EMCDDA, Management Board Lisbon, 11-13 January 2006

32nd meeting Agenda Item V

Document: EMCDDA/12/06 rev 1

EMCDDA 2006 work programme

Summary

The 2006 EMCDDA work programme completes the implementation of the three-year work programme for 2004–2006 (EMCDDA/29/03) and is consistent with its principal objectives. It takes into account the objectives of the EU drugs action plan (2005–2008), with a view to contributing to its implementation, and reflects the new organisation and structure of the EMCDDA, which aims to streamline the work and facilitate thematic cross-departmental cooperation.

The overall priorities of the 2006 work programme may be summarised as follows:

The continuation/follow up of the 2005 work programme, by:

- Consolidating and implementing the EMCDDA data storage and retrieval system for quantitative and qualitative information reported by the national focal points and other relevant information providers.
- Executing EMCDDA core tasks essential to implementing, developing and maintaining the existing
 instruments and mechanisms for data collection and analysis of the drug phenomenon, while
 ensuring the full incorporation into the EMCDDA of the concerned actors from the new EU Member States
 and preparing and supporting the participation of the candidate countries in EMCDDA activities.
- Improving EMCDDA data reporting and dissemination on the drug phenomenon. In this context the EMCDDA will continue to promote an integrated approach to reporting and will continue to concentrate on improving the analytical quality of its outputs.

Implementing specific activities/tasks required or likely to be required by:

- The new EU drugs strategy and action plan, which will require the EMCDDA to refocus some aspects of its work to better match the needs of the action plan and also to undertake some additional responsibilities.
- The Council Decision on the information exchange, risk assessment and control of new psychoactive substances, which extends the scope of the previous joint action to cover all new psychoactive substances, i.e. new narcotic drugs and new psychotropic substances.
- The expected recasting of the EMCDDA founding regulation, which will expand the EMCDDA's area of
 intervention to cover new methods of drug use, especially polydrug use, and to devise tools and methods
 for evaluating drugs policies and strategies implemented in the EU.

These priorities take into account the assessment by Management Board members of the EMCDDA's operational activities carried out in 2005. They also focus on improving the scientific quality of the Centre's work and outputs, enhancing its credibility, providing leadership and applying good management practice, as well as building and improving partnerships.

The EMCDDA's main objectives and activities for 2006 are in line with the priorities mentioned above and they are presented below in accordance with the new organisational structure of the EMCDDA.

Respecting the decision taken by the EMCDDA Management Board on the Reitox operating framework, the Reitox focal points have been involved from an early stage in the preparation of this document. In accordance with article 8 of the EMCDDA founding regulation, the EMCDDA Scientific Committee and the European Commission have been consulted.

Budgetary effect

The budgetary resources required for the implementation of the proposed 2006 work programme will be provided by the EMCDDA budget for 2006, as adopted by the Management Board.

Decision

The Management Board adopts the proposed EMCDDA 2006 work programme.

EMCDDA 2006 work programme

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I. Foundations, working framework and budget

The 2006 EMCDDA work programme completes the implementation of the three-year work programme for 2004–2006 (EMCDDA/29/03) and is consistent with its principal objectives.

The 2006 work programme takes into account the objectives of the EU drugs action plan (2005–2008), with a view to contributing to its implementation – in particular to achieving the objectives and results for which a specific input is requested from the EMCDDA.

It is also consistent with the working framework set out in the EMCDDA 2004–2006 work programme, which can be summarised as follows:

- To consolidate and improve the conditions for the monitoring and analysis of the drug phenomenon, while ensuring full integration of the new Member States into the EMCDDA structures and activities;
- To improve and increase data quality and utility through carrying out more analytical work as well as expanding thematic analysis;
- To reshape EMCDDA outputs to make the most effective use of collected data.

The underlying principles delineated in the 2004–2006 work programme are also reflected – in particular those aimed at improving the quality and effectiveness of the work of the EMCDDA and at promoting an output-driven and objective-focused approach. These principles include:

- · Improving scientific standards and quality;
- Improving the visibility and recognition of the EMCDDA;
- Focusing on core priorities and ensuring that the resources available are invested to maximum effect:
- Evaluating the relevance of EMCDDA objectives and outputs on an ongoing basis, with special attention paid to the key indicators and the Commission's ongoing activities in the area of European Community Health Indicators (DG SANCO) as well as Eurostat's work in the area of public health statistics including the preparation of a proposal of a regulation of the European Parliament and of the Council concerning Community statistics on public health and on health and safety at work;
- Developing the internal synergies necessary to optimise in-house knowledge, expertise and resources;
- Focusing on products to meet identified information needs and reflecting the needs of key audiences;
- Increasing networking activities to draw out the potential of partners' information resources and expertise;
- Better integration and synergy of the EMCDDA's work with key partners, the European institutions and bodies, and appropriate international organisations.

The work programme also reflects the new organisation and structure of the EMCDDA, which aims to streamline the work and facilitate thematic cross-departmental cooperation. Two scientific units, which operate under a common scientific coordination mechanism, have been created out of the four scientific programmes that previously existed. A new unit has also been created to provide scientific support.

The budgetary resources required to implement the 2006 work programme will be provided by the 2006 budget of the EMCDDA, as adopted by its Management Board. The EC annual subsidy to the 2006 EMCDDA budget is expected to amount to €12,100,000, roughly status quo with the 2005 subsidy.

II. Priorities and objectives for 2006

II.A. Priorities for 2006

The priorities drawn up for the 2006 work programme take into account:

- the assessment of the EMCDDA 2005 operational projects/activities (see EMCDDA/10/05);
- the intervention areas identified as priority by the new Director in his mission statement:
 - improving the scientific quality of the Centre's work and outputs and enhancing its credibility;
 - o providing leadership and applying good management practice;
 - o building and improving partnerships.

The overall priorities of the 2006 work programme may be summarised as follows:

II.A.1. Continuation/follow up of the 2005 work programme, by:

II.A.1.1. Consolidating and implementing the EMCDDA data storage and retrieval system for quantitative and qualitative information reported by the national focal points and other relevant information providers.

This will be the main priority for the EMCDDA in 2006 and the efforts made in the previous years will be boosted with a view to fully entering into the production phase of the project.

Focus will be placed on executing the electronic data processing tool (EDPT) project. This project aims to reorganise and rationalise the data collection process by exploiting in a better way the potential of the Internet. It addresses the way in which the Reitox national focal points provide their data to the EMCDDA as well as the way in which the information is stored, analysed and disseminated.

As a result of the project, data will be uploaded electronically directly into a central repository and will be more easily retrievable by all interested parties (the Centre, the national focal points and the EMCDDA target audiences).

The initial objective is to have the general framework and the overall data model of the EDPT developed by the end of 2006.

II.A.1.2. Executing EMCDDA core tasks essential to implementing, developing and maintaining the existing instruments and mechanisms for data collection and analysis of the drug phenomenon, while ensuring the full incorporation into the EMCDDA of the concerned actors from the new EU Member States and preparing and supporting the participation of the candidate countries in EMCDDA activities.

In 2006, special attention will be paid to:

- The participation of the two acceding countries (Bulgaria and Romania) and the candidate country Turkey, once the relevant agreements with the European Communities fixing the conditions for their participation in the work of the EMCDDA have been concluded and ratified;
- The implementation of two specific projects for technical assistance, under two (Phare) multi-beneficiary programmes, one directed at Bulgaria and Romania and the other at Croatia and Turkey. The latter is expected to start in the second guarter of 2006;

- Strengthening EMCDDA relations with the scientific community in order to enhance scientific excellence, boost synergies and heighten impact;
- The follow up to the 2003 Council Recommendation on the prevention and reduction of health-related harm associated with drug dependence.

II.A.1.3. Improving EMCDDA data reporting and dissemination on the drug phenomenon. In this context the EMCDDA will continue to promote an integrated approach to reporting and will continue to concentrate on improving the analytical quality of its outputs.

II.A.2. Implementing specific activities/tasks required or likely to be required by:

II.A.2.1. The new EU drugs strategy and action plan, which will require the EMCDDA to refocus some aspects of its work to better match the needs of the action plan and also to undertake some additional responsibilities.

Taking into account the relevance of the actions mentioned in the section of the EU action plan covering information, research and evaluation, the EMCDDA commits itself to continue its efforts to support the implementation of the key indicators (action 39) and to contribute to the evaluation of the EU action plan in particular to the 2006 Annual Review and the preparatory work necessary for the 2008 impact assessment (actions 45.1, 45.2 and 45.3).

The EU action plan explicitly recognises the value of EMCDDA's annual reporting exercise (objective 40, action 2) and improvements in this area planned in 2006 will therefore contribute directly to the achievements of the EU action plan objectives. The EMCDDA work on EDDRA and analysis of risk perception of drug use in young people and school populations contributes to objective 7 and the work of the treatment demand indicator (TDI) and the work on prevention to objective 9. Specific cross-cutting analysis involving TDI and other indicators will be required to support objective 10 where analysis is required on implementation of early intervention programmes, coverage estimation and assessment of age of first service uptake. The work on treatment and rehabilitation programmes contributes to objective 11 and will also technically contribute to objectives 12 and 13.2. The further data-collection instrument that covers responses to reduce health-related harm (overdose/acute drug-related deaths) will continue to support the ongoing activities related to objective 14. In addition to the work of the Centre to monitor infectious diseases, this last instrument will also support objectives 15, 16 (taking into account the EC Communication on AIDS¹) and 17, respectively.

The EMCDDA will hold a number of technical meetings in 2006 organised under the remits of existing projects but focused on the needs of the action plan. These include meetings on: planning and coordination for the project on factors associated with low rates of HIV prevalence (objective 43, point 2); pilot work on estimating public expenditure (objective 42); the organisation of a meeting on attitude measurement (objective 41); and work on measuring drug-related crime (objective 25). The EMCDDA will also continue to provide technical support for the follow-up of the 2003 Council Recommendation on the prevention and reduction of health-related harm associated with drug dependence (objective 14).

II.A.2.2. The Council Decision on the information exchange, risk assessment and control of new psychoactive substances, which extends the scope of the previous joint

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¹ http://europa.eu.int/comm/health/ph_threats/com/aids/docs/com_2005_654_en.pdf

action to cover all new psychoactive substances, i.e. new narcotic drugs and new psychotropic substances.

II.A.2.3. The expected recasting of the EMCDDA founding regulation, which will the expand the EMCDDA's area of intervention to cover new methods of drug use, especially polydrug use, and to devise tools and methods for evaluating drugs policies and strategies implemented in the EU.

The implications of the recast of the EMCDDA regulation will be assessed and elaborated in the new work programme and strategy document 2007–2009.

In the fields where the EMCDDA relies on data which are collected also by other organisations (such as Europol, EuroHIV, Interpol, Pompidou Group, United Nations Office on Drugs and Crime – UNODC, WHO) the Centre will continue to explore ways to ensure resource-efficient working and synergies in data collection. In this context, the EMCDDA will continue to review its memoranda of understanding with its partner organisations.

II.B. Main objectives and outcomes for 2006

The EMCDDA's main objectives and activities for 2006 are in line with the priorities mentioned above.

They are presented below in accordance with the new organisational structure of the EMCDDA.

II.B.1. Scientific activities

The mission of the scientific units of the EMCCDDA is to provide the scientific and technical expertise necessary to ensure:

- that the European Member States, through the EMCDDA, have at their disposal high quality tools and a
 methodologically sound approach to the collection of reliable and comparable data on the European drug
 phenomenon;
- that data collected by the EMCDDA is subject to a scientifically rigorous and impartial analysis;
- that the scientific and technical outputs of the EMCDDA are of high quality, timely and relevant to the development of policy, practice, and the scientific understanding of the European drug phenomenon;
- that the Commission has at its disposal data in view of the Commission's annual progress review and final evaluation for the EU action plan on drugs.

II.B.1.1. Scientific coordination

The mission of this newly established mechanism is to ensure coordination between the scientific units and the other technical and support units of the EMCDDA, to encourage synergy and transversal working between scientific staff and projects of the EMCDDA and to ensure the work of the scientific units is resource efficient, complementary and focused on the priorities of the EMCDDA as defined in the regulation and work programme.

2006 will be **a year of consolidation and review** for the scientific activities of the EMCDDA. The new scientific coordination mechanism and unit structure will need time to reach full operational efficiency. This will require investment in developing working methods to improve the coordination of activities within and between the two scientific units and also to improve coordination with the other programmes of the EMCDDA that collaborate closely with the scientific units, particularly the Communication, Reitox, and Scientific support units.

As this is the last year of the current three-year work programme, the need to complete activities commenced in its first two years of implementation will, to a large extent, shape the project work for 2006. The impact of enlargement and the increased data flow that this has produced, as well as increased requirements for training and support activities, is still being felt by scientific staff. The EMCDDA's resources are still stretched to fulfil the basic reporting duties of the Agency and, consequently, available capacity for developmental work will remain limited. Resources will also have to be devoted for the necessary review and reflection required for the development of the new three-year work programme (2007–2009). Finally, during 2006 the scientific units need to reorient some aspects of their current work to better reflect the needs of the new EU action plan on drugs.

Strategic goals

In the context of the framework elaborated above, the scientific coordination has five strategic goals for 2006.

- Improved coordination and efficiency of basic reporting duties
 Objectives are: to improve the coordination within the scientific units to more rapidly
 process and analyse data for the 2006 reporting round; to work with the
 Communication unit to allow more efficient checking and drafting of outputs; and to
 free up resources earlier in the year for other activities.
- 2. **Improvements to technical outputs**Objectives are: to further enhance the quality of the annual reporting package,

including the statistical bulletin and supporting online elements; to ensure the necessary planning and preparatory work to have a steady stream of additional outputs in production, including scientific papers, policy briefings and including the production of at least one major technical report (Monograph or Insights) each year.

- 3. **Review and rationalisation of existing reporting tools and methods**The first objective is to prepare an analysis plan for the review of all reporting tools in respect of their utility, analytical value, availability and cost of data, level of implementation and potential use of data². The second objective is to refine and rationalise reporting tools taking into consideration the overall reporting burden and to develop a common format for EMCDDA tools (indicators, core data, structured questionnaires and supporting methodological guidelines). This second objective will require 24 months to complete.
- 4. Improve analysis of EMCDDA data by encouraging transversal working and the combination of information from different indicators and sources. The objective in 2006 will be the formation of transversal working groups to provide better support to the production of complex analysis. Topics to be addressed in 2006 will include selected issues areas for the 2007 reporting round.
- 5. Improve planning, focus and organisation of the future scientific work of the EMCDDA

 The principal objective here is to inform the preparation of the 2007–2009 work programme of the EMCDDA with an analysis of current EMCDDA activities and future needs as determined by the obligations of the regulation and necessary support for the EU action plan.

II.B.1.2. Epidemiology, crime and markets

A major achievement of the 2004–2006 work programme has been the launch and subsequent development of the EMCDDA **statistical bulletin**. The statistical bulletin allows easy access to all the quantitative data collected by the EMCDDA together with methodological notes and provides an opportunity to present more detailed analysis. In 2006, the statistical bulletin will be further developed, especially with regard to the analytical elements it contains. It is also intended to produce a working copy of the bulletin earlier to allow greater opportunities for consultation with Member States.

With respect to the key indicators as a group, the EMCDDA has been in discussion with WHO (Europe) about adapting the key indicators for use by states not linked to the EMCDDA. This will require identifying a simplified top set of measures within each indicator. As described above, it also intended to assess the level of implementation of each indicator to assist Member States in reporting on the level of implementation as required by the new EU action plan. Expert working groups for each indicator will be held in 2006 and the current practice of splitting groups into a methodological/developmental section and a topic-based/analytical section will be maintained. Cocaine use will picked up as a topic by several of the indicator groups and the findings used to support the selected issue on cocaine planned for 2007.

In 2006, a **scientific monograph on cannabis** will be launched marking the end of a series of projects which grew initially out of the work of the TDI (treatment demand indicator) working group. A short data paper is also in preparation that reflects on the development of patterns of drug use in the new Member States. A transversal working group will continue the discussions on the **extension and development of EMCDDA problem drug use indicator** to better reflect the more heterogeneous nature of contemporary European drug problems, and particularly issues of polydrug use, combined

² It is noted that the follow-up of the project regarding the implementation of the 2003 Council Recommendation on the prevention and reduction of health-related harm associated with drug dependence helped to identify gaps in harm reduction data collection; the reporting tables should be updated. Full use should be made of the European Health Survey System. (http://europa.eu.int/comm/health/ph_information/dissemination/reporting/ehss_en.htm).

problems with legal and illegal drugs and better measurement of non opiate problems. This work will be supported by a project on improving the measurement of intensive forms of drug use in survey data and a project assessing the feasibility of collecting accident and emergency room data.

Within the TDI working group, the issue of the **treatment of minors** will be elaborated to support the selected issue in this area. In 2006, the joint project on treatment data with UNODC will reach completion with the **launch of a TDI toolkit**. An analysis of changes in heroin use among treatment attendees is also planned as is a **policy briefing on the living conditions** of those with chronic drug problems.

The work to support the drug-related deaths indicator will include further development of a complementary table on toxicological information and some enhanced analysis on non opiate deaths. A new technical report on the assessment of total drug mortality is also planned using synergies with Eurostat's activities on causes of death statistics.

EMCDDA cooperation with the **ESPAD** (European school surveys) project will continue in 2006 with further support for **analytical work on gender**. This will complement a gender analysis project currently being undertaken within TDI, and the survey work groups.

The **epidemiological database** will continue to be developed in 2006 but within the context of the investment in new online information collection tools which are likely to be come available during the 2007–2009 work programme. A small **working project on GIS (geographical information systems)** and **Geo coding** is planned for 2006.

Over 2004 and 2005, considerable efforts have been made in cleaning, rationalising and archiving the historical data within the EISDD (Epidemiological Information System on Drug Data). This is now providing benefits in terms of ease of data retrieval and reporting. Considerable work remains in the areas of drug-related crime, drug supply and availability and market information. These areas will be given priority in 2006 with the aim of achieving improvements in data availability. A **policy briefing on drug-related crime** is also planned in 2006. The project on **drug availability** will deliver guidelines for questions in this area including a module for the EMQ (European model questionnaire) and a reporting table.

During 2006, the new structure of the scientific units will allow for closer working ties between the epidemiological work of the EMCDDA and the action on new drugs. This will be particularly evident in area of new trends and drugs use by youth.

Activities in support of the **action on new drugs** form an important part of the EMCDDA's work. This new instrument encompasses and expands the work covered by the joint action on new synthetic drugs. The action on new drugs is organised as a specific entity reflecting its unique legal and organisational status within the EMCDDA.

The two main objectives for 2006 are:

- To implement fully the provisions of Council Decision 2005/387/JHA on the
 information exchange, risk-assessment and control of new psychoactive
 substances while ensuring the continuity of the work accomplished by the earlywarning system in the frame of the 1997 Joint action mechanism.
- In support of the EU drugs action plan 2005–2008 and the general mission of the EMCDDA, to develop a methodology and mechanism to detect, track and understand new trends so as to provide evidence for defining responses at EU and national level (in collaboration with other relevant programmes within the EMCDDA and relevant outside bodies).

A number of specific activities are envisaged in 2006 in support of these objectives. These include: a) revising the early-warning system (EWS) guidelines to reflect the extended scope of the new Council Decision and the lessons learned from the initial implementation of the Council Decision; b) completing the work undertaken in relation to the EMCDDA-

Europol Joint Report on 1-(3-chlorophenyl) piperazine (mCPP); c) developing the format for the EMCDDA-Europol annual report on implementation of the Council Decision to the Council, European Parliament and the Commission and preparing the 2006 report; d) further developing the European database on new drugs; e) revising and extending the risk assessment guidelines (in collaboration with the EMCDDA's Scientific Committee); f) launching a pilot project to develop methodology and mechanism to detect, track and understand new trends; g) setting up a working group to assess the potential for increased use of methylamphetamine in Europe and exploring options for future monitoring; h) producing reports on magic mushrooms and GHB.

II.B.1.3. Interventions, law and policies

As many of the new tools developed recently by the EMCDDA for data reporting cover response and policy areas, it will be important in 2006 to begin the **evaluation** of these tools as part of the overall review of the reporting framework discussed above. The **structured questionnaire format** was introduced in 2004 to facilitate the collection of qualitative information and the EMCDDA now has the experience necessary to assess the performance of reporting methods in this area.

Quantitative data is also collected on responses and more of this information will be made available in the EMCDDA statistical bulletin. An important area is the **assessment of treatment capacity** in Europe and efforts will be made to improve the quality and scope of data in this area during 2006. A transversal project group will also look at how treatment capacity and treatment demand estimates can be reconciled.

It is recognised that EMCDDA needs to enhance its work on the identification and dissemination of good practice. A key tool to achieving this will be the **EDDRA** database which was under review in 2005. The findings from this exercise will be incorporated into a development programme for EDDRA which is intended to build upon the strengths of the tool and improve its usefulness.

EMCDDA work on drug prevention in 2006 is predominantly geared to supporting best practices and the online publication of the state of selective and especially indicated prevention in the EU will be updated along with the documentation and training resources to Member States' professionals on the scientific basis of prevention including PERK (prevention and evaluation resources kit – web based resources and training material on prevention and evaluation models). The EMCDDA will also continue to work on the identification and dissemination of best practice in the area of treatment and rehabilitation to complement monitoring activities on treatment demand and availability.

In 2006, the first **progress review exercise of the EU action plan** on drugs will take place. The EMCCDA will assist the Commission in assessing the level of implementation of the actions foreseen in the plan and in developing the methodological approach for the final impact evaluation which is planned for 2008 (see above, section II.A.2.1, for further details on EMCDDA activities in support of the EU action plan on drugs).

A **study on** national coordination mechanisms is planned for release in 2006. In the area of **public expenditure**, pilot work will be undertaken supported by a technical meeting with the dual task of developing a reporting methodology and exploring existing methods for estimating the social costs of drug use, including health costs.

The EMCDDA will continue to provide technical support to Commission projects looking at prevention and reduction of health-related harm associated with drug dependence in Europe (in support of the follow-up of the Council Recommendation of 18 June 2003). An important aspect of this work will be the development of a reporting format for low-threshold harm reduction services. Work will continue on the joint WHO/EMCDDA database on health in prisons as part of activities to report on drug use and services for drug users

in the prison system. This work will also support technically the future Commission projects contributing to objectives 12 and 13.2 on drug treatments and drugs and prisons (SANCO).

Work will start in support of the **selected issue on drugs and driving** planned to accompany the 2007 annual reporting package.

As in the previous years, a number of activities are planned regarding the routine data collection on EU and national legislation and the dissemination of legal information in the framework of the European Legal Database on Drugs (ELDD). These include an update of the information on the legal responses in the area of supply reduction, including drug trafficking, precursor and controlled delivery (This work will not extend beyond legitimate reporting areas for the EMCDDA nor will it overlap with the Commission's responsibilities for reporting and evaluation actions in this area.)

Institutional relations activities will focus on providing support to the work of the European Commission, Council Presidencies and European Parliament (where appropriate). Work in this area includes promoting EMCDDA tools and products and presenting EMCDDA work at the **Horizontal Drugs Group** (HDG) and other related meetings.

II.B.2. Transversal activities

II.B.2.1. Reitox and international cooperation

The mission of the Reitox and international cooperation unit is to assist:

- the scientific departments of the EMCDDA in coordinating the collection of the data in all Member States through the appointed Reitox national focal points;
- the national focal points in their active participation in the EMCDDA 2006 WP, namely the implementation of the key indicators and other core data, at national level, and in the production of their national reporting (national report, standard tables and structured questionnaires),
- the promotion of the Reitox-based model for data collection on drugs in Europe.

The main objectives and activities for 2006 are outlined below.

The **quality assurance policy** for products/data submitted to the EMCDDA will be further developed and the quality of the instruments and instructions provided by the EMCDDA to its partners for that purpose improved.

The training activities for **capacity development** will be more closely linked to the conclusions of the quality assessment of the outputs delivered by the national focal points and the analysis of the level of implementation of indicators at national level.

The **financial and administrative management** of the Reitox network will be improved.

Technical assistance will be provided to the candidate countries to the EU and to countries that are candidates to join the EMCDDA and the visibility of their work will be assured through the publication of **country situation summaries**.

The activities of the EMCDDA in the framework of its **relations with international organisations and third countries** will be coordinated, in support to the action of the European Commission with these countries.

Tasks of the Reitox national focal points for 2006

Collection and analysis of information at national level:

Annual national report;

- Statistical standard tables and structured questionnaires:
- Data requested within the implementation of the epidemiological key indicators³;
- Data input into EDDRA database and the Reitox extranet;
- Action on new drugs: early warnings to the EMCDDA;
- Updates regarding national developments, e.g. operational, legal, institutional and political changes and events;
- Press clippings covering major national developments as well as EMCDDA and/or NFP events, e.g. launch of the annual report;
- Replies to ad hoc requests from the EMCDDA.

Dissemination at national level:

- Distribution of EMCDDA reports and other products;
- Action on new drugs: information from the EMCDDA to national partners;
- · Media relations at national level;
- Informing relevant national partners and network(s) about quality feedback provided by the EMCDDA;
- Responding to queries at national level or, where indicated, channelling such requests to the EMCDDA. Being the EMCDDA's 'ambassador' at national level;
- Language checking and proof-reading of EMCDDA products.

Progress reports on the implementation of:

- The epidemiological key indicators at national level;
- The action on new drugs at national level;
- EDDRA and REITOX information systems.

Financial and activity reporting on the implementation of the grant agreements:

- Intermediate and final activity reports;
- Intermediate and final financial reports;
- Audit certificates;

Summary statements of expenses and receipts.

³ Attention should also be paid to the Commission's ongoing activities in the area of European Community Health Indicators (DG SANCO) as well as Eurostat's work in the area of public-health statistics including the preparation of a proposal of a regulation of the European Parliament and of the Council concerning Community statistics on public health and on health and safety at work.

II.B.2.2. Scientific partners and documentation

The mission of the Scientific partners and documentation unit is to strengthen relations with the scientific community in order to enhance scientific excellence, boost synergies and improve impact by:

- providing support to the Scientific Committee;
- facilitating access to science;
- · facilitating exchange among researchers;
- facilitating transfer between research and policy;
- increasing transparency in the scientific agenda.

The main objectives and activities for 2006 are outlined below.

A newly nominated EMCDDA **Scientific Committee** will start its three-year term in 2006. The EMCDDA intends to make use of the Scientific Committee and the expertise of its members in more systematic, comprehensive and innovative ways, including joint scientific articles, peer reviews, expert meetings and conferences.

The EMCDDA will further develop its **relations with the scientific community** involved in drug-related research. More systematic contacts with research networks and organisations will enhance the EMCDDA's scientific presence, facilitate communication between the EMCDDA and the scientific community, and promote EMCDDA scientific work, e.g. through publications in scientific journals.

It is important that the EMCDDA maintains an up-to-date understanding of the **developments in European research on drugs**. This information is necessary to inform the technical work of the Centre and also allows an overview of scientific developments in the EU to be disseminated. In 2006, the EMCDDA will evaluate its current activities in this field, and, in consultation with other organisations that are working in this area such as the Pompidou Group, will develop a new strategy to ensure that key developments in drugs research are recorded and disseminated.

The working structure and organisation of the **EMCDDA documentation centre** will be revised and an information specialist will be recruited in order to plan and implement a substantial improvement in the management of the EMCDDA documentation facilities, promoting a proactive service-oriented approach. The documentation centre will primarily rely on existing libraries and electronic information sources and be able to provide up-to-date information, documentation and literature to the EMCDDA staff as a priority user group.

EU research programmes. The EMCDDA will closely monitor the developments in the preparation of the EU 7th Framework Programme for Research and also the research activities of other DGs and cooperate with the Commission wherever possible. The EMCDDA will provide input to the research-related objectives of the EU action plan on drugs (objectives 42 and 43), as required. The feasibility of following developments in national programmes will also be assessed.

II.B.2.3. Communication

The mission of the Communication unit is to provide the European Union and its Member States with a high-quality and highly valued information service on the drugs phenomenon in Europe. Its principal aims are:

- to ensure that the information produced by the Centre is tailored to the needs of its target groups, which means it must be timely, analytical, up-to-date, concise and in the right format;
- to raise awareness of the European drug problem, in general, and the role of the EMCDDA, in particular, via a broad yet targeted dissemination of the information produced by the Centre with a clear brand image;
- to promote the EMCDDA as a centre of excellence among drug experts, researchers and practitioners by producing information of a high scientific standard.

The main objectives and outputs are outlined below.

The EMCDDA **communication strategy** will be reviewed and redrafted to take into account the new priorities for the EMCDDA set out by the Director and in the EU Action plan and also in the European Commission's action plan and white paper on communicating in Europe.

The **knowledge management** project aims to improve the knowledge base and knowledge infrastructure by developing the principal resource for the storage, retrieval, exploitation and dissemination of the main EMCDDA data sets. A full time project manager has been assigned to this priority task. In 2006, the general framework and data model of the electronic data processing tool (EDPT) will be finalised (see also section 1.1).

The following **products** will be produced and ongoing quality improvement assured. *Annual reporting package*

The package is comprised of: Annual report on paper and online in 24 languages; Selected issues publication; Statistical bulletin; Country data profiles; news releases; and a special issue of *Drugnet Europe*. Annex 1 provides further details on the content and production schedule for 2006.

In 2006, it is hoped that benefits will be derived from the new working structure and scientific coordination and that a more joined up analysis of the drugs problem and coherent presentation of data will be achieved. The production processes and the dissemination tools used will also be refined.

Website

The public website will be further developed in order to ensure more coherent and comprehensive dissemination of available data online. In particular, the thematic approach will be expanded and easier access to thematic data provided. A public health area which better complements the EU public health portal will be developed. An overall EMCDDA output strategy to guide developments will be drawn up.

Policy briefings – Drugs in focus: Three issues will be produced in 2006 covering: the living conditions of those with chronic drug problems; drug-related crime; and another theme yet to be determined.

Newsletter: Four editions of *Drugnet Europe* will be produced in EN. In parallel an online EMCDDA news service/newsletter will be prototyped.

Other planned publications: 1 Monograph on cannabis, 1 risk assessment, thematic papers, scientific reports.

The media continues to serve as an important conduit to permanently raise awareness and reach the EMCDDA's target audiences. In the **media relations** area, further online services will be developed for journalists, the network of specialised journalists will be expanded geographically and thematically and a training module for media relations developed.

Efforts to raise the visibility of the work of the EMCDDA will be increased. A calendar of **events** will be defined and products to tie in with them planned. Work to analyse the results of the **Annual report launch** and to increase its impact will be carried out.

Annex

Structure and schedule for the preparation of the 2006 Annual reporting package

A. Annual report on the state of the drugs problem in Europe

Structure of 2006 Annual report

Foreword

Acknowledgements & box with Reitox focal points information

Introductory note with explanation of the various products available and the type of information that can be found in each of them

Overview/commentary

Policy

What is new in the areas of strategies and policies – transversal e.g. in harm reduction policy, prevention policy, treatment policy as well as EU and national policy

Drugs

- Cannabis
- · Cocaine and crack cocaine
- Amphetamine-type stimulants, other synthetic drugs
- · Heroin and injecting drug use
- Polydrug use

Other developments

- · Schools, youth and drugs
- Treatment
- Crime and prison issues

Summary of selected issues

- Gender differences
- Drug policies extended beyond illicit drugs?
- Developments in drug use within recreational settings

References

B. Selected issues (separate publication)

Introduction

- · Gender differences
- Drug policies extended beyond illicit drugs?
- Developments in drug use within recreational settings

C. 2006 Statistical bulletin

- About 200 statistical tables
- 100 graphics
- Methodological notes
- Commentary and analysis

D. 2006 Country data profiles

Graphical summary of key aspects of national drug situations.

Production schedule – 2006 Annual report (provisional)

Task	Schedule 2006 report	Actors
Analysis of national reports	November 2005 – December 2005	Scientific staff
(Identify new developments – bullet points, elaboration)		
Selection of material for AR	January 2006	Editors consulting scientific staff
Writing up of first draft	January – February	Scientific staff + editors
Editing of first draft – consultation with authors	Late February – March	Editors
Consultation with Management Board, SC, NFPs and EMCDDA staff; finalising editorial work	10 April – 28 April	MB, SC, NPFs, scientific staff
Integration of comments from Management Board, SC, NFPs and staff	May	Scientific staff, editors
Feedback from EMCDDA to Member States on the follow-up of the comments provided	June	Editors
Translation	June – July	Translation Centre
Manuscript preparation, layout (from here onwards in the schedule, parallel development of the online version)	Early August – end October	OPOCE, editors
Multilingual proof-reading (at least two proofs per language)		
Printing		
News releases/powerpoint presentations	End May – end July	Communication
Launch and distribution	Early November	