national reporting package and the definition of a comprehensive quality assurance framework for our scientific work.

<sup>(4)</sup> Available at: [emcdda.europa.eu/data/2014](http://emcdda.europa.eu/data/2014)

<sup>(5)</sup> Available at: [emcdda.europa.eu/countries](http://emcdda.europa.eu/countries)

The basic principle of the revised package is to combine an improvement in the quality and usefulness of the information collected with the rationalisation of the reporting system that was started three years ago. The objective is to develop more efficient, coherent and manageable data collection tools in order to minimise the reporting burden for the NFPs.

This became increasingly important in 2014 in the context of the Centre's reduced budget, which, in addition to the resources constraints experienced by the Member States, triggered an increased need to rationalise investments, both for the EMCDDA and for our national data providers. During the year, the EMCDDA, in close consultation with the NFPs, developed a proposal for a new Reitox national reporting package, which allows the Centre and the NFPs to better address the needs for information of stakeholders at European and national levels, while rationalising resources (see Main Area 10).

Following an intensive consultation exercise, the implementation plan and the guidelines for 2015 were adopted by the HFPs at their meeting in November. This marks an important milestone for one of the key projects implemented by the EMCDDA and its Reitox partners in the past few years.

Furthermore, one of the objectives of the 2014 work programme is to strengthen the quality assurance framework for data collection, analysis and reporting. To this end, the Management Board adopted, in December, the EMCDDA Internal Statistics Code of Practice, a reference document that establishes a set of relevant principles to provide the Centre with guidance and goals for its own work. In line with Eurostat's European Statistics Code of Practice, the EMCDDA's document is based on 15 principles covering the institutional environment, statistical production processes and the output of statistics. A set of supporting statements for each of the principles provides guidance for implementation. Before its adoption by the Management Board, the document was discussed with the Reitox network and endorsed by the EMCDDA Scientific Committee at its September meeting.

As in every year, 30 quality reports were sent to the NFPs in July, providing feedback on the national reports submitted by the countries to the EMCDDA.

## **Monitoring and understanding drug use and problems: key indicators and epidemiology (Main Area 2)**

An objective and reliable knowledge and understanding of the drug situation — in terms of prevalence and patterns of use, risk factors, and health and social consequences — is a prerequisite for developing policies and interventions and for evaluating their outcomes and effectiveness. Therefore, the epidemiological monitoring of prevalence and patterns of drug use and of its health and social consequences has been at the heart of the EMCDDA's work since its establishment.

This monitoring is based on a range of core indicators, called key epidemiological indicators, that include the prevalence and patterns of drug use in the general population (GPS); the prevalence and patterns of problem drug use (PDU), the number and characteristics of drug users contacting drug services, in particular treatment services (treatment demand indicator (TDI)); the number of drug-induced deaths and mortality among drug users (drug-related deaths (DRD)); and rates of infectious diseases related to drug use (drug-related infectious diseases (DRID)).

## Highlights and main achievements

### Methodological development

The guidelines for data collection on TDI treatment prevalence were finalised and presented, together with a two-year implementation plan, at the HFPs meeting in November. This is the result of a project which started in 2007 and which was relaunched in 2012 after the TDI revision process was completed. The TDI treatment prevalence was conceived with the aim of collecting information on drug treatment clients who are in continuous treatment and are not, therefore, captured by the TDI data collection tool, which measures only the number of people entering drug treatment during each calendar year. The results will allow collection of information on the total treated population and, together with other tools, will help provide a complete national picture of treatment provision.

The EMCDDA published the *European questionnaire on drug use among prisoners (EQDP)* <sup>(6)</sup> in February. This is the first common questionnaire of its kind at European level and is the result of two years of work in the field of drugs and prisons, which has included an agreement on a methodological framework for monitoring drug use in prisons in Europe, the analysis of existing questionnaires and a discussion among high-level experts from several European countries and international organisations.

Also in February, the agency released a review of tools for monitoring illicit drug use in the prison population in Europe, entitled *Drug use in prison: assessment report* <sup>(7)</sup>. The review describes the existing tools used at national level and assesses their comparability, with a view to building a common European basis for data collection on drug use in prisons. The introduction includes the activities carried out in recent years at the EMCDDA, the formal mandate governing this area of work and the methodological developments. The report presents the assessment results by information area.

The technical report *Computer-assisted and online data collection in general population surveys* <sup>(8)</sup> was published in October. The report collects information from a literature review on computer-assisted interviewing and online data collection in GPS. It evaluates the pros and cons of both approaches in terms of research processes and outcomes. It also provides an overview of representative studies on drug use conducted in the EMCDDA countries that used one of these methods.

### Focus on polydrug use, including alcohol

For many years, there has been considerable concern at policymaking level about the interaction between alcohol and drug use in Europe. The EMCDDA's own remit was broadened in 2006 to include the monitoring of polydrug use, where illicit drugs are taken in combination with licit substances or medication.

As part of the efforts to develop this part of its mandate, the EMCDDA's three-year strategy and work programme for 2013–15 includes a commitment to increasing collaboration with ESPAD. ESPAD provides useful and harmonised information on long-term patterns of substance use, including polydrug use, in many EU countries and

<sup>(6)</sup> Available at: [emcdda.europa.eu/publications/scientific-studies/eqdp](http://emcdda.europa.eu/publications/scientific-studies/eqdp)

<sup>(7)</sup> Available at: [emcdda.europa.eu/publications/drug-use-in-prison-assessment-report](http://emcdda.europa.eu/publications/drug-use-in-prison-assessment-report)

<sup>(8)</sup> Available at: [emcdda.europa.eu/publications/technical-reports/online-data-collection-gps](http://emcdda.europa.eu/publications/technical-reports/online-data-collection-gps)

neighbouring countries. The EMCDDA Management Board, the Swedish Government and the Commission acknowledged the agency as an appropriate institutional home for the study; thus, they have stressed the need for ESPAD, while maintaining its individual identity, to be progressively anchored to the EMCDDA.

A number of activities were undertaken in 2014 to ensure closer collaboration between the EMCDDA and ESPAD. These activities included the EMCDDA's participation in substantive components of the ESPAD project, such as steering committee meetings, the new questionnaire design group and discussions on publications. Importantly, the collaboration between the EMCDDA and ESPAD has included the development of a strategy to ensure the continued coordination of the ESPAD project for the current round of data collection and reporting (2015 and 2016).

In addition, the EMCDDA published the *2012 ESPAD impact survey*<sup>(9)</sup>, which was a joint initiative of the Pompidou Group and ESPAD, with a contribution from the EMCDDA. This survey was conducted in 2012 to explore whether the interest in, use of and impact of the ESPAD 2011 report were as high as they had been for the previous two reports. In addition to the ESPAD researchers, two other groups with an informed view took part: the permanent correspondents of the Pompidou Group and the HFPs.

Also as part of its efforts to strengthen the monitoring of polydrug use, on 31 January the EMCDDA hosted the kick-off meeting of the RARHA project, funded by the European Commission. Led by SICAD, the initiative involves 32 associated partners and 28 collaborating partners from both EU and non-EU countries. The EMCDDA is among the project's collaborating partners and also sits on its advisory group.

Furthermore, the EMCDDA started to develop a proposal for a set of core variables related to alcohol use, for their inclusion in the European Model Questionnaire (EMQ) for drug surveys. The completion of this task will be linked with the work developed as part of the RARHA project.

### Capacity-building and network development

The added value of the EMCDDA's epidemiological information is to a considerable extent based on the work of the NFPs and the networks of national experts on the various key indicators. An important task in 2014 was the ongoing maintenance, reinforcement and development of these networks. This was achieved through continuous contact with their members, by giving them scientific advice and support, and by holding annual expert network meetings.

With the importance of these meetings in mind, the new concept for key epidemiological indicators annual expert meetings, which was initiated in 2013, was further improved in 2014. This integrated approach was designed to inspire cross-discipline analyses of the drugs problem and responses to it. Through this approach, the EMCDDA intends to obtain greater value from these annual events, strengthening what have become, over the last 10 years, valuable networks of excellence.

As part of the new concept, four of the five key epidemiological indicators annual expert meetings were organised back to back.

<sup>(9)</sup> Available at: <http://www.emcdda.europa.eu/publications/joint-publications/2012-espad-impact-survey>

## ANNUAL EUROPEAN KEY EPIDEMIOLOGICAL INDICATORS EXPERT MEETINGS

General population survey	17–18 June
Treatment demand indicator and problem drug use	23–26 September
Drug-related death and drug-related infectious diseases	15–17 October (see Main Area 3)

'Continuity and change: high-risk drug use and drug treatment in Europe' was the focus of a series of events held at the EMCDDA from 23 to 26 September. Two parallel expert meetings, dedicated to the agency's treatment demand key indicator and problem drug use indicator, preceded a broader event open to specialists from outside the two groups.

While the two key indicator meetings explored important technical issues related to the implementation of these tools, the conference-style meeting focused on data- and multi-indicator analyses and monitoring drug treatment (as an epidemiological data source and a response to the drug problem). Issues debated included trends and developments in high-risk opioid use; ageing drug users; vulnerable populations; high-risk use of stimulants, benzodiazepines and cannabis; treatment outcomes; and evaluating best practice.

Furthermore, the quality and consistency of epidemiological monitoring at European level is based on the implementation of common EMCDDA standards and key indicators in Member States. Many third countries (e.g. candidate countries and neighbouring countries) use the key indicators as models for developing their own drug monitoring strategies and the EMCDDA provides valuable support to these countries.

A specific example is the report *National survey on lifestyles of citizens in Serbia 2014: key findings on substance use and gambling*. These survey results were released in June by the Institute of Public Health of Serbia; the survey was the first GPS on psychoactive substance use conducted in the country, and was carried out in line with EMCDDA methodology. It represents a crucial first step towards monitoring substance use among adults in Serbia and providing national data that will be comparable in the European context. Further examples include the GPS conducted in Albania and Kosovo\*, and the pilot survey in Montenegro, also carried out in line with the EMCDDA methodology (see Main Area 8).

Capacity-building initiatives for third countries beneficiaries continued to be implemented in 2014. One important event was the second Reitox Academy training course. 'Contemporary approaches in drug monitoring', organised jointly with the First Faculty of Medicine of Charles University in Prague, from 8 to 12 September, for 28 participants from seven ENP countries (see Main Area 8).

## Analysis

The technical report *Emergency health consequences of cocaine use in Europe: a review of the monitoring of drug-related acute emergencies in 30 European countries* was published in April <sup>(10)</sup>. The study reveals the substantial levels of morbidity related to cocaine use, and considers the large number of cocaine cases seen in various emergency settings in European countries. Traditional drug indicators do not often capture this health burden. The report also points to the potential early prevention, assessment and

<sup>(10)</sup> Available at: [emcdda.europa.eu/publications/scientific-studies/2014/cocaine-emergencies](http://emcdda.europa.eu/publications/scientific-studies/2014/cocaine-emergencies)



referral opportunities that may currently be overlooked, including the possibilities for referring patients who may benefit from specific counselling or treatment.

Another report, *The levels of use of opioids, amphetamines and cocaine and associated levels of harm: summary of scientific evidence*, was published in March <sup>(11)</sup>. This report presents the findings of a literature review to identify the most frequently occurring patterns of use and their relation to harm in users of opioids, powder and crack cocaine, and amphetamine and methamphetamine. The behavioural factors that were studied included frequency of use, duration of use, routes of administration, drug type, dose, severity of dependence and the presence of polydrug use.

Two more analyses were released in the POD series, as part of the EDR package:

*Injection of synthetic cathinones* <sup>(12)</sup>: over 50 synthetic cathinone derivatives were detected via the EU EWS between 2005 and 2013. This POD explores new, worrying, localised and national outbreaks of injecting these substances and recommends close monitoring of the issue as a public health priority.

*Wastewater analysis and drugs: a European multi-city study* <sup>(13)</sup>: the findings of the largest European project to date in the emerging science of wastewater analysis are taken up in this POD. The project in question analysed wastewater in over 40 European cities (21 countries) to explore the drug-taking habits of those who live in them. The results provide a valuable snapshot of the drug flow through the cities involved, revealing marked geographical variations.

In addition, an in-depth analysis was carried out on psychiatric co-morbidity, which is an essential dimension for understanding drug problems, their evolution and the possible outcomes of treatment, including the chances of recovery. It will be published in 2015 in the EMCDDA Insights series.

## Monitoring demand reduction responses applied to drug-related problems (Main Area 3)

Describing the demand reduction measures that Member States take to address drug problems is a core aspect of the EMCDDA's work. These measures span prevention, treatment, harm reduction and social reintegration.

The year 2014 was another prolific period for the EMCDDA in this area, with the release of eight new thematic publications, and also saw the launch of the revamped Best practice portal, the EMCDDA's unique online collection of reviews of evidence on the effectiveness of interventions in the EU.

Furthermore, the EMCDDA enhanced its work in the harm reduction area. The agency continued to provide up-to-date information on and threat analyses of infectious disease among PWID and related responses in Europe based on the existing reporting tools, expert networks and close collaboration with ECDC.

<sup>(11)</sup> Available at: [emcdda.europa.eu/publications/literature-review/2014/levels-of-harm](http://emcdda.europa.eu/publications/literature-review/2014/levels-of-harm)

<sup>(12)</sup> Available at: [emcdda.europa.eu/topics/pods/synthetic-cathinones-injection](http://emcdda.europa.eu/topics/pods/synthetic-cathinones-injection)

<sup>(13)</sup> Available at: [emcdda.europa.eu/topics/pods/waste-water-analysis](http://emcdda.europa.eu/topics/pods/waste-water-analysis)

## Highlights and main achievements

### Prevention

In the area of prevention, the Centre's online resources were further developed and updated. A new module, on partygoers — people taking part in entertainment and recreational activities — was developed and included in the Best practice portal (see below). The use of both new and more traditional substances occurs in these settings and the new module provides an overview of evidence regarding the effectiveness of preventive interventions which aim to protect the safety of these people in relation to car accidents, violence and risky behaviours.

The regional Reitox Academy 'Effectiveness and efficiency of drug use prevention programmes' was organised in Slovenia (Ljubljana, 28–29 May). National experts from Poland and Slovenia, as well as experts from seven candidate and potential candidate countries, attended the event (see Main Area 8).

### Treatment, harm reduction and social reintegration

During the year, the EMCDDA continued to provide an ongoing overview of drug treatment in Europe. A consistent picture of the area is provided by the 2014 EDR package (see Main Areas 1 and 9), including two PODs. *Health and social responses for methamphetamine users in Europe* <sup>(14)</sup> looks at the challenges for the provision of health and social responses related to this drug today. While methamphetamine use in Europe has historically been confined to the Czech Republic and Slovakia, new pockets and patterns of use are now emerging elsewhere in the EU, in diverse populations. The second POD, *Internet-based drug treatment*, charts developments in Internet-based drug treatment, which has expanded in Europe over the past 10 years, and explores some of the benefits it can offer.

An important new resource is the in-depth review *Therapeutic communities for treating addictions in Europe: evidence, current practices and future challenges*, published in April in the Insights series <sup>(15)</sup>. This report examines how therapeutic communities have developed over time, with reference to seven European countries, and provides an overview of research into their effectiveness as a treatment option and their impact on wider society.

Another publication, *Residential treatment for drug use in Europe*, was released in July <sup>(16)</sup>. This paper provides a Europe-wide overview of the history and availability of residential drug treatment within wider national drug treatment systems.

To be able, in the future, to provide a state-of-the-art overview of drug treatment in Europe, the EMCDDA needed to further invest in the development of its monitoring tools. One of the key tasks was the implementation of the new treatment data collection and analysis strategy (further to its adoption by the HFPs in 2012, the strategy was kicked off in 2013), the objective of which is to improve national estimates of the total number of people in treatment.

<sup>(14)</sup> Both available at: [emcdda.europa.eu/topics/pods/](http://emcdda.europa.eu/topics/pods/)

<sup>(15)</sup> Available at: [emcdda.europa.eu/publications/insights/therapeutic-communities](http://emcdda.europa.eu/publications/insights/therapeutic-communities)

<sup>(16)</sup> Available at: [emcdda.europa.eu/publications/emcdda-papers/residential-treatment](http://emcdda.europa.eu/publications/emcdda-papers/residential-treatment)

In this regard, a two-day expert meeting was organised by the agency on 25 and 26 June in Lisbon. During the event, experts from 10 Member States and from the EMCDDA worked together to develop a methodological toolkit to improve national estimates, as well as to identify the main treatment system typologies in Europe and agree on a set of core dimensions that can help to characterise national drug treatment systems across Europe. This work will inform an EU-wide comparative analysis that the EMCDDA will carry out in 2015.

The meeting demonstrated the increased interest of the Member States, which recognise the utility of obtaining a fuller picture of their treatment systems; for the EMCDDA, this is strong evidence that the approach and the resources invested in this project over recent years, by both the agency and the NFPs, are bearing fruit.

In 2014, the agency also strengthened its work in the field of harm reduction. The EMCDDA continued to work with its partners at European and international levels, offering its expertise in the prevention of infectious diseases among PWID, with a main focus on HIV and HCV.

One of the best examples was the joint ECDC and EMCDDA assessment mission to Latvia from 1 to 4 September at the invitation of the Latvian Government, and in the context of high HIV levels in the country. The objective of the mission was to review the status of HIV and hepatitis surveillance, prevention and control measures with country experts and health service providers, with a view to proposing actions for strengthening local services. The availability of harm reduction services for drug users, testing and vertical transmission of HIV/HBV were some of the key topics developed.

In addition, the reports of the two expert meetings organised jointly by the EMCDDA and ECDC in 2013 — Bucharest, 'Detecting and responding to outbreaks of HIV among PWID'; and Tallinn, 'Monitoring trends in and responses to drug-related infectious diseases among people who inject drugs' — were published in April <sup>(17)</sup>. The meetings had their roots in an ECDC–EMCDDA regional assessment of HIV trends, risks and prevention coverage among PWID, conducted in mid-2013 in response to the HIV outbreaks in Greece and Romania in 2011.

Furthermore, HCV and HIV infections among drug users and the latest evidence on drug overdoses were among the topics discussed during a programme of events organised by the EMCDDA from 15 to 17 October. Two EMCDDA expert meetings, dedicated to the agency's drug-related deaths and mortality key indicator and the drug-related infectious diseases key indicator (see also Main Area 2), were preceded by a satellite event focusing on the role of take-home naloxone in reducing opioid-related fatalities. Epidemiologists, clinicians, public health practitioners and representatives of civil society brought their expertise to the table and shared perspectives with the Reitox NFPs and international organisations. Among the issues highlighted were Europe's HCV epidemic among PWID and the need to scale up treatment.

Moreover, work on an in-depth review on HCV treatment was carried out in 2014 (to be published in 2015). This new study aims to provide top-level guidance on the HCV treatment services provision for drug clients. The publication will also review existing national guidelines on HCV treatment for drug users and include case examples from a select group of European countries. It will, therefore, potentially serve as a reference manual for treatment service development and delivery.

<sup>(17)</sup> The reports are available on request in English from the EMCDDA or ECDC.

On 28 July, World Hepatitis Day, the open-access online journal *PLOS ONE* published the results of an EMCDDA systematic review on data for the scaling up of HCV treatment and prevention for PWID across the EU. The authors reviewed the literature published between 2000 and 2012, as well as data provided by the agency's DRID expert network. The study, one of the largest conducted on this topic and involving over 80 collaborators, concluded that data on HCV epidemiology, care and disease burden among PWID in Europe, while sparse, suggest many undiagnosed infections and poor treatment uptake. The burden of disease, where assessed, was high and is expected to rise in the next decade. The study concluded that greater efforts are needed to improve data availability to guide the scale-up of HCV treatment among PWID.

The EMCDDA was also on the steering committee of the First European Conference on Hepatitis C and Drug Use, which was held from 23 to 24 October in Berlin. One of the highlights of the conference was the presentation of the 'Berlin Declaration', a call to national and European policymakers to ensure better access to and quality of hepatitis treatment for the most marginalised groups and individuals.

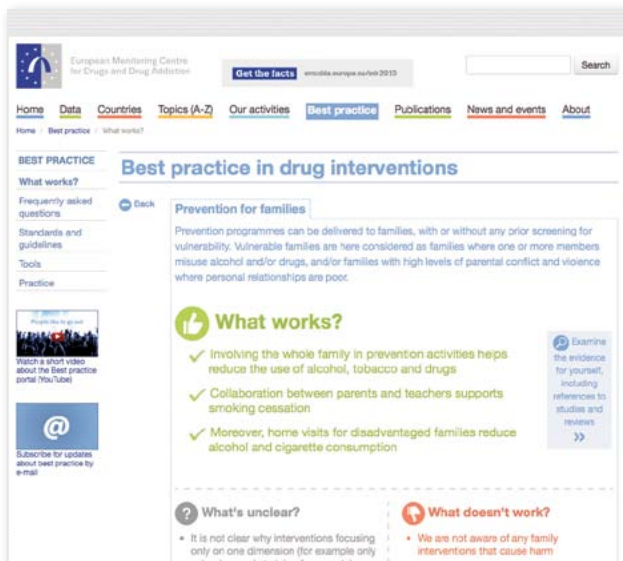
Finally, the Reitox Academy 'Harm reduction in prisons' was organised by the Austrian NFP on 1 December. A total of 32 professionals, representing all 27 Austrian prisons, attended the training programme.

## Best practice

A key achievement in this area was the launch on 23 October of the revamped Best practice portal<sup>(18)</sup>.

Targeting practitioners and professionals working in the drugs field, the portal is designed as a practical and reliable source information about what works, and what does not, in the areas of drug-related prevention, treatment, harm reduction and social reintegration. The new-look portal helps users identify tried and tested interventions quickly; allocate resources to effective measures; evaluate and improve interventions, by applying practical tools, standards and guidelines; and take better decisions, gaining from

experience and expertise from across Europe. Among its revised features are a dynamic FAQs section, to which users can add their own questions, and a raft of new search functions.



The outcome of a collaboration with the Cochrane Drugs and Alcohol Group, the EMCDDA Paper *Pregnancy and opioid use: strategies for treatment* was published in November<sup>(19)</sup>. Illicit opioid consumption during pregnancy brings with it the risk of an increase in obstetric complications for the mother and a range of potential

<sup>(18)</sup> [emcdda.europa.eu/best-practice](http://emcdda.europa.eu/best-practice)

<sup>(19)</sup> Available at: [emcdda.europa.eu/publications/emcdda-papers/pregnacy-opioid-use](http://emcdda.europa.eu/publications/emcdda-papers/pregnacy-opioid-use)

dangers for the child, both before and after birth. Psychosocially assisted opioid substitution treatment is the preferred first-line therapy for this group. This Paper reviews methadone, buprenorphine and slow-release oral morphine, used in a range of combinations with cognitive–behavioural approaches and contingency management, in order to identify the strengths of each medicine and method.

Another review, *Treatment for cocaine dependence: reviewing current evidence* <sup>(20)</sup>, was published in the POD series in May. The EMCDDA had carried out a meta-analysis of six reviews examining the effectiveness of medications used in treating cocaine problems. The original reviews, undertaken by the Cochrane Drugs and Alcohol Group, involved 92 studies (85 in the USA) and over 7 000 participants. This POD shows that some medications can reduce specific symptoms (e.g. cravings), but that no single pharmacological solution has been found for cocaine dependence overall.

Another EMCDDA resource should be mentioned here: *Multidimensional family therapy for adolescent drug users: a systematic review* was published in February <sup>(21)</sup>. During adolescence, some young people may experiment with both licit and illicit substances (alcohol, tobacco, cannabis and other drugs). This EMCDDA Paper focuses on a form of inclusive therapy that involves the young person, their family and their environment. Based on five studies carried out in the USA and the EU, it would appear that the holistic approach encapsulated by multidimensional family therapy delivers promising results that are visible both during therapy and after it has ended. However, the approach requires family engagement, which cannot always be obtained, and may come at a higher cost than other therapeutic options.

Finally, an EMCDDA Insight entitled *Drug use, impaired driving and traffic accidents* was launched in June <sup>(22)</sup>. Released to mark the international day against drug abuse and illicit trafficking (26 June), the report updates an EMCDDA literature review released in 2008. The new edition includes the results of the European Commission-funded DRUID (Driving under the Influence of Drugs, Alcohol and Medicines) project, which contributed key evidence to road safety policy by mapping Europe’s drink- and drug-driving problem across 13 countries. Also examined are over 500 studies, published in Europe and internationally up to 2013, with a greater emphasis placed on meta-analyses and systematic reviews.

## Monitoring drug supply and supply reduction interventions (Main Area 4)

In 2014, the EMCDDA focused primarily on developmental work to improve tools and concepts for reporting on drug supply (drug markets, drug-related crime and drug supply reduction). This supports Action 16 of the EU action plan on drugs (2013–16), which calls for the development and progressive implementation of key indicators on drug supply by standardising, improving and streamlining data collection in this field, building on currently available data, and is in line with the Council’s 2013 conclusions on improving the monitoring of drug supply in the EU. During the year, the EMCDDA, in consultation with its partners in the Member States, with Europol and with the European Commission, achieved significant progress in this area.

<sup>(20)</sup> Available at: [emcdda.europa.eu/topics/pods/treatment-for-cocaine-dependence](http://emcdda.europa.eu/topics/pods/treatment-for-cocaine-dependence)

<sup>(21)</sup> Available at: [emcdda.europa.eu/publications/emcdda-papers/multidimensional-family-therapy-review](http://emcdda.europa.eu/publications/emcdda-papers/multidimensional-family-therapy-review)

<sup>(22)</sup> Available at: [emcdda.europa.eu/publications/insights/2014/drugs-and-driving](http://emcdda.europa.eu/publications/insights/2014/drugs-and-driving)

Central to the work of the EMCDDA in the areas of drug supply and drug supply reduction is the EMCDDA European reference group on drug supply issues. Following the constitution and first meeting of this group in 2013, it was essential in 2014 to ensure its continuity and sustainability.

In parallel with this, the EMCDDA fulfilled the tasks assigned to it in the OAPs within the EMPACT framework developed under the EU policy cycle for organised and serious international crime 2013–17 within COSI.

## Highlights and main achievements

One of the core tasks of the EMCDDA in the current three-year strategy and work programme is to further develop and improve data collection instruments in the areas of drug markets, drug-related crime and drug supply reduction, with a view to improving the accuracy, reliability, comparability and quality of these data at EU level. This involves close collaboration with Europol and the European Commission, as well as with the Reitox network of NFPs and other relevant data providers. The EMCDDA has a leading role in the process, in terms both of conceptualising the work and of developing and reaching consensus on the necessary mechanisms to implement it.

In 2014, significant progress was achieved in the development of the reporting instrument for drug seizures, drug law offences and drug production facilities; these data sets (subindicators) are relevant to more than one area (drug markets, drug-related crime and drug supply reduction, respectively) and were, thus, given priority.

**Drug seizures:** this is a core data set which supports the monitoring of both drug markets and drug supply reduction activities. During the year, the revised data collection instrument was completed, in consultation with the EMCDDA reference group on drug supply (see below), and agreed upon by the HFPs at their meeting in November. Pilot implementation will start in 2015.

**Drug law offences:** this is a core data set which supports the monitoring of all three areas (drug markets, drug-related crime and drug supply reduction). As a result of enhanced cooperation with Eurostat, the revised instrument was finalised in 2014; it was then discussed with the reference group and agreed upon by the HFPs, who will carry out a pilot implementation in 2015.

**Drug production facilities:** this is a core data set which will allow the monitoring of drug markets and drug supply reduction activities. This involves data on dismantled synthetic drugs labs, secondary-extraction cocaine labs and cannabis cultivation sites.

The activity was implemented in close collaboration with Europol, and it is one of the tasks assigned to the EMCDDA in the OAPs on heroin/cocaine trafficking and synthetic drugs under the EU policy cycle within COSI (see also below). In 2014, the EMCDDA and Europol finalised and tested ERISSP, a tool that enables collection of sound data on the number and characteristics of sites related to the production of synthetic drugs and precursors (including facilities related to NPS) dismantled by law enforcement agencies. The first data collection exercise using ERISSP was carried out by Europol during the year and the data were sent to the EMCDDA for analysis (see also Main Area 1).

Furthermore, the two agencies built on the work of developing the template for ERISSP to design a similar tool for the monitoring of dismantled cocaine extraction labs. This new

tool was called ERICES (European reporting instrument for cocaine extraction sites) and it will be used by Europol in 2015 to facilitate and standardise the collection of data on these dismantled sites from the Member States.

With regard to cannabis cultivation sites, following an agreement with Europol, the EMCDDA will develop a standard reporting tool for use by all the EU Member States. This will be similar to the tools already in place for synthetic drugs and cocaine secondary-extraction facilities. A feasibility study to inform this activity was concluded in 2014.

In line with the available resources and the priority level assigned to this activity, some progress was also made in the development of the reporting instrument for drug prices. The EMCDDA held an expert meeting on 8 and 9 April, in Lisbon, where 21 participants from 18 European countries reviewed the opportunities and issues around a broadening of the scope of drug prices data collection and discussed specific concrete changes to the current EMCDDA drug prices data collection instrument.

The year also saw a strengthening of the EMCDDA's collaborative work with EU partners. Besides the excellent cooperation with Europol and Eurostat highlighted above, the agency enhanced its work with the Directorate-General for Taxation and Customs Union (DG TAXUD) and the Directorate-General for Enterprise and Industry (DG ENT/GROW), also of the European Commission. Further to a coordination meeting held on 30 September in Brussels, the EMCDDA will present data on drug precursors provided by the European Commission in the 2015 EDR. Further joint work is planned for 2015.

A key event during the year was the second meeting of the national correspondents of the EMCDDA European expert reference group on drug supply issues, which took place on 4 and 5 November in Lisbon. The reference group was set up in 2013, and its first meeting took place in that year. It is composed of representatives from each Member State, from the European Commission (the Directorate-General for Migration and Home Affairs (DG HOME) and Eurostat), as well as from Europol and Eurojust. The 2014 event comprised a full-day meeting on 4 November, where the subindicators on drug seizures and drug law offences were discussed, followed by a brainstorming session on the forthcoming *EU drug markets report* (see below). This was followed by a half-day meeting at which invited experts provided updates on key issues related to the three EMPACT priority drug areas, heroin, cocaine and synthetic drugs, as well as the cross-cutting topics of financial investigation and precursors.

In terms of partnership, the EMCDDA also increased its collaboration with Eurojust. The two agencies signed a MoU in July, in The Hague (see Main Area 8), and the EMCDDA participated in a strategic seminar on drug trafficking organised by Eurojust (29 September, The Hague).

The Centre's collaboration with another traditional EMCDDA partner, CEPOL, was also strengthened in 2014, when the EMCDDA participated in CEPOL's meeting on synthetic drugs (24–25 November) and delivered presentations on the agency's mandate and its activities in the area of monitoring NPS at webinars organised by CEPOL as part of its training programme for law enforcement professionals.

In 2014, the EMCDDA started planning the second *EU drug markets report* strategic analysis, which will be prepared jointly with Europol in 2015. The two agencies agreed on the general concept and the timetable for their common work. An agreement with the NFPs on the collection of the data that will inform the report was also reached.

The analysis *New developments in Europe's cannabis market* was published in the POD series in May <sup>(23)</sup>. It reports that Europe's consumer market for cannabis is increasingly dominated by herbal products, with domestic herbal production supplying national markets. It also describes how imported cannabis resin appears to be getting stronger.

In 2014, the agency also fulfilled the tasks assigned to it in the OAPs within the EMPACT framework developed under the EU policy cycle for organised and serious international crime 2013–17 within COSI. The EMCDDA provided contributions in the fields of synthetic drugs, cocaine and heroin; the agency also provided support to Europol for the follow-up of activities initiated under the previous policy cycle (2012–13), in particular on the reporting of synthetic drug and cocaine production sites (see the sections on ERISSP and ERICES above).

In addition, as part of the OAP on synthetic drugs, the EMCDDA produced a joint threat assessment of methamphetamine with Europol. The operational action was led by Germany. This threat assessment will be published for a law enforcement audience early in 2015.

A regional Reitox Academy, 'Drug supply indicators and drug supply reduction', took place in Vilnius on 23–24 November. It facilitated an in-depth discussion on experiences, challenges and best practice in monitoring drug-related crime, illicit drug markets, existing national drug laws and implemented drug supply reduction activities in the Baltic Sea region, and gathered 23 participants from Estonia, Latvia, Lithuania and Poland.

## Monitoring new trends and developments and assessing the risks of new substances (Main Area 5)

The EMCDDA was assigned a key role in the detection and assessment of new drugs in the EU under the terms of Council Decision 2005/387/JHA on the information exchange, risk assessment and control of NPS. The Council Decision requires ongoing and dynamic work to ensure efficient information exchange.

As in previous years, in 2014 the EMCDDA assured the implementation of the EWS, together with Europol and its EWS partners in the Member States, the Reitox network.

As some of the figures presented below show, however, this was probably the most demanding year since the EWS was first implemented, in 1997: 101 NPS were identified, which is more than one fifth of the total number of NPS which have been identified, formally notified to and monitored by the EWS to date (i.e. around 450 NPS, of which three quarters were notified in or after 2010); and six risk assessments were carried out at the request of the Council, that is twice the number of risk assessments requested during the entire preceding four-year period (2010–13).

In parallel, the EMCDDA started a process of redesigning its European Database on New Drugs (EDND). This critical EWS tool can no longer cope with the demands posed by the overwhelming number of NPS constantly entering the system, in addition to the need to regularly update the information on the 'old' NPS that were already being monitored through the EDND.

<sup>(23)</sup> Available at: [emcdda.europa.eu/topics/pods/cannabis-markets-developments](http://emcdda.europa.eu/topics/pods/cannabis-markets-developments)



This placed huge pressure on the agency's resources in 2014; in an unfortunate coincidence, this was also the first year in which the EU subsidy allocated to the EMCDDA was cut.

## Highlights and main achievements

In 2014, 101 NPS were formally notified, a 25 % increase on 2013 (81 substances).

A total of 102 new substance profiles were created and 290 existing substance profiles updated; the total number of NPS currently monitored exceeds 450.

Public health warnings provided to EWS correspondents numbered 16; these included, for example, alerts on 4,4'-DMAR (detected in 18 deaths in the UK) and MT-45 (detected in 11 deaths in Sweden) and the alert issued on PMMA, regarding ecstasy tablets containing a deadly amount of this substance, risk assessed in 2002.

Six risk assessment exercises were carried out by the EMCDDA's extended Scientific Committee, on MDPV, methoxetamine, 25I-NBOMe, AH-7921, 4,4'-DMAR and MT-45. Together, these six substances were associated with more than 200 deaths and more than 700 non-fatal intoxications.

Following the decision adopted by the Council on 25 September, in response to a recommendation which had been formulated by the European Commission on the basis of risk assessments carried out by the EMCDDA, four of these substances, MDPV, methoxetamine, AH-7921 and 25I-NBOMe, will be subject to control measures and criminal penalties throughout the EU and their manufacturing and marketing will become illegal.

Eight risk assessment reports were published, on MDPV, methoxetamine, 25I-NBOMe, AH-7921, 4,4'-DMAR and MT-45, as well as on two NPS which had been risk assessed previously, namely 5-(2-aminopropyl)indole (5-IT) and 4-methylamphetamine (4-MA).

Two EMCDDA–Europol joint reports, on 4,4'-DMAR and MT-45, were produced, sent to the European Commission, the Council of the EU and the EMA, and published; four other EMCDDA–Europol joint reports on NPS, which had been sent to the Commission, the Council and the EMA in December 2013, were also published in 2014.

The EDND analytical databank was expanded in 2014 to include data files for the 101 new substances, as well as additional analytical data on substances already reported. Furthermore, a total of 573 reporting forms (new substances, first notifications and significant updates from Member States) were processed by the EWS in 2014.

Network management and day-to-day provision of technical assistance to the members of the Reitox EWS network are key requirements for the successful functioning of the EWS. The system, coordinated by the EMCDDA with the participation of Europol and the EMA, relies heavily on the provision of data by the Reitox network.

The 14th annual meeting of the EWS network took place on 4 June in Lisbon. The meeting was organised in conjunction with the EMCDDA conference on the EU project Spice II Plus and attended by 80 participants.

In accordance with Article 10 of Council Decision 2005/387/JHA, the EMCDDA–Europol 2013 annual report on the implementation of Council Decision 2005/387/JHA was prepared by the two agencies and published in July <sup>(24)</sup>. The report presents the key activities performed by the EMCDDA and Europol in 2013, including NPS notified in 2013, joint reports produced, risk assessments conducted and public health alerts and advisories issued.

<sup>(24)</sup> Available at: [emcdda.europa.eu/publications/implementation-reports/2013](http://emcdda.europa.eu/publications/implementation-reports/2013)

As highlighted before, six risk assessments for NPS were successfully carried out by the EMCDDA's extended Scientific Committee in 2014, at the request of the Council, as follows:

- MDPV <sup>(25)</sup>, methoxetamine, 25I-NBOMe and AH-7921, on 1 and 2 April. The four risk assessment reports were subsequently submitted to the European Commission and the Council in April; on the basis of these, on 16 June the Commission recommended to the Council that the drugs be subjected to control measures across the EU; further to this recommendation, on 25 September the Council decided to subject the four drugs to control measures and criminal penalties throughout the EU and their manufacturing and marketing became illegal.

The risk assessments were requested by the Council on the basis of the EMCDDA–Europol joint reports on MDPV <sup>(26)</sup>, methoxetamine, 25I-NBOMe and AH-7921, sent to the Commission and the Council in December 2013 and published by the EMCDDA in January 2014.

- 4,4'-DMAR and MT-45 on 16 September. The two risk assessment reports were subsequently submitted to the European Commission and the Council in September and October respectively.

The risk assessments were requested by the Council on the basis of the EMCDDA–Europol joint reports on 4,4'-DMAR <sup>(27)</sup> and MT-45 <sup>(28)</sup>, sent to the Commission and the Council on 8 May (4,4'-DMAR) and 25 June (MT-45) and published by the EMCDDA in July and September respectively.

To prepare the joint reports, data collection exercises were launched by the EMCDDA on 27 February (4,4'-DMAR) and 16 April (MT-45).

The risk assessment meetings were organised in conjunction with the regular meetings of the Scientific Committee, which were brought forward for cost-effectiveness reasons. In advance of the exercises, and to support the work of the Scientific Committee, technical reports for all six substances were drafted by the EMCDDA based on the information collected from Member States and Europol, and on a comprehensive analysis of all the available data.

In the light of these dynamic developments in the new drugs phenomenon, the topic was higher than ever on the EU policy agenda; the interest generated is extremely useful in raising awareness of the importance of this phenomenon and of the need to implement appropriate measures to tackle it. However, it also involves substantial additional efforts on the part of the EMCDDA; in addition to the intensive work carried out to implement Council Decision 2005/387/JHA, the EMCDDA had to respond to a significant number of requests for information or technical support from its stakeholders and partners, including Member States, the EU institutions, other agencies and international organisations, and third countries, as well as from many of the people who visited the agency in 2014.

The Centre participated actively in a range of discussions with representatives from the European Commission, the Council of the EU and the European Parliament on the proposed new legislation that will replace Council Decision 2005/387/JHA. This involved providing technical advice on NPS regulation, participating in and contributing to HDG discussions, discussing options for cooperation with the Directorate-General of the Joint

<sup>(25)</sup> The risk assessment reports are all available at: [emcdda.europa.eu/publications/risk-assessments](http://emcdda.europa.eu/publications/risk-assessments)

<sup>(26)</sup> The joint reports listed here are available at: [emcdda.europa.eu/publications/joint-reports](http://emcdda.europa.eu/publications/joint-reports)

<sup>(27)</sup> Available at: [emcdda.europa.eu/publications/joint-reports/4-4-DMAR](http://emcdda.europa.eu/publications/joint-reports/4-4-DMAR)

<sup>(28)</sup> Available at: [emcdda.europa.eu/publications/joint-reports/MT-45](http://emcdda.europa.eu/publications/joint-reports/MT-45)

Research Centre (DG JRC) and the Directorate-General for Justice (DG JUST), as well as providing written feedback on a range of related technical issues.

In addition, the agency was invited to disseminate its knowledge through a large number of training initiatives carried out in the Member States (Spain, Croatia, Austria, Poland and Slovenia) (for details, see Annex 4).

Furthermore, the EMCDDA co-organised the Third International Conference on Novel Psychoactive Substances, which took place in Rome on 15 and 16 May. The other organisers were: the University of Hertfordshire; the University of Chieti-Pescara; Sapienza University of Rome; the *Società italiana di psichiatria* and the Canadian Centre on Substance Abuse. The event followed on from the first two conferences held in Budapest (2012) and Swansea (2013). The prime objective of this NPS conference series is to increase knowledge and understanding of the nature and effects of NPS, as well as to promote innovative solutions in the field. As a co-organiser of this conference, the EMCDDA took an active role in the organisation of the event, provided the programme and publications, co-chaired most of the sessions, and closed the conference.

The event was preceded by a high-level International Conference on New Drugs organised by the Italian Dipartimento per le Politiche Antidroga, also in Rome, on 14 and 15 May. At this important event, a representative of the EMCDDA was a keynote speaker.

In 2014, the EMCDDA further strengthened its links with the informal forensic science and toxicology networks (see below, information on the first meeting on toxicovigilance organised with forensic toxicology experts). In addition to ad hoc exchanges of information with international leading forensic, toxicology and law enforcement experts in the field of NPS, the agency participated in two important events: the 2014 annual meeting of the European Network of Forensic Science Institutes and the first meeting of the Customs Laboratories European Network (CLEN) on designer drugs and illicit products.

Information exchange with the EMA and the EU pharmacovigilance system on medicines and substances with medicinal properties was ongoing in 2014. This included the provision of data on the misuse of pregabalin to the Pharmacovigilance Risk Assessment Committee (PRAC) of the EMA, on methadone medicinal products containing povidone, and on quetiapine abuse, misuse and dependency. Following a request by the EMA, information on all these substances was collected by the EMCDDA through its Reitox network.

The toxicovigilance component of the EWS was further developed in 2014. As part of the framework being established, a new reporting form for suspected adverse events was developed and tested for the preparation of the joint report on MT-45 and further piloted. In addition, a continuous review of key open-source information, including scientific and medical literature, was carried out and the results were disseminated through a dedicated EMCDDA Twitter feed.

Furthermore, owing to the growing importance of this component of the EWS, the EMCDDA organised the first expert meeting on toxicovigilance for NPS in Lisbon in December. Experts from Belgium, France, Hungary, the Netherlands, Poland, Sweden and the UK, the European Commission and the EMCDDA discussed the experiences in different countries, and the roles of forensic toxicology, emergency departments and poison information services.

## Improving Europe's capacity to monitor and evaluate policies (Main Area 6)

Since its creation, the EMCDDA has monitored various aspects of drug policy, including drug laws, drug strategies and action plans, drug policy coordination bodies, drug policy evaluation mechanisms and drug-related public expenditure. A database (the European Legal Database on Drugs) and network of legal correspondents constitute the main resources supporting the EMCDDA's reporting on drug laws.

In 2014, in response to the EU action plan on drugs (2013–16) overarching indicator 14, work in this area continued, monitoring developments in legislation, national drug strategies, coordination mechanisms and public expenditure estimates in EU Member States. This involved taking stock of current knowledge on drug policy and exploring different policy models.

Monitoring of drug policies was advanced through new analyses in the area of drugs and public expenditure. An overview of drug strategies around the world was also produced. There were also historical reviews of national drug policies in Austria and Poland, furthering our understanding of the diversity of national approaches in Europe.

Network building in this area included the annual meeting of legal and policy correspondents. We also continued to provide Member States with support in their evaluation of drug policies on request.

### Highlights and main achievements

The 15th Meeting of the Legal Correspondents of the European Legal Database on Drugs took place in Lisbon on 26–27 July. The meeting brought together representatives from the 30 EMCDDA Member States and experts from CICAD, Russia and Israel.

The participants exchanged information on national and EU legal updates, including laws controlling new drugs in some EU Member States. A special session was dedicated to naloxone, during which the legal status of naloxone in the different countries was discussed with regard to its use as an opiate antagonist, to prevent death following overdose. The discussions informed the satellite meeting on naloxone which was organised on 14 October in the margins of the annual DRD expert meeting (see Main Area 3). Following developments around cannabis legalisation, an overview of the drug laws in the Americas was provided by CICAD/OAS, which outlined the basic differences between the drug laws in the different countries of the Americas, and compared the legal frameworks of cannabis regulation in the three jurisdictions of Washington State, Colorado and Uruguay.

Two new analyses in the area of drugs and public expenditure were published in 2014. The study *Estimating public expenditure on drug-law offenders in prison in Europe*, which was released in February <sup>(29)</sup>, estimates how much 22 European countries spent on drug law offenders in prisons during the last decade. Based on this, an estimate of public expenditure on drug law offenders at the European level was made.

<sup>(29)</sup> Available at: [emcdda.europa.eu/publications/emcdda-papers/public-expenditure-drug-law-offenders-in-prison](http://emcdda.europa.eu/publications/emcdda-papers/public-expenditure-drug-law-offenders-in-prison)

A second analysis was presented in the EMCDDA Paper *Financing drug policy in Europe in the wake of the economic recession*, which was published in December <sup>(30)</sup>. By examining public expenditure in the areas where most drug-related activities are provided, this report looks at how austerity affected responses to the drug problem. While the full effect of austerity on drug policy is not yet clear, one of the tentative conclusions is that the countries hardest hit by the recession are the ones in which drug policy is most strongly affected.

Two new Drug policy profiles, on Austria and Poland, were launched in May. The profile on Austria traces the development of drug laws in the country from the time of the Austro-Hungarian Empire through to the present day. The profile on Poland begins with the early days of drug control in the country (in the 1920s), describes the changes related to the emergence of Polish heroin and highlights the role played by non-governmental organisations in shaping national responses.

The EMCDDA Paper *Regional drug strategies across the world* was published in March. It offers a comparison of the drug strategies and plans adopted over the last five years by six intergovernmental organisations engaging 148 countries in four continents. It informs decision-makers, professionals and researchers working in the area of international drug policy about the way in which countries of the same region have decided to strategically approach drug-related security and social and health problems.

Supporting Member States' activities in the area of drug policy evaluation is another important task for the agency. In 2014, input and/or technical support was provided to policymakers and professionals from EU Member States such as Ireland, France, Sweden and Slovenia. Support was also provided to non-EU countries such as Bosnia and Herzegovina and the USA.

Furthermore, the EMCDDA shared its experience of monitoring public expenditure in the field of drugs in the EU through various capacity-development activities and training sessions. In September, at the request of the Israeli Drug Monitoring Centre, and in the framework of the ENP technical assistance project (see Main Area 8), a special Reitox Academy, 'Estimating public expenditure in the field of drugs', was held in Tel Aviv for 33 Israeli experts. This Academy was organised to support a two-stage study being launched in Israel by the IADA, 'Estimating drug-related public expenditures, social costs and cost-utility'.

## Scientific coordination, research and content support (Main Area 7)

The scientific work of the EMCDDA covers a wide range of complex topics that require detailed knowledge and specialised expertise. An ongoing commitment to improving the scientific quality of our work is a prerequisite for fulfilling our role as a centre of excellence for the collection, analysis and dissemination of drug-related information. It is, therefore, a primary objective for scientific management and coordination.

Top priorities in 2014 were to ensure a good overall performance in the work of the Scientific Division, in close coordination with the work performed by other units; to complete the EMCDDA's proposal for a revised national reporting system (in collaboration

<sup>(30)</sup> All Papers are available at: [emcdda.europa.eu/publications/emcdda-papers](http://emcdda.europa.eu/publications/emcdda-papers)

with the NFPs); to ensure the high quality of the Centre's scientific publishing; and to coordinate other cross-cutting activities, in particular in the areas of training, emerging trends and monitoring misuse of medicines in the context of polydrug use.

In performing its scientific work, the EMCDDA benefits from the support of the Scientific Committee, which plays an important advisory role.

## | Highlights and main achievements

### Scientific Committee

In December 2013, the EMCDDA Management Board selected a new Scientific Committee for 2014–16. The newly appointed Scientific Committee met in Lisbon for the first time from 31 March to 2 April and elected its new Chair and Vice Chair for the next three years. Professor Dr Gerhard Bühringer (Germany) was elected to the position of Chair and Dr Anne Line Breteville-Jensen (Norway) to the position of Vice Chair.

A presentation on the various tasks to be fulfilled by the Committee was given by the Director, the scientific director and other staff members of the EMCDDA. These tasks included the preparation of formal opinions on the agency's work programmes; risk assessment of NPS; input to the EU action plan on drugs 2013–15; contribution to HDG's Annual Dialogue on Research; and peer-reviewing of EMCDDA publications.

During the meeting, the Scientific Committee — with the participation of additional experts from the EU Member States, the European Commission, Europol and the EMA — carried out formal risk assessments of four new substances (25I-NBOMe, AH-7921, MDPV and methoxetamine) and risk assessment reports were submitted to the European Commission and the Council of the EU in April. On the basis of these, the Commission recommended to the Council on 16 June that the drugs be subjected to control measures across the EU (see Main Area 5).

The second meeting of the Scientific Committee took place in September and dedicated one day to the risk assessment of 4,4'-DMAR and MT-45 (see Main Area 5).

During the following days, a formal opinion on the agency's 2015 work programme was adopted and preliminary discussions on the 2016–18 EMCDDA strategy were held. The scientific evaluation of policies and interventions and the process for reviewing EMCDDA publications were also discussed, as were improved procedures for future rounds of the EMCDDA Scientific Paper Award. Recent developments in the risk assessment of NPS were also reviewed.

Furthermore, the EU action plan on drugs (2013–16) calls on the EMCDDA Scientific Committee to contribute to the Annual Dialogue on Research of the Council's HDG. In line with Action 46 of the action plan, this advisory input involves proposing research priorities (within areas covered by the expertise of the Committee), as well as suggesting ways to promote synergies and complementarity and prevent overlaps in research funding. During its meeting, the Committee adopted its formal contribution to this year's Annual Dialogue on Research, which followed on 5 November in Brussels.

The Scientific Committee members were also actively involved in the 2014 edition of the EMCDDA Scientific Paper Award, as reviewers, nominators of articles and members of the jury.

The Scientific Committee members who reviewed publications in 2014 were (in alphabetical order): Henri Bergeron, Anne Line Bretteville-Jensen, Gerhard Bühringer, Catherine Comisky, Paul Dargan, Brice De Ruyver, Gabriele Fischer, Henk Garretsen, Dirk Korf, Krzysztof Krajewski and Letizia Paoli.

The following publications were peer reviewed: *European Drug Report: Trends and developments* report; *Pregnancy and opioid use: strategies for treatment* (EMCDDA Papers); *Financing drug policy in Europe in the wake of the economic recession* (EMCDDA Papers, released in 2015); *Treatment of cannabis-related disorders in Europe* (Insights, to be released in 2015); and *Psychiatric co-morbidity in Europe* (Insights, also to be released in 2015).

MEETINGS OF THE SCIENTIFIC COMMITTEE		
31 March–2 April	Lisbon	40th meeting of the Committee
16–18 September	Lisbon	41st meeting of the Committee

### Scientific coordination

A key priority in 2014 was to further improve the quality and coherence of the EMCDDA's information collection and reporting system. An important part of the process was the redefinition of the national reporting system, in close consultation with the NFPs. The project, which started in 2011 with a systemic review of tools, gained further relevance in 2014 when the budget of the agency was cut by 5 %, with a knock-on effect on the Reitox NFPs, whose grants were consequently reduced. This triggered the need to rationalise the reporting system, with a view to decreasing the burden on the data providers at national level while ensuring maximum value was gained from the investments made. The work culminated in November 2014 with the adoption by the HFPs of the proposal put forward by the EMCDDA (see Main Areas 1 and 10).

Furthermore, given that data collection capacity at national level is limited, ongoing review of existing data demands and careful scrutiny of new requests are needed. A data coherence group was set up in 2014 in consultation with the NFPs, with the objective of implementing a mechanism to check the quality and coherence of tools, including the adoption of new tools; scheduling regular and coordinated reviews of tools; and harmonising terminology across tools.

Dissemination of information is at the core of the EMCDDA's operation. Providing training is one way of informing experts at different levels about the agency's findings and results. In 2014, an integrated training strategy was developed, building on experiences acquired from academic training activities, capacity-building projects and other initiatives.

As far as academic training is concerned, the successful partnership launched in 2012 between ISCTE-IUL and the EMCDDA, with the purpose of collaborating on the development of a summer school on 'Drugs in Europe: demand, supply and public policies', continued in 2014, with the third such event (30 June to 11 July).

New this year at the summer school were video lectures with representatives of civil society from Greece and the Netherlands. In addition, two study visits were arranged, offering students the opportunity to learn more about Portuguese drug policy. The two-week course was attended by 28 participants from Europe, Latin America, the USA

and Asia. Through evaluation questionnaires, the students expressed a high degree of satisfaction with the course, particularly its comprehensive and interactive approach. On a scale from 0 (not satisfied) to 10 (very satisfied), the average level of student satisfaction with the summer school was 8.83. In addition, almost all the students stated that they would recommend the summer school to others.

Another very important channel for knowledge dissemination is scientific publishing. In 2014, 43 scientific publications were released by the EMCDDA (including a few joint publications with our partners) and 21 scientific articles authored or co-authored by EMCDDA staff were published in prestigious journals. The complete list of publications is presented in Annex 3.

Important to ensuring the high value of our publications is the implementation of the EMCDDA overall scientific quality control framework. This includes a sound quality control procedure which is supported by an internal tool — the products database — that includes all EMCDDA products, in their different stages of preparation, with clear indications of the staff member or members responsible for each and the production timeline. Furthermore, a peer review system is in place. This system was improved in 2014 when the guidelines developed by the EMCDDA were presented to the Scientific Committee and endorsed by it.

### Emerging trends

Detecting new trends is an important part of the agency's work, which ensures that our monitoring systems keep pace with the dynamic evolution of the drug situation and, even more importantly, that they can anticipate trends and inform timely reactions.

In 2013, the EMCDDA launched a trendspotter study on methamphetamine in Europe, which was followed by an expert meeting. The results are presented in the EMCDDA Paper *Exploring methamphetamine trends in Europe*, which was published in January. The methodology used was based on the triangulation of data collected from multiple sources using various investigative approaches.

A new EMCDDA trendspotter case study, on Internet drug markets in Europe, was undertaken in 2014. This started with a phase of data collection and a literature review, culminating in an expert meeting. The aim of the study was to increase understanding of the online supply of drugs and undertake a mapping of the range of Internet markets in existence. There were specific focuses on the sale of NPS, research chemicals and legal highs; the use of social media and apps; online sale of medicinal products for illicit use; and the sale of drugs on the deep web.

Fourteen international experts attended the meeting, sharing their experiences and contributing to an analysis of the topic, providing insights from IT, research and monitoring, law enforcement, and Internet and drug user perspectives.

The results will be presented in the EMCDDA report *The Internet and drug markets* (to be published in 2015).

### Monitoring the misuse of medicines

In 2014, the EMCDDA continued its work on the misuse of medicines, with the aim of developing and proposing a conceptual framework for monitoring such misuse by the end of 2015. To this end, a case study on misuse of benzodiazepines among high-risk drug



users was carried out. A POD will be published in 2015, presenting the results of the different activities carried out so far.

The misuse of medicines classified as NPS has been a growing area of work for the EWS on new drugs (see Main Area 5); within this area, regular exchange of information took place with the pharmacovigilance system of the EMA.

Furthermore, following reports of some serious harms linked to the illicit injection of oral methadone solutions containing high-molecular-weight povidone, the PRAC of the EMA asked the Centre to provide information on the use of methadone-containing medicines. The request was part of the Article 107(i) referral procedure that led to the recommendation that oral methadone solutions containing high-molecular-weight povidone be suspended from the market.

There was also ongoing monitoring and analysis of the existing data (such as TDI and DRD) on synthetic opioids (including methadone, buprenorphine and fentanyl), conducted during the year and realised through various EMCDDA publications (e.g. a *Drugnet* article on the EDR and the proceedings from the TDI and DRD expert meetings).

The year also saw intensive collaboration with external partners. Following a joint project with ESPAD, an additional question on misuse of medicines was introduced to ESPAD's EMQ, to be piloted in 2015. Further contributions were provided to the Pompidou Group, for a project on gender and misuse of medicines, and to the European Parliament, following a request for information on benzodiazepines.

### Drug-related research

The EMCDDA continued to follow closely EU and national drug-related research projects and present information publicly on its website <sup>(31)</sup>, as well as on dedicated Intranet pages. Ongoing contact and collaboration with drug-related research consortia took place in 2014. These included ALICE RAP, the sewage profiling project SEWPROF, SCORE (Sewage biomarker analysis for community health assessment), LINKSCH <sup>(32)</sup>, ERANID <sup>(33)</sup> and DECIDE (Developing and evaluating communication strategies for supporting informed decisions and practice based on evidence). Furthermore, the EMCDDA hosted meetings of the ERANID and LINKSCH projects, in May and November respectively.

In addition, the EMCDDA hosted, for the second time, the European Masters in Drug and Alcohol Studies (EMDAS) graduation ceremony. During the event, which took place on 30 September, 25 students received their diplomas.

Furthermore, four researchers were distinguished with the 2014 EMCDDA Scientific Paper Award. The fourth edition of this prize, which was inaugurated by the Scientific Committee in 2011, took place on 25 November in the margins of the third Reitox Week (see Main Area 10). Over 60 eligible articles, authored by European scientists and published in peer-reviewed journals in 2013, were assessed by an award committee. The four winners (primary authors) were Florian Buchmayer (Austria), Annabeth Groenman (the Netherlands), Michael P. Schaub (for a paper written in the framework of EQUUS, a

<sup>(31)</sup> [emcdda.europa.eu/topics/research](http://emcdda.europa.eu/topics/research)

<sup>(32)</sup> LINKSCH, set up under the European Commission's Seventh Framework Programme of Research, unites researchers from France, Germany, the Netherlands and the United Kingdom.

<sup>(33)</sup> ERANID (European Research Area Network on Illicit Drugs) is an ERA-NET project funded through the SSH Theme of FP7: <http://www.eranid.eu/>

European Commission-funded project on minimum quality standards in drug demand reduction) and Jürgen Rehm (Germany).

In 2014, the agency continued to contribute to studies and research. The EU action plan on drugs 2013–16 names, for the first time, the EMCDDA's Scientific Committee as an actor in three actions related to drug research in Europe. The EMCDDA, advised by its Scientific Committee, supports the European Commission in the preparation of the European Council's Annual Dialogue on Research <sup>(34)</sup>, which takes place within the framework of the HDG. This year's contribution by the Scientific Committee was submitted on 5 November.

Preparatory work for Lisbon Addictions, which will take place in Lisbon on 23–25 September 2015, started in 2014. The event will be organised by SICAD, in collaboration with the scientific journal *Addiction*, the International Society of Addiction Journal Editors (ISAJE) and the EMCDDA. A call for abstracts was launched on 31 October.

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<sup>(34)</sup> Council of the European Union, 'Council conclusions on strengthening EU research capacity on illicit drugs', Cordroque 78, 17177/09, Brussels, 7 December 2009.



## CHAPTER 4

# Cooperation and collaboration with key partners (Main Area 8)

Cooperation with key external partners, namely with EU institutions and bodies, national policymaking bodies, international organisations, civil society and third countries, represents an important part of the EMCDDA's work within the current three-year strategy and work programme, which commits the agency to strengthening and enhancing cooperation with European, national and international partners.

Throughout the year, the agency provided technical support to the EU institutions and Member States and continued to build synergies with other EU agencies and international organisations; furthermore, the EMCDDA continued its successful work with candidate and potential candidate countries and ENP countries, with a view to supporting them in developing their drug monitoring capacity in line with EMCDDA standards. This transfer of knowledge was mainly accomplished through the completion of a technical assistance project funded by the European Commission under IPA 4, and the implementation of a new, similar, project in partner ENP countries.

### Highlights and main achievements

#### The EU institutions

In 2014, the EMCDDA continued to support drug policy dialogue at EU level by providing expertise and technical information to the European Parliament, the Council of the EU and the European Commission.

Regarding the agency's collaboration with the European Parliament, the findings from the EDR (see Main Areas 1 and 9) were presented by the Director to the Civil Liberties, Justice and Home Affairs Committee (LIBE Committee) of the Parliament in Brussels, on 25 September. On this occasion, Mr Götz also presented the highlights of the 2013 *General Report of Activities*, which gave an overview of the main achievements of the EMCDDA during the year.

The President of the European Parliament, Martin Schulz, visited the EMCDDA and EMSA on 23 September. Mr Schulz was accompanied by the Portuguese Secretary of State for European Affairs, Bruno Maçães; the Vice Mayor of Lisbon, Fernando Medina; and Pedro Valente da Silva, Head of the Information Office of the European Parliament in Lisbon. After a meeting with EMCDDA Director Wolfgang Götz and EMSA Director Markku Mylly, the President of the European Parliament participated in a press conference.

The Director participated in the public hearing 'A new approach to European drug policy for the 21st century', hosted by MEP Nikos Chrysogelos (Greens/European Free Alliance) on 5 March in Brussels. The scientific staff of the agency also attended a hearing on hepatitis C and drug use and delivered the presentation 'What do we know about the prevalence of HCV among PWID? Overview of HCV data and facts' on 12 February in Brussels.

Furthermore, the Director visited the European Parliament three times during the year: on 23–24 July, when he held a series of meetings with MEPs Gardiazábal Rubial (Spain), Tomáš Zdechovský (Poland), Jimenez-Becerril Barrio (Spain) and Gérard Deprez (Belgium), on issues concerning the EMCDDA budget for 2015; on 24 September, when he met with MEP Michał Boni (Poland), rapporteur for regulation on NPS; and, finally, on 18 November, when he met with MEP Joseph Weidenholzer (Austria) on drug trafficking.

The EMCDDA also contributed to the new LIBE Committee newsletter, with updates on its activities of interest to EU citizens.

In terms of the agency's cooperation with the Council of the EU, an important event was the presentation by the Director of the EDR to the Council of JHA Ministers on 5 June in Luxembourg. The EMCDDA also presented the EDR to the Working Group on the External Dimension of Justice and Home Affairs in June.

Furthermore, the EMCDDA participated in eight meetings of the HDG held during the year under the Greek Presidency and the Italian Presidency and provided presentations and active contributions to the discussions, in particular on NPS, which remained one of the topics of highest interest. Furthermore, the EMCDDA gave a presentation on harm reduction interventions for the prevention of HBV and HCV among injecting drug users at the high-level meeting organised under the Greek Presidency in Athens (3–4 June). Under the Italian Presidency, the agency also participated in the expert group on minimum quality standards for demand reduction and the Presidency-led group on the EU position for the UN General Assembly Special Session on drugs 2016 and delivered a presentation on harm reduction for people who use drugs at a regional conference of the Second Health Programme, implemented by the Consumers, Health and Food Executive Agency (20–21 October, Rome).

Contributions were also brought to dialogues with the Western Balkans, the USA and Peru, and meetings of EU national drug coordinators, the EU–Community of Latin American and Caribbean States (CELAC) partnership, the Central Asian Partnership and the Dublin Group. A list of events attended by the EMCDDA can be found in Annex 4.

Another important task for the EMCDDA is supporting the EU policy cycle for organised and serious international crime 2013–17 within COSI. In 2014, the EMCDDA fulfilled the tasks assigned to it in the OAPs, providing contributions in the fields of synthetic drugs, cocaine and heroin (see Main Area 4).



*The President of the European Parliament Martin Schulz (centre) visited the EMCDDA and the European Maritime Safety Agency on 23 September*

In terms of the agency's cooperation with the European Commission, collaboration was further strengthened in 2014 through coordination dialogues with DG JUST, DG HOME and the Directorate-General for Health and Food Safety (DG SANCO).

Furthermore, on 13 May the EMCDDA received a visit from Ms Anabela Gago, new head of the Organised Crime and Relations with the EMCDDA Unit at DG HOME. The discussions focused on issues related to the relations of the EMCDDA with the EU institutions and collaboration with other JHA agencies.

In terms of institutional cooperation, as of November, when a new European Commission took office, the newly created DG Migration and Home Affairs became the partner DG of the EMCDDA (see Main Area 10).

At a technical level, in 2014 the Commission addressed several requests regarding NPS, including a request to consult the national EWS on the most common hypernyms used to refer to NPS, so that they could be added to a question in Eurobarometer 2014, and a request to participate in the Early Warning and Response System (EWRS) put in place by the Commission.

In 2014, intense collaboration began between the EMCDDA, DG JRC and DG TAXUD to strengthen cooperation and enhance sharing of information with CLEN and co-organise the second meeting of the project group in 2015, with the participation of over 60 experts (see Main Area 5).

Furthermore, the EMCDDA stepped up its collaboration with Eurostat in the area of supply key indicators (see Main Area 4). After a review of their data on criminal and non-criminal offences, the two institutions agreed that, in future, the EMCDDA will take over data collection and analysis in this area. This synergistic approach will improve the comparability and quality of these data, which are an important proxy indicator of drug-related crime.

Twice a year, the EMCDDA participates in the meetings of the EU HIV/AIDS think tank organised by DG SANCO. The meetings gather representatives from the EU Member States and the main European and international organisations working in the infectious disease field. In 2014, the EMCDDA contributed to meetings organised in Luxembourg and Rome and presented the results of the EDR 2014, with a special focus on drug-related infectious diseases and harm reduction interventions.

As part of the inter-agency networks, the EMCDDA provided input and contribution to the work of and meetings between the Commission (the Directorate-General for Human Resources and Security (DG HR) and the Directorate-General for Budget (DG BUDGET)) and the EU agencies on issues regarding the implementation of the new staff regulations (see Main Area 11).

The EDR 2014 was presented to the European External Action Service (EEAS) on 3 June in Brussels.

During the year, the EMCDDA increased its collaboration with various EU-funded projects. In the area of NPS, the agency collaborates with I-TREND and Spice II Plus, and is a partner of and advisor to the Response project, funded under the ISEC 2014 call. In addition, the EMCDDA is a member of the steering group of the Euro-DEN project, which monitors cases of NPS and cannabis toxicity in a number of emergency care facilities throughout Europe, and, two project meetings EMCDDA staff attended in 2014. In the area of the fight against infectious diseases, the EMCDDA was invited to contribute to the

new joint action on HIV and co-infection prevention which was initiated by DG SANCO in 2014. The Centre provided input to the preparation of this project and participated in two preparatory meetings.

EMCDDA staff provided their input as trainers to several workshops funded by the Technical Assistance and Information Exchange (TAIEX) instrument managed by the Directorate-General for Neighbourhood and Enlargement Negotiations. The workshops were on enhancing the quality of drug addiction treatment (Zagreb, 19–20 May, and Sarajevo, 26–28 March); and on NPS (Zagreb, 29 June–5 July and 17–18 November). Furthermore, the EMCDDA provided scientific advice to the TAIEX project with regard to a Croatian study on drug-related social costs.

## Member States

Cooperation with the Member States is key to the successful implementation of the EMCDDA's activities. The agency's monitoring systems rely on the information provided by the 30 reporting countries, including the 28 Member States. Throughout the year, technical support was provided to national data providers, including through ongoing contact and assistance and through the Reitox Academy training programme (see Main Areas 1–7 and 10).

In addition, some events were organised by national authorities to which the EMCDDA was invited to provide input. These included the presentation given by the Director at the Conference 'Building the Bridges: drug dependence in Central Asia and Afghanistan and the activities of the European Union to improve access to and quality of treatment', organised by the Federal Ministry of Health of Germany.

On 1–4 September, following a request from the Latvian authorities to ECDC, the EMCDDA joined the latter in making a joint assessment of the drastic HIV situation among PWID in the country and providing an overview of the necessary responses.

Furthermore, the Scientific Director and other agency staff members participated in several hearings and panel reviews organised by the Swedish Government on drug-related and by the British Home Office on NPS. Acknowledging the important contribution of the EMCDDA to the NPS debate in the UK, the British Minister for Crime Prevention stated that the input of EMCDDA staff will contribute to 'a more robust policy position' on NPS in his country.

In addition, the agency received visits from several high-level delegations from Denmark, Germany, Finland, Hungary, Norway and Portugal (see Main Area 10).

## Collaboration with Portugal, our host country

As the host country of the EMCDDA, Portugal is a Member State to which particular attention has been paid in terms of continuously improving the Centre's collaboration with its authorities, namely the Parliament, Government and Presidency of the Portuguese Republic. In 2014, there was ongoing contact between the EMCDDA and the Portuguese authorities, within the framework of the Seat Agreement, in the context of the negotiations over the selling of the former headquarters of the EMCDDA (see Main Area 10).

Furthermore, several high-level members of the Portuguese Government visited the agency in 2014 (see Main Area 10). One of the highlights was the presence of the Minister

of Health, Mr Paulo Macedo, at the reception held at the EMCDDA's premises in the margins of an event on 26 June to mark the international day against drug abuse and illicit trafficking. In his speech, the Minister raised awareness among the diplomatic community about a number of issues relevant to the EU as regards information on drugs and underlined the importance of the work of the agency. The Minister said: 'The EMCDDA has the critical role of providing the European Union and its Member States with reliable, comparable and evidence-based information on the drug situation, which allows sound decisions to be taken by policymakers across the EU. For Portugal, the added value of having EMCDDA in Lisbon is beyond doubt. This proximity has fostered an excellent collaboration with the Portuguese authorities, with SICAD in particular, which has facilitated the participation of local professionals in the activities of the EMCDDA and has promoted overall experience exchange between Portuguese and European experts.'

### EU agencies and international organisations

The year 2014 also saw important developments in the agency's collaborations with other EU agencies, within the existing agreements and work programmes.

At institutional level, the EMCDDA contributed to the two Heads of agencies network meetings.

The Centre's staff contributed also to the work carried out within the inter-agency networks, such as the EU Agencies Network of Scientific Advisors (EU-ANSA); Heads of administration; Heads of communication; Performance Development Network; and the Inter-Agency Legal Network. Furthermore, the EMCDDA co-organised, together with EMSA, the 23rd meeting of the agencies' information and communications technology (ICT) managers network, and a workshop entitled 'Innovation in communication'. A workshop on media relations was also co-organised by the EMCDDA in Brussels in November (see Main Area 9).



*Signature of Memorandum of Understanding between the EMCDDA and Eurojust on 15 July in The Hague: Director Wolfgang Götz and the President of Eurojust, Michèle Coninx*

Joint work was also carried out in the framework of the JHA agencies cluster, which was created in 2006 in order to foster JHA inter-agency cooperation. The Director attended the 2014 annual meeting, which was organised by the European Asylum Support Office (EASO) in Valletta on 3 November, and the Fourth Informal Strategy Meeting between the Director General of DG HOME and the directors of Home Agencies, which took place in Gozo, Malta, on 9–10 May.

The EMCDDA also contributed to the meetings of the JHA agencies contact group <sup>(35)</sup> which took place in Valletta. Furthermore, under the chairmanship of EASO, a special meeting of JHA press

<sup>(35)</sup> The JHA agencies contact group is composed of representatives of Europol, Eurojust, CEPOL, Frontex, FRA, eu-LISA, EASO, OLAF and the European Commission (DG Home, DG Justice, Secretariat General). This informal group was set up by Europol under the Swedish Presidency to support and prepare for the annual meetings of JHA agencies' directors, and to monitor multilateral cooperation.



officers and communication multipliers was organised on 31 March in Valletta and a joint brochure on JHA agencies was produced for dissemination to the general public<sup>(36)</sup>. The EMCDDA also contributed to the joint meeting between the Commission, the EEAS and the JHA agencies organised on 23 October in Brussels. Also at institutional level, in 2014 the EMCDDA stepped up its cooperation with Eurojust. A MoU between the two agencies was signed on 15 July in The Hague by EMCDDA Director Wolfgang Götz and the President of Eurojust, Michèle Coninx, who reaffirmed their agencies' commitment to strengthening action against illicit drugs and related crime in the EU.

The MoU focuses on drug-related matters relevant to judicial cooperation — including drug supply, drug supply reduction and legislation — and will be implemented through joint activities, decided on the basis of the partners' work programmes. The contribution provided by the EMCDDA to Eurojust's strategic meeting on drug trafficking, held in The Hague on 29–30 September, should also be noted.

Institutional cooperation with FRA was also strengthened: a service level agreement was signed in April between the directors of the EMCDDA and FRA. The agreement grants the EMCDDA licence rights to Matrix 2.0, the management information system (MIS) developed by FRA for planning, monitoring and reporting work programme activities. The EMCDDA is planning to customise and implement this solution in 2015 (see also Main Area 10).

Building on the existing excellent cooperation between the two agencies, the Centre continued to build further synergies with EMSA, particularly in the areas of staff training, logistics and infrastructure management, and ICT. This was highlighted by the Commission as a model of successful collaboration between EU agencies which should be replicated elsewhere.

Finally, the EMCDDA consulted the JHA agencies, as well as ECDC and EMA, on its draft work programme for 2015. In turn, the agency was invited to provide feedback on the work programmes developed by Europol, EASO, Eurojust and CEPOL.

At a technical level, collaborations with Europol (see Main Areas 4 and 5), CEPOL and Eurojust (see Main Area 4), EMA (see Main Area 5) and ECDC (see Main Areas 2 and 3) were further strengthened.

Cooperation with international organisations was also enhanced in 2014, in particular with UNODC, WHO, CICAD and the Pompidou Group.

Cooperation with UNODC takes place within the framework of the joint work programme for 2012–14 and highlights strategic areas of work, such as development of standards for data collection and data analysis; capacity-building; and exchange of best practices. In 2014, experts from the two organisations discussed, among other issues, work related to the UN Early Warning Advisory on NPS and the EU EWS on NPS, with a view to exchanging data on NPS and aiming to achieve synergies in their work and reduce national reporting burdens.

Exchange of information also took place during the various meetings organised throughout the year by the Centre and UNODC. The EMCDDA contributed to the Afghan Opiate Trade Project informal meeting on major drug trends, the Second International Conference on Governance, Crime and Justice Statistics, a workshop on Afghan heroin

<sup>(36)</sup> Available at: [emcdda.europa.eu/html.cfm/index229337EN.html](http://emcdda.europa.eu/html.cfm/index229337EN.html)

trafficking through the southern route and the 57th session of the Commission on Narcotic Drugs in Vienna, 13–21 March. UNODC was involved in the 14th Annual Meeting of the Reitox EWS Network, the regional Reitox Academy 'Effectiveness and efficiency of drug abuse prevention programmes' and the Albanian TDI data collection information system software development meeting.

The EMCDDA contributed also to the UNAIDS Expert Consultation 'Changing the Game', aimed at achieving a further reduction in new HIV infections in Europe and putting an end to death from AIDS as a result of discrimination.

Cooperation with WHO Europe in recent years has covered prisons and infectious diseases, whereas cooperation with WHO Headquarters has focused on quality standards of interventions and the monitoring of treatment systems. In 2014, the EMCDDA contributed to the WHO's work on the development of standards in drug treatment, with a specific contribution to WHO guidelines on the management of opioid overdose and WHO guidelines on the identification and management of substance use in pregnancy.

In the area of prisons and drug use, as a member of the steering group of WHO Europe's Health in Prison Programme, the EMCDDA attended the two meetings organised by WHO Europe. The agency also contributed to the WHO guidelines on health in prison, supplying a chapter on the epidemiology of drug use.

In addition, the WHO Europe expert on prisons contributed to the definition of the EMCDDA methodological framework on monitoring drugs in prisons in Europe and in particular to our European questionnaire on drug use among prisoners (see Main Area 2).

In terms of collaboration with CICAD, the EMCDDA attended the CICAD Demand Reduction Consultation Task Force, a workshop on alternatives to incarceration. The agency also actively contributed to the 55th regular session of CICAD.

The EMCDDA contributed also to the two executive training sessions for drug policy managers, 'Drug policy implementation under budgetary constraints and austerity measures', organised by the Pompidou Group.

Finally, all the EMCDDA's key external partners took part in the consultation process for the new 2016–18 EMCDDA strategy and work programme.

### Candidate and potential candidate countries

Cooperation with candidate and potential candidate countries continued in 2014 within the framework of the IPA 4 technical assistance project. Within the project, seven IPA beneficiary countries (Albania, Bosnia and Herzegovina, Montenegro, Kosovo\*, Serbia, the former Yugoslav Republic of Macedonia and Turkey) were provided with capacity-building and technical support in order to prepare them for their participation in the work of the EMCDDA.

The project was successfully completed in 2014 and a closing ceremony took place on 24 November, preceding the third Reitox Week (see below). The national correspondents from the seven beneficiary countries presented the results of this three-year project, initiated in January 2012. The event also gave the EMCDDA the chance to present the first regional report on drug use in the Western Balkans (to be published in 2015), based largely on the national reports written this year by the project beneficiaries.

IPA 4 PROJECT IN A NUTSHELL	
<b>Duration</b>	36 months
<b>Budget</b>	EUR 900 000
<b>Beneficiaries</b>	Albania, Bosnia and Herzegovina, Croatia (until 1/07/13), the former Yugoslav Republic of Macedonia, Kosovo*, Montenegro, Serbia and Turkey
<b>General objective</b>	'To support IPA beneficiaries in their preparation for participation in the work of the EMCDDA and the Reitox network'
<b>Key results</b>	<p>Resulted in 304 instances of participation by country experts in 70 meetings and training sessions organised by the EMCDDA.</p> <p>Led to the first representative surveys on drug use among the general population in Albania, Kosovo* and Serbia, and a pilot survey (three cities) in Montenegro, in line with EMCDDA methodology.</p> <p>EMCDDA manuals and guidelines were translated into national languages and disseminated:</p> <ul style="list-style-type: none"> <li>– new protocol for collecting data on new clients entering treatment;</li> <li>– quick guide on European drug prevention quality standards;</li> <li>– ECDC and EMCDDA guidance on prevention and control of infectious diseases among PWID.</li> </ul> <p>Country overviews on the drug situation, updated in 2013, were produced.</p> <p>National reports, comprehensive resources updated in 2014, were written.</p>

An important component of the project was capacity development. In 2014, this was mainly achieved through several multi-country or national Reitox Academies implemented by the EMCDDA in Montenegro, Slovenia, and Bosnia and Herzegovina, as follows:

- The regional Reitox Academy for IPA 4 beneficiaries 'Drug law offences in the Western Balkan region: from definition to monitoring' took place on 2–3 April in Podgorica, Montenegro, with the participation of 23 experts from Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Kosovo\*, Montenegro and Serbia. Experts from the EMCDDA, Hungary and the US Embassy in Montenegro also attended the meeting.
- The regional Reitox Academy 'Effectiveness and efficiency of drug use prevention programmes' took place in Ljubljana, Slovenia, on 28–29 April. In total, 61 experts attended the first day of the Academy and 60 experts attended the second day. They represented Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Kosovo\*, Montenegro, Poland, Serbia, Slovenia and Turkey. The objectives were to discuss contemporary concepts for drug prevention in Europe and in participating countries, with particular focus on scope, objectives and evidence for universal prevention activities; to share best practice in improving the quality of prevention programmes through programme evaluation and certification; to present *European drug prevention quality standards: a quick guide*, and to discuss how these standards could be applied further in the participating countries.
- The Reitox Academy national seminar 'Implementation of European standards in developing strategic guidelines in the field of drugs' was held on 19–20 May in Sarajevo, Bosnia and Herzegovina. The objectives of the seminar were to discuss European best practice in defining national drug strategies and to facilitate the drafting of basic main principles for strategic guidelines in the field of drugs.

Furthermore, experts from the beneficiary countries attended various EMCDDA meetings held during the year. These included the key indicators annual expert meetings (see Main Areas 2 and 3) — GPS, TDI-PDU, and DRD and DRID — the annual EWS network meeting (see Main Area 5); the annual meeting of the legal correspondents (see Main Area 6); the third extended Reitox Week; and the ESPAD coordination meeting.

GPS were implemented in line with EMCDDA methodology for the first time in Serbia <sup>(37)</sup> (see also Main Area 2), Albania and Kosovo. In addition, a pilot GPS was carried out in Montenegro in order to prepare for a first GPS (see also Main Area 2).

These representative surveys provide important data on prevalence and patterns of drug use at national and regional levels. The results were published on the EMCDDA website.

Moreover, national reports on the drug situation were received from all the beneficiary countries (except Montenegro) and published on the EMCDDA website <sup>(38)</sup>.

An interactive Internet forum was implemented in 2014 with a view to strengthening day-to-day communication with the external partners of the EMCDDA, both inside and outside the EU (e.g. Reitox NFPs; candidate, potential candidate and ENP countries).

### European Neighbourhood Policy countries and other third countries

In 2013, the European Commission awarded the EMCDDA financing of EUR 450 000 for implementing a two-year technical assistance project in ENP countries. The project 'Towards a gradual improvement of ENP partner countries' capacity to monitor and to meet drug-related challenges' aims to strengthen the capacity of ENP partner countries (initially Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine; other ENP countries will be invited to participate in some project activities on an ad hoc basis) to react to new challenges and developments in the drug situation. The implementation of the project started on 1 January 2014, with the official kick-off meeting taking place at the EMCDDA on 5–6 March.

On-site visits took place in Moldova and Georgia, which allowed participants to agree on the next year's work programme and a framework for cooperation.

Cooperation with Israel was stepped up in 2014, thanks to a MoU signed between the EMCDDA and the IADA. The agreement was signed at the Israeli Ministry of Foreign Affairs by EMCDDA Director Wolfgang Götz and IADA Director General Yair Geller.

Israel submitted a formal request for cooperation with the EMCDDA in 2012. This led to a green light from the EMCDDA Management Board in December that year for the agency to negotiate a MoU with the IADA. The new accord — signed for an initial period of five years — will be implemented through a joint work programme. This will include steps to enhance the partners' monitoring and knowledge base on the drug situation and responses to it, particularly through harmonising key indicators in areas of both supply and demand. Special attention will be given to the regular exchange of information on the availability and use of new psychotropic substances, as well as the technologies employed in their production. The agreement provides for an exchange of technical expertise between the two bodies and the pooling of human and financial resources to launch joint programmes.

Furthermore, Georgia submitted a request for signature of a MoU on 3 December, which was submitted to the Executive Committee of the EMCDDA for analysis.



*Director Götz signs the Memorandum of Understanding at the Israeli Ministry of Foreign Affairs with IADA Director General Yair Geller*

<sup>(37)</sup> For GPS reports by country, see: [emcdda.europa.eu/publications/country-overviews/rs](http://emcdda.europa.eu/publications/country-overviews/rs)

<sup>(38)</sup> [emcdda.europa.eu/publications/searchresults?action=list&type=PUBLICATIONS&SERIES\\_PUB=w203](http://emcdda.europa.eu/publications/searchresults?action=list&type=PUBLICATIONS&SERIES_PUB=w203)

Capacity-building is central to achieving the objective of the project. To this end, in 2014 two multi-country Reitox Academies and one national Academy were organised, which reached some 60 experts from Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine, as follows:

- The Reitox Academy training course ‘Contemporary approaches in drug monitoring’ took place in Prague, the Czech Republic, on 8–12 September. The overall aim was to train professionals on how to organise a drug information system, to collect, analyse and interpret drug-related data, and to provide their different audiences with information on the drug situation that meets their needs for action. Twenty-eight participants, representing Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine, attended the course.
- The Reitox Academy professional training course ‘The European Union, the EU drugs policy and the relations with the European Neighbourhood Policy region’ took place on 28–29 October, in Brussels, for 15 participants from Armenia, Georgia, Israel, Moldova, Morocco and Ukraine.
- The Reitox Academy national seminar ‘Public expenditures in the field of drugs’ was held on 30 September–2 October, in Jerusalem, Israel, for 33 Israeli experts.

An important component of the new project is exchange of information, working practices and methodology on the identification of NPS with ENP partner countries. In 2014, a project to extend the functionality of the EDND (see Main Area 5) to disseminate appropriate information to ENP countries started. The objective is to allow access to non-restricted information on NPS to the partner countries.

The third Reitox Week took place on 25–28 November in Lisbon. This annual event (see Main Area 10) brought together representatives of over 40 nations, including the 30 Reitox network members; representatives from Albania, the former Yugoslav Republic of Macedonia, Serbia, Kosovo\*, Bosnia and Herzegovina, Morocco, Moldova, Ukraine, Israel, Georgia, Armenia, Azerbaijan, Lebanon, Algeria, Egypt and Russia.

The 2014 Reitox Week included a full-day session on the topical issue of cannabis legislation and policy. This provided the participants with the opportunity to hear experts from the USA, Latin America and Europe share their knowledge on developments in this area and the challenges it poses for drug monitoring.

The EMCDDA presented the EU drug data collection system and the operation of the EWS at a workshop aimed at strengthening the American National Drugs Observatories, organised by CICAD in Guatemala.

Another important event was the visit to the EMCDDA of a delegation of Ukrainian officials led by Mr Volodymyr Tymoshenko, Head of the State Drug Control Service of Ukraine. The visit was part of a study tour sponsored by UNODC. The EMCDDA signed a MoU with the Ukrainian Ministry of Health in 2010, establishing cooperation between the agency and the Ukrainian Medical and Monitoring Centre on Drugs and Drug Addiction. Ukraine is a priority partner country within the ENP and a member of the Eastern Partnership <sup>(39)</sup>.

<sup>(39)</sup> The Eastern Partnership (EaP) is a policy initiative that aims to bring the six Eastern neighbours — Armenia, Azerbaijan, Belarus, Georgia, Republic of Moldova and Ukraine — closer to the EU. It represents the Eastern dimension of the European Neighbourhood Policy (ENP) and strengthens bilateral relations between the EU and its partners.



# CHAPTER 5

## Supporting the achievement of results

### Communicating the EMCDDA's findings to external audiences (Main Area 9)

Communication is a core activity of the EMCDDA, both in supporting its role as an information agency and in helping further its reputation as 'the reference point on drugs in Europe'. The integrated communication strategy <sup>(40)</sup> adopted in 2012 sets out the fundamental principles for communicating our knowledge and presents the tools available to build and nurture relations with our stakeholders, target audiences and partners.

Activities in 2014 were guided by this strategy and its action plan, which aim to ensure that communication activities are not an isolated function at the end of a project, but an integral part of the agency's scientific and technical activity. At a time of heightened need for efficient use of resources, this integrated and multidisciplinary approach pools scientific and technical expertise to produce pertinent and cost-efficient results.

### Highlights and main achievements

#### Integrated communication infrastructure developed

Applying the integrated approach espoused by the new communication strategy requires significant changes to the way we work. In 2014, we continued to develop the practices and workflows with the scientific units to enable the most suitable end product and its appropriate communication channel to be identified at an early stage. In addition, guidelines have been prepared for the specific publications series to facilitate the work of authors and contractors.

Improving the planning of products has been a constant priority, and progress was made during the year in that regard. This was supported by the processes and tools which were put in place in previous years and improved in 2014. These include the regular 'Follow-up on products' meetings, which ensure that the progress of products is reviewed at least once a month and that delays are addressed. Work to improve the products database was also executed.

Furthermore, the work started in 2013 to review and rationalise the EMCDDA product range continued in 2014, with the aim of achieving a better mix of print and online products while taking into account new information-seeking behaviours and also the need to save costs. For example, the EMCDDA Papers and Risk assessment reports series are

<sup>(40)</sup> Available at: [emcdda.europa.eu/publications/communication-strategy](http://emcdda.europa.eu/publications/communication-strategy)

now online only. This led to improved timeliness, which is essential for our products, and it also had a positive impact on production costs. These costs were significantly reduced, with output prices falling by some 90 % per product. New formats for other EMCDDA series are being also finalised.

The EMCDDA has been also making efforts to implement a revised linguistic policy, which, on the one hand, observes the EU multilingual policy and, on the other hand, follows efficiency principles.

Synergies with relevant EU bodies were further pursued in this area. The agency's staff attended the first meeting of the Translation Management Network (Luxembourg, 2 December), where new tools and processes were presented. The EMCDDA also gave a presentation on the procedure for translating the EDR, which is seen by the Translation Centre as an example of best practice.

Owing to budgetary restrictions, fewer translations were ordered by the agency, and those which were requested were carried out at the cheapest rates possible. This may have been counterbalanced, however, by national initiatives to translate EMCDDA products: in 2014, an increasing number of requests were received from NFPs and other national organisations for permission to translate EMCDDA titles, especially manuals, guidelines and handbooks. The EMCDDA's translation guidelines have been updated and a process for tracking the results and ensuring their dissemination has been refined.

In 2014, the EMCDDA made some significant progress in the implementation of the terminology/glossary project. This continues efforts made in previous years in collaboration with the NFPs, and is part of our strategy to improve translation quality. In 2014, to mark the European Day of Languages on 26 September, the terms already validated and available in all languages were made available to all staff using a simple search tool on our Intranet. The third phase of the project will be finalised in 2015.

The implementation of the brand refresh that commenced in 2013 was completed and all EMCDDA publications, presentations, and promotional resources, press materials, etc., were produced in line with the new corporate identity, which gives a modern look to the EMCDDA's outputs.

Keeping abreast of the needs of our customers requires a regular review of how we are serving them and by what means. Following the detailed mapping exercise of our stakeholders and target audiences carried out in collaboration with the scientific units in 2013, an EMCDDA stakeholders engagement strategy was completed in 2014. The process benefited from sharing experiences with other EU agencies which are implementing similar projects. The EMCDDA attended the training course 'EU agencies' experience-sharing workshop on stakeholder engagement', which was organised by the European Chemicals Agency (Helsinki, 15–16 May). The event focused on three themes which were highly relevant for the development of the EMCDDA strategy: 'This is how we mapped our stakeholders'; 'This is how we engage and work together with our stakeholders (and how we respond to them)'; and 'This is how stakeholder engagement has paid off'.

The new strategy will become effective from 2015 and will be key to implementing the new EMCDDA strategy and work programme for 2016–18 (see Main Area 10).

Furthermore, as part of the overall EMCDDA performance management improvement strategy (see Main Area 10), KPIs were defined to allow more accurate measurement of the impact of the communication activities planned in the 2015 work programme. In addition, with a view to better understanding the audience reached via our website, an in-depth



analysis of web metrics was carried out in December. This was complemented by a website satisfaction survey which started to run in the same month and the results of which will provide the baseline data against which progress will be measured at the end of 2015.

### Publishing high-quality and timely products

In 2014, 55 products were published, including:

- The EDR package: Trends and developments; six PoDs; Data and statistics; 30 country overviews; 30 national reports;
- Two Insights;
- One joint publication;
- Fifteen outputs linked to the implementation of Council Decision 2005/387/JHA on new psychoactive substances (see Main Area 5);
- Nine EMCDDA Papers;
- Two drug policy profiles;
- Two brochures;
- Five technical reports and literature reviews;
- Five institutional publications; and
- Four Drugnet issues.

In addition, the 11 PODs which were produced as part of the EDR 2013 package were updated.

Furthermore, 21 scientific articles co-authored by EMCDDA staff were published in prestigious journals.

For a full list of publications, see Annex 3.

As mentioned before, keeping track of the numerous products that the information agency produces has been greatly facilitated by the processes and tools which were put in place as part of the overall publication quality assurance framework. This includes a products database which is kept up to date and regular editorial board and follow-up meetings where work is planned and the best use of available resources decided on.

All products were disseminated through the EMCDDA website and social media channels, along with news releases to mark the launch of key products.

### Increasing the relevance and impact of the EMCDDA's online presence

The EMCDDA website is the agency's primary means of communicating across all target audiences and is the key to reinforcing the agency's profile as the primary source of drug information in Europe. Following on from the content review carried out in 2013, key content began to be overhauled in 2014. Working in a web-focused environment requires a shift in language, style and technique. The communication team started to work closely with colleagues responsible for developing content to help achieve the best quality of communication possible across channels and languages.

Significant progress was achieved in some areas, such as improving the presentation of the *Statistical bulletin* (see Main Area 1) and the development of an interactive interface for displaying data on NPS. The revamped Best practice portal was also launched in October (see Main Area 3). Progress in other areas was slower, however, and one of the influencing factors was the revision of the national reporting system (see Main Areas 1, 7 and 10); if the structure of the website was to be aligned with the outcome of the

workbooks exercise, the process could not be implemented before the approval of the proposal by the HFPs, which took place at the end of November.

In parallel, work on tailoring the new content management system, Drupal, to the needs of the EMCDDA continued to progress well in 2014, with one contractor working on site. The date for a 'soft launch' of the new tool was fixed for the end of March 2015, when we will begin the migration of web content to the new content management tool.

### Enhancing visibility, reputation and recognition

The channels at our disposal to promote EMCDDA work results include the web, publications and print products, events and conferences, media relations, audiovisual material and social media. Exploring new dissemination options and tools is part of our commitment to efficiency, which requires us to further rationalise participation in external events, in line with the existing resources and priorities.

In 2014, the EMCDDA played a very active role within the network of agencies in promoting new communication approaches. In addition to participation in the regular meetings of the Heads of Communication and Information Network (HCIN) (Vienna, 29–31 January and 6–7 October), the EMCDDA co-organised two events which were attended by a large number of other agencies:

**'Innovation in communication workshop'** (Lisbon, 29–30 September), in partnership with EMSA. The workshop held sessions on 'Creating compelling videos', 'Exploring alternatives to paper publications' and 'Making the complex simple through data visualisation'. It was attended by some 40 participants from 14 agencies

**'Media relations workshop'** (Brussels, 25–26 November), in partnership with Fusion for Energy (F4E), the European Union Agency for Network and Information Security (ENISA) and FRA. The aim of the workshop was to help HCIN members improve their media relations work through the exchange of knowledge and best practice. It also allowed participants to benefit from the experience of communications staff from other EU institutions and media practitioners. The two-day event was organised in cooperation with the Council of the EU's Communication Unit in Brussels and gathered some 25 participants (from 20 agencies). In addition to being a member of the organising team, the EMCDDA chaired the plenary session 'Sharing best practice on media monitoring and impact assessment' and moderated the parallel session on video news releases and audiovisual material.

The role of staff as ambassadors was further developed through coaching in representation and training: the second stage of the 'Representing the EMCDDA' staff ambassadors' project (which kicked off in March 2012 and ran for three years) was completed during the year. In total, 75 staff improved their communication skills during the three-year training programme, 19 taking part in 2014.

Video production was further boosted in 2014, with 10 videos produced to promote key events and products, generating 12 322 views during the year.

The EMCDDA organised, or was represented at, several prominent events throughout the year. The agency had stands or displays at the 57th session of the Commission on Narcotic Drugs (Vienna, 13–21 March); 'Youth on the Move', an event organised to celebrate Europe Day (Lisbon, 9–10 May); and the Third International Conference on New Psychoactive Substances (Rome, 15–16 May), to name but a few.

Annex 4 presents a list of events attended by EMCDDA staff during the year.

The EMCDDA marked the international day against drug abuse and illicit trafficking (26 June) with an event at its premises for the Lisbon diplomatic community and its partners among the Portuguese authorities. Speeches were delivered by EMCDDA Director

Wolfgang Götz and by the Portuguese Minister of Health, Mr Paulo Macedo. The event was attended by 148 external guests, including members of the diplomatic community and of the Portuguese Government, and other personalities on the political scene. The second edition of the EMCDDA Insight 'Drug use, impaired driving and traffic accidents' (see Main Area 3) was released ahead of the event.

Awareness raising and promotion of the EMCDDA's work continued on several platforms, such as the presentation of the EMCDDA and its findings at a meeting of the drugs coordinators of the Portuguese-speaking countries (Lisbon, 12–14 November) and a meeting between the EMCDDA Director and the Portuguese Secretary of State for European Affairs (see Main Area 10).

Furthermore, 56 external visits to the EMCDDA's offices took place in 2014, involving 403 visitors (a 50 % increase on 2013, when there were about 260 visitors). Visits are an important aspect of the communications policy of the Centre. They support the EMCDDA in its role as an information agency and help it to further its reputation as 'the reference point on drugs in Europe'. Target groups are perceived as customers with a potential interest in EMCDDA outputs and authoritative information on drugs. Along with conferences, seminars and expert meetings, visits to the EMCDDA offer an invaluable opportunity to connect with key audiences. The work conducted by the EMCDDA and its partners has importance for a variety of target groups including policymakers; scientists and researchers; practitioners; and European citizens. Tailored presentations and information packs have proved effective and generally result in a high level of satisfaction among visitors. Ongoing support and visibility was given to the visits programme, through, for example, customised information packs and website and social media coverage (see Main Area 10).

Building sound contacts and relations with journalists and providing media-friendly information continued to be a priority in 2014. During the year, nine news releases, 12 fact sheets and 12 web news items were released to mark major events.

Furthermore, 245 requests were received by the press office in 2014, up by more than 50 requests on the previous year (194 in 2013; 166 in 2012); timely responses to all these requests were made.

The most important event of the year was the launch, on 27 May in Lisbon, of the 2014 EDR package (see also Main Area 1). The findings were presented at a press conference at the EMCDDA, which opened with a video message from European Commissioner for Home Affairs, Cecilia Malmström. On the panel were Chairman of the EMCDDA Management Board João Goulão, EMCDDA Director Wolfgang Götz and Scientific Director Paul Griffiths.

Commenting on the report, Commissioner Malmström said: 'This annual analysis from the EMCDDA provides us with a critically important window on Europe's evolving drugs problem ... It is essential that we use these data to ensure that the response by European authorities keeps pace with the evolving challenges we face.'

The purpose of the EDR is also to inform decision-makers in the Member States. With this in mind, the utility of the EDR for national policymakers within the EU was highlighted by the Portuguese Minister of Health, Mr Paulo Macedo, in his contribution at the event organised by the EMCDDA to mark the international day against drug abuse and illicit trafficking on 26 June (see Main Area 8). According to Minister Macedo: 'The *European Drug Report* published annually by the EMCDDA is a tool of major importance for policymakers and professionals alike, as it presents an in-depth analysis of the drug situation and responses, together with a long-term overview of the main trends and developments in the drug

phenomenon. This is a very useful perspective in that it allows us to better understand the national situation by placing it within the overall European context.'

As in previous years, the monitoring of the EDR was broken down into the following sections: 28 EU Member States plus Norway and Turkey (30 countries); EU institutions (European Parliament, Council of the European Union, European Commission); 'Europa' media (Brussels-focused media not linked to a particular country, e.g. The European Voice, Europolitics); and International media (countries beyond the 30 mentioned above).

In total, there were 1 600 items of coverage for the 28 EU Member States plus Turkey and Norway in 2014, down from 1 800 items in 2013, although the monitoring parameters were not as extensive as in previous years. France overtook Germany as the country with the greatest share of voice thanks to 232 items – 15 % of the European total. The UK (226), Portugal (187) and Germany (123) produced the next greatest volumes. EU institutions provided a further 11 items, a drop on the previous figure of 46 while 'Europa' generated 22 items, one less than last year.

Kantar Media has applied AVE and OTS figures to the coverage. These industry standard measurements give an approximate indication of the benefit to the EMCDDA from media coverage. AVE is an estimate of how much it would cost the EMCDDA if it were to pay for similar media space to promote itself, while OTS measures the number of people who may have an opportunity to view an article. The total AVE for all coverage was €13 106 187 and the total OTS was 667 011 024.

### Supporting scientific knowledge and research

Tailored information was proactively distributed to EMCDDA staff, and literature searches were carried out to support projects. The library answered over 540 individual requests during the year. Over 1 200 resources in various media were ordered, catalogued and made available promptly.

Furthermore, during the Eurolib meeting (Brussels, 4–7 November) and the Eurolib General Assembly (The Hague, 12–13 June) EMCDDA staff networked with librarians from other libraries to exchange experiences and share best practices.

## Governance, management and networks (Main Area 10)

Work continued in 2014 to successfully implement the 2013–15 strategy and work programme. This was, however, a particularly challenging year because of the aforementioned substantial budget cut, which resulted in a significant decrease in the EU subsidy allocated to the agency. This had an impact on the EMCDDA's operations which could be mitigated only through even stronger measures at governance and management levels.

### Highlights and main achievements

#### Management

The management of the agency was the responsibility of the Director, supported by his team of managers and the heads of unit, who are supported in their turn by their heads of sector.

Regular heads of unit meetings were organised throughout the year (nine in 2014). These meetings are the agency's main managerial forum, addressing both strategic and operational issues. In addition, the Coordination Group met 20 times to support the heads of unit meetings. Furthermore, regular scientific coordination meetings took place during the year, involving the heads of unit and the heads of sector from the Scientific Division.

### EMCDDA Director — main activities in 2014



*Visit of Katalin Novák, Minister of State for Family and Youth Affairs (Ministry of Human Resources) on 19 September. The Minister of State was accompanied by the Ambassador of Hungary in Portugal, Klára Breuer*

As in previous years, the Director contributed through his external activities towards increasing the visibility and consolidating the credibility of the work of the Centre by building and improving partnerships.

#### *The EU institutions*

The Director welcomed to the EMCDDA Mr Martin Schulz, President of the European Parliament, who paid a visit on 23 September 2014 to the two agencies located in Lisbon, the EMCDDA and EMSA. The Director presented, on 25 September, the EMCDDA's 2014 *EDR* and the 2013 *General Report of Activities* to the LIBE Committee of the Parliament. In July 2014, the Director met several members of the LIBE and Budget Committees to discuss EMCDDA's budget for 2015, and on 18 November, the Director met with MEP Josef Weidenholzer, a member of the LIBE Committee. The Director participated on 5 March in a public hearing at the Parliament, 'A new approach to European drug policy for the 21st century'.

The Director's key action in 2014 in the Council of the European Union was the presentation of the EMCDDA's 2014 *European Drug Report: Trends and developments* to a meeting of JHA ministers held on 5 June.

Concerning relations with the European Commission services, the Director had meetings in Brussels, on 29–30 January, with Ms Lotte Knudsen, Director of the Criminal Justice Directorate in DG JUST (whom he met again on 6 June), Mr Reinhard Priebe, Director of the Internal Security Directorate in DG HOME, and Ms Anabela Gago, the head of the Organised Crime and Relations with the EMCDDA Unit at DG HOME. He also participated in a conference organised by DG HOME, 'An open and safe Europe — What next?'. On 6 June, Mr Götz met with the newly appointed Director General of DG HOME, Mr Matthias Ruete.

The Director met with the representatives of the European Court of Auditors (ECA) during the audit of the annual accounts of the Centre concerning the financial year 2013, held on 10–14 February, and during the audit of the annual accounts of the Centre concerning the financial year 2014, held on 6–10 October.

#### *EU agencies*

Regarding relations with the other EU agencies, the Director participated in the heads of agencies meeting at FRA in Vienna, and in the JHA agencies meeting organised by EASO in Malta. Mr Götz also participated in the Fourth Informal Strategy Meeting of JHA Agencies in Gozo, Malta, in May.

The Director had several meetings with the directors of EMSA and the European Fisheries Control Agency (EFCA) to explore possible synergies between the agencies. The three directors met on 7 March in Brussels with the directors general and directors of DG HOME, the Directorate-General for Maritime Affairs and Fisheries and the Directorate-General for Mobility and Transport.

Still in the context of looking for potential synergies between EU bodies, the Director organised, on 19 March, a meeting of the heads of the EU bodies located in Lisbon: EMCDDA, EMSA, and the Offices of the European Parliament and of the European Commission in Lisbon.

### *Relations with EU Member States*

On 31 January, the Director welcomed Mr Paulo Macedo, Minister of Health of Portugal, to the EMCDDA. The Minister of Health also attended a reception held at the EMCDDA premises on 26 June to mark the international day against drug abuse and illicit trafficking, during which he delivered a speech. On 27 October, the Director welcomed Mr Bruno Maçães, the Secretary of State for European Affairs, to the EMCDDA. On 16 April, the Director met Mr Fernando Leal da Costa, the Secretary of State for Health.

On 2 April, the Director welcomed a delegation from the Committee for Social Affairs and Health of the Finnish Parliament to the EMCDDA.

On 18 April, the Director attended the conference 'Building the bridges: drug dependence in Central Asia and Afghanistan and the activities of the European Union to improve access to and quality of treatment', organised by the German authorities in Berlin. On 11 June, the Director welcomed to the EMCDDA the German Drug Commissioner, Ms Marlene Mortler.

On 19 September, the Director received a visit from Ms Katalin Novák, Hungarian Secretary of State for Family Affairs and Youth, accompanied by Mr István Hollik, Deputy Head of Cabinet, Ms Klára Breuer, Ambassador of Hungary to Portugal, and Ms Katalin Szurovszky, Counsellor at the Hungarian Embassy.



*Marlene Mortler, German Drug Commissioner at the EMCDDA on 11 June. The German Drug Commissioner was accompanied by Andreas Schoppa, Head of Cabinet at the German Ministry of Health*

On 22 September, the Director welcomed a delegation of members from the Legal Committee of the Danish Parliament to the EMCDDA, following a preparatory visit, on 9 September, from Mr Michael Suhr, the new ambassador of Denmark to Portugal.

On 22 October, the Director received Mr Govert Bijl de Vroe, the new ambassador of the Netherlands to Portugal, for a courtesy visit.

As in previous years, on 26 June the Director welcomed the ambassadors based in Lisbon as well as representatives of the Portuguese authorities to a reception held at the EMCDDA premises to mark the international day against drug abuse and illicit trafficking.

### *Relations with non-EU countries*

On 12 May, the Director welcomed Ms Ingvild Naess Stub, Secretary of State for European Affairs of Norway, accompanied by Mr Ove Thorsheim, Ambassador of Norway, to the EMCDDA.

On 11 June, the Director welcomed a high-level delegation of ministers from the Federation of Bosnia and Herzegovina, including Mr Sredoje Nović, Minister of Civil Affairs of Bosnia and Herzegovina; Mr Rusmir Mesihović, Minister of Health of the Federation of Bosnia and Herzegovina; Mr Dragan Bogdanić, Minister of Health and Social Welfare of Republika Srpska; and Mr Mladen Čavar, Deputy Minister of Security of Bosnia and Herzegovina. On 2 October, the Director welcomed a Serbian high-level delegation headed by Mr Aleksandar Nikolic, Secretary of State, Ministry of the Interior.

On 4 February, the Director signed a MoU between the EMCDDA and the Israel Anti-Drug Authority (IADA) in Jerusalem, where he met with the IADA authorities.

On 11 June, the Director welcomed a delegation from the United States Joint Interagency Task Force South (JIATFS), headed by its Director, Rear Admiral Mehling. On 16 September, the Director received a visit from a delegation of Californian state senators.

The Director also welcomed to the EMCDDA the following third-country ambassadors: Mr Mulya Wirana, Ambassador of Indonesia; the Ambassador of the Philippines in Portugal, Mr Philippe Jones Lhuillier; and Ms Keitumetsi Matthews, Ambassador of South Africa.

### *Other organisations and bodies*

On 13 March, the Director participated in the high-level segment of the 57th session of the Commission on Narcotic Drugs organised by UNODC in Vienna. The Director met with Mr Paul Simon, Executive Director of CICAD, in Brussels on 28 January.

On 19 November, the Director participated in the 16th Ministerial Conference of the Pompidou Group of the Council of Europe in Strasbourg.

The Director met on several occasions (on 3 September, 10 October and 18 December) with Mr Frank Francis, Director of MAOC-N.

### **Data protection activities**

Implementation of data protection activities was carried out throughout the year, to ensure compliance with the rules applicable to EU bodies (Regulation (EC) 45/2001). Some of the issues addressed included: draft European Data Protection Supervisor (EDPS) guidelines on e-communications; EDPS guidelines on conflict of interests; access to dangerous web pages; and an audit of EMCDDA activities.

Furthermore, the EMCDDA participated in the two Data Protection Officer (DPO) network meetings. These meetings are valuable training opportunities; they enable participants to make and develop contacts within the EDPS services; and, finally, they are an excellent framework for developing synergies between the institutions and bodies of the EU. One example is the fruitful cooperation established with other agencies, such as the EFCA, European Food Safety Authority (EFSA) and EMSA, which resulted in joint

activities, for example a video surveillance policy audit and a common approach to traffic penalties and fines.

Finally, great attention was paid to developing contacts with Portuguese national authorities in the field of data protection. With this in mind, the EMCDDA's DPO attended a number of conferences organised by these authorities, during which options for future cooperation were explored.

## External visitors

In 2014, the EMCDDA coordinated or organised 56 visits by external parties, involving 403 visitors. This represents an average of at least one visit per week, and the interest in the agency's activities has increased significantly since last year (in 2013, there were 45 visits involving 263 visitors).



*Visit of a delegation from Georgia: Lea Tsulukiani, Minister of Justice; Tamar Sanikidze, Minister of Education; Levan Izoria, Deputy Minister of Internal Affairs; Lasha Kiladze, Head of the Mental Health and Drug Prevention Centre in the Ministry of Healthcare; Beka Dzamashvili, Deputy Head of Public International Law Department in the Ministry of Justice and David Otiahvili, Head of the NGO 'Alternative Georgia'*

In some cases, these visits helped to improve the visitors' understanding of the EMCDDA's mandate and activities. For example, visitors included students from the Department of Applied Social Studies of the Karel De Grote University College of Antwerp, from the Faculty of Psychology and Pedagogy of the VU University of Amsterdam and from the Faculty for Psychology of Leiden; pharmacists from France; Polish police officers; representatives of the German Federal Administrative Court; and young lawyers from the regional courts of Frankfurt and Rottweil.

Another type of visit focused more on discussions about possible cooperation and exchange of technical knowledge in specific scientific areas. Examples this year were the visits of the Director of the JIATFS of the USA and of the Director General of Italy's Anti-Drug Services.

The President of the European Parliament, Mr Martin Schulz, honoured the EMCDDA and EMSA with his presence on 23 September, together with the Portuguese Secretary of State for EU Affairs, Mr Bruno Maçães, and the Vice Mayor of Lisbon, Mr Fernando Medina.

The German Drug Commissioner, the Hungarian Secretary of State for Family and Youth, the Portuguese Minister of Health and the Norwegian State Secretary to the Minister of European Economic Area and European Union Affairs paid a visit to the EMCDDA. Members of the Legal Committee of the Danish Parliament and a delegation from the Finnish Parliamentary Committee for Social Affairs and Health visited the EMCDDA in September and April respectively.

With regard to third countries, the following visits should be highlighted: a delegation of Californian state senators and groups of university students from St. John's University



School of Law of New York and the Graduate Department of Counselor Education of the College of New Jersey (USA); officials from the Ukraine; ministerial delegations from Bosnia and Herzegovina, Georgia and Serbia; police officers from the State of Rio de Janeiro; the Head of the Moroccan National Drug Observatory; representatives of the National Rehabilitation Centre of Abu Dhabi; and delegations from the GCC-Criminal Information Center to Combat Drugs of Qatar, from the Dangerous Drugs Board of the Philippines and from the Indonesian National Narcotics Board.

Recent developments in cannabis policy and Portuguese drug policy, put into the context of drug legislation across Europe, were topics of discussion during several visits.



*Major General Sabino Cavaliere, Director of the Central Directorate for Anti-drug Services (DCSA) of the Italian Ministry of Interior, on a courtesy visit to the EMCDDA*

### Strategic planning, monitoring and reporting

The *General Report of Activities 2013* <sup>(41)</sup> was published online on 13 June and sent, on the same day, to the Parliament, the Commission, the Council and the ECA, as required by the EMCDDA's recast regulation. The content and format of the report were further improved, for example through the introduction of a new annex (Annex 8) providing a detailed picture of the status of implementation of the follow-up action plan to the third external evaluation of the EMCDDA. In addition, Annex 5, on the implementation of the 2013 work programme, provided further clarity in terms of the degree of achievement of the annual objectives set out by the agency. Both annexes helped increase the transparency and accountability of the EMCDDA to its external stakeholders.

*A Year in review: highlights from the EMCDDA's General Report of Activities 2013*, a summary of the report intended for use in corporate communications, was also published on 13 June <sup>(42)</sup>. Both documents were printed and made available for dissemination at the 26 June event.

With regard to the monitoring of the EMCDDA's activities, the 2014 mid-year monitoring exercise was conducted and the performance report submitted to the internal stakeholders. The report included a new section dedicated to the monitoring of the KPIs that the agency had defined for the first time in its annual work programme. In order to track the progress of the KPIs, a detailed monitoring and evaluation plan was put in place.

Furthermore, as part of the EMCDDA's strategic objective to develop its internal performance measurement system, the agency explored options for setting up a MIS to support its integrated operational and financial planning, monitoring and reporting activities. With a view to creating synergies, different solutions used by the agencies were reviewed and Matrix 2.0, the MIS implemented by FRA was identified as the solution

<sup>(41)</sup> Available at: [emcdda.europa.eu/publications/gra/2013](http://emcdda.europa.eu/publications/gra/2013)

<sup>(42)</sup> Available at: [emcdda.europa.eu/publications/gra/2013-highlights](http://emcdda.europa.eu/publications/gra/2013-highlights)

which best meets the needs of the EMCDDA. Further to this, a licensing agreement between FRA and the EMCDDA for access, use and modification of the FRA, Matrix 2.0 information system was signed by the two directors. Implementation is expected to start in 2015 (see also Main Area 12).

The 2015 annual work programme was adopted by the Management Board in December <sup>(43)</sup>. The document was submitted to the European Commission and to the EMCDDA Scientific Committee on 31 March, i.e. six months earlier than in previous years. The new work programme maintains the prioritisation approach based on three levels, and defines, for the first time, KPIs for all the 12 main areas of work. This is in line with the action plan on performance measurement endorsed by the Management Board in July 2013.

Furthermore, in 2014 the EMCDDA began to develop its next three-year strategy and work programme for the period 2016–18. To help draw up the document, the EMCDDA launched an extensive consultation exercise calling for thoughts and ideas on the possible focus of its work for the next strategic programming period. Among those consulted were key stakeholders and partners from the EU Member States; the EMCDDA Scientific Committee; the EU institutions; international organisations; third countries; and the general public. The valuable contributions received in the process will play an important role in defining the EMCDDA's medium- to long-term direction. This will be reflected in the 2016–18 strategy and work programme, scheduled to be adopted by the Management Board in December 2015.

### Reitox network

Reitox network coordination tasks focused in 2014 on two main priorities and challenges: (1) the revision of the new national reporting package; and (2) managing with the NFPs the possible negative consequences of the reduction in the budget of the grant agreement at national level. As mentioned before, this was one of the consequences of the cut to the EU subsidy allocated to the EMCDDA in 2014.

The main priority during the year was, therefore, the definition of a proposal for a new national reporting package (see also Main Areas 1 and 7). Work was carried out throughout 2014 in close coordination with the NFPs. Discussions took place at the 50th meeting of the Reitox HFPs, followed by two technical meetings. Both meetings benefited from the participation of the NFPs (ten representatives at one meeting and nine at the other).

The joint project made possible the finalisation of the proposal, which received its seal of approval at the 51st meeting of the HFPs held in Lisbon on 26–28 November. Guidelines and an implementation plan for the new package were adopted at the meeting, marking the end of an extensive EMCDDA–Reitox consultation, begun in 2012, to revise the existing reporting system. The package determines how data are reported from the Member States to the EMCDDA in order to provide an overall picture of Europe's drug phenomenon.

The aim of the new package is to ensure efficiency, match priorities and resources, and better address the information needs of European and national stakeholders. The new package has three components: standard tables, for reporting standardised quantitative

<sup>(43)</sup> Available at: [emcdda.europa.eu/publications/work-programmes/2015](http://emcdda.europa.eu/publications/work-programmes/2015)

information; structured questionnaires, for reporting qualitative information; and thematic workbooks, replacing the former national reports. To date, 10 thematic workbooks have been endorsed on the following themes: drug policy; legal framework; drugs; prevention; treatment; best practice; harms and harm reduction; drug market and crime; prison; and drug-related research.

The new package is designed to ensure timely reporting, improve coherence and reduce the reporting burden. The implementation of the package is designed to be progressive, with five of the ten workbooks compulsory in the first year (2015).

The 51st meeting of the Reitox HFPs was preceded by the third Reitox Week (see Main Area 8).

MEETINGS OF THE REITOX NETWORK		
14–15 May	Lisbon	50th meeting of the heads of focal points
24–25 November	Lisbon	Third Reitox Week
26–28 November	Lisbon	51st meeting of the heads of focal points

During the first semester of 2014, the EMCDDA undertook a detailed desk check of all the 2013 grant agreement accounting documents, as provided by the EU Reitox NFPs. A more detailed on-site verification of the accounting system was undertaken in three Member States, namely Cyprus, Germany and Greece. These on-site verifications comply with the emphasis on checks by the ECA and also allow for bilateral feedback to be given, with a view to improving the financial and narrative reporting within the framework of the grant agreements. All EU NFPs signed a grant agreement with the EMCDDA, although the EMCDDA's co-financing component was revised due to the reduction in its budget.

In addition, the EMCDDA attended the 10th anniversary conference organised by the Hungarian focal point and had a bilateral meeting with the new head of the French focal point.

Furthermore, several Reitox Academies were organised or supported during the year (see Main Areas 1–7).

Work continued during the year to develop the management information system (HERMES) which supports technical cooperation activities and the management of grants. All 2014 grant agreements, including applications and addenda, have been fully integrated into the HERMES system.

## **| Administration: supporting core business (Main Area 11)**

In line with the goals set for the 2013–15 programming period, enhancing efficiency, further developing sound management of available resources and providing service-oriented administrative support to the EMCDDA's operations, along with the application of best practice, continued to be the main priorities within the administration area in 2014.

The EMCDDA continued its active cooperation with other EU agencies on administrative matters. This included, among other activities, the representation of the EU agencies network in the EU interinstitutional administrative bodies where EMCDDA staff members have been formally appointed to represent all EU decentralised agencies. Furthermore,

the successful cooperation with EMSA initiated in previous years continued in 2014, when further synergies were promoted and developed.

## Highlights and main achievements

### Financial and budget management and accounting

Financial management activities focused on aligning the EMCDDA rules and processes with the revised EU financial regulation and the necessary training of the actors concerned, pursuant to the entry into force of the revised Framework Financial Regulation for EU Agencies and of the new Financial Regulation of the EMCDDA, starting from 1 January 2014. The implications for the work of different units were explained to the internal actors concerned in order to ensure an effective transition.

In terms of procurement execution, the procurement plan was put into place, in line with the EMCDDA 2014 management plan, and successfully executed, in close collaboration with all units. The EMCDDA is also an active member of the Network of Agencies Procurement Officers (NAPO); the annual NAPO meeting organised by the European Centre for the Development of Vocational Training (Cedefop) in Thessaloniki on 16–17 October offered further opportunities for exchange of experiences and updates on the state of play of various procurement initiatives within the EU bodies.

Implementation of digitalised tools and processes has made a proven contribution to organisational efficiency gains; however, progress in this area is incremental, given the available resources. In 2014, development began on an ICT-based tool for the management of missions carried out by staff throughout the year, and it is expected that the solution will be ready for implementation in 2015.

The accounting of EMCDDA assets was further improved: in close cooperation with ICT, the assets reporting process has been reviewed and the reports are now running automatically on the first day of each month, which ensures better follow-up.

Further measures to improve budget execution and use of work programme resources were put in place. As a result, in 2014, the EMCDDA achieved once more outstandingly efficient management of its budget, as follows: 99.6 % for commitment appropriations and 94.9 % for payment appropriations (99.8 % for Title 3 payment appropriations). This is one of the EMCDDA's best ever results (in terms of commitments) and exceeds the targets set for 2014, namely 97 % of total commitment appropriations (KPI 11.1.1) and 93 % of the total payment appropriations (KPI 11.1.2) (see Annex 6).

Commitment appropriations	99.6 %
Payment appropriations	94.9 %
Consumption of 2013 (C8) credits	95.1 %

Similarly to the situation in 2013, this excellent budget execution rate was possible only thanks to the efforts of all staff involved across all core business and support areas. This was also a result of further improvements in budget management practices applied during the year.

In addition, the 2015 budget and a preliminary budget for 2016 were adopted by the EMCDDA Management Board.

## Human resources

Work to align the EMCDDA human resources processes and policies with the reform of the EU staff regulations continued in 2014. This included the revision of staff entitlements to annual leave and of the appraisal process for officials.

In addition, the EMCDDA played a very active, and sometimes a leading, role in the discussions held within several relevant working groups, for example the interinstitutional committee CPQS (Comité de Préparation pour les Questions Statutaires), which examines questions of the application and interpretation of the staff regulations of officials and the conditions of employment of other servants of the EU; the Agencies–European Commission Standing Working Party on the implementation of the new staff regulations of officials and the conditions of employment of other servants of the EU approved in 2014; the Permanent Group for the revision of the service level agreement between all Agencies and EU bodies and the Pay Master Office in Brussels; the Working Group for the revision of the service level agreement between all Agencies and EU bodies and the DG HR; and the Working Group on agencies' contribution to the new Interinstitutional Working Group on Agencies. A significant effort was dedicated to the proceedings of these working groups during the year.

An important objective in 2014 was to further develop EMCDDA working and production capacity by maximising training opportunities for EMCDDA staff. Individual training plans were set out during the annual staff performance appraisal exercise and training was delivered in line with available resources.

The target for 2014 was to provide an average of three training days per staff member (KPI 11.2.3; see Annex 6); as shown in the table below, this target was achieved.

TRAINING PROVIDED IN 2014	
Total number of training days	315.1
Training courses by staff member (average)	2.0
Training days by staff member (average)	3.1
Budget spent on training	EUR 66 637.00

## Infrastructure and logistics

In the area of logistics and infrastructure management, ensuring a healthy and safe working environment remained the key priority. Another priority was to further optimise the use of space and the functioning of existing facilities. Special attention was given to the development of solutions for business continuity.

The new EMCDDA internal environmental policy was adopted and its implementation began. It aims to put in place an environmental management system, which should ensure that the agency complies with the EU norms and bring further savings.

In the same regard, the agency continued to contribute to the Greening Network, the eighth annual meeting of which was organised by the EMA (London, 23–24 October) with technical input from the EMCDDA.

Further measures to rationalise costs for utilities and service contracts were implemented in 2014. In parallel, minimum standards for the work environment were

defined, so that the measures taken would have as small an impact as possible on the working conditions of the staff.

Identifying health and safety risks to the staff remained one of the main priorities.

With a view to increasing effectiveness, efficiency gains and cost savings, further synergies were built with EMSA.

## **Information and communications technology (ICT) (Main Area 12)**

ICT programmes and services are planned to support the agency's core development objectives and to guarantee the smooth operation of all up and running services. They include IT support for day-to-day work processes, maintenance of enterprise applications, hosting of enterprise applications and management of the data centre.

Consistent with the overall approach applied to the agency's 2014 work programming exercise, a thorough prioritisation of projects and investments planned for the ICT area has been conducted. As a result, the activities in 2014 were implemented in line with three levels of priority, which were strictly aligned with those defined for the core business areas and the other areas of work requiring ICT support.

### **Highlights and main achievements**

In order to develop and maintain instruments for supporting core business, in 2014 top priority was given to developing and maintaining the infrastructure for the annual drugs data collection and analysis; the web presence review programme; and the development of the EDND.

Fonte, the EMCDDA's web-based data collection instrument, and the Drugs data warehouse are key applications supporting the agency's data collection, validation and analysis, and much of the work in the ICT area was dedicated to maintaining them and adjusting them to the needs of the 2014 work programme.

During the year, Fonte was set up for the annual data collection exercise, while maintenance updates were performed as required. A major upgrade for Fonte will be needed in 2015; therefore, the analysis phase started in 2014 and the contract for services was signed. Updates were performed also on the analytical drugs database.

In terms of the website development project, work was carried out in close coordination with the Communication unit and the other core business units. The development system was set up, the architecture and configuration were defined, the functionality bundles were prepared and work on security planning got under way. The web platform migration was prepared and tests were performed. Full implementation is planned for 2015.

Another level 1 priority project was the EDND. The database requires urgent and substantial investment in order to be adapted to the requirements imposed by monitoring NPS, which are appearing on the market at an unprecedented speed (see Main Area 5). Because of the EMCDDA's difficult financial situation, it was possible to allocate only some of the necessary resources to the development of the EDND in 2014. A contract for services was signed and developmental work will be carried out in 2015. Progress will depend, however, on the further allocation of resources.

Some more limited investments were also made in order to support corporate and administrative projects. A priority project was the development of a MIS to support the new performance-measuring system (see also Main Area 10). Further to the signing of the licensing agreement between FRA and the EMCDDA for access, use and modification of the FRA Matrix 2.0 information system selected by the EMCDDA, the software code was delivered, the internal project team was set up and steps necessary for integration with the EMCDDA's ABAC electronic management and accounting system were implemented.

Other projects concerned the development of solutions for a Reitox network forum, for missions management and for HR management. Work was begun, in line with available resources.

The implementation of the project management methodology approved by the ICT steering committee in 2012 continued and 100 % of the active projects classified as 'business projects' by the ICT steering committee were managed accordingly. This was one of the annual targets for the area, which was fully achieved (KPI 12.1.1; see Annex 6).

Gradual execution of the business and information architecture management programme was carried out in 2014. This encompassed the planning of business/IT architecture development and its technical implementation, while trying to keep pace with the changing global landscape of ICT architectures and the related security and privacy threats.

The majority of resources were, however, earmarked for the ongoing service management programme, which accounts for most of the effort dedicated to business-as-usual services. The technical implementation of the business architecture programme included the acquisition of new servers, new laptops and system support software licences, new corporate storage systems/elements and some additional meeting room equipment.

Developing the role of the ICT steering committee and implementing best practice are also part of this intervention. In 2014, particular focus was placed on carrying out the actions needed to meet the recommendations of the risk assessment by the Internal Audit Service (IAS) and managing the risks included in the ICT section of the EMCDDA risk register, in particular in the areas of security, project management and governance.

Finally, the EMCDDA further improved its collaborative work with institutional networks. The agency co-organised, together with EMSA, the 23rd meeting of the Agencies' ICT Managers' Network (ICTAC) and attended the 24th ICTAC meeting organised by EFSA.

Further to the sale of the former EMCDDA headquarters, the Centre reached an agreement with EMSA to host the EMCDDA business continuity systems in its data centre in Madrid. A MoU will be signed in this regard in 2015.

**II**



## **PART II**

# **Management and internal control systems: annual activity report as per the financial regulation applicable to the EMCDDA**

CHAPTER 1  
**Management**

CHAPTER 2  
**External evaluations**

CHAPTER 3  
**Assessment of the effectiveness of internal control systems**

CHAPTER 4  
**Management assurance: Declaration of assurance by the Authorising Officer**

1

# CHAPTER 1

# Management

## Management Board

### Main decisions

As usual, the Management Board met twice during the year. The first meeting took place on 3–4 July and the second on 4–5 December.

At the July meeting, the Management Board gave a favourable opinion on the final accounts of the EMCDDA for 2013 and congratulated the Director and his staff on the excellent level of budget execution.

The Management Board reconfirmed the procedure for the appointment of the EMCDDA Director by the EMCDDA Management Board, as described in Annex II of the Rules of Procedure, and the European Commission updated the Board members on the state of play of the pre-selection procedure. The Board adopted some readjustments to the Scientific Division of the EMCDDA to take into account internal and external developments.

The Board agreed with the text of the MoU between the EMCDDA and the National Security Council of the Republic of Armenia, and mandated the EMCDDA Director to sign it.

The EMCDDA provided the Management Board with an overview of the state of progress of the adaptation of the Reitox national reporting package, following the conclusions of the systemic review and the reduction in Reitox co-financing in 2014, and of the situation with the buildings. The Director also provided feedback on the launch and media coverage of the 2014 *EDR* and an update on the agency's cooperation with the ESPAD project.

The Management Board discussed present and future challenges for the EMCDDA's work on the EWS and risk assessment of NPS. Since 1997, the EMCDDA has played a central role in the response to NPS in the EU. The Centre, supported by the Reitox network and key partners Europol and EMA, has operated the world's only regional EWS on NPS. The EMCDDA Director stressed that, in the light of the growing consumption of NPS and the rapidly increasing number of NPS and risk assessments, the EWS network and Reitox NFPs need to be adequately supported at EU and national level. The EMCDDA EDND needs to be strengthened and resources are urgently required to ensure that it can meet the needs of the EU and of the Member States in the near future and in the long term. Finally, targeted non-clinical studies that characterise the pharmacological and toxicological properties of NPS are required for the risk assessment process, and sufficient resources must be made available.

The European Commission informed the meeting about the strategic guidelines in the area of freedom, security and justice. Finally, the Chair announced that SICAD, the Society for the Study of Addiction, the EMCDDA and ISAJE will organise the Lisbon Addictions conference in September 2015.

The Agreement between the European Community and the Republic of Turkey on the participation of Turkey in the work of the EMCDDA entered into force on 1 June 2014. For the first time, representatives from Turkey participated as full members, albeit without the right to vote, of the Management Board, at its December meeting.

The Director General of DG HOME of the European Commission informed the meeting about the latest developments due to the entry into function of a new Commission in November 2014.

The European Commission informed the Management Board about the state of play of the selection procedure for a new Director of the EMCDDA. The College of Commissioners decided on 3 December 2014 not to establish a list of candidates for the post of the EMCDDA Director and to close the selection procedure. Upon the proposal of the European Commission, the EMCDDA Management Board decided on 4 December 2014 to publish a new vacancy notice and to exceptionally extend the mandate of the Director until the date when the next appointed Director will take up his/her duties. This decision of an exceptional nature was taken in the interest of the service, to ensure the continuity of the EMCDDA executive management during the transition from the current to the next EMCDDA Director. The Management Board further confirmed the Vice Chair, Mr Claude Gillard, as observer for the pre-selection procedure.

Mr John McCracken (United Kingdom) was re-elected to the Budget Committee, and Mr Stelios Sergides (Cyprus) was elected as a member of the Budget Committee for a mandate from 1 July 2015 to 30 June 2018. Mr Sergides will also ensure the replacement of Mr Löfstedt between 1 January 2015 and 30 June 2015.

The EMCDDA's 2015 budget and work programme were key points on the agenda at the December meeting. The Management Board gave its seal of approval to the 2015 work programme, on which the European Commission and the EMCDDA Scientific Committee had given a favourable opinion.

A budget of EUR 16 003 770 for 2015 (28 Member States and Norway, and Turkey for the second year of its participation in the work of the EMCDDA) was adopted on the basis of a European Commission subsidy of EUR 15 447 000, as anticipated in the preliminary draft budget adopted by the Management Board in December 2013. The Management Board further adopted a preliminary draft budget of EUR 16 063 770 for 2016 (28 Member States and Norway, and Turkey for the third year of its participation in the work of the EMCDDA) on the basis of a European Commission subsidy of EUR 15 447 000. In the budgetary context, the EMCDDA updated the Board members on the situation with the unused office spaces (the Palacete Mascarenhas and the Relógio building).

The Board adopted the rules implementing the financial regulation applicable to the EMCDDA, which will enter into force on 1 January 2015, as well as an EMCDDA policy for the prevention and management of conflicts of interest. The Board further adopted the EMCDDA Internal Statistics Code of Practice. Furthermore, the Director was given a mandate to negotiate a MoU between the EMCDDA and the Ministry of Justice of the Republic of Georgia.

The Director reported on the preparation of the EMCDDA's three-year strategy and work programme for 2016–2018, and on recent developments in the agency's cooperation with non-EU countries, international organisations and other EU agencies. Sweden updated the Board members on its cooperation with ESPAD, while Portugal provided an update on the preparations for the Lisbon Addictions conference in September 2015.

MEETINGS OF THE MANAGEMENT BOARD		
3–4 July	Lisbon	49th meeting of the Board
4–5 December	Lisbon	50th meeting of the Board

## Executive Committee

### Main decisions

In 2014, the Executive Committee met four times in Lisbon, on 14 May, 3 July, 29 October and 4 December.

At its meeting of 14 May, the Executive Committee commented on the draft agenda and documents for the subsequent Management Board meeting in July, and endorsed the readjustments to the Scientific Division proposed by the Director. It was further decided that the EMCDDA will reimburse to the European Commission travel costs for the pre-selected candidates for the post of EMCDDA Director who are invited to interview, including to the assessment centre.

On 3 July, the Executive Committee prepared the Management Board meeting of 3–4 July 2014. The Budget Committee and the Executive Committee congratulated the Director, the accountant and the financial management team for the clear final accounts and the excellent level of budget execution in 2013. The Executive Committee also approved a transfer from Title 1 (salaries and allowances) to Title 3 (operational activities) for the implementation of the IPA 4 project.

At its meeting of 29 October, the European Commission informed the Executive Committee that it will take a decision concerning the outcome of the selection procedure for the post of the EMCDDA Director, as not enough candidates qualified for the shortlist to be submitted to the Management Board, and that a new selection procedure will have to be launched. In this situation, the Executive Committee proposed to extend the mandate of the current Director. The Executive Committee further commented on the draft agenda and draft documents for the upcoming Management Board meeting in December.

The Executive Committee prepared, on the morning of 4 December, for the Management Board meeting of 4–5 December. It also empowered the Director to request the European Commission's agreement on the opt-out of the EMCDDA from the application by analogy of the European Commission implementing rules on appraisal and reclassification of contract agents.

At the beginning of each meeting of the Executive Committee, the Chair of the Budget Committee reported on the conclusions of the meetings held prior to the Executive Committee meetings, and the recommendations made by the Budget Committee.

## MEETINGS OF THE EXECUTIVE COMMITTEE

14 May	Lisbon
3 July	Lisbon
29 October	Lisbon
4 December	Lisbon

## Main events

A number of events had an important institutional impact on the EMCDDA in 2014. These included the procedure for the selection of a new EMCDDA Director; a revision of the EMCDDA's organisational structure in the scientific area; the change in the partner DG of the EMCDDA; the ratification by the Republic of Turkey of the agreement for its participation in the activities of the EMCDDA; and the sale of the former EMCDDA headquarters.

The procedure for the selection of a new Director (see also earlier section on the decision of the Management Board): the EMCDDA Director, Mr Wolfgang Götz, is in his second term of office, which is due to expire on 30 April 2015. Consequently, a process for the selection of the next EMCDDA Director was initiated on 15 October 2013. The selection procedure was ongoing during the year; however, it was closed without the European Commission adopting a shortlist of eligible candidates. As a result, a new selection procedure was launched in January 2015. In this context, it was necessary and opportune to ensure continuity of the EMCDDA's executive management in order to avoid any possible gap and the risk that this could affect the smooth running and functioning of the EMCDDA. This is particularly important considering that in 2015 the EMCDDA will have to define its strategy and work programme for the next three-year period (2016–18).

Pursuant to the relevant provisions of the EMCDDA founding regulation (namely Articles 11 and 18 thereof), and further to the recommendations of the EMCDDA Executive Committee, on 4 December, the Management Board decided that, should the next EMCDDA Director not be in a position to take up his or her duties on 1 May 2015, the term of office of the current Director, Mr Wolfgang Götz, will be extended until the date when the next appointed Director will take up his or her duties.

Revision of the EMCDDA's organisational structure: some internal and external developments, including the definitive or temporary departures of some key staff and increased workload in some areas, together with the consequences of the reduced EMCDDA budget and the need to further re-prioritise the agency's activities, triggered some important challenges for the agency, particularly as far as the implementation of its annual work programme was concerned.

To ensure that the implementation of the EMCDDA work programmes would be affected as little as possible by these new circumstances, the Director was faced with the need to consider some adjustments to the Scientific Division, namely a reduction in the number of scientific units from four to three. These adjustments were discussed first internally, with the Scientific Director and the heads of units and afterwards with the Chair and members of the Executive Committee. In compliance with Staff Committee Rules and Regulations, the Director also consulted the EMCDDA Staff Committee, which issued a positive opinion.

The adjustments to the EMCDDA's organisational structure were approved by the Management Board on 3 July, further to their endorsement by the Executive Committee at its meeting of 14 May.

**The change in the partner DG of the EMCDDA:** in November, a new European Commission took office, which resulted in few organisational changes at the level of the Directorates-General. One of these modifications was the movement of the unit in charge of coordinating the relationship with the EMCDDA, namely Anti-Drugs Policy, from DG JUST to the newly created DG Migration and Home Affairs (DG HOME). This triggered an important change for the EMCDDA, which switched its partner DG from DG JUST to DG HOME.

The EMCDDA will follow closely the agenda of its new partner DG, in line with its mandate; this will be reflected in the agency's next three-year strategy and work programme, for 2016–18 (see below). Other EU agencies having HOME as their partner DG are eu-LISA, Frontex, EASO, Europol and CEPOL. The EMCDDA has close working relationships with most of these agencies, as described in the various sections of this report.

On 2 May, the Republic of Turkey ratified the international agreement for its participation in the work of the EMCDDA. As a result, the Agreement between the European Community and the Republic of Turkey on the participation of Turkey in the work of the EMCDDA entered into force on 1 June. Turkey is one of the two non-EU countries (the other is Norway) that report their data to the EMCDDA. Further to this agreement, Turkey became a member of the EMCDDA Management Board, without the right to vote, and will contribute financially to its participation in the activities of the EMCDDA.

Finally, an important development in 2014 was the sale of the Palacete Mascarenhas, the EMCDDA's former premises in Lisbon. For the past five years, the EMCDDA has made some considerable efforts to sell or rent the building. However, because of the depressed climate of the Lisbon real-estate market, these efforts were not successful until the last quarter of 2014, when the EMCDDA managed to prepare for signature the contract for the sale of the building to Lisbon Metropolitan Area — a public association of the 18 municipalities of the greater Lisbon area. This entailed a consultation of the two branches of the EU budgetary authority — the European Parliament and the Council of the EU — which raised no objections to the operation proposed by the EMCDDA. The sale of the building, which took place on 23 January 2015, will allow the EMCDDA to earmark for core business activities the budget that was spent annually on the maintenance of the building.

## **Budgetary and financial management**

### **Information transmitted currently in the report on the budgetary and financial management (Article 93 of the FFR)**

The requested information is already covered by the report on budgetary and financial management included in the EMCDDA annual accounts for 2014 (available on our website)

In terms of procurement execution, the procurement plan was put in place, in line with the EMCDDA 2014 management plan, and successfully executed, in close collaboration with all the units.

Tendering	2014 figures
Negotiated procedures — disp. Art. 134) — Rules of implementation of the financial regulation (exceptional procedures)	0
Negotiated procedure — single tender (*)	221
Negotiated procedure — at least three candidates	12
Open procedures	4
European Commission frameworks joined	6
New framework contracts launched	5
Order forms — framework contracts	98

(\*) including appointment letters and low-value contracts.

### Negotiated procedures launched in 2014

	Works		Supplies		Services		TOTAL 2014			
	Number of contracts	Volume of contracts (EUR)	Number of contracts	Volume of contracts (EUR)	Number of contracts	Volume of contracts (EUR)	Number of contracts	%	Volume of contracts (EUR)	%
>5 000 and <15 000 EUR	3	29 341.28	8	72 084.30	38	386 291.98	49	83	487 717.56	63.3
=/>15 000 and <60 000 EUR	2	66 094.74	3	111 414.78	5	105 300.50	10	16.9	282 810.02	36.7
=/> 60 000 EUR	0	0.00	0	0.00	0	0.00	0	0.0	0.00	0.0
<b>TOTAL</b>	<b>5</b>	<b>95 436.02</b>	<b>11</b>	<b>183 499.08</b>	<b>43</b>	<b>491 592.48</b>	<b>59</b>	<b>100</b>	<b>770 527.58</b>	<b>100</b>

## Summary information on budgetary operations for the year in terms of budget operations, revenue and expenditure

The information about the appropriations transferred in 2014 can be found in the report on budgetary and financial management included in the EMCDDA annual accounts for 2014. The EMCDDA Management Board approved one amending budget in 2014, which was published on 17 December 2014.

In 2014, the EMCDDA received 100 % of the revenues envisaged in its 2014 budget. In this context, the EMCDDA achieved an outstanding performance in terms of budget execution, which can be summarised by the following rates of execution: 99.62 % for commitment appropriations (this rate reflecting the second-best performance in the EMCDDA's history); 94.93 % for payment appropriations; 95.14 % for appropriations carried forward from 2013; and 0.4 % for cancelled/non-used payment appropriations (these last two rates reflecting record high performances).

## Human resources management

### Major human resources events

Work to align the EMCDDA human resources processes and policies with the reform of the EU staff regulations continued in 2014. This included the revision of staff entitlements to annual leave, of absences and working time, and of the appraisal process for officials. A table detailing the number of days of leave authorised to each function group and grade



under the flexitime and compensatory leave schemes is presented below for the sake of completeness.

Flexitime days in 2014 per grade					
Function group	Grade	No days	Function group	Grade	No of days
AD	5	0	AST	6	10.5
AD	6	14	AST	7	10.5
AD	7	12	AST	8	0
AD	8	33.5	AST	9	0
AD	9	4.5	AST	10	0
AD	10	0	AST	11	0
AD	11	5.5	CAIII	8	0
AD	12	0	CAIII	9	8
AD	13	0	CAIII	10	16
AD	14	0	CAIII	11	0.5
AD	15	0	CAII	4	9
AST	1	0	CAII	5	18
AST	2	0	CAII	6	5
AST	3	1	CAII	7	32
AST	4	4.5	CAI	2	0
AST	5	42.5	CAI	3	4.5
<b>Total</b>					<b>227</b>

No major changes occurred in the EMCDDA establishment plan, apart from a reduction in full-time equivalents, as requested by the European Commission.

### Brief description of the results of the screening/benchmarking exercise

The EMCDDA carried out in 2014, for the first time, a staff screening exercise, obtaining a very gratifying outcome, with 69.41 % of its human resources devoted to operational work and only 30.59 % to administrative and support and neutral work (20.25 % and 10.34 % respectively) (see Annex 2). The EMCDDA continuously endeavours to maximise its financial and human resources and this will continue to be the trend in the future.

### Assessment by management

In accordance with the financial regulation applicable to the EMCDDA, which replicates exactly the text of the European Commission's Framework Financial Regulation No 2343/2002 <sup>(44)</sup>, the EMCDDA has set its internal procedures for budget execution and internal control, while defining and implementing a partially decentralised management model.

<sup>(44)</sup> As last amended by Commission Regulation (EC, EURATOM) No 652/2008.

As a consequence, both operational and financial decisions required for the implementation of the EMCDDA's work programme and budget have been delegated to the heads of unit/head of the Scientific Division. The Administration unit provides support to managers for budgetary and financial management and execution, as well as for overall internal planning and monitoring.

These procedures have been codified and all of the EMCDDA's deputy authorising officers have received specific training and information on their role, duties and liabilities, in accordance with the provisions of the financial and staff regulations.

The key actors and steps of the EMCDDA procedures for budget execution can be summarised as follows:

- Project manager: initiates and provides operational input for the administrative and financial operations in relation to project implementation (technical specifications for tendering procedures, cost estimate, 'certified correct' for payments).
- Financial management team: financial and contractual support officers help to prepare the administrative and contracting supporting documents with the input of the project manager concerned.
- Budget planning and monitoring team: checks consistency with work programme and budget allocations.
- Financial management team: ABAC initiating officers carry out operations in the EMCDDA's ABAC electronic management and accounting system, prior to the decision of the authorising officer.
- Governance unit: the verifying officer carries-out ex-ante checks.
- Head of unit/head of the Scientific Division: authorises budgetary and legal operations, acting as deputy authorising officer by delegation (from the Director as EMCDDA authorising officer) for the execution of the tasks/activities of his or her unit, within the limits of the adopted EMCDDA annual work programme and budget.
- Accountant: makes the required financial transactions.

The procedures presented above are consistent with the EMCDDA's project-based working methods, aimed at integrating activities and resource management, in accordance with activity-based management/activity-based budgeting principles. In this context, the EMCDDA has established procedures for planning, monitoring and reporting, with a clear indication of the actors involved, roles and responsibilities.

Following the adoption of the new operating framework for the Reitox system in January 2003, a new grant agreement model has been introduced for the annual co-financing of activities by the Reitox NFPs. This agreement requires that an external audit be carried out each year by an independent body or expert in order to certify that the financial documents submitted to the EMCDDA comply with the financial provisions of the agreement, that the costs declared are the actual costs and that all receipts have been declared.

The EMCDDA is currently subject to the following checks and controls:

- External audit by the ECA (twice a year);
- External audit for specific projects (IPA, etc.);
- Discharge by the European Parliament (once a year);
- Internal audit by the European Commission's IAS (once a year);
- Opinion of the European Commission's services on the agency's staff policy plan (once a year);

- External periodical evaluation (set for every six years in the EMCDDA founding regulation);
- Agreement by the European Commission on implementing rules to staff regulations (for each rule);
- Consent by the European Commission on possible deviation of the EMCDDA Financial Regulation from the European Commission's Framework Financial Regulation for decentralised agencies;
- The European Data Protection Supervisor, for compliance with Regulation 45/2001 (by prior notification and upon complaint);
- The European Anti-Fraud Office (upon complaint);
- The Ombudsman (upon complaint);
- Civil Service Tribunal — Court of First Instance — European Court of Justice (upon complaint).

#### *Key features of the EMCDDA's partially decentralised management model*

Actors/level of operations	Role/operations
Decentralised level (operational and technical units)	Operational initiative/input and operational and financial decisions by delegation in order to implement the work programme and budget
Central level (Directorate and Administration unit)	Coordination and management of executive planning, monitoring, reporting and assessment of the implementation of the work programme and budget. Administrative and financial support, management and control of implementation

#### *Key actors and processes for the execution of the EMCDDA work programme and budget*

Level of operations	Actors	Role/operations
Decentralised level (operational and technical units)	Project manager and head of unit concerned/ head of the Scientific Division	Initiative and operational input for the operations required to implement projects
Central level (Administration unit)	Budget planning and monitoring team	Checks consistency of operations with adopted work programme and budget. Budgetary appropriations to be committed are set aside
	Human resources management team	Defines rights and checks compliance with staff regulations for staff-related management and expenditure
	Financial management team	Prepares the required administrative and legal supporting documents and controls compliance with applicable regulations. Processes the required ABAC operations
Central level (Governance unit)	Verifying officer	Ex-ante verification
Decentralised level (operational and technical units)	Head of unit/deputy authorising officer	Authorises budgetary and legal commitments and payments
Central level (Administration unit)	Accounting officer	Executes and records payments and recovery orders

Ex-ante controls of financial transactions have been applied exhaustively throughout the year, in order to check compliance with the EMCDDA Financial Regulation and the relevant implementation rules; these have been carried out swiftly in order to allow payment deadlines to be met and ensure the formalisation of legal commitments and the recovery of credits and receipts, without prejudice to the application of corrections, where required.

Financial circuits were properly defined, a sound system of authorisation of access to ABAC was set up and the manual of procedures has been followed and updated where necessary.

Furthermore, the 2013 revised EMCDDA Financial Regulation (Article 46) requires that 'outcomes of ex-post controls shall be reviewed by the authorising officer at least annually to identify any potential systemic issues'. While this provision in itself does not appear to require these controls to be carried out annually, in late 2014 the need to conduct an ex-post exercise in ICT security-related areas was identified, as the risk levels still remain in the medium to high range. Outsourcing will be used here in order to bring fresh expertise and complement the existing in-house competencies in this regard. This ex-post assessment is expected to be performed during the first quarter of 2015.

## **Assessment of audit results during 2014 and follow-up of audit plans, audits and recommendations**

In 2014, following up on observations and recommendations expressed by the ECA and the EU Budget Authority, and audits by the IAS of the European Commission, the EMCDDA implemented some measures to improve its management and internal control systems as follows:

### **Internal Audit Service**

All recommendations relating to the 2008 IAS audit have been closed by the internal auditor.

With regard to the implementation of IAS recommendations arising from the 2011 audit on 'Annual activity reporting and building blocks of assurance', only two recommendations have not yet been formally closed by the internal auditor. For the first one, which concerns the setting up of a performance monitoring system including KPIs, the EMCDDA is already at an advanced stage of implementation, as its 2015 annual work programme sets up KPIs for all main areas of work. The second outstanding recommendation, which concerns ex-post controls, has also been followed up. Pursuant to the assessment of ICT security-related risks, an ex-post verification exercise in this area of risk is expected to be performed in the first half of 2015.

In February 2013, the IAS carried out an audit on 'Budget and monitoring within the EMCDDA' in respect of which it issued the following three main recommendations:

1. Procurement procedures for non-administrative activities should be based on financing decisions by indication on the work programmes of the relevant global budgetary envelopes, indicative number and type of contracts and launching timeframes.

2. A comprehensive description of the budget preparation process should be set up and all relevant documentation kept in a central file. Moreover, a sound methodology for the preparation of the activity-based budget should be created and duly documented.
3. Expected outputs and results indicated in the work programmes should always be specific, measurable and better timed by setting priorities.

Recommendations 1 and 3 have been implemented in a timely manner by the EMCDDA and subsequently closed by the IAS.

As regards Recommendation 2, the bulk of the documentation relating to budget preparation procedures already exists; in addition, a comprehensive and detailed definition and documentation of the different phases of the procedure for the preparation of the EMCDDA budget has been formally approved by the EMCDDA authorising officer. The setting up of a central file containing all documentation relevant to the preparation of the budget is in progress and will be completed in 2015.

## European Court of Auditors

In line with the recommendations expressed by the Court and its constant efforts to improve its procurement procedures, the EMCDDA has put in place and implemented several processes for this purpose, namely to further reduce the need for adjustment of technical specifications and to ensure that the provision of effective information to tenderers on such adjustments.

## Follow-up on observations from the discharge authority

Measures taken in the light of the observations and comments accompanying the decision on discharge for 2012

### 1. Comments on internal controls

Observation No 8 of the European Parliament discharge decision (EPDD)

*Notes with concern that according to the Court of Auditors' annual audit report, the Centre does not usually obtain any documents from beneficiaries to substantiate the eligibility and accuracy of the costs claimed in relation to grants for supporting cooperation under the Reitox network and that ex post on-the-spot verifications of costs at beneficiary level are rare; calls on the Centre to address the issue by accepting the Court of Auditors' recommendation of having a random verification of supporting documents and a higher coverage of beneficiaries by on-the-spot verifications which could considerably increase assurances; calls on the Centre to report to the discharge authority, within the framework of the 2012 discharge follow-up, on the steps taken.*

The EMCDDA has implemented the following processes and measures to ensure adequate ex-ante and ex-post verification and controls, by taking into account the risks at stake:

- Ex ante controls of requests for payment are regularly carried out in the first place within the EMCDDA Reitox unit by the financial and contractual support officer, who analyses all supporting documents provided. The standard documents required as support for a

request for payment are a summary statement of all expenses, a financial report, details of the salaries covered by the grant, an activity report and an external audit report. In case of doubt, additional information and/or supporting documents are requested to verify the eligibility of the costs involved. The payment request and the relevant supporting documents are then double-checked by the programme management officer in the Reitox unit, as well as other actors in the standard payment process (initiating officer, verifying officer and authorising officer). Furthermore, as a routine procedure, constant assistance and guidance is provided to the Reitox NFPs throughout the year, both by email and by phone, to facilitate their understanding and application of the EMCDDA's requirements, and to make the financial reporting procedure easier.

- Written instructions have been communicated to all NFPs concerning minimum requirements to be complied with for external audits on Reitox grants, as part of the Guide for administrative and financial procedures related to the grant agreement. These include the specific sections 'Balance payment and reporting' and 'External audit report', with a clear indication of the scope and objectives of the verifications to be communicated to the external auditors.
- Each Reitox grant agreement clearly identifies the scope and objectives of the external audits and specifies that the beneficiary of the grant itself (the NFP) shall certify the eligibility of the costs. Each NFP is, therefore, formally and explicitly bound by this contractual provision, namely for the purpose of the payment of the final instalment of the grant.
- Specific information sessions on the issues at stake have been organised in the margins of the periodic meetings of the HFPs in Lisbon.
- Each year, the EMCDDA analyses the financial reporting of each NFP for the previous year. On this basis, it provides bilateral feedback to tackle and solve possible problems relating to the management of the Reitox grants.
- Two staff members of the Reitox unit have received specific training organised by the European Commission (DG BUDGET) concerning ex-post on-the-spot checks for grants (audits).
- On-site ex-post verifications have been carried out to check the accounts of selected NFPs relating to the grant received, by taking into account the result of the aforementioned annual analysis/feedback (the latest verifications in 2013 concerned three NFPs). The EMCDDA plans to continue carrying out, on average, two or three annual ex-post verifications on site, taking into account the current and expected budget constraints (the estimated average cost for each ex-post control is between EUR 7 000 and EUR 10 000), the nature of the beneficiaries concerned (public bodies) and the specific role assigned to the ECA with regard to the checks and audits relating to the execution of the Reitox grant agreements. If budget constraints do not allow on-site verifications, ex-post desk verification will be carried out.

#### Observation No 9 of the EPDD

*Notes with concern that no ex post verifications were carried out for any transactions made after 2008, except for grants; calls on the Centre to address the issue and to report to the discharge authority, within the framework of the 2012 discharge follow-up, on the steps taken.*

An ex-post verification was actually carried out in 2009 in relation to transactions carried out in 2008.

Since 2008, the EMCDDA has made substantial progress in risk assessment and management, namely by the formal adoption, application and monitoring of internal

control standards (ICS), as well as by the setting up of central and sector risk registers (the latter where applicable), in line with relevant rules and European Commission guidelines and requirements. In this context and pursuant to the results emerging from the assessment of possible risks, no areas of medium to high risk, likely to justify ex-post verifications, were identified (as documented by the EMCDDA central risk register).

With regard to the above, the EMCDDA has revised its rules defining the requirements for ex-post exercises to explicitly link ex-post verification to the results of risk assessments.

In this context, the latest risk assessment exercise in 2014 has confirmed the existence of some medium to high risks of a technical nature relating to ICT security and software configuration, likely to justify ex-post verification, which will complete the ongoing mitigating measures designed to address the risks identified.

## 2. Other comments

Observation No 10 of the EPDD

*Notes with concern from the Court of Auditors' annual audit report that the Centre currently bears the annual cost of about EUR 200 000 for unused office space in its former building and in the new headquarters; calls on the Centre, as a matter of priority, to work in cooperation with the Commission and national authorities to seek adequate solutions for this unused office space, and to report to the discharge authority, within the framework of the 2012 discharge follow-up, on the steps taken.*

In October 2014, the EMCDDA received from the Lisbon Metropolitan Area — a public association of the 18 municipalities of the greater Lisbon area — a formal offer for the purchase of the EMCDDA former headquarters (the Palacete Mascarenhas), preferably before the end of 2014 or at the beginning of 2015.

At the end of October 2014, the EMCDDA asked for the approval of the EU budgetary authority on this operation, in accordance with the relevant provisions of the applicable financial regulations. The two branches of the EU budgetary authority gave the required approval before the end of 2014, and the purchase contract should be concluded in early 2015.

Concerning the unused office space in the Relógio building, the EMCDDA has received some expressions of interest in renting the space, but only a few have materialised into concrete proposals. The last proposal for a short-term lease contract was made in August 2014 by a start-up company, but the company withdrew its proposal at the end of 2014. The EMCDDA is making efforts to find a suitable solution and remains in contact with the relevant Portuguese authorities for this purpose. Meanwhile, the EMCDDA has further rationalised and reduced the maintenance costs for these premises, namely by revising the security settings and reducing energy consumption. This has been facilitated by the development of further synergies with EMSA, including joint procurement of relevant services.

## 3. Prevention and management of conflicts of interests and transparency

Observation No 11 of the EPDD

*Acknowledges that the Centre will review its policy on the prevention and management of conflicts of interests on the basis of the Commission's Guidelines on the Prevention and*

*Management of Conflict of Interest in EU Decentralised Agencies; calls on the Centre to inform the discharge authority on the assessment results once available.*

The EMCDDA Management Board, at its meeting of 4–5 December 2014, approved the EMCDDA policy for the prevention and management of conflicts of interest. This policy reflects the Guidelines on the prevention and management of conflicts of interest in EU decentralised agencies adopted by the European Commission on 10 December 2013.

Observation No 12 of the EPDD

*Observes that the CVs and declarations of interests of the members of the Management Board and the senior management of the Centre, as well as the declaration of interests of the Executive Director, are not publicly available; calls on the Centre to remedy the situation as a matter of urgency.*

See the measure concerning Observation No 11 above.

#### 4. Internal audit

Observation No 13 of the EPDD

*Acknowledges from the Centre that in 2012 the Commission's Internal Audit Service (IAS) submitted a three-year strategic audit plan for the Centre on 27 November 2012 and that it was endorsed by the Centre's Management Board at its meeting of 6–7 December 2012; notes that the IAS did not carry out any audits at the Centre in 2012; notes that the IAS carried out a follow-up of its earlier recommendations and found that at the cut-off date of 31 December 2012, one very important recommendation was still being implemented, while two had been implemented but were subject to confirmation from the IAS.*

None of the 'very important' recommendations referred to is outstanding at present.

#### 5. Performance

Observation No 14 of the EPDD

*Requests that the Centre communicate the results and impact its work has on European citizens in an accessible way, mainly through its website.*

In July 2012, the EMCDDA adopted a revised communication strategy, which has addressed the issue in question.



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## CHAPTER 2

# External evaluations

The third external evaluation of the EMCDDA was completed in June 2012, when the final report was forwarded to the Centre. This included 15 recommendations which were made to the EMCDDA as a result of the evaluation exercise. An action plan to follow-up on these recommendations was prepared by the Centre and endorsed by the Management Board in July 2012. It defined detailed measures to be taken during the implementation of the new three-year work programme (2013–15), also adopted by the Management Board in July 2012.

An internal assessment was carried out in 2013 and presented in the 2013 *General Report of Activities* (see Annex 8 to that report) to measure progress achieved after the first year of implementation of the triennial work programme. This was updated in 2014, with a view to informing the measurement of KPI 10.2.1.6, which was defined in the 2014 work programme, to monitor the degree of implementation of the follow-up action plan. The results of the exercise are presented in Annex 6. The detailed progress achieved in the implementation of the follow-up action plan is presented in Annex 9.

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## CHAPTER 3

# Assessment of the effectiveness of the internal control systems

### Risk management and compliance with and effectiveness of the internal control standards

As in previous years, a comprehensive risk identification and assessment exercise aimed at improving risk management in the EMCDDA was carried out throughout 2014. The central risk register, as well as the sector risk register set up by the ICT unit, has been kept updated. Risk analysis has been a continuous exercise at the EMCDDA, although at the stage of preparation of annual work programmes a more systematic review was conducted by managers.

A comprehensive document reviewing and setting out the state of implementation of the EMCDDA internal control standards was drawn up in early 2013 and reviewed throughout 2014. As a result of this review, three main areas where implementation of the EMCDDA ICS ought to be improved have been identified, namely (and by order of priority) business continuity (ICS 10); governance in IT, notably as regards project management (a key feature under ICS 7, operational structures); and monitoring of performance supported by KPIs (ICS 5). Mitigating measures have continued to be taken across the EMCDDA to deal with the related risks.

The adoption of a fully fledged business continuity plan for the agency as a whole reflected a major improvement in the implementation of the aforementioned ICS. Without prejudice to future improvements, this plan already appears to be detailed and comprehensive enough to allow the EMCDDA to act swiftly and operate recoveries in the event of emergency or disaster. It is also worth mentioning the continuous efforts made in relation to governance and technical management of ICT operations. In this area, business continuity was achieved without major incidents, namely by ensuring, within the framework of sound procurement procedures, adequate licensing and proper testing of applications. Furthermore, some mitigating measures were taken during 2014 to bring risks inherent to the management of some ICT-related investments and projects to nearly tolerable levels.

In line with the IT sector risk register, an adequate risk management plan has been set up. This plan identifies for each area the estimated risk level, the controls to be put in place and the ongoing programmes and projects that will contribute to the reduction of the risks in question.

In 2014, KPIs have been defined in the annual work programme for 2015 for all main areas of work. To support the measurement of KPIs, a detailed monitoring and evaluation plan has been developed for internal use, including information (per KPI) on the relevant

method of calculation, baseline, target, frequency of monitoring, reference documents and/or data sources. Moreover, an IT performance-monitoring tool integrating planning and monitoring of activities is currently under development. The timeline for its completion hinges on having the necessary resources available.

The EMCDDA internal coordination bodies (for example the Coordination Group) have contributed to strengthening risk management processes, by enhancing the capacity of managers and other key staff to closely monitor all major issues relating to the timely and effective implementation of the planned activities, the delivery of outputs and the achievement of results.

Concerning the risks more directly associated with operational activities, the most relevant of these risks, namely the lack of proper funding for the Reitox NFPs, materialised in 2014, and this situation had a negative impact on the capacity of the NFPs to properly comply with their reporting obligations towards the EMCDDA. In this context, and in order to mitigate the aforementioned risk, the EMCDDA has reviewed the reporting process and tools to be used by the NFPs.

Furthermore, in 2014 there was some reduction in the reporting capacity of Member States, as a result of either a lack of or a reduction in available core data of the appropriate level of quality. This event further affected the NFPs' capacity to comply with their reporting obligations, namely in terms of the quality of the information provided. If confirmed, this event may lead to a review of the planning of publications, in order to adjust the relevant requirements to the quality of information and expertise actually available in the areas affected.



# CHAPTER 4

## Management assurance

### Declaration of assurance by authorising officer

I, the undersigned, Director of the European Monitoring Centre for Drugs and Drug Addiction

In my capacity as Authorising Officer

Declare that the information contained in this report gives a true and fair view <sup>(?)</sup>.

State that I have reasonable assurance that the resources assigned to the activities described in this report have been used for their intended purpose and in accordance with the principles of sound financial management, and that the control procedures put in place give the necessary guarantees concerning the legality and regularity of the underlying transactions.

This reasonable assurance is based on my own judgement and on the information at my disposal, such as the results of the self-assessment, the observations of the Internal Audit Service and the lessons learnt from the reports of the Court of Auditors for years prior to the year of this declaration.

Confirm that I am not aware of anything not reported here which could harm the interests of the institution.

Done in Lisbon, on 13 May 2015



**Wolfgang Götz**  
Director

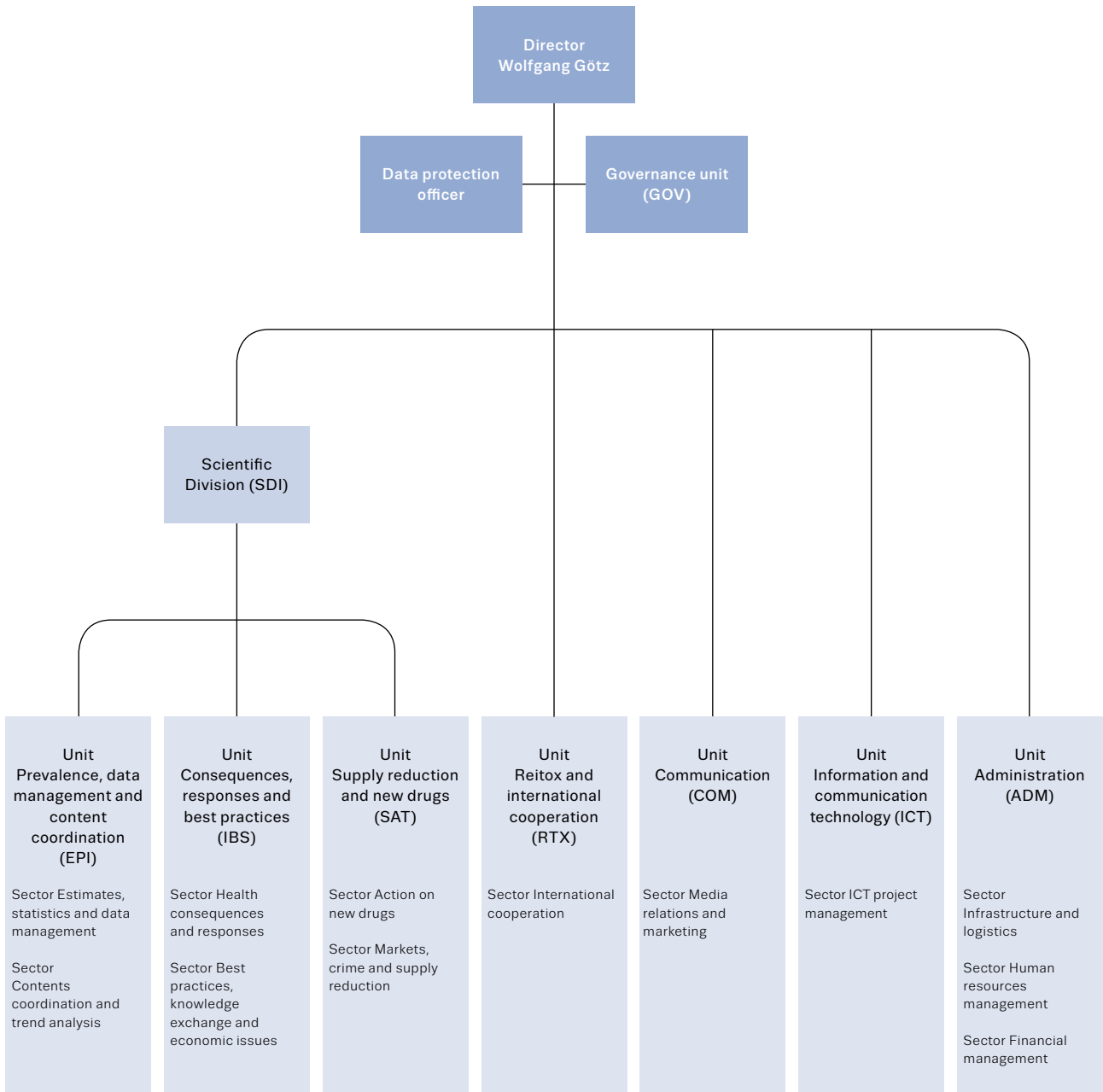
<sup>(?)</sup> 'True and fair' in this context means a reliable, complete and correct view on the state of affairs in the service.





# Annexes

# ANNEX 1 EMCDDA Organisational chart



## ANNEX 2

## Breakdown of EMCDDA staff as of 31 December 2014

Contract agents (CA), Temporary agents (TA), Officials

	Category/ Grade	Officials	Gender		TA	Gender	
			Male	Female		Male	Female
AD	15				1	1	
	14						
	13				2	2	
	12	5	4	1	7	5	2
	11				4	2	2
	10				5	2	3
	9	1	1		1	1	
	8	1	1		5	2	3
	7				11	1	10
	6				6	4	2
	5						
	<b>Subtotal AD</b>	<b>7</b>	<b>6</b>	<b>1</b>	<b>42</b>	<b>20</b>	<b>22</b>
AST	11						
	10				1		1
	9				2	1	1
	8	1		1	1	1	
	7	2		2	3	3	
	6				2	1	1
	5	1		1	9	4	5
	4				3	1	2
	3				1	1	
	2						
1	1		1				
	<b>Subtotal AST</b>	<b>5</b>	<b>0</b>	<b>5</b>	<b>22</b>	<b>12</b>	<b>10</b>
	<b>TOTAL</b>	<b>12</b>	<b>6</b>	<b>6</b>	<b>64</b>	<b>32</b>	<b>32</b>

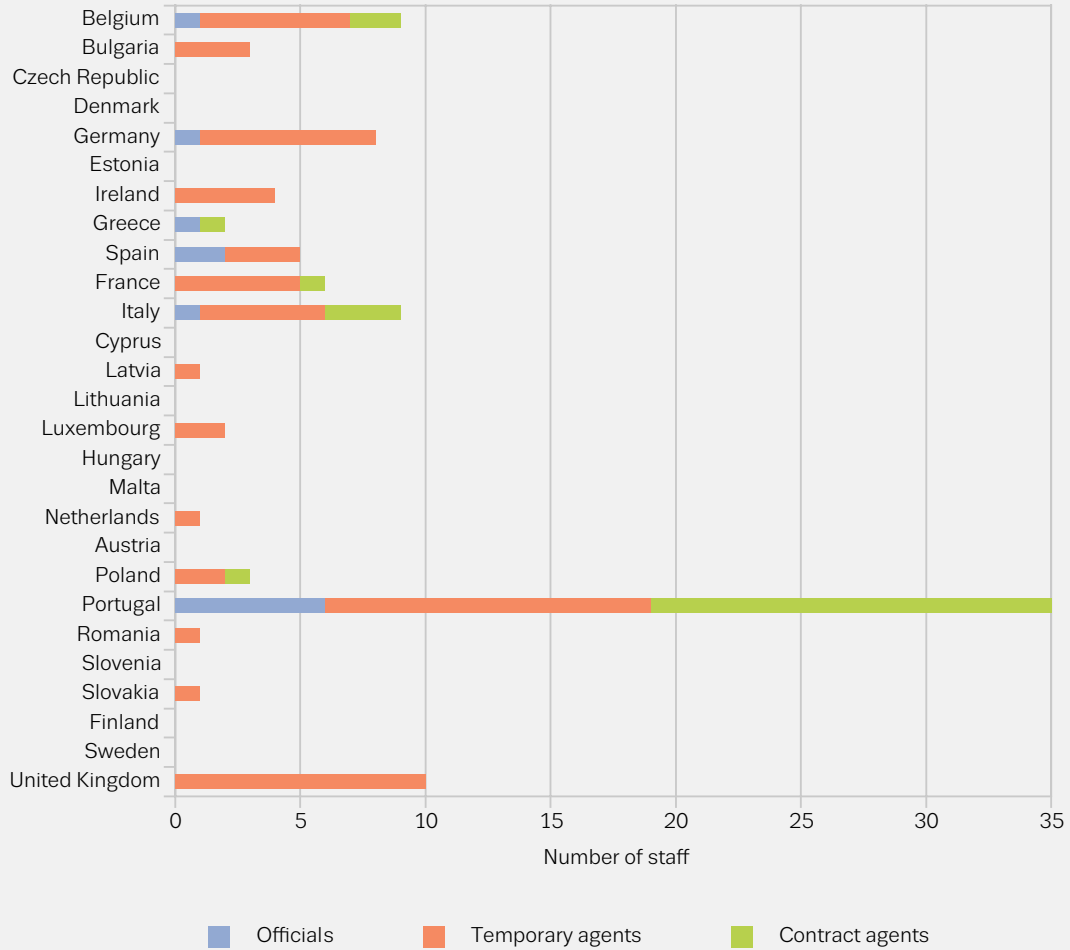
	Function group		Gender	
			Male	Female
Contract Agents	IV			
	III	8	4	4
	II	13	1	12
	I	3	3	
	<b>Total CA</b>	<b>24</b>	<b>8</b>	<b>16</b>

Total EMCDDA staff*	Gender	
	Male	Female
101	47	54
%	46.53	53.47

Administrator = AD  
Assistant = AST

\* Including a seconded national expert.

## EMCDDA staff by nationality



## Results of the benchmarking exercise

Job type (sub-) category	Year N (%)*
<b>Administrative support and coordination</b>	<b>20.25</b>
Administrative support	19.41
Coordination	0.84
<b>Operational</b>	<b>69.41</b>
General operational	12.94
Programme management	51.85
Top-level operational coordination	4.62
Evaluation and impact assessment	0
<b>Neutral</b>	<b>10.34</b>
Finance	10.34
Control	0

\* 2014 was the first year when the benchmarking exercise was performed.

Key functions (examples of terminology adapted to the agency's job titles)	Type of contract (official, TA or CA)	Function group, grade of recruitment	Indication whether the function is dedicated to administration support, operations or neutral, according to definitions used in the screening exercise
Scientific director (second level)	TA-O	AD10	Operational
Head of unit (third level)	TA-O	AD9	Admin support + operational
Head of sector (fourth level)	TA-O	AD7	Admin support + operational
Principal officer	TA-O	AD8	Admin support + operational
Officer	TA-O-CA	AD5 — FG IV	Admin support + operational
Senior assistant	TA-O	AST10	Admin support + operational
Assistant	TA-O-CA	AST1 — FG I to FG III	Admin support + operational
Head of administration	TA-O	AD9	Admin support
Head of human resources	TA-O	AD7	Admin support
Head of finance	TA-O	AD7	Neutral
Head of communication	TA-O	AD9	Operational
Head of IT	TA-O	AD9	Admin support
Administrative assistant/administrative support agent (secretary)	TA-O-CA	AST1 — FG II	Admin support + operational
Mail clerk	NA	NA	NA
Webmaster, editor	TA-O	AD6	Operational
Data protection officer	TA-O	AD6	Admin support + operational
Accounting officer	TA-O	AST4	Neutral
Internal auditor	NA	NA	NA
Administrative assistant to the Director (secretary to the Director)	TA-O	AST1	Operational + neutral

NA, not applicable.

## ANNEX 3

### Outputs and products

#### Annual reporting

*European Drug Report 2014: Trends and developments*, EMCDDA, Lisbon, May 2014

A yearly overview of the drug phenomenon in Europe.

Available in 24 languages — all EU official languages (except MT and GA), plus Turkish and Norwegian.

<http://www.emcdda.europa.eu/publications/edr/trends-developments/2014>

#### *Statistical bulletin (Data and statistics)*

The epidemiological basis on which the European Drug Report is based, with over 300 tables and 100 graphics collated by the EMCDDA from the information submitted by the network of Reitox national focal points.

Available as a website in EN: <http://www.emcdda.europa.eu/data/2014>

#### *Perspective on drugs (PODs)*

Designed-for-the-web interactive analyses providing deeper insights into a selection of important issues.

*Wastewater analysis and drugs — a European multi-city study*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/waste-water-analysis>

*New developments in Europe's cannabis market*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/cannabis-markets-developments>

*Health and social responses for methamphetamine users in Europe*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/responses-for-methamphetamine-users>

*Injection of synthetic cathinones*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/synthetic-cathinones-injection>

*Internet-based drug treatment*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/internet-based-drug-treatment>

*Treatment for cocaine dependence — reviewing current evidence*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/topics/pods/treatment-for-cocaine-dependence>

#### *Country overviews*

Summaries of the national drug situation showing the drug use prevalence position in seven former Soviet Union countries: Belarus, Georgia, Moldova, Ukraine, Kazakhstan, Kyrgyzstan and Uzbekistan

Available online in EN (for all) and in Russian (for Kazakhstan, Kyrgyzstan and Uzbekistan):

<http://www.emcdda.europa.eu/publications/country-overviews>

#### *Country overviews (FSU)*

Summaries of the national drug situation showing the drug use prevalence position in seven former Soviet Union countries: Belarus, Georgia, Moldova, Ukraine, Kazakhstan, Kyrgyzstan and Uzbekistan

Available online in English (for all) and in Russian (for Kazakhstan, Kyrgyzstan and Uzbekistan): <http://www.emcdda.europa.eu/publications/country-overviews>

### *National reports*

Commissioned each year by the EMCDDA and produced by the national focal points of the Reitox network, the National reports draw an overall picture of the drugs phenomenon at national level in each EU Member State. Published on the EMCDDA website: [http://www.emcdda.europa.eu/publications/searchresults?action=list&type=PUBLICATIONS&SERIES\\_PUB=w203](http://www.emcdda.europa.eu/publications/searchresults?action=list&type=PUBLICATIONS&SERIES_PUB=w203)

### **Institutional publications**

*General Report of Activities 2013 including annual activity report of the EMCDDA's authorising officer (for 2013)*, EMCDDA, Lisbon, June 2014.  
<http://www.emcdda.europa.eu/publications/gra/2013>

*2013: a year in review: Highlights from the EMCDDA's General Report of Activities*. EMCDDA, Lisbon, June 2014.  
<http://www.emcdda.europa.eu/publications/gra/2013-highlights>

*Annual accounts 2013*, EMCDDA, Lisbon, August 2014.  
<http://www.emcdda.europa.eu/html.cfm/index230495EN.html>

*Budget 2014*, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/budget-2014>

*2014 Work Programme*, EMCDDA, Lisbon, February 2014.  
<http://www.emcdda.europa.eu/publications/work-programmes/2014>

### **Outputs linked to the implementation of the Council Decision on new psychoactive substances (2005/387/JHA)**

*EMCDDA–Europol 2013 Annual Report on the implementation of Council Decision 2005/387/JHA (New drugs in Europe, 2013)*, EMCDDA, Lisbon, July 2014.  
<http://www.emcdda.europa.eu/publications/implementation-reports/2013>

This report presents the results and outlines the key achievements for 2013 on the information exchange, risk assessment and control of new psychoactive substances.  
<http://www.emcdda.europa.eu/publications/implementation-reports/2013>

*EMCDDA–Europol Joint Report on a new psychoactive substance: MDPV (3, 4-methylenedioxypropylvalerone)*, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/joint-report/MDPV>

*EMCDDA–Europol Joint Report on a new psychoactive substance: AH-7921*, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/joint-report/AH-7921>

*EMCDDA–Europol Joint Report on a new psychoactive substance: 25I-NBOMe*, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/joint-report/25I-NBOMe>

EMCDDA–Europol Joint Report on a new psychoactive substance: methoxetamine (2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone), EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/joint-report/methoxetamine>

EMCDDA–Europol Joint Report on a new psychoactive substance: 4,4'-DMAR (4-methyl-5-(4-methylphenyl)-4,5-dihydrooxazol-2-amine), EMCDDA, Lisbon, July 2014.  
<http://www.emcdda.europa.eu/publications/joint-reports/4-4-DMAR>

EMCDDA–Europol Joint Report on a new psychoactive substance: 1-cyclohexyl-4-(1,2-diphenylethyl)piperazine ('MT-45'), EMCDDA, Lisbon, September 2014.  
<http://www.emcdda.europa.eu/publications/joint-reports/MT-45>

## Risk Assessments

Report on the risk assessment of 5-(2-aminopropyl)indole in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/5-IT>

Report on the risk assessment of 4-methylamphetamine in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, January 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/4-MA>

Report on the risk assessment of 2-(4-iodo-2,5-dimethoxyphenyl)-N-(2-methoxybenzyl)ethanamine (25I-NBOMe) in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, May 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/25I-NBOMe>

Report on the risk assessment of 3,4-dichloro-N-[[1-(dimethylamino)cyclohexyl]methyl]benzamide (AH-7921) in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, May 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/AH-7921>

Report on the risk assessment of 1-(1,3-benzodioxol-5-yl)-2-(pyrrolidin-1-yl)pentan-1-one (MDPV) in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, May 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/MDPV>

Report on the risk assessment of 2-(3-methoxyphenyl)-2-(ethylamino)cyclohexanone (methoxetamine) in the framework of the Council Decision on new psychoactive substances, EMCDDA, Lisbon, May 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/methoxetamine>

Report of a new psychoactive substance: 1-cyclohexyl-4-(1,2-diphenylethyl)piperazine (MT-45), EMCDDA, Lisbon, November 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/mt-45>

Risk assessment of 4-methyl-5-(4-methylphenyl)-4,5-dihydrooxazol-2-amine (4,4'-dimethylaminorex, 4,4'-DMAR), EMCDDA, Lisbon, November 2014.  
<http://www.emcdda.europa.eu/publications/risk-assessment/4,4-DMAR>



## EMCDDA Insights

*Therapeutic communities for treating addictions in Europe: evidence, current practices and future challenges*, EMCDDA, Lisbon, April 2014.

<http://www.emcdda.europa.eu/publications/insights/therapeutic-communities>

*Drug use, impaired driving and traffic accidents, second edition*, EMCDDA, Lisbon, June 2014.

<http://www.emcdda.europa.eu/publications/insights/2014/drugs-and-driving>

## Joint publications

The 2012 ESPAD impact survey, EMCDDA, ESPAD, Pompidou Group, Lisbon, July 2014.

<http://www.emcdda.europa.eu/publications/joint-publications/2012-espad-impact-survey>

## EMCDDA Papers

*Exploring methamphetamine trends in Europe*, EMCDDA, Lisbon, January 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/exploring-methamphetamine-trends-in-Europe>

*Multidimensional family therapy for adolescent drug users: a systematic review*, EMCDDA, Lisbon, February 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/multidimensional-family-therapy-review>

*Estimating public expenditure on drug-law offenders in prison in Europe*, EMCDDA, Lisbon, February 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/public-expenditure-drug-law-offenders-in-prison>

*Regional drug strategies across the world*, EMCDDA, Lisbon, March 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/regional-drug-strategies>

*Drug policy profile: Austria*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/policy-profile-austria>

*Drug policy profile: Poland*, EMCDDA, Lisbon, May 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/policy-profile-poland>

*Residential treatment for drug use in Europe*, EMCDDA, Lisbon, July 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/residential-treatment>

*Pregnancy and opioid use: strategies for treatment*, EMCDDA, Lisbon, November 2014.

<http://www.emcdda.europa.eu/news/2014/pregnancy-opioid-use>

*Financing drug policy in Europe in the wake of the economic recession*, EMCDDA, Lisbon, December 2014.

<http://www.emcdda.europa.eu/publications/emcdda-papers/recession-and-drug-related-public-expenditure>

## Technical reports

*European Questionnaire on Drug Use among Prisoners (EQDP)*, EMCDDA, Lisbon, February 2014.

<http://www.emcdda.europa.eu/publications/scientific-studies/eqdp>

*Drug use in prison: assessment report*, EMCDDA, Lisbon, February 2014.

<http://www.emcdda.europa.eu/publications/drug-use-in-prison-assessment-report>

*Emergency health consequences of cocaine use in Europe. A review of the monitoring of drug-related acute emergencies in 30 European countries*, EMCDDA, Lisbon, April 2014.

<http://www.emcdda.europa.eu/publications/scientific-studies/2014/cocaine-emergencies>

*Computer-assisted and online data collection in general population surveys*, EMCDDA, Lisbon, October 2014.

<http://www.emcdda.europa.eu/publications/technical-reports/online-data-collection-gps>

## Literature reviews

The levels of use of opioids, amphetamines and cocaine and associated levels of harm: summary of scientific evidence, EMCDDA, Lisbon, March 2014.

<http://www.emcdda.europa.eu/publications/literature-review/2014/levels-of-harm>

## Brochures

*The EU justice and home affairs agencies*, EMCDDA, Lisbon, June 2014.

<http://www.emcdda.europa.eu/html.cfm/index229337EN.html>

## Drugnet Europe

*Drugnet Europe*

The EMCDDA's quarterly newsletter. Provides regular information on the agency's activities to a broad readership. Four editions in 2014 (85, 86, 87, 88). Available in English.

<http://www.emcdda.europa.eu/publications/drugnet>

## Media products

*News releases*

Nine news releases

No 1: Four new drugs go under the microscope in the wake of rising health concerns (29.01.2014) EN

No 2: EU drugs agency to launch European Drug Report 2014 (24.04.2014) BG/CS/DA/DE/EL/EN/ES/ET/FI/FR/HR/HU/IT/LT/LV/NL/ PL/PT/RO/SK/SL/SV/NO

No 3: EMCDDA analysis 2014 European Drug Report out today — Europe's drugs problem 'increasingly complex' (27.05.2014) BG/CS/DA/ DE/EL/EN/ES/ET/FI/FR/HR/HU/IT/LT/LV/NL/ PL/PT/RO/SK/SL/SV/NO

No 4: European Drug Report 2014 — Perspectives on drugs EU drugs agency places six topics in the spotlight with new online analyses (27.05.2014) BG/CS/DA/ DE/EL/EN/ES/ET/FI/FR/HR/HU/IT/LT/LV/NL/ PL/PT/RO/SK/SL/SV/NO

No 5: Largest multi-city study on drug wastewater analysis released today (27.05.2014) EN

No 6: 26 June: International day against drug abuse and illicit trafficking (25.06.2014) EN/PT

No 7: Eurojust and EMCDDA pledge to boost cooperation (15.07.2014) EN

No 8: European Parliament President Martin Schulz to visit EU agencies in Lisbon (19.09.2014) EN/PT

No 9: Annual award ceremony to celebrate excellence in scientific writing on illicit drugs (24.11.2014) EN/DE/FR/PT

### *Fact sheets*

Twelve fact sheets available only in English

Fact sheet 1: Registration opens for third European drugs summer school (15.01.2014)

Fact sheet 2: EMCDDA and Israel Anti-Drug Authority sign memorandum of understanding in Jerusalem EU drugs agency steps up cooperation with Israel Anti-Drug Authority (04.02.2014)

Fact sheet 3: New EMCDDA technical assistance project with ENP countries kicks off today (05.03.2014)

Fact sheet 4: Regional drug strategies across the world explored in new EMCDDA paper (18.03.2014)

Fact sheet 5: Scientific Committee —EMCDDA Scientific Committee elects new leaders (01.04.2014)

Fact sheet 6: International experts to examine latest findings in the field of new drugs (15.05.2014)

Fact sheet 7: ISCTE–EMCDDA summer school: 30 June–11 July 2014, Lisbon (30.06.2014)

Fact sheet 8: Over 30 years' experience in the cross-border collection and analysis of information (15.07.2014)

Fact sheet 9: European scientists to assess risks of new stimulant drug 4,4'-DMAR (16.09.2014)

Fact sheet 10: EMCDDA unites expert networks in integrated approach to monitoring (24.09.2014)

Fact sheet 11: Drug-related harms and responses in focus at annual EMCDDA expert meetings (13.10.2014)

Fact sheet 12: Click and learn with the EMCDDA's new-look Best practice portal (23.10.2014)

### *News updates*

EMCDDA hosts kick-off meeting of EC-funded Joint Action on Reducing Alcohol Related Harm (31.01.2014)

EMCDDA embarks on 2014 Work Programme (13.02.2014)

Dangerous synthetic drugs hit the EU market (05.03.2014)

EMCDDA and ECDC facilitate sub-regional exchange of knowledge and best practice in monitoring and preventing drug-related infections (07.04.2014)

Published today on World Hepatitis Day: New EMCDDA review on hepatitis C virus infection among people who inject drugs in Europe (28.07.2014)

ECDC–EMCDDA mission on HIV status and hepatitis surveillance in Latvia (03.09.2014)

Four new drugs to be placed under control (25.09.2014)

Second EMDAS graduation ceremony at EMCDDA (29.09.2014)

Pregnancy and opioid use: strategies for treatment (14.11.2014)

Third EMCDDA Reitox week (19.11.2014)

Gaps in HIV prevention expose Europe to risk of outbreaks (01.12.2014)

### *Videos*

European drugs summer school 2014, Lisbon (14.01.2014)

<https://www.youtube.com/watch?v=BjCSeOL-en8>

What is addiction? (17.02.2014)

<https://www.youtube.com/watch?v=HxxLNBWafXY>

Internet-based drug treatment (27.05.2014)

<https://www.youtube.com/watch?v=hH3alZfP-r0>

New developments in Europe's cannabis market (27.05.2014)

[https://www.youtube.com/watch?v=74Qf8V3\\_cWk](https://www.youtube.com/watch?v=74Qf8V3_cWk)

Treatment for cocaine dependence (27.05.2014)

<https://www.youtube.com/watch?v=L9RCgoXxVV4>

European Drug Report 2014 (27.05.2014)

[https://www.youtube.com/watch?v=PUVsZJQh\\_HQ](https://www.youtube.com/watch?v=PUVsZJQh_HQ)

EMCDDA best practice portal (22.10.2014)

<https://www.youtube.com/watch?v=Ku4KsTQh7pM>

Take-home naloxone in Estonia (presentation at EMCDDA expert meeting) (21.11.2014)

<https://www.youtube.com/watch?v=YiOjHD6W2iE>

2014 EMCDDA scientific paper award (16.12.2014)

<https://www.youtube.com/watch?v=zJKVKEu-6w4>

Take-home naloxone programmes in Europe — overdose prevention (18.12.2014)

<https://www.youtube.com/watch?v=OR2XoQExPCw>

### *Social media*

Facebook

3061 'Likes' by 31 December 2014

Twitter

140 tweets/retweets in 2014

## **Online tools and web-based resources**

### *EMCDDA public website*

The gateway to drug information in Europe

<http://www.emcdda.europa.eu>

Prevention profiles

<http://www.emcdda.europa.eu/prevention-profiles>

Action on new drugs

<http://www.emcdda.europa.eu/activities/action-on-new-drugs>

Drug-related research

<http://www.emcdda.europa.eu/themes/research>

Best practice portal: A resource for professionals, policymakers and researchers in the areas of drug-related prevention, treatment, harm reduction and social reintegration.

<http://www.emcdda.europa.eu/best-practice>

ELDD (European Legal Database on Drugs)

<http://www.emcdda.europa.eu/eldd>

Treatment profiles

<http://www.emcdda.europa.eu/responses/treatment-overviews>

Public expenditure profiles

<http://www.emcdda.europa.eu/countries/public-expenditure>

### Scientific articles published in 2014 (bold indicates EMCDDA staff member(s))

1. **Ballotta, D.** (2014), 'Convergence européenne', *Politique: revue des débats*, 86, pp.36–37.
2. **Evans-Brown, M.**, Kimergård, A., McVeigh, J., Chandler, M., Brandt, S. D. (2014), 'Is the breast cancer drug tamoxifen being sold as a bodybuilding dietary supplement?', *BMJ* 2014;348:g1476. doi: 10.1136/bmj.g1476.
3. Abbate, V., Kicman, A.T., **Evans-Brown, M.**, McVeigh, J., Cowan, D.A., Wilson, C., Coles, S.J., and Walker, C.J. 'Anabolic steroids detected in bodybuilding dietary supplements – a significant risk to public health'. *Drug Test Anal.* 2014 Oct 6. doi: 10.1002/dta.1728.
4. Brandt, S. D., King, L. A. and **Evans-Brown, M.** (2014), 'The new drug phenomenon', *Drug Testing and Analysis*, 6(7–8); pp. 587–97. Article first published online: 3 July 2014, doi: 10.1002/dta.1686.
5. Hope, V. D., McVeigh, J., Marongiu, A., **Evans-Brown, M.**, Smith, J., Kimergård, A., Parry, J. V. and Ncube, F. (2014), 'Injection site infections and injuries in men who inject image- and performance-enhancing drugs: prevalence, risks factors, and healthcare seeking', *Epidemiology and Infection*. Published online 8 April 2014. doi: 10.1017/S095026881400072.
6. Torben Breindahl, T., **Evans-Brown, M.**, Hindersson, P., McVeigh, J., Bellis, M., Stensballe, A. and Kimergård, A. (2014), 'Identification and characterization by LC-UV-MS/MS of melanotan II skin-tanning products sold illegally on the Internet', *Drug Testing and Analysis*. Published online: 25 April 2014. DOI: 10.1002/dta.1655.
7. **Ferri, M., Bo, A.**, Amato, L., Correia Guedes, I., Esteves, C. S., **Wiessing, L.**, Oliver, S., Hickman, M. and Davoli, M. (2014), 'What is needed in future drug treatment research? A systematic approach to identify gaps on effectiveness of drug treatment from the EMCDDA', *Drugs: Education, Prevention and Policy*, published online 28 August 2014, DOI: 10.3109/09687637.2014.954988.
8. **Ferri, M.** (2014), 'Developing a reliable knowledge base', DAWN (Drugs and Alcohol Women Network) promoting a gender responsive approach to addiction, UNICRI Publication No 104, United Nations Interregional Crime and Justice Research Institute (UNICRI), Turin.
9. **Ferri, M. and Ballotta, D.**, (2014), 'Riduzione della domanda and Osservatori e governance europea', *Atlante delle dipendenze*, Edizioni Gruppo Abele, Torino.
10. Rossi, P. G., Ferroni, E., Barca, A., Pantano, P., Camilloni, L., Cogo, C., **Ferri, M.**, Borgia, P. and Federici, A. (2014), 'Quality appraisal of documents producing recommendations for breast, colorectal and cervical cancer screening', *Epidemiology Biostatistics and Public Health*, 11, 3, pp. e9062-1–e9062-22.
11. Wood, D. M., Heyerdahl, F., Yates, C. B., Dines, A. M., **Giraudon, I.**, Hovda, K. E. and Dargan, P. I. (2014), 'The European Drug Emergencies Network (Euro-DEN)', *Clinical Toxicology* 52.
12. Heyerdahl, F., Hovda, K. E., **Giraudon, I.**, Yates, C., Dines, A. M., **Sedefov, R.**, Wood, D. M. and Dargan, P. I. (2014), 'Current European data collection on emergency

department presentations with acute recreational drug toxicity: Gaps and national variations', *Clinical Toxicology*, 52, 10, pp.1005–1012.

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14. **Griffiths, P., Evans-Brown, M.** and **Sedefov, R.** (2014), 'The (mis)use of psychoactive medicines: getting the balance right in complex systems', *Addiction*, 109, 2, pp.182–183.
15. **Hughes, B.** and **Griffiths, P.** (2014), 'Regulatory approaches to new psychoactive substances (NPS) in the European Union', *Addiction*, 109, 10, pp.1591–1593.
16. **Montanari, L., Royuela, L.,** Pasinetti, M., **Giraudon, I., Wiessing, L.** and **Vicente, J.** (2014), 'Drug use and related consequences among prison populations in European countries', in Enggist, S., Moller, L., Galea, G. and Udesen, C. (eds), *Prisons and health*, World Health Organization, Copenhagen, pp. 107–112.
17. **Mounteney, J.** and **Griffiths, P.** (2014), 'Increasing complexity in European drug use: Highlights from the EMCDDA's 2014 European drug report', *Drugs: Education, Prevention and Policy*, published online 26 September 2014, doi:10.3109/09687637.2014.963516.
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20. Lazarus, J. V., Lundgren, J., Casabona, J., **Wiessing, L.,** Matheï, C., Vickerman, P., Prins, P., Kretzschmar, M., Kantzanou, M., **Giraudon, I., Ferri, M., Griffiths, P.,** Harris, M., Walker, M., Chavdarova, L., Schatz, E., Schiffer, K., Kools, J., Farrell, J. and Mendão, L. (2014) 'Roundtable discussion: how lessons learned from HIV can inform the global response to viral hepatitis', *BMC Infectious Diseases*, 14, Suppl 6, S18.
21. Uuskula, A., Raag, M., Folch, C., Prasad, L., Karnite, A., van Veen, M.G., Eritsyan, K., Rosinska, M., Des Jarlais, D.C. and **Wiessing, L.** (2014), 'Self-reported testing, HIV status and associated risk behaviours among people who inject drugs in Europe: important differences between East and West', *AIDS*, 28, 11, pp.1657–1664.

## ANNEX 4

### **Key external events, conferences and meetings, 2014**

During 2014, EMCDDA staff participated in many external events, conferences and technical meetings. Through this participation, they brought their knowledge and expertise to international scientific discussions and the various political debates currently active in the drugs field. For details of these events, see [emcdda.europa.eu/publications/gra/2014](http://emcdda.europa.eu/publications/gra/2014)

## ANNEX 5

### **Implementation of the 2014 work programme by objectives, activities and expected outputs/results**

This annex presents in detail the activities contained within the work programme for 2014 and how they were carried out during the course of the year. It can be found at [emcdda.europa.eu/publications/gra/2014](http://emcdda.europa.eu/publications/gra/2014)

## ANNEX 6

### **Key performance indicators**

Attaining good performance is one of the EMCDDA's strategic goals for 2013–15. In order to measure the achievement of this goal, the agency has committed to improving its performance measurement system by developing, among other things, KPIs for each main area of work. In 2014, KPIs were defined for the following areas: Main Area 10 (Governance, management and networks), Main Area 11 (Administration — supporting core business) and Main Area 12 (Information and communications technology).

These KPIs were designed to measure the yearly achievement of the specific objectives set up in the 2013–15 work programme, based on annual targets that were expected to be accomplished by the end of 2014. The results achieved are presented in the online annex at [emcdda.europa.eu/publications/gra/2014](http://emcdda.europa.eu/publications/gra/2014)



## ANNEX 7

## Members of the EMCDDA's statutory bodies

## Members of the Management Board of the EMCDDA

The Management Board consists of one representative from each Member State, two representatives of the European Commission, two independent experts particularly knowledgeable in the field of drugs designated by the European Parliament and one representative from each country which has concluded an agreement with the EMCDDA (Norway and Turkey). Non-voting observers, such as from international organisations with which the Centre cooperates, may be invited to Management Board meetings.

Country	Member	Substitute
Belgium	Claude GILLARD <b>Vice-Chairman</b>	Vladimir MARTENS
Bulgaria	Tsveta RAYCHEVA	
Czech Republic	Jindrich VOBOŘIL	Lucia KISSOVA
Denmark	Lars PETERSEN	Erich ERICHSEN
Germany	Marlene MORTLER	Dirk LESSER
Estonia	Anna-Liisa PÄÄSUKENE	Veiko KOMMUSAAR
Ireland	Susan SCALLY	Brendan RYAN
Greece	Christina DIAMANTOPOULOU	Gerasimos PAPANASTASATOS
Spain	Francisco BABÍN VICH	Maria Sofia ARAGÓN SÁNCHEZ
France	Laura D'ARRIGO	Danièle JOURDAIN MENNINGER
Croatia	Željko PETKOVIĆ	Sanja MIKULIĆ
Italy	Patrizia De ROSE	Elisabetta SIMEONI
Cyprus	Stelios SERGIDES	Marios ADONIS
Latvia	Dzintars MOZGIS	
Lithuania	Zenius MARTINKUS	Povilas RADZEVIČIUS
Luxembourg	Xavier POOS	Alain ORIGER
Hungary	Mónika SZÁSZIK	Ibolya CSÁKÓ
Malta	Richard MUSCAT	Marilyn CLARK
Netherlands	Wil DE ZWART	
Austria	Franz PIETSCH	Christina SCHAFFER-KRAL
Poland	Piotr JABŁOŃSKI	Bogusława BUKOWSKA
Portugal	João GOULÃO <b>Chairman</b>	Manuel CARDOSO
Romania	Sorin OPREA	Cătălin NEGOI-NIȚĂ
Slovenia	Vesna-Kerstin PETRIČ	Jože HREN
Slovakia	Zuzana MIKOVA	Marcela HORVATHOVA
Finland	Eliina KOTOVIRTA	Kari PAASO
Sweden	Ralf LÖFSTEDT	
United Kingdom	John McCracken	Anna RICHARDSON
European Commission	Luigi SORECA Lotte KNUDSEN	Anabela GAGO Michael HÜBEL

Country	Member	Substitute
European Parliament	Barbara DÜHRKOP Carla ROSSI	Massimo CANU Katalin FELVINCZI
Norwegian representatives	Lilly Sofie OTTESEN	Hege Christina BREDESEN
Turkish representatives	Cengiz ERIŞİR	Murat SARIKAMIŞLI
<b>Observers</b>		
Scientific Committee	Gerhard BÜHRINGER	
Reitox spokesperson	Tim PFEIFFER-GERSCHEL	
UNODC	Gilberto GERRA	
Council of Europe Pompidou Group	Thomas KATTAU	
WHO	Lars MØLLER	

## Members of the Executive Committee

The Management Board is assisted by an Executive Committee. The Executive Committee is made up of the Chairperson and the Vice Chairperson of the Management Board, two other members of the Management Board representing the Member States and appointed by the Management Board and two representatives of the European Commission. The Executive Committee prepares the decisions of the Management Board and assists and advises the Director.

João GOULÃO	PT (Chairman of the Management Board)
Claude GILLARD	BE (Vice Chairman of the Management Board and Chair of the Budget Committee)
Laura D'ARRIGO	FR
Franz PIETSCH	AT
Two representatives of the European Commission	

## Members of the Scientific Committee

The members of this Committee are selected for their independence and proven expertise in a particular field or speciality, as indicated below.

Issue	Name
<b>Basic biological, neurobiological and behavioural research</b>	Fernando RODRIGUEZ de FONSECA
	Rainer SPANAGEL
<b>Drug policy</b>	Henri BERGERON
	Anne-Line BRETTEVILLE JENSEN
<b>Population-based research and epidemiology</b>	Krzysztof KRAJEWSKI
	Catherine COMISKEY
	Paul DARGAN
	Dirk KORF
<b>Supply, supply reduction and crime</b>	Matthew HICKMAN
	Brice DE RUYVER
<b>Demand reduction</b>	Letizia PAOLI
	Gerhard BÜHRINGER
	Marina DAVOLI
	Gabriele FISCHER
	Henk GARRETSSEN

## ANNEX 8

### Use of the available resources in 2014

#### EMCDDA 2014 budget execution by objectives and activities in the 2014 work programme

##### A. Monitoring and reporting on the drugs problem in Europe (vertical operations)

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
Data collection, analysis and quality assurance	EPI + RTX	0.5	2.5	3	0	6
Monitoring and understanding drug use and problems: key indicators and epidemiology	EPI	0.5	5	1	0	6.5
Monitoring demand reduction responses applied to drug-related problems	IBS	1.7	4.7	0.7	0	7.1
Monitoring drug supply and supply reduction interventions	SAT	0	2.75	0.5	1	4.25
Monitoring new trends and developments and assessing the risks of new substances	SAT	0	3.25	1.5	0	4.75
Improving Europe's capacity to monitor and evaluate policies	EPI + IBS + SAT	0	3	1	0	4
Scientific coordination, research and content support	SDI + EPI	1	4.5	0	0	5.5
<b>TOTAL</b>		<b>3.7</b>	<b>25.7</b>	<b>7.7</b>	<b>1</b>	<b>38.1</b>

##### B. Cooperation and collaboration with key external partners (transversal operations)

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
Cooperation and collaboration with key partners	DIR + SDI + RTX	0.7	3.9	0	0	4.6
<b>TOTAL</b>		<b>0.7</b>	<b>3.9</b>	<b>0</b>	<b>0</b>	<b>4.6</b>

Note: Figures are in EUR.

Initial allocation of budget resources — non assigned appropriation			Final allocation of budget resources — non assigned appropriation			Executed budget — non assigned appropriation		
Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget execution
793 012.73	347 720.70	1 140 733.43	793 012.73	347 720.70	1 140 733.43	790 550.19	346 640.93	1 137 191.11
534 313.96	208 788.75	743 102.70	534 313.96	208 788.75	743 102.70	532 654.75	208 140.39	740 795.14
336 767.81	99 148.99	435 916.80	336 767.81	99 148.99	435 916.80	335 722.05	98 841.10	434 563.15
360 382.53	104 497.24	464 879.77	360 382.53	104 497.24	464 879.77	359 263.43	104 172.75	463 436.18
411 831.87	104 497.24	516 329.11	411 831.87	104 497.24	516 329.11	410 553.00	104 172.75	514 725.75
555 697.52	208 788.81	764 486.33	555 697.52	208 788.81	764 486.33	553 971.91	208 140.46	762 112.37
433 395.28	123 072.16	556 467.44	433 395.28	123 072.16	556 467.44	432 049.46	122 689.98	554 739.44
<b>3 425 401.69</b>	<b>1 196 513.90</b>	<b>4 621 915.59</b>	<b>3 425 401.69</b>	<b>1 196 513.90</b>	<b>4 621 915.59</b>	<b>3 414 764.79</b>	<b>1 192 798.36</b>	<b>4 607 563.15</b>

Initial allocation of budget resources — non assigned appropriation			Final allocation of budget resources — non assigned appropriation			Executed budget — non assigned appropriation		
Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget execution
341 116.70	113 280.73	454 397.43	341 116.70	113 280.73	454 397.43	340 057.43	112 928.96	452 986.39
<b>341 116.70</b>	<b>113 280.73</b>	<b>454 397.43</b>	<b>341 116.70</b>	<b>113 280.73</b>	<b>454 397.43</b>	<b>340 057.43</b>	<b>112 928.96</b>	<b>452 986.39</b>

## C. Supporting the achievement of results (transversal operations)

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
Communicating the EMCDDA's findings to external audiences (including translation)	COM	1	8	2	0	11
Governance, management and networks	DIR + IBS	3.3	5.3	2.3	0	10.9
	RTX + NFPS' co-financed activities	0.3	3.1	0	0	3.4
<b>TOTAL</b>		<b>4.6</b>	<b>16.4</b>	<b>4.3</b>	<b>0</b>	<b>25.3</b>
<b>GRAND TOTAL FOR OPERATIONS</b>		<b>9</b>	<b>46</b>	<b>12</b>	<b>1</b>	<b>68</b>

## D. Support to operations under A, B and C above (overheads)

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
Administration: supporting core business	ADM (administration and resources/assets management)	3	11	7.5	0	21.5
Information and communication technologies	ICT (equipment and services)	0	8	2.5	0	10.5
<b>TOTAL</b>		<b>3</b>	<b>19</b>	<b>10</b>	<b>0</b>	<b>32</b>

## E. Grand total for operations and support to operations

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
<b>TOTAL</b>		<b>12</b>	<b>65</b>	<b>22</b>	<b>1</b>	<b>100</b>

## F. Special projects

Objectives and activities of EMCDDA 2014 WP	Main organisational actors for implementation	Assigned HR				
		O	TA	CA	SNE	Total HR
Preparation of IPA Beneficiaries Countries for their participation in the EMCDDA (IPA 4 project — third year)	RTX	0	0	2	0	2
Project for technical assistance aimed at strengthening the capacity of the ENP partner countries to react to new challenges and developments in the drug situation (ENP 1 project – first year)	RTX	0	0	0	0	0

Note: Figures are in EUR.

Remarks:

Assigned HR = full-time equivalent per year; O = officials; TA = temporary agents; CA = contract agents; SNE = seconded national experts.

Appropriations for cost/expenditure for operational activities and staff that directly aim at implementing the EMCDDA mission/task/WP

Overheads, i.e. appropriations for cost/expenditure for activities, equipment, infrastructure and staff that indirectly aim at implementing the EMCDDA mission/task/WP, as their immediate aim is to support operational activities and staff. These overheads are distributed to operational activities in proportion to the human resources assigned for the implementation of these activities.

Initial allocation of budget resources — non assigned appropriation			Final allocation of budget resources — non assigned appropriation			Executed budget — non assigned appropriation		
Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget	Direct cost of operations	Indirect costs of operations	Total budget execution
1 475 955.19	404 853.88	1 880 809.07	1 475 955.19	404 853.88	1 880 809.07	1 471 371.90	403 596.69	1 874 968.59
1 001 965.05	298 269.62	1 300 234.67	1 001 965.05	298 269.62	1 300 234.67	998 853.64	297 343.41	1 296 197.05
2 807 417.53	91 867.04	2 899 284.57	2 807 417.53	91 867.04	2 899 284.57	2 798 699.65	91 581.76	2 890 281.41
5 285 337.76	794 990.54	6 080 328.30	5 285 337.76	794 990.54	6 080 328.30	5 268 925.20	792 521.85	6 061 447.05
9 051 856.16	2 104 785.17	11 156 641.32	9 051 856.16	2 104 785.17	11 156 641.32	9 023 747.42	2 098 249.18	11 121 996.59

Initial allocation of budget resources for direct cost of supporting activities to be distributed to operations	Final allocation of budget resources for direct cost of supporting activities to be distributed to operations	Executed budget — non assigned appropriation
2 954 104.75	2 954 104.75	2 944 931.37
1 073 216.56	1 073 216.56	1 069 883.90
4 027 321.31	4 027 321.31	4 014 815.27

Allocated budget resources for direct costs of supporting activities to be distributed to operations (see above) — non-assigned appropriations

15 136 811.86

Budget – Assigned appropriations			
Budget allocation — financing received in 2014	Carried over and carried forward from 2013	Total available in 2014	Budget execution
200 000.00	223 964.87	423 964.87	410 046.64
288 900.00	0.00	288 900.00	196 647.10

*Economic outturn account (in EUR)*

	2014	2013	Variation
Contributions of EFTA countries belonging to the EEA	392 177.02	403 235.32	-11 058.30
Recovery of expenses	27 910.85	13 360.02	14 550.83
Revenues from administrative operations	1 936.25	2 038.01	-101.76
Other operating revenue	15 293 808.38	15 716 351.87	-422 543.49
<b>TOTAL OPERATING REVENUE</b>	<b>15 715 832.50</b>	<b>16 134 985.22</b>	<b>-419 152.72</b>
Administrative expenses	-11 325 830.20	-11 031 684.10	-294 146.10
All staff expenses	-8 654 377.38	-8 730 147.27	75 769.89
Fixed asset-related expenses	-256 302.53	-243 808.48	-12 494.05
Other administrative expenses	2 415 150.29	-2 057 728.35	4 472 878.64
Operational expenses	-4 223 010.71	-4 261 558.26	38 547.55
Other operational expenses	-4 223 010.71	-4 261 558.26	38 547.55
<b>TOTAL OPERATING EXPENSES</b>	<b>-15 548 840.91</b>	<b>-15 293 242.36</b>	<b>-255 598.55</b>
<b>SURPLUS/DEFICIT FROM OPERATING ACTIVITIES</b>	<b>166 991.59</b>	<b>841 742.86</b>	<b>-674 751.27</b>
Financial expenses	-5 453.75	-3 266.78	-2 186.97
<b>SURPLUS/DEFICIT FROM NON OPERATING ACTIVITIES</b>	<b>-5 453.75</b>	<b>-3 266.78</b>	<b>-2 186.97</b>
<b>SURPLUS/DEFICIT FROM ORDINARY ACTIVITIES</b>	<b>172 445.34</b>	<b>838 476.08</b>	<b>-666 030.74</b>
<b>ECONOMIC OUTTURN FOR THE YEAR</b>	<b>172 445.34</b>	<b>838 476.08</b>	<b>-666 030.74</b>



## EMCDDA 2014 budget appropriations and execution by nature of expenditure

Title	Description	EUR
<b>1.</b>	<b>Expenditure relating to persons working with the EMCDDA</b>	
	Staff in active employment	8 552 049.81
	Other staff-related expenditure (exchange of officials, etc.)	58 399.71
	<b>Total under Title 1</b>	<b>8 610 449.52</b>
<b>2.</b>	<b>Expenditure for support activities</b>	
	Investment in immovable property, rental of buildings and associated costs	1 625 247.46
	Data processing	660 090.92
	Movable property and associated costs	161 437.34
	Current administrative expenditure + postal charges and telecommunications	135 410.10
	Socio-medical infrastructure	21 140.82
	<b>Total under Title 2</b>	<b>2 603 326.64</b>
<b>3.</b>	<b>Expenditure for operational activities</b>	
	Statutory meetings	159 743.85
	Expenditure on formal and others meetings + representative expenses	351 839.87
	Studies, surveys, consultations	381 943.53
	Publishing and translations	648 229.79
	European Network on Drugs and Drug Addiction Reitox	2 143 769.00
	Missions	237 509.66
	<b>Total under Title 3 – Section 1.01</b>	<b>3 923 035.70</b>
	Section 1.02 – <b>Total core budget</b>	<b>15 136 811.86</b>
	Section 1.03	
<b>4.</b>	<b>Expenditure relating to other subsidies</b>	
	EU financing of specific projects	
	<b>4a.</b> IPA 4: financing for implementing pre-accession strategy	<b>200 000.00</b>
	<b>4b.</b> ENP1: strengthening the capacity of the partner countries to react to new challenges and developments in the drug situation	<b>288 900.00</b>
<b>5</b>	<b>Other expenses (reserve)</b>	0.00
	<b>Total budget</b>	<b>15 625 711.86</b>

## Execution of the budget: credit consumption, 2014 (commitments)

Title	Description	% consumption of available credits
<b>1</b>	<b>Staff</b>	99.40
<b>2.</b>	<b>Expenditure for support activities</b>	99.99
<b>3.</b>	<b>Expenditure for operational activities</b>	99.84
<b>4a.</b>	<b>Expenditure relating to IPA 4</b>	96.72
<b>4b.</b>	<b>Expenditure relating to ENP1</b>	68.07
	<b>Total consumption of core budget (Titles 1, 2, 3 )</b>	<b>99.62</b>

## Balance sheet: ASSETS (in EUR)

	31.12.2014	31.12.2013	Variation
<b>ASSETS</b>			
<b>A. NON CURRENT ASSETS</b>			
<b>Intangible assets</b>	<b>96 308.03</b>	<b>109 282.12</b>	<b>-12 974.09</b>
<b>Property, plant and equipment</b>	<b>2 104 365.66</b>	<b>2 110 997.02</b>	<b>-6 631.36</b>
Land and buildings	1 810 069.20	1 901 558.72	-91 489.52
Plant and equipment	93 654.67	96 372.72	-2 718.05
Computer hardware	137 275.28	60 909.84	76 365.44
Furniture and vehicles	63 366.51	52 155.74	11 210.77
<b>TOTAL NON CURRENT ASSETS</b>	<b>2 200 673.69</b>	<b>2 220 279.14</b>	<b>-19 605.45</b>
<b>B. CURRENT ASSETS</b>			
<b>Short-term pre-financing</b>	<b>0.00</b>	<b>40 518.80</b>	<b>-40 518.80</b>
Short-term pre-financing	0.00	40 518.80	-40 518.80
<b>Short-term receivables</b>	<b>767 915.59</b>	<b>946 192.87</b>	<b>-178 277.28</b>
Current receivables	398 410.97	678 984.64	-280 573.67
Other	369 504.62	266 409.77	103 094.85
Deferred charges	369 504.62	266 409.77	103 094.85
Short-term receivables with consolidated EU entities		798.46	-798.46
<b>Cash and cash equivalents</b>	<b>1 071 938.39</b>	<b>1 146 193.85</b>	<b>-74 255.46</b>
<b>TOTAL CURRENT ASSETS</b>	<b>1 839 853.98</b>	<b>2 132 905.52</b>	<b>-293 051.54</b>
<b>TOTAL</b>	<b>4 040 527.67</b>	<b>4 353 184.66</b>	<b>-312 656.99</b>

## Balance sheet: LIABILITIES

	31.12.2014	31.12.2013	Variation
<b>LIABILITIES</b>			
<b>Net assets</b>	<b>2 726 473.03</b>	<b>2 554 027.69</b>	<b>172 445.34</b>
<b>Accumulated surplus/deficit</b>	<b>2 554 027.69</b>	<b>1 715 551.61</b>	<b>838 476.08</b>
<b>Economic outturn for the year — profit +/- loss—</b>	<b>172 445.34</b>	<b>838 476.08</b>	<b>-666 030.74</b>
<b>TOTAL NET ASSETS</b>	<b>2 726 473.03</b>	<b>2 554 027.69</b>	<b>172 445.34</b>
<b>Accounts payable</b>	<b>1 314 054.64</b>	<b>1 799 156.97</b>	<b>-485 102.33</b>
Current payables	4 102.64	328.00	3 774.64
Other	1 110 134.23	934 195.41	175 938.82
Accrued charges	946 780.70	927 832.21	18 948.49
Deferred income	2 253.53	6 363.20	-4 109.67
<i>Deferred income with consolidated EU entities</i>	161 100.00	488 900.00	-327 800.00
Accounts payable with consolidated EU entities	199 817.77	375 733.56	-175 915.79
<i>Pre-financing received from consolidated EU entities</i>	199 817.77	364 406.95	-164 589.18
<i>Other accounts payable against consolidated EU entities</i>	0.00	11 326.61	-11 326.61
<b>TOTAL CURRENT LIABILITIES</b>	<b>1 314 054.64</b>	<b>1 799 156.97</b>	<b>-485 102.33</b>
<b>TOTAL</b>	<b>4 040 527.67</b>	<b>4 353 184.66</b>	<b>-312 656.99</b>

## Budget outturn account for the financial year 2014 (in EUR)

		2014	2013
<b>REVENUE</b>			
Balancing Commission subsidy	+	14 793 959.00	15 550 000.00
Other subsidy from Commission (IPA 4, ENP1)	+	488 900.00	350 000.00
Other income	+	407 822.92	435 612.70
<b>TOTAL REVENUE (a)</b>		<b>15 690 681.92</b>	<b>16 335 612.70</b>
<b>EXPENDITURE</b>			
<i>Title I: Staff</i>			
Payments	–	8 644 335.30	9 306 826.89
Appropriations carried over	–	38 178.67	36 456.41
<i>Title II: Administrative expenses</i>			
Payments	–	1 932 659.31	2 149 955.30
Appropriations carried over	–	701 335.34	224 628.57
<i>Title III: Operating expenditure</i>			
Payments	–	4 417 989.82	4 447 250.36
Appropriations carried over	–	153 508.06	240 835.86
<b>TOTAL EXPENDITURE (b)</b>		<b>15 888 006.50</b>	<b>16 405 953.39</b>
<b>OUTTURN FOR THE FINANCIAL YEAR (a-b)</b>		<b>-197 324.58</b>	<b>-70 340.69</b>
Cancellation of unused payment appropriations carried over from previous year	+	8 622.14	29 845.62
Adjustment for carry-over from the previous year of appropriations available at 31/12 arising from assigned revenue	+	262 588.50	198 497.35
Exchange differences for the year (gain +/ loss–)	+/-	-1 272.22	-1 679.50
Prorata Norway 2015		-2 253.53	-4 936.51
<b>BALANCE OF THE OUTTURN ACCOUNT FOR THE FINANCIAL YEAR</b>		<b>70 360.31</b>	<b>151 386.27</b>
Balance year 2013	+/-	151 386.27	42 959.14
Positive balance from year 2013 reimbursed in year 2014 to the Commission	–	-151 386.27	-42 959.14
<b>Result used for determining amounts in general accounting</b>		<b>70 360.31</b>	<b>151 386.27</b>
<b>Commission subsidy — agency registers accrued revenue and Commission accrued expense</b>		<b>14 723 598.69</b>	<b>15 398 613.73</b>
<b>Pre-financing remaining open to be reimbursed by agency to Commission in year N+1</b>		<b>70 360.31</b>	<b>151 386.27</b>
Not included in the budget outturn:			
Interest generated by 31/12/N on the Commission balancing subsidy funds and to be reimbursed to the Commission (liability)	+		10 335.38

## ANNEX 9

**Follow-up action plan to the third external evaluation:  
monitoring table**

The third external evaluation of the EMCDDA was completed in 2012. The final report contains 15 recommendations and the Centre prepared an action plan to implement them. The description of the contents of the action plan can be found at [emcdda.europa.eu/publications/gra/2014](http://emcdda.europa.eu/publications/gra/2014)

## ANNEX 10

**List of acronyms and abbreviations**

ABAC	The EMCDDA's electronic management and accounting system
ALICE RAP	Addiction and Lifestyles in Contemporary Europe — Reframing Addictions Project
CA	contract agents
CELAC	Community of Latin American and Caribbean States
CEPOL	European Police College
CICAD	Inter-American Drug Abuse Control Commission
CLEN	Customs Laboratories European Network
COPOLAD	Cooperation Programme between the EU and Latin America on Drugs Policies
COSI	The Council of the European Union's Standing Committee on Operational Cooperation on Internal Security
DCG	Data Coherence Group
DG	Directorate-General
DG BUDGET	Directorate-General for Budget
DG HR	Directorate-General for Human Resources and Security
DG JRC	Directorate-General of the Joint Research Centre
DG JUST	Directorate-General for Justice
DG HOME	Directorate-General for Migration and Home Affairs
DG SANCO	Directorate-General for Health and Food Safety
DG TAXUD	Directorate-General for Taxation and Customs Union
DLOs	drug law offences
DPO	Data Protection Officer
DRD	drug-related deaths (indicator)
DRID	drug-related infectious diseases (indicator)
EASO	European Asylum Support Office
ECA	European Court of Auditors
ECDC	European Centre for Disease Prevention and Control
EDND	European Database on New Drugs
EDPS	European Data Protection Supervisor
EDR	European Drug Report
EEAS	European External Action Service
EFCA	European Fisheries Control Agency
EFSA	European Food Safety Authority
EMA	European Medicines Agency
EMCDDA	European Monitoring Centre for Drugs and Drug Addiction
EMPACT	European Multidisciplinary Platform against Criminal Threats
EMQ	European Model Questionnaire
EMSA	European Maritime Safety Agency

ENP	European Neighbourhood Policy
ERANID	European Research Area Network on Illicit Drugs
ERICES	European Reporting Instrument for Cocaine Extraction Sites
ERISSP	European Reporting on Illicit Synthetic Substances Production Sites
ESPAD	European School Survey Project on Alcohol and Other Drugs
EU	European Union
eu-LISA	EU Agency for Large-Scale IT Systems
Eurojust	the European Union's Judicial Cooperation Unit
EWS	Early Warning System
FRA	Fundamental Rights Agency
GPS	general population survey(s)
HBV	hepatitis B virus
HCIN	Heads of Communication and Information Network
HCV	hepatitis C virus
HDG	Horizontal Drugs Group
HFPs	heads of national focal points
IADA	Israel Anti-Drug Authority
IAS	Internal Audit Service of the European Commission
ICS	Internal Control Standard(s)
ICT	information and communications technology
ICTAC	Agencies' ICT Managers' Network
IPA	Instrument for Pre-Accession Assistance
ISAJE	International Society of Addiction Journal Editors
ISCTE-IUL	Instituto Superior das Ciências do Trabalho e da Empresa — Instituto Universitário de Lisboa
ISEC	Prevention of and Fight against Crime
JHA	Justice and Home Affairs
JIATFS	Joint Interagency Task Force South
KPI	key performance indicator
LIBE Committee	Committee on Civil Liberties, Justice and Home Affairs of the European Parliament
MAOC-N	Maritime Analysis and Operational Centre — Narcotics
MIS	management information system
MoU	Memorandum of Understanding
NAPO	Network of Agencies Procurement Officers
NFP	national focal point
NPS	new psychoactive substances
OAP	operational action plan
OAS	Organization of American States
PDU	problem drug use (indicator)
POD	Perspectives on drugs
PRAC	Pharmacovigilance Risk Assessment Committee

PWID	people who inject drugs
RARHA	Joint Action on Reducing Alcohol-Related Harm
Reitox	European Information Network on Drugs and Drug Addiction
SICAD	Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências (General Directorate for Intervention on Addictive Behaviours and Dependencies)
TA	temporary agents
TAIEX	Technical Assistance and Information Exchange
TDI	treatment demand indicator
UNAIDS	the Joint United Nations Programme on HIV/AIDS
UNODC	United Nations Office on Drugs and Crime
WHO	World Health Organization



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## About this report

The *General Report of Activities* is an annual publication providing a detailed progress report of the EMCDDA's activities over a 12-month period. Published every spring, it catalogues the agency's achievements in each area of its annual work programme. The report is a useful information source for all those seeking comprehensive information on the agency and its work.

## About the EMCDDA

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is the central source and confirmed authority on drug-related issues in Europe. For over 20 years, it has been collecting, analysing and disseminating scientifically sound information on drugs and drug addiction and their consequences, providing its audiences with an evidence-based picture of the drug phenomenon at European level.

The EMCDDA's publications are a prime source of information for a wide range of audiences including: policymakers and their advisors; professionals and researchers working in the drugs field; and, more broadly, the media and general public. Based in Lisbon, the EMCDDA is one of the decentralised agencies of the European Union.

