European Monitoring Centre
for Drugs and Drug Addiction

EMCDDA STRATEGY AND WORK PROGRAMME

2010–12

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for Drugs and Drug Addiction

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Abbreviations and acronyms used in this document

CUP	cross-unit project	EWS	Early warning system
DRD	drug-related deaths	GPS	general population survey
DRID	drug-related infectious diseases	IDU	injecting drug use
EDDRA	European drug demand reduction action	NFP	national focal point
ELDD	European legal database on drugs	PDU	problem drug use
E-POD	European perspectives on drugs	TDI	treatment demand indicator

2004
2005
2006
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Section I
Strategic overview

Coherence and continuity form the basis of the EMCDDA's strategy and work programme (2010–12). We will build on progress made in the 2007–09 period and keep focused on the core tasks set out in the agency´s mandate. The successful creation and implementation of robust data collection tools requires a long-term vision and developmental approach which can support the ongoing investments made by Member States. The fact that the European Union now has one of the best-developed systems for monitoring the drug phenomenon and its consequences proves the value of this approach. We will continue working closely with experts across Europe to improve the availability, quality and value of the data.

This work programme, which is ambitious but also realistic, reflects the evolving information needs for drug policy formation in Europe. The resources available for data-collection activities within Europe are not likely to increase in the coming years and therefore we need to ensure that maximum value is derived from investments made. The achievements made over the last three years to consolidate the agency's structure and processes place us in a good position to extend our work without jeopardising successful execution of core activities.

If it is to remain relevant, the work of the agency must keep pace with the changing nature of the European drugs problem and emerging information needs. Improving the timeliness of reporting will be a key concern in the coming three years. It will be important to better identify and rapidly report on new trends, a priority task awarded to the agency in the recast of its founding regulation that came into force in January 2007. We outline a strategic approach for doing this that strikes an appropriate balance between the need to report rapidly and the need to be accurate, non-alarmist and consistent.

Greater focus is also given to activities that have become important information needs. The EU drugs strategy (2005–12) and the accompanying action plans complement the EMCDDA's regulation as important points of strategic reference ([1]). One of the challenges raised by the new action plan (2009–12) is to do more to support the establishment of European guidelines and standards for good practice for demand reduction work. Therefore, there is increased emphasis on best practice and ensuring quality in services delivery.
If European-level approaches are to have any credibility in this area, they need to be built on national experiences and expert consensus and we will ensure this. Another area singled out for attention is to develop better indicators in the supply-reduction area and correspondingly this work is now given greater prominence.

We will continue to configure our products to the needs of those using the information. This task has implications across EMCDDA work processes from how data is checked, processed and analysed to how resources on the web are organised. We will refine our dissemination strategy to ensure products reach their intended audience promptly and we will endeavour to obtain more feedback on their quality and relevance.

([1]) In particular, in the 2009–12 action plan, the EMCDDA is mentioned as a responsible party in the following actions: 4, 17, 18, 19, 22, 60, 63, 64, 64, 67, 68, 69 and 71.

The role of the EMCDDA and Reitox network as catalysts and hubs for information exchange goes far beyond the annual reporting of data. The technical meetings and wider networking activities are vital for reporting, but they also allow experts and practitioners to come together to share views and experiences often resulting in common projects, informal exchanges and peer support. We will encourage and support the further development of this knowledge exchange platform. To remain sustainable, the added value of work done at European level needs to be further developed also at national level by strengthening the national focal points as national references for drug-related information. We will address this issue as a matter of priority for the strategic development of the Reitox network over the next three-year period.

The agency will also continue to engage in international efforts to share best practice on how resources can be used on a global or regional level to minimise drug-related problems. By working together with international organisations, specialised government agencies and NGOs, the EMCDDA seeks to build the most complete picture possible of drug demand and supply in Europe, and to amplify the impact of all partners involved.

The strategy and initiatives set out in this document will be implemented through three annual work programmes. One of the challenges for the EMCDDA's management in 2010–12 will be to ensure that the objectives set are attained through thorough planning, implementation and monitoring. Given the budgetary perspective, priority setting will be key.

A better understanding of drug use in Europe: summary of results to be achieved

The EMCDDA will continue to deliver a comprehensive review of the drug situation in Europe with the following:

- *Annual report on the state of the drugs problem in Europe* in at least 23 languages
- Country overviews — providing an overview of the situation for all EU Member States and some selected third countries
- Selected issues developing topics of policy relevance in detail
- Statistical bulletin presenting all EMCDDA quantitative data and offering statistical tables, graphics and downloadable resources for researchers as well as an explanation of methods and definitions used
- Standardised national reporting packages delivered annually by 30 national focal points
- A range of high-quality information products tailored to the needs of different audiences
- New data, country overviews, national and regional reports on the drugs situation in candidate and potential candidate countries

In addition, this work programme has been designed to provide:

Monitoring the overall drug situation
- improved and more delimited estimate of the size of the European drug problem
- refinement to key indicators to improve their implementation and increase their analytical value
- improved monitoring and reporting on polydrug use issues
- better understanding of responses targeting non-opiate problems

Monitoring new trends
- development of a more coherent and integrated approach to identifying and disseminating information on new trends and potential threats
- continued delivery of an efficient mechanism for the identification and risk of new psychoactive substances
- a regular audit and survey of drugs available on the Internet

Monitoring supply and supply reduction
- greater emphasis given to the area of supply and crime reduction including the development of new tools and approaches
- the launch of a new multi-component price purity indicator building on current approaches in this area
- scaling up work to provide better analysis of drug markets

Monitoring responses
- a restructuring of response indicators to provide a stronger conceptual framework for reporting
- a greater focus on the identification and dissemination of examples of best practice
- a concrete programme to build consensus and help establish European guidelines and standards for demand reduction programmes
- better analysis of service needs across Europe and the extent to which they are met

Monitoring policies
- greater capacity to respond rapidly to questions of policy importance
- new tools to facilitate policy analysis and regular reporting on policy developments
- ongoing support to the information needs arising out of the EU drug strategy and to the European policy debate on drugs

Increased quality and scientific rigour
- improved efficiency and greater quality assurance across all areas of data collection and data processing
- increased scientific standing for the work of the EMCDDA through more scientific publishing and engagement with the research community
- a catalyst for European-level information exchange, networking and debate on drug issues
- greater coherence in the choice of media for reporting and a more flexible approach to accessing data

Facilitating the incorporation of new members to the EMCDDA
- updated overview of the available sources of information and expertise in candidate and potential candidate countries

Section II

Guiding principles

The agency has an underlying commitment to quality and ongoing improvement in its working methods that cuts across all areas of activity. These core values are operationalised in the new work programme in the form of guiding principles. These principles provide an ongoing point of reference for the development of both scientific and administrative activities: they are not new but adapted from those that guided the work during the 2007–09 period and are based on what the agency has learned on how best to fulfil its mandate.

Delivering value — making the work relevant and useful

The overarching purpose of the agency's information collection and analysis activities is to provide timely, indepth and policy-relevant reporting. In the data collection process, different types of information are brought together in a pool that serves as the basis for analysis and elaboration of outputs. The methodological and practical difficulties inherent in monitoring the complexities of drug use in Europe make this necessary as information sources are partial and a multi-indicator/information source approach allows the limitations of individual data sources to be overcome. In some respects, this issue is reversed when it comes to configuring the different outputs. The data that the agency produces has to inform a number of different audiences who have specific interests and needs. Ensuring that outputs are relevant and useful to different groups from policymakers, practitioners and scientists through to European citizens is an important task for the EMCDDA. Investing in data collection and analysis is only worthwhile if it results in useful products that can be accessed by those who need them in an appropriate form and timeframe. It will be important here to reflect the general moves and audience preference towards electronic publishing and more flexible approaches to accessing information. The historical data resources of the EMCDDA that have considerable potential to be greater utilised for teaching and research purposes are another area for development. How the EMCDDA will ensure its work remains relevant and useful to different audiences is developed further in Section III.

A greater focus on knowledge exchange

The agency's role as an information hub and catalyst for networking and development is recognised and encouraged. For a network to be sustainable, it needs to deliver value to those who participate in it. As a European-level information system, the EMCDDA relies on the support and activities of the national focal points that support and motivate national data providers. It is only through close partnership with the focal points, national experts and other bodies collecting information in this area that the agency can achieve its results. This partnership is not only important at European level: as it is based on continuous investment on data collection by the Member States, its value at national level needs further development and recognition. The key indicators and other EMCDDA technical meetings bring together experts from across Europe and already provide a forum for developing conceptual frameworks and methods, initiating common projects, sharing ideas, peer support and training. The expertise that exists throughout the network is now considerable and the interaction that occurs needs to be harnessed for wider exchange of knowledge and expertise and European-level networking.

Our strategy here is shaped by the fact that developments will need to be delivered through improved efficiency and innovation rather than additional resources. The approach will therefore concentrate on linking the range of technical activities undertaken in a more coherent and supportive way — for example, broadening the agendas of technical meetings and using better electronic networking and communication tools. Close cooperation with the Reitox network is important here. Another element is to motivate and encourage expert participation in the agency's work. This becomes easier as the EMCDDA's reputation improves, but in the longer term experts will only participate in activities that offer stimulating agendas and an opportunity to further develop their own work.

Apart from the organisational perspective, we include elements designed to encourage expert participation and support networking between countries. Increased emphasis on scientific publishing is one example of this. Another is the new 'data laboratory' concept which will encourage experts to conduct cross-national analysis. Based on a successful pilot project, this approach will provide both a virtual and physical space for researchers with similar data sets to unite them, according to pre-agreed protocols and then conduct common analysis. This will enable collaboration on scientific papers without researchers losing ownership of their data sets. We will continue to raise awareness about opportunities for funding for drug-related topics and provide information to European researchers.

Developing the EMCDDA as a platform for exchange will also enable better use of existing resources at national level. The agency's scientific conference in 2009 explored the perspective for future information needs and provided informative results. Coordinating and sharing work done nationally on guidelines and standards can help avoid duplication of work and make better use of the limited resources existing for this kind of work in Europe as a whole. Moreover, as increasing importance is given to questions of quality and best practice, we will need input from national experts to explore approaches and to develop the technical consensus that progress in these areas will demand. Practically, this can be achieved by using the EMCDDA as a platform of collaboration and exchange, and for ongoing discussion between national and international experts on topics such as treatment procedures, instruments for policy evaluation or risk assessment. The agency has considerable experience in successfully working with expert groups, as is evident in the developmental success of the epidemiological key indicators. This approach will be expanded conceptually to cover aspects of quality and best practice in prevention, treatment, harm reduction, social rehabilitation and also to consider aspects of policy, supply and supply reduction. This will need to be accomplished by making maximum use of our existing networks, by innovative use of technological solutions and by building bridges with other networks and centres of expertise.

A commitment to partnership

The EMCDDA can only achieve its results through working closely with its partners. We rely on a number of different actors to provide the data necessary for reporting, to shape the outputs and direction of the agency and to ensure the quality of our work. Building strong relationships with our national, institutional and international partners was actively pursued during the 2007–09 work programme and remains a priority. These activities have borne fruit in that the agency is recognised widely as a solid and reliable collaborator and, overall, existing relationships with key partners remain strong. Nonetheless, we recognise that developing collaborative relationships is a fundamental aspect of good working practice and improvements can always be made.

At policy level, the relevance of work to the European debate is ensured through close dialogue and cooperation with European institutions. We will further develop our working relationship with key partners among the other European agencies and, where appropriate, international organisations. In terms of data collection and analysis, our work depends on the Reitox network who also work to support the implementation of European data collection standards. The relationship between the Reitox network and the EMCDDA is a symbiotic and dynamic one. The focal points play an active role in shaping the agenda of the agency's work, alerting the analysis to new developments and providing a source of national expertise, whilst the agency provides technical support, normative standards and a quality control structure for national work. As national focal points are a diverse group, we will pay more attention to tailoring support to the specific needs of individual focal points. We recognise the reporting burden already requested of national focal points and for this reason, some complementary reporting mechanisms will be developed during the coming three years. Where this is the case, it will be done in line with existing agreements between the EMCDDA and Reitox that ensure coordination, transparency and efficient working practices.

Enhancing scientific standing

The Scientific Committee plays an important role with regard to improving the scientific standing of the agency — not only in its formal role of reviewing the scientific quality of the agency's work programme but also as an important voice for science within the EMCDDA. The scientific coordination team, which brings together all substantive scientific areas, is well placed to engender change and will work to improve the overall quality of scientific work. We will introduce new internal procedures to better control the scientific rigour in the analysis performed for the Annual report, Statistical bulletin and other products. We will also pay greater attention to ensuring that the agency's statistical outputs are methodologically rigorous, reflect good reporting practice, and can be easily accessed by researchers wishing to conduct secondary analysis of the data.

We will also continue to build links with various research and scientific fora and relevant university and expert centres. This includes encouraging PhD students to take an interest in the EMCDDA's work, encouraging universities to use our products for teaching purposes and providing internships for young researchers. Short-term expert mentoring contracts and in-house and external training opportunities to develop the scientific skills and potential of in-house scientific teams will also be introduced.

We will make our work more visible to the scientific world by encouraging and supporting scientific publishing, both of our own staff and of those experts working with us. We will disseminate better scientific findings and literature through EMCDDA web resources and tackle language issues that inhibit publishing or sharing the results of studies. The new 'data laboratory' approach will promote common scientific analysis.

Ensuring good governance

To reach key goals there needs to be effective and supportive administration and management structures. This is why an ongoing commitment to good governance is a core aspect of enhancing our capacity to function as a service-oriented public administration. Although we have made considerable progress, further improvements are required for our continuing development as an example of organisational competence and good practice.

We will ensure this commitment through: further improvements to management, planning, monitoring and control processes; better coordination of the Reitox network; and by optimising use of internal resources. Given the budgetary perspective, priority setting will be important and efficient financial management essential to guarantee best use is made of the resources allocated.

With regard to the Reitox network, in 2007–09 priority was given to improving the financial and administrative management of the grant agreements. The objective for 2010–12 is twofold: first, to prepare and implement a Reitox development strategy aimed at consolidating the network and at improving its perceived added value at national level; and second, to streamline operational and control processes including introducing an electronic tool for grants and project management.

Human resources services and practices have greatly improved during the 2007–09 period but remain areas for development to keep highly motivated staff. The agency's staff is unlikely to increase significantly over the next three years and in view of the limited turnover of staff that can be expected, it will be important to ensure that existing human resources are fully developed and efficiently managed. We will therefore pay more attention to training and staff development and review our internal organisation and structure on an ongoing basis to ensure that they remain optimal. We will also consider outsourcing tasks, especially when they are time limited or intermittent and can produce savings for the agency.

Section III
Keeping communication on target

To make the EMCDDA's work relevant, it must be disseminated appropriately, which is why communication is central to our activities. Part of the added value of the agency is to interpret complex information into meaningful and useful messages for policymakers and other target audiences. Information needs and patterns of use evolve, which is why we remain mindful of the need to keep communication on target.

Timeliness

We will look at how we can improve the timeliness of EMCDDA products. Inherent in the process of reporting national statistics is the time necessary to collect and collate them. Our annual reporting process requires time: for Member States to bring together their national data; for it to be processed and analysed at EU level; and for production and dissemination in 23 languages. This results in a two-year delay in the reporting window for quantitative analysis which is largely unavoidable if a reliable and comprehensive analysis of the European situation is to be produced. Nevertheless, we will review the reporting cycle to ensure that data is made available as quickly as possible. A first step in that direction was the shortened production cycle for the Statistical bulletin and Country overviews, that makes the information gathered available eight months after submission of the national reporting packages. We will make the content of the Annual report more topical by including in the analysis recent information from non-registry sources (for example, the release of a new study or important changes in a Member State's policy).

Beyond the annual reporting exercise, we will explore more generally how to make the agency's work more responsive. Not all important information is based on annually collated registries and the more up-to-date that reports can be, the better. We will examine web-based reporting tools in this context. We also receive information requests that require a rapid response, ranging from requests to inform a particular policy discussion to exchanges of information on new drugs or health threats. In order to improve the handling of these requests, we will establish a standing Rapid Response Team (RRT).

Getting the medium right: accessibility, web-based products and language issues

The agency's products range from printed reports to online databases. Whilst our target audiences still prefer some key outputs in printed form, we are aware of the significant benefits that electronic publishing brings and we will continue to invest in pertinent and user-friendly online products. Language is an important issue for accessibility: the EMCDDA believes that European citizens should have access to information on the drugs problem in Europe in a language that they understand. We therefore adapt to the growing linguistic diversity in the EU to ensure that reporting remains user-focused. For budgetary reasons, we have adopted a pragmatic approach that takes into account the intended readership of the communication product. We will work with national focal points to improve the link between EMCDDA resources and nationally held web resources so as to further facilitate access to own-language materials.

Active communication: our participation

As the EMCDDA's role as the reference point on drugs in Europe becomes a reality, it increasingly gets called upon to communicate its findings and messages face-to-face — in the form of visits from policymakers, presentations at conferences and talking to the media. Our communication work locally and within the diplomatic community is also on the increase. We will continue to service these requests recognising the value and insight into audience needs that such occasions provide.

Disseminating and valorising our outputs

The dissemination, monitoring and evaluation of outputs constitutes a valuable management tool that allows ongoing activities and their results to be contrasted with real needs of the target public — either validating them or demonstrating the need for their further improvement. We will review our dissemination activities to ascertain to what extent outputs are reaching their intended audience. We will also clarify and analyse the type of EMCDDA information that is disseminated by national focal points to their national contacts and discuss with them possible actions and tools for their increased participation in this activity.

Responding better to differentiated needs

A clear understanding of the information needs of the intended audience for EMCDDA outputs is a prerequisite to tailoring products appropriately. This issue goes beyond simply delimiting product lines, although this is important too. Communicating with different audiences requires prior assessment of the most appropriate style, tone and register; the most fitting form; and the most suitable channel/product. The EMCDDA Communication strategy (2007) provides a framework for ensuring this happens and ongoing attention will be paid to achieving a balanced mix of outputs for the different consumers of our work.

Policymakers

Who are they?	*What do they need?*	*What do we offer them?*
e.g. representatives of government (Ministers and their advisors); drug coordinators and officials responsible for implementing health, social and criminal justice policies, national parliaments; local government officials; European Parliament, Council of the European Union and European Commission	Highly synthesised, objective information on drugs issues Cross-country comparisons and national drug situations in a European context Analytical, evidence-based information on policy options Timely information on significant emerging threats and best practice Key statistics and summary analysis	Products targeted at policymakers include: • Annual report • *Drugs in focus* policy briefing • European legal database on drugs (ELDD) • Insights series • Risk assessments • Statistical bulletin • Scientific papers

Development strategy

Providing resources for the policy audience remains a priority of the agency's work. To aid accessibility, all main products are accompanied by a short, multilingual, policy summary. The Drugs in focus series will continue to provide top-level reviews on topical issues of particular policy interest and the views of policymakers will be canvassed to generate new topics for this series. We will continue the technical backstopping and support we provide to European bodies and Member States, although always respecting the role of the agency as an information centre that facilitates but does not engage in the policymaking process. We will also pay more attention to responding rapidly and appropriately to important information requests from European bodies and Member States.

Scientists and researchers

Who are they?	*What do they need?*	*What do we offer them?*
e.g. university researchers and scientific staff; research institutes; research networks; documentation centres	Scientific reports and analyses Statistical databases Guidelines and tools for data-collection Literature on new topics	Products targeted at scientists and researchers include: • Annual report • Statistical bulletin • Monographs • Thematic papers/Literature reviews • Technical datasheets • Drug profiles

Development strategy

The EMCDDA acts as an interface between the worlds of science and policy and aims to be a Centre of scientific and technical excellence in the drugs field. Although we are not a dedicated research centre, we feed findings from our research into our analysis and also act as a catalyst for new questions and studies. We recognise that the credibility of our analysis is based on sound methods and a scientifically rigorous approach. We also know that interacting with the European scientific community, through meetings, conferences and publishing is key to ensuring the quality of our work and supporting the scientific discourse on drug use in Europe. We plan a number of new initiatives to make the agency's work more relevant for a scientific audience. The new structure of the Scientific Committee means that the agency now benefits from the input of some of Europe's leading scientists on drugs issues and this forum in itself improves our ability to dialogue with the wider community of scientists and researchers in Europe. We will also raise the scientific visibility and impact of the agency's work by encouraging publishing in scientific journals, both by experts working on projects initiated by the EMCDDA and by our staff. Scientific networking activities with the aim of increasing the visibility and usefulness of the EMCDDA products will also be supported with more attention paid to assisting scientists wishing to work on secondary analysis of data sets held by the EMCDDA. We will explore opportunities for providing technical training for national experts on issues related to the agency's work, for example using the Reitox Academy format or working with established training centres. We will also continue to liaise with the editors of scientific journals in the drugs field to look at the issue of publishing and language availability and how scientific articles of relevance to European drug researchers can be made more accessible.

Practitioners

Who are they?	*What do they need?*	*What do we offer them?*
e.g. prevention and educational specialists; outreach workers; therapists; primary healthcare staff; treatment providers	Methods and tools for developing best practice Examples of good practice and comparative analysis of practice Scientific studies and technical reports Methodological manuals	Products targeted at practitioners include: • Annual report • Manuals • Best practice portal • Technical datasheets • Statistical bulletin • Insights series • Thematic papers/Literature reviews

Development strategy

The focus of the debate on drugs in Europe has moved towards the importance of sharing an understanding of what responses work and what factors are important in ensuring quality of the interventions that are delivered. The progress that Europe has made in this respect can be witnessed by the emphasis given in the current EU action plan on drugs on developing European-level guidelines and standards. We will take up this challenge by further developing the Best practice portal and associated tools that allow practitioners across Europe to share information on effective programmes. Working closely with the European Commission, we will liaise with national bodies and experts to bring together existing guidelines and standards. These are necessary elements to reach a European level consensus on guidelines and standards as envisaged by the action plan. We will also produce a set of 'evidence papers' that review the scientific literature in key intervention areas thereby providing practitioners across Europe with easy access to the state-of-the-art, supported by examples of good practice and quality standards where they are available.

Citizens

Who are they?	*What do they need?*	*What do we offer them?*
e.g. interested members of the public, students, young people, drug users and their families	Clear, simple, concise information General overview of the drugs phenomenon Effects and dangers of individual drugs Information in national languages when possible	Products targeted at citizens include: • EMCDDA websites • Frequently asked questions and answers • *Drugnet Europe* newsletter • *Drugs in focus* policy briefing • Drug profiles

Development strategy

To date, beyond the annual reporting exercise and occasional general interest publication, our focus has been on meeting specialist information needs. This has been a deliberate strategy with the aim of not duplicating the efforts of others or trying to create sources of information at European level which are better delivered more locally, such as service directories and advice on seeking help. As a number of good general reference sites exist on drugs, the agency has not sought to provide this type of information. Nevertheless, the agency exists to serve the needs of the Europe citizen and it is important to raise awareness of our work. We will therefore continue to offer more general, awareness-raising products planned to coincide with specific calendar events, such as International Women's Day, World AIDS Day and the International Day Against Drug Abuse. To improve links to national and international sites, we will create a new 'Drug use in Europe' web page for students and young adults that will provide a general introduction to the topic through a set of FAQs and a linked glossary of key terms and concepts.

Media

Who are they?	*What do they need?*	*What do we offer them?*
Journalists and editors from all media: print, broadcast, online; national regional, local; specialised, general, etc.	Highly synthesised Topical Country-specific	Products targeted at the media include: • News releases • Fact sheets • Feature articles • *Drugnet Europe* newsletter • *Drugs in focus* policy briefing

Development strategy

The media serves as a conduit to permanently raise awareness and reach the various target audiences. We will continue to build sound contacts and relations with journalists (from general and specialist publications), provide media-friendly information with clearly defined messages, and assess impact of media coverage. We will work closely with the national focal points to further improve dissemination of EMCDDA results to media at national level.

Overview of EMCDDA outputs, their typology, intended audience and timeframe

	Typology	Target audiences				Timeframe
		Policy	Science	Practice	Citizen	
Annual reporting package						
Annual report	Yearly overview of the drug phenomenon	X	X	X	X	Annual, November
Selected issue	In-depth reviews of topical interest	X	X	X	X	3 per year
Statistical bulletin (web-based)	Comprehensive presentation of statistical data	X	X			Annual, July
Country overviews	Structured synopsis of trends and characteristics of national drug problems	X		X	X	Annual, July
Web-based resources						
Key indicator gateway	Overview of five key indicators and toolbox of supporting material	X	X			Ongoing
Drug profiles	Objective and scientifically sound descriptions of drugs		X	X	X	4 new
Best practice portal	Tools and standards to improve quality of interventions and real-life solutions to drug problems	X		X		Ongoing
Drug use in Europe — web page and resources	General introduction to the topic of drug use + FAQs				X	Launch 2010, then ongoing
Research resources area	Thematic area facilitating access to drug-related research	X	X			Ongoing
ELDD and legal topic overviews and reports	Database of information on European drugs-related legislation	X	X	X		Ongoing, 2 topic overviews per year
EMCDDA series publications						
Drugs in focus policy briefings	Concise overviews of key issues in the drugs field	X				3 per year
EMCDDA Insights	Findings of studies and research projects on topical issues	X		X		1 per year
EMCDDA Manuals	Practical handbooks for those working in the drugs field			X		
EMCDDA Scientific monographs	Specialised publications containing scientific papers		X	X		1 every 2 years
Drugnet Europe newsletter	Regular, rapid and succinct information on the agency's activities	X	X	X	X	4 per year
Scientific and technical reporting						
EMCDDA Thematic papers	Scientific papers on selected, theme-based aspects of the drugs phenomenon	X	X			2 per year
Technical datasheets	Information on ongoing research topics	X	X			3 per year
Literature reviews	Collection and discussion of published information		X	X		Ad hoc

	Typology	Target audiences				Timeframe
		Policy	Science	Practice	Citizen	
EMCDDA Guidelines	For data collection or programme development		X	X		2 per year
Risk assessments	Reports on new substances entering the illicit drug market	X	X			On request
Articles/papers in peer reviewed scientific journals	Dissemination of EMCDDA findings and analyses to specialist scientific audiences		X	X		5 per year
Conferences participation, presentations	Dissemination of EMCDDA findings at European and international events	X	X	X		Ongoing

IV

Section IV

Strategic framework for monitoring drugs in Europe

Focused, developmental and long-term vision

The focus of our work on monitoring drug use in Europe will remain on the continued development of key areas, with increased emphasis on best practice, the quality of interventions and identifying solutions. We also include a limited number of strategically important new areas for monitoring and analysis.

The EMCDDA's principal responsibility is monitoring the European drug situation and developments in how Europe responds to drug problems. Although easy enough to state, this is a challenging accomplishment and it has only been possible to progress by focusing on a small set of key measures and developing them over time. For the epidemiological monitoring of the drug situation, the key indicators provide the building blocks necessary for describing the drug situation and tracking trends and developments. Indicators on the responses side are now more mature and provide the opportunity to contrast what is known about the nature of the problem with an understanding of the way Member States respond, and even the extent to which responses and needs are in balance.

Now that well thought out and methodologically sound basic information tools are in place, and consolidation and refinement work can advance, we can undertake more complex and comprehensive analysis. Considerable progress has been made here over the life of the agency. This was noted in the 2007 external evaluation but can be seen clearly by comparing the data available now to the situation five or ten years ago. Also, in comparison with other parts of the world, Europe now stands out in terms of its ability to monitor the drug situation. These gains have been hard won and rest on detailed, time-consuming and ongoing work with European Member States to develop practical and achievable solutions to the complex problems that exist in this area. The time trend analysis now available is the strength of the system but is only possible due to investments made in earlier years.

As the European data is now much more complete, it would be easy for us to pursue a less ambitious approach. However, such a strategy would fail to deliver the high-quality information system Europe requires and for this reason we have decided to continue with a developmental and long-term approach focusing on a restricted number of high-quality tools. These tools are a prerequisite for a more informed and detailed understanding. This is why the epidemiological key indicators and core data sets in the responses area remain central elements.

This does not exclude the need to adapt to changing conditions and improve on existing approaches. In 2009, we initiated a review of the epidemiological key indicators and this work will progress with improvements and rationalisation underway for the treatment demand (TDI) and problem drug use (PDU) indicators. On the responses side, a review of information tools was launched in the 2007–09 period and attention was given to developing more natural reporting cycles. In a next step, we will reorganise the responses measures into more coherent indicator groups. This will bring internal organisational benefits and improve the visibility and consistency of these measures.

Although the EMCDDA's work on collecting demand-side data is better known, the agency has also always been collecting information from supply-side sources. Prominent examples of this can be found in the long-term time series of data on drug-law offences, drug seizures and price and purity. We have also conducted conceptual work in this area, such as developing a framework for monitoring drug-related crime and a methodology for measuring perceived drug availability. However, supply-side data still remain to a large extent underdeveloped and so we took measures in the 2007–09 work programme to strengthen the capacity of the agency in this area. This included recruiting more specialised staff and forging a closer working relationship with key partners such as Europol, as well as methodological work. We also developed an internal strategy for improving the quality of data sources in this area. Considerable value can accrue from the synthesis of demand- and supply-side information sources and we plan a number of outputs using this approach.

As the European drug situation evolves, significant new situations arise where the EMCDDA would be failing in its duty if it did not adjust its vision to take them into account. In a general sense, the complexities and more fluid nature of today's European drug problem mean that more attention must be given to identifying new trends and threats as well as more complex forms of behaviour, such as those represented by patterns of polydrug use. Particularly challenging in this respect is the increasingly important grey area of tandem use of illicit and licit psychoactive substances. This kind of polydrug use pattern needs to be taken better into account in our future reporting and analysis (insofar as its mandate allows). A related new element is the need to respond to the use of the Internet as a source of supply for psychoactive substances. We therefore include an Internet-monitoring module built on successful pilot work carried out as part of the E-POD project. We will also invest more in updating our restricted and open information sources on new drugs as this is an area where the agency can provide significant European-level added value.

Cross-cutting and developmental issues

The priority areas for development are set out below. They have been selected because of their importance in the EMCDDA regulation and/or the EU action plan (2009–12) and because of their strategic value for future reporting needs.

1. Methods for reporting and analysing new trends, including the better utilisation of forensic science data and a new approach to ongoing monitoring of the Internet.
2. Supply and supply reduction practice, including better reporting on drug markets, their economic aspects and a new combined indicator of price and purity.
3. Measures to estimate and describe dependence and drug problems in non-opiate populations and better understanding of what is done and constitutes good practice in responding to problems in this area, including reporting on patterns and responses to polydrug use.
4. A framework for developing guidelines and good practice standards for interventions and the identification and dissemination of quality standards.

A more general priority is to better exploit the data held by the agency to inform ongoing policy discussions. This requires cross indicator/source analysis and more transversal working within the scientific teams. Transversal activities will be supported structurally by the creation of new CUPs (cross-unit projects). CUPs are established formally, have specific objectives and a timeframe, but provide a flexible mechanism for encouraging cross-unit work. The following CUPs are envisaged:

Supply reduction
The existing supply and supply reduction CUP which was tasked with developing a strategic framework for the EMCDDA in this area will conclude its work by the end of 2009. The objectives and timeframe of this CUP will be reviewed and it will be re-launched with the overall purpose of raising the profile of supply reduction related activities within the EMCDDA. A central concern of this work area will be to produce a better understanding of the European drug market, including economic analysis, and the integration of information on interdiction activities.

Prison
Prison settings are important for monitoring drug use as well as for delivering interventions to problem drug users. Although monitoring prisons is covered within the existing EMCDDA information system, a coordinated approach has been lacking. A CUP will be set up to revitalise work in this area, increase its overall visibility and enable the agency to better respond to information requests in this area.

Treatment
Information on drug treatment is of policy importance, and treatment data also provide an important window for monitoring patterns of drug use and assessing drug problems. Currently, EMCDDA data sets on treatment demand and supply have been developed separately and there is a need to bring these approaches together both to improve the analysis possible and to ensure efficient working. The CUP will also allow us to respond better to information needs, including those of the EU action plan (Goal objective No 20).

Modelling
The data resources available within the EMCDDA progressively permit more complex statistical analysis. Moreover, methodological developments in diseases epidemiology and economics increasingly point to the potential of more complex models to shed light on issues of policy importance and relevance. A CUP will be established to promote and look for opportunities to exploit EMCDDA data sets to a greater extent through mathematical modelling and other advanced analytical approaches. The initial focus of this CUP will be on the area of infectious diseases.

IV.1. Area 1 — Monitoring the drug situation

Goal 1
Provide a sound evidence base for informed policies and actions through developing and implementing high quality data collection tools that permit analysis of the drug situation, its impact and the tracking of trends over time

This goal will be delivered through achieving the following objectives:
- To improve the efficiency and scientific rigour of tools and processes to better collect data on the European drug situation and its consequences [1.1]
- To improve and further develop reporting tools, capacity and analytical potential of the key epidemiological indicators [1.2]
- To continue to develop information collection tools in other established areas that are vital for understanding the drug situation and its consequences, and develop new tools and approaches where these are required [1.3]
- To ensure maximum value is obtained from the data available by actively pursuing a policy that is relevant and scientifically sound, and an innovative analytical strategy [1.4]

1.1
To improve the efficiency and scientific rigour of tools and processes to better collect data on the European drug situation and its consequences

Our reporting system depends on the Reitox network, expert networks, working groups, ad hoc studies and small projects, and for a large component of activities, work will continue along these lines. In addition, we will further develop working partnerships and appropriate data-collection synergies with relevant international and European bodies, expert networks, centres of excellence and research exercises.

Improvements are planned to data handling, processing and analysis procedures. Activities here include further implementing and improving the Fonte system and associated information technology tools so as to ensure efficient and accurate inputting, cleaning and analysis of data. We also plan on improving data quality assurance procedures, including those related to data manipulation, archiving and accuracy checking. We will carry on with the work done on quality assurance in partnership with the national focal points and with national experts and improve the quality criteria for national reporting. We will review the timing and contents of the quality feedback system and adapt it as necessary making full use of the features offered by Fonte.

We will review the structure and content of the Statistical bulletin and explore automation of the data extraction process as well as alternative methods of querying and presenting data. One innovative development will be to pilot work to establish a new model for data collection to facilitate analysis based on a 'decentralised databank concept' which will be developed in close collaboration with interested countries. We will also re-launch the historical survey archive to provide a vehicle for storing and accessing subsets of important data and to improve the service we offer to the scientific community. Procedures for collecting, archiving and retrieving qualitative data sources will also be implemented.

Work will continue to keep track of developments in new technologies or methods that may have important implications for future EMCDDA activities. This includes studies on drugs and driving and drug testing in the workplace, new approaches to detecting drug use including environmental or novel approaches, and developments in survey and sampling methods relevant to monitoring drug use.

Initiatives	Outcomes
Produce Annual report on the state of the drugs problem in Europe and related products (Selected issues, Statistical bulletin + targeted communication)	Overall improvement of data analysis Rationalisation and improved efficiency of data management system Improvement of the quality of data collected Capacity to monitor new topics (ad hoc reports, etc.) Improved understanding of behaviours linked to infectious disease risk
Further implement and improve Fonte	
Improve data quality assurance procedures, criteria and reporting	
Further develop archiving and retrieval procedures	
Act as catalyst with relevant groups and bodies (strengthen partnerships and synergies) with EU bodies, centres of excellence and experts	

Initiatives	Outcomes
Convene and support expert networks and working groups and ad hoc studies and small projects	Conceptual model and prototypes developed for DDS Survey archive launched More efficient internal and external coordination (including at international level) — production of reports if requested, support for technical meetings
Develop 'decentralised data bank system' (DDS) and historical survey archive	
Further define tools for monitoring polydrug use (including misuse of licit and illicit substances, impact on morbidity and mortality)	
Implement behavioural surveillance among drug injectors and further improve the quality of the DRID prevalence monitoring	
Conceptualise and monitor new topics of interest: drugs and driving, drugs in the workplace, detecting drug use, statistical and epidemiological developments	
Inform international reporting developments (if requested and when appropriate)	

1.2 To improve and further develop reporting tools, capacity and analytical potential of the key epidemiological indicators

The five key epidemiological indicators are at the core of the EMCDDA's approach to monitoring the drug situation in Europe. The strength of the indicators lies not only in their individual value but also because in combination they provide a more comprehensive set of information, from which a better overall picture of drug use in Europe can be produced. With this in mind, the indicators will be collectively located within a more developed overall model of drug use and its health effects. Furthermore, emphasis will be placed on developing approaches that facilitate early identification of important changes and trends. Examples here include: route of administration, age cohort effects, sub-population difference, geographical difference, changes in latency periods and continuation rates as well as improved sensitivity to monitoring polydrug patterns and their impact on health.

The indicators represent an ongoing accomplishment which is reflected in activities to support expert networks through meetings, developmental studies and projects. It is also necessary to collect contextual information to permit comparative analysis. There is ongoing work to rationalise the indicators to improve their performance and develop synergies between different working groups. This revision will be done in consultation with the expert groups and Reitox focal points who are responsible for data collection at national level. Other horizontal activities include the introduction of an improved system for auditing implementation which will facilitate targeting of support for Member States experiencing technical difficulties, as well as meeting the reporting obligations of the EU drugs action plan as well as contributing to other EU activities such as the EU communication on HIV/AIDS and the EU health indicators portal. This will be closely coordinated with Reitox activities to provide quality feedback, and focused training (Reitox Academies) and linked to annual work programme objectives.

Improving the quality and comparability of data from general population surveys will be the focus of the work in the patterns and prevalence in the general population survey indicator (GPS),

together with improving the analysis of the general population survey data (GPS) indicator. Revisions of the treatment demand indicator (TDI) will continue to improve its performance, keep pace with changes in the European drug problem and remove unproductive elements. We will rationalise the strategy for data collection in different settings (low-threshold and GPs, prisons) and improve articulation with the problem drug use (PDU) indicator. The PDU indicator will be located within a broader overall concept of problem drug use with further subcomponent development and conceptualisation (PDU-R indicator with sub-population denomination by drug type). The approach will be reformulated and based on a combination of indirect estimations, survey methods, and, over time, the introduction of new approaches. This will require updates to guidelines and standards and work to stimulate the production of national estimates, where this is possible. In addition, we will continue to develop improved methods for assessing incidence.

The drug-related infectious diseases (DRID) indicator will continue to strengthen the monitoring and reporting on HIV, viral hepatitis (HCV, HCB) and contribute to transversal work to gain a greater understanding of how epidemiological trends are influenced by intervention. Developmental work on sexually transmitted infections, tuberculosis (TB) and bacterial infections will also be undertaken. We will continue the modelling and analytical work in collaboration with other interested parties (WHO, ECDC UNAIDS and the Commission) including supporting, where possible, activities conducted in the framework of the 'UN reference group on HIV in drug using populations' and the DG SANCO coordinated 'HIV/AIDS Think Tank'. Overall, the aim will be to develop more analytical synergy and provide high-quality guidance for reporting activities. Where appropriate, ad hoc support will continue to be provided to national and international conferences and expert meetings on HIV/AIDS, hepatitis and related interventions as well as national and international DRID studies where expert input is requested.

Within the work of the drug-related deaths (DRD) indicator, attention will be given to non-opioid deaths. We will also continue our efforts to improve the quality and validity of information, in particular from mortality cohort studies. Analysis of acute drug-induced deaths (overdoses) will be progressively located within a more comprehensive approach (total burden of drug-related mortality which will include suicide, violence and other factors) and more attention will be given to important sub-groups, such as those with mental health problems, in need of housing or homeless, the socially excluded, and those leaving prison or treatment programmes. Work will be initiated across the indicators to map out a more comprehensive overview of the nature and impact of drug use on public health in Europe.

Initiatives	Outcomes
Develop the five key indicators (KI) (including supporting studies and projects, experts meetings)	Overall improvement of the implementation of the key indicators
Develop innovative approaches for early identification of change	Annual report on implementation levels and three-year baseline analysis
Improve auditing and follow-up of implementation for the five KIs	
Provide relevant activities and support for improving implementation of KIs	Adoption and implementation of revised guidelines and standard protocol (DRD, PDU-R, TDI)
Reformulate and develop a subcomponent of PDU (PDU-R)	

Initiatives	Outcomes
Improve quality and comparability of population surveys	Improvement to monitoring and conceptualisation of the EU situation on health consequences of drug use
Improve methods of estimation of incidence and change in drug use, and different forms of drug use	Increase in the quality of reports and the number of countries reporting
Improved conceptual framework and more delimited analysis of problem drug use	Better reporting of trends in the drug situation
Map overview of health consequences of drug use (including among non-opiates users)	More analysis of non-opiate based drug use patterns and problems
Assess mortality and morbidity among selected vulnerable groups	Improved estimation of the size of different components of the drug problem
Develop comprehensive approach of DRD	Improved understanding of overall morbidity and mortality related to drug use in Europe
Finalise revision of TDI	Existence of effective and productive KI expert networks
Improve the sensitivity, scope and analytical potential of infectious diseases indicator	Structured dialogue established between the EMCDDA, national focal points and KI expert networks so as to ensure convergence and feasibility of new tools
Develop rapid information exchange on important health consequences	
Ensure appropriate collaboration for each KI	

1.3
To continue to develop information collection tools in other established areas that are vital for understanding the drug situation and its consequences, and develop new tools and approaches where these are required

An important area for cross-unit developmental work is supply reduction. The ongoing CUP in this area will establish an expert reference group to improve expert input into data collection and developmental activities across the whole area of supply reduction and crime. Improving existing routine data sources will be one area of focus. Work will continue on drug seizures and drug law offences and the current approaches on drug prices and purity will be rationalised in a new price and purity indicator (PPI). Drug market analysis will continue to be developed and the results from the cannabis audit due in 2009 will inform the new approach to monitoring in this area, particularly home production and distinguishing between different cannabis products.
Close collaboration with Europol will also explore how the EMCDDA can better report on drug production interdiction in Europe (laboratories and grow sites).

Better monitoring of the drug market will also be taken forward through the ongoing work on perceived availability and access resulting in the formal launch of the European Model Questionnaire (EMQ) module for GPS surveys. Further developmental work in the survey area includes collaboration with secondary sources of sub-population survey data: school children, minorities, conscripts, and specific risk groups or settings. Our ongoing collaboration with the European school surveys project on drugs and other substances (ESPAD) and the Health behaviour in school-aged children (HBSC) survey groups is of particular importance here.
We will also continue to develop better measures for assessing problems and dependence within survey data, especially related to cannabis use.

As part of increased focus on the prison setting, a dedicated CUP will further develop and conceptualise tools for reporting on drug use trends in custodial settings (in synergy with the key indicators) and work will continue on an inventory of prison database studies.

Throughout the work programme, a flexible and ongoing assessment of new and ad hoc information needs will be maintained. As well as responding to the arising needs of the EU action plan (2009–12), we will continue to collaborate on the implementation of health statistics regulation with Eurostat and DG SANCO plus other DG SANCO projects of interest for the EMCDDA. We will also explore the conceptualisation of polydrug use involving licit and illicit psychoactive substances (in collaboration, where and if appropriate, with the EMEA, EFSA, WHO and the European Commission).

In the areas where focal points are usually less active or have less access to information at national level, we will explore further ways of exchanging information so as to strengthen their capacity as national reference centres for drug-related information.

Initiatives	Outcomes
Ongoing follow-up of information needs for the EU action plan and ad hoc requests	Overall improvement of availability and interpretation of data tailored to EU needs
Develop adequate and appropriate indicators for monitoring drug use in prison settings	Improved reliability of drug market indicators
Conceptualise and develop tools for assessing polydrug use patterns	Improved conceptualisation and monitoring of prisons, polydrug use and supply reduction
Develop data collection of sub-population survey data (secondary sources)	
Continue to develop supply-side indicators and market analysis	Rationalised price purity indicator with supporting guidelines and implementation support materials
Rationalisation and combination of price-purity indicator	EU Reference group on supply and supply reduction established
Implementation of drug availability (EMQ)	Better reporting on drug production in the EU
Set up an EU reference group on supply and supply reduction	
Further streamline drug-law offences and drug seizures	More reliable core data on drug seizures and drug-law offences
Extend monitoring of wholesale prices and dismantled production sites	More joint reports and collaboration with other agencies working in this area
Conceptualisation and feasibility of second sources indicators of drug supply and supply reduction	
Ensure adequate collaboration with third parties in the area of prisons, polydrug use, health statistics	

1.4
To ensure maximum value is obtained from the data available by actively pursuing a policy that is relevant and scientifically sound, and an innovative analytical strategy

Improvements will be made to ensuring that data analysis conducted by the EMCDDA is methodologically sound. We will introduce new quality control measures and guidelines for statistical procedures and improved internal guidelines for trend analysis and the interpolation of data points. Internal quality assurance procedures for ensuring accuracy and backtracking for analytical outputs will also be developed. We will review internal coordination and task management for the annual reporting cycle with the aim of improving efficiency. These tasks consume a considerable amount of the agency's scientific resources and so resource saving here will be valuable in freeing up capacity for work in other areas.

We will pay attention to improving analytical methods for more timely detection of key aspects of the drug situation (prevalence, consequences or markets) based on existing indicators and other information sources with the overall aim of improving the reporting of time trends from individual and combined data sets. Our data resources also permit a greater emphasis on modelling and more complex statistical approaches, including combined indicator analysis. This will enable fuller elaboration of some important policy-relevant questions such as: overall service needs, changing incidence and prevalence levels, changes in patterns of use, drug continuation rates and modelling of the impact of interventions, gender, mental health and lifestyle issues, and the natural history of drug use (initiation, continuation, progression to more intensive forms of use and cessation). We will also develop a conceptual framework that locates the indicator data in a broader concept of health outcomes arising from different drug consumption patterns.

The 'data laboratory' approach will be introduced to encourage data sharing and more complex analysis of sub-sets of information. It will be based on common coding of a subset of variables held by different research groups to produce an agreed output. This will be developed as part of the decentralised database concept described earlier.

We will continue our close collaboration with the ESPAD project group and again support further elaboration of this data set, including the analysis of combined drug-use patterns and exploratory analysis of how youth survey and adult survey data can be better reconciled. The issue of polydrug use will also be taken forward in an analysis of health impacts of different forms of polydrug use leading to the development of a typology of primary polydrug-using categories (from a public health perspective).

In close cooperation with Europol, we will develop a series of analyses of trends in European drug markets and drug flows. We will explore trends in the European cannabis market and the European market in synthetic drugs including possibilities of displacement and replacement of different drug types. Further issues to be addressed are: economic and structural aspects, interactions between demand and supply and case studies of market disruption and new market development. Despite its importance, there is limited understanding of the nature and dynamics of the European drug market. Although methodologically challenging, understanding which factors can influence the drug market is important for policy development. We also plan a series of analyses using European and secondary data sources to better locate the European data in the global picture. This will provide a better comparative analysis of European trends in an international perspective. Potential topics include: macro trends in cannabis use and the factors why many developing countries are seeing a declining trend; comparisons in HIV and HCV rates between regions and the relationship to protective factors; and methamphetamine diffusion.

The EMCDDA will also supply trend analysis to important international projects, such as the WHO study on the global burden of diseases and provide European analysis to other international bodies where appropriate.

Initiatives	Outcomes
Improve analytical procedures	Easier access and more use made of EMCDDA data sets
Develop analytical methods for more timely detection of key aspects of the drug situation	Improved and more detailed analysis of the EU drug situation
Improve internal coordination and task management of annual reporting (Annual report and related products)	Studies and reports utilising cross-indicator analysis
Perform relevant combined analysis on prevalence and patterns of drugs	Production of high-quality scientific publications
Develop analytical work groups to combine situation and response data to explore associations and interactions (including service coverage and impact)	Studies and analyses successfully conducted, facilitated by DDS
Improve analysis of characteristics, patterns and trends in drug problems and better mapping of PDU in settings and group analysis	Joint work with ESPAD and other scientific networks
Increase analysis of disease outcomes, underlying factors, settings	More comprehensive analysis of the relationship between patterns of drug use and health outcomes
Launch data laboratory decentralised databank systems approach (DDS)	Improved reporting on polydrug issues
Collaborate closely with ESPAD to better explore youth trends and combined analysis of youth and adults survey	Improved quality of time trend analysis
Analyse the health impact of different forms of polydrug use and develop typology of primary polydrug using categories (from a public health perspective)	The EU versus global analysis conducted on key topics
Undertake analyses of drug availability and trends in European drug markets and drug flows	Improved understanding and documentation of European markets
Strengthen cooperation with key institutional and scientific partners in the DRID area as well as engage where possible in a dialogue with researchers working in neighbouring countries where HIV among IDUs is increasing	Effective collaboration in the DRID area
Achieve better understanding of the nature and trends in the European cannabis market and the European markets of synthetic drugs	
Perform comparative and global analysis (the EU and other regions)	

IV.2. Area 2 – Monitoring responses, interventions and solutions applied to drug-related problems

The agency's efforts to collect better information on responses will be further strengthened and refined. In particular, this area will be given a stronger conceptual basis reflected in better defined indicator groups. Attention will be given to ensuring that data collected supports the identification and dissemination of good practice, quality standards and successfully evaluated intervention approaches. This issue is developed further in Section IV.4.

Goal 2

Continue to monitor the availability, accessibility and quality of responses to drug use in Europe through a set of systematic, well-defined and analytically relevant indicators

This goal will be delivered through achieving the following objectives:

- To improve the efficiency and scientific rigour of existing tools and processes to better collect data on the availability, accessibility and characteristics of responses to drug use in Europe [2.1]
- To develop data sources where they are required, and redefine existing tools, to provide a coherent and systematic set of response indicators that provide a sound basis for policy-relevant analysis [2.2]
- To develop an analytical framework that provides a better understanding of the availability, accessibility and quality of responses to drug use in Europe [2.3]

2.1
To improve the efficiency and scientific rigour of existing tools and processes to better collect data on the availability, accessibility and characteristics of responses to drug use in Europe

The EMCDDA has developed a pragmatic and broad-based approach to monitoring responses to reflect the practical and methodological difficulties presented by this area. Information tools are structured around the areas of: prevention, treatment, harm reduction and social rehabilitation, and are rationalised in a set of structured questions and standard tables. Legal and policy developments are also systematically monitored. National reports and secondary sources, such as developments reported in the research and practice literature, provide additional important contextual information resources.

The ongoing work of collecting the information for annual reporting will continue to represent a major activity for the agency. Improvements in data management processes will be delivered for response data through the further implementation of Fonte (the EMCDDA's data management system). Annual reporting will be complemented by focused one-off studies and analyses to allow reporting on issues of topical importance.

Information tools will continue to be reviewed and their performance evaluated and fine-tuned, where necessary. This work will be conducted in close collaboration with the Reitox network with consideration given to the information needs of the EU action plan and the appropriateness of tools for monitoring changes in the European situation. For example, ensuring responses targeting non-opiate based problems such as treatment for cannabis or stimulant users are appropriately covered.

The EMCDDA will continue to monitor the research literature on programme effectiveness as this is important for analysis of the extent to which the provision available is evidence based. The agency will also continue to be active at national and international conferences as they provide an additional opportunity to contribute to and learn about new developments, national discussions, ongoing projects and emerging research findings. This is important as a number of new innovations, especially in the area of drug treatment, are likely to come on stream in the 2010–12 period.

Complementary data collection mechanisms will continue to supplement the information delivered from focal points and this approach will be extended. Synergies will be developed with relevant practitioner and expert groups that can provide additional channels of information or inform about responses in specific settings (e.g. low-threshold agencies). Work will also be closely coordinated with planned European Commission activities especially those supporting the action plan. For example, the agency's work will inform and support the planned European survey on availability and effectiveness of interventions.

Monitoring drug laws will remain a key activity but with more attention given to the broader issue of the legal basis for interventions. This area is becoming more important, particularly interventions considered novel across Europe, and also greater interaction between drug treatment and the criminal justice system. New developments, especially in the area of drug treatment, also require the agency to assess ethical considerations and monitor the potential impact on health systems.

Initiatives	**Outcomes**
Annual report on the state of the drugs problem in Europe and related products (Selected issues, Statistical bulletin + targeted communication)	Overall improvement/relevance and quality of information collected Overall improvement of data analysis Data collection matched to EU information needs Better insight on treatment effectiveness and new types of treatment Increased collaboration and dialogue with practice and scientific communities
Further implementation and improvement of Fonte	
Revise data collection instruments according to needs	
Revise and improve quality criteria for reporting tools in this area	
Adaptation of the data collection process to better meet EU action plan needs	
Fine-tune efficiency of reporting mechanisms	
Focused one-off studies and related specific analysis	
Ensure appropriate representation in national and international conferences	
Continue follow-up on research literature on effectiveness of responses	
Follow legal bases of interventions, particularly those considered novel across Europe	
Assess and follow up the impact of the introduction of new types of treatment	

2.2
To develop data sources where they are required, and redefine existing tools, to provide a coherent and systematic set of response indicators that provide a sound basis for policy-relevant analysis

The responses area will be conceptually redefined to provide a coherent and comprehensive strategy for data collection and analysis. The first step in this process will be to take stock of the lessons that have been learned about how tools, methods and information sources can most optimally be developed. Issues to be addressed are: the cost–benefit ratio for data collection approaches, mix of information sources, appropriate reporting intervals, ensuring information has analytical value, and missing elements and gaps. In the second part of this exercise, topics, methods and information sources will be reorganised under the following conceptual areas: (1) Drug policy and legal interventions, (2) Prevention and early intervention, (3) Treatment, harm reduction, health and social interventions, (4) Supply reduction interventions and (5) Drug-related cost and expenditure. These information domains will be elaborated to provide an indicator structured by: (a) a conceptual framework (types of approach and purpose), (b) policy relevance, (c) current availability (including accessibility, access and coverage issues), (d) quality measures and best practice. This will provide the agency with a strategy for the continued development of information tools across the responses area and also a sound basis for scaling-up activities to identify and disseminate quality standards and best practices.

Among the developmental needs identified for the responses area are: social reintegration, psychiatric comorbidity and interventions in prison settings. These are distinct topics of policy importance but also linked to some extent to practice. Across these three areas, current approaches, including tools and sources, will be reviewed and reporting on these topics will be given greater prominence. The areas will be taken forward in the context of the Prison and Treatment CUPs and through ongoing collaboration with external partners (DG SANCO, WHO, UNODC and expert networks). The prison context is particularly important as not only does it provide a setting for service provision it is also an important area for interventions targeting post-release issues, particularly continuation of care, offending and drug overdose prevention. The importance of drug overdose as a significant cause of avoidable mortality in Europe will be reflected through increased attention in monitoring and reporting on responses in this area.

Responses in the areas of supply reduction and drug-related crime reduction are also a priority for development and will benefit from a CUP. Activities will be informed by needs of the EU action plan, (particularly action 67), and the findings of the European Commission's recent study on the topic. To guide activities, an expert group will be established with participation from national experts, focal points and Europol, Eurojust and the European Commission. This group will assist with reporting and also inform discussions on how the concept of best practice in this area might be developed.

Initiatives	Outcomes
Re-organise conceptual areas under four main pillars (conceptual framework, policy relevance, availability and best practice)	Redefined strategy for data collection and analysis Information sources developed and new expert groups established Improvement of monitoring EU responses in the areas of: treatment, prisons, social reintegration, co-morbidity Increased and more fruitful collaboration with relevant external bodies and experts EU reference group on supply reduction established
Develop adequate and appropriate indicators for monitoring responses to drug use in custodial settings	
Continue to develop estimation methods for total number of people in treatment/treatment coverage	
Re-conceptualise resocialisation and social reintegration area	
Develop a better insight into psychiatric co-morbidity	
Set up a CUP on prisons	
Set up a CUP on treatment	
Set up an EU reference group on supply and supply reduction	
Ensure adequate collaboration in the response area with EU bodies, centres of excellence, specialised networks and experts	
Convene and support expert networks and working groups and ad hoc studies and small projects	
Contribute to the development of the decentralised data bank system (DDS)	

2.3 To develop an analytical framework that provides a better understanding of the availability, accessibility and quality of responses to drug use in Europe

Improving the value of the data available on responses will be an important element. Benefit will continue to accrue from the revision already made in this area which is resulting in improved data quality and permitting more comprehensive reporting and better time trend analysis. Ensuring that responses match needs and that they are effective and of high quality are key policy questions and ones reflected in the EU action plan. The EMCDDA's priorities will be to provide the analytical framework to support discussions in this area, to facilitate the development of a consensus on what constitutes good practice and appropriate quality standards and to develop tools for sharing and disseminating learning on effective programming.

Analysis undertaken in this area will include drawing up a synthesis of the findings from intervention and drug policy evaluation studies to provide a clear understanding of the state-of-the-art in each indicator area. The analytical approach will be to audit levels of activity in the context of what is known about effective working practices. Special attention will be paid to the cross-analysis of different data sources. Other important areas for analysis will be the synthesis of data from availability and coverage indicators (especially in the area of drug treatment) and reporting on effective responses to those groups identified as being most at risk. The concept of intervention profiles will be used as a way of presenting and comparing national differences in a more coherent way. More work will be done to assess policy, legal, financial and organisational models and how these influence the responses delivered. Particular attention will be paid to the analysis of quality standards, frameworks and guidelines to identify common

elements and approaches. Attention will also be paid to issues of access to services and services provision for specific disadvantaged or high-priority sub-groups. Analysis will also be more sensitive to the importance of polydrug problems and the fact that drug services are often now delivered as part of a broader substance prevention and health education approach.

More complex analyses require that responses data are elaborated with information on the drug situation and take into account both supply and demand issues. Among the questions that will be explored in more detail are the degree to which responses match estimated needs and to what extent and in which way associations can be found between levels of responses and indicator data on patterns and trends in drug use. Economic modelling of drug issues and the drug market will also continue to be developed, including work to improve estimates of public expenditure.

Initiatives	Outcomes
Further expand cross-analysis between epidemiology and responses indicators	Analytical framework to better inform on interventions and impact in the EU
Develop intervention profiles	Further development of economic analysis
Analyse quality standards, frameworks and guidelines of a different range of interventions	More sensitive monitoring of service provision
Further develop epidemiological and economic modelling of drug issues and drug markets	Better elaboration of service needs and coverage issues
Improve estimates of public expenditure	
Implement a more sensitive monitoring of service provision for high-risk populations, polydrug users, and deliver broader substance prevention and a health education approach	More analysis of specific responses for high-risk or special needs groups

IV.3. Area 3 – More sensitive monitoring of new trends and developments and assessing the risks of new substances

Goal 3

To develop a more responsive system for monitoring new trends in drug use and the appearance of new psychoactive substances and provide increased understanding of emerging and new patterns of drug use to facilitate early responses to potential threats

This goal will be achieved through the following objectives:

- To coordinate the mechanism for the rapid exchange of information and risk assessment on new psychoactive substances through the implementation of the Council decision (2005/387/JHA) on the information exchange, risk assessment and control of new psychoactive substances [3.1]
- To develop a more sensitive approach for detecting new developments and tracking and evaluating emerging trends and threats [3.2]

3.1
To coordinate the mechanism for the rapid exchange of information and risk assessment on new psychoactive substances through the implementation of the Council decision (2005/387/JHA) on the information exchange, risk assessment and control of new psychoactive substances

The implementation of the Council decision (2005/387/JHA) on the information exchange, risk assessment and control of new psychoactive substances will remain an important task for the EMCDDA and its partners in this work, Europol and the EMEA. The decision established an early warning mechanism for the rapid exchange of information on new psychoactive substances. This mechanism can also lead to a risk assessment exercise which is carried out under the auspices of the EMCDDA's Scientific Committee.

The Council decision requires ongoing work to ensure efficient information exchange and the new 'Guidelines for risk assessment of new psychoactive substances' need to be implemented and operationalised. The guidelines provide the methodological and procedural framework for risk assessment and were extensively revised in 2009. The EMCDDA database on new drugs and the drugs profiles series will also continue to be developed. Where possible and appropriate, the work in support of the Council decision will be linked to the agency's broader 'trend spotting' activities.

The development of the Internet as a medium for the distribution of psychoactive substances and the rapid speed at which this market can react and innovate when faced with control measures poses an important challenge to monitoring new trends. Member States need to be better equipped to analyse, identify and exchange information on new substances. The EMCDDA will respond to this challenge by reviewing and strengthening its current approach for facilitating information exchange. A new omnibus survey of the Internet will be launched to provide a regular window on developments in this area. Through networking with forensic science centres, methodological approaches to allow new substances to be more effectively identified and information shared will also be explored. A more proactive approach will also be developed to predicting, identifying and researching new compounds.

Misuse of medicinal products especially when used in combination with illicit drugs is a phenomenon of growing importance. The EMCDDA, in cooperation with the EMEA, will explore how to strengthen the exchange of data available through the Reitox early warning

system (EWS) and the EU pharmacovigilance system. Over the next three years, the scope and nature of information exchange on the misuse of substances with medical value (i.e. medicinal products authorised in the Community) will be broadened and cooperation with the EMEA deepened.

To ensure transparency in the implementation of the decision, the EMCDDA and Europol will continue to report annually to the European Parliament, the Council and the European Commission on the implementation of it. The report takes into account all aspects needed to assess the efficacy and achievements of the system. The EMCDDA will assist the Commission and the Council with the assessment of the Council decision foreseen by the EU drugs action plan (2009–12) (Objective 23, Action 69).

Initiatives	Outcomes
Operate an efficient information exchange mechanism	Continued successful implementation of the Council decision mechanism
Carry out a risk assessment exercise (if needed)	Improvements to and more use made of the database on new drugs
Further develop tools to ensure implementation of the Council decision	Regular information exchange with European forensic science services
Improve and promote the use of the new drugs database	Effective collaboration with Europol and the EMEA
Conceptualise and implement ongoing monitoring of the Internet	
Develop proactive approach of networking with forensic sciences	
Conceptualise information exchange on misuse of medicinal products	
Ensure adequate collaboration in the framework of the exchange mechanism (Parliament, Council and Commission, Europol, EMEA, etc.)	

3.2 To develop a more sensitive approach for detecting new developments and tracking and evaluating emerging trends and threats

The specific tasks to implement the Council decision will be located within a broader, integrated approach to track and evaluate emerging trends and threats. The dynamic nature of drug use where new patterns can grow and spread over time requires an equally dynamic monitoring response with regular review and reassessment built in. A key aspect will be to make more use of the various types of information available including more qualitative information and currently unexploited sources. An approach will be developed that allows collection, monitoring and exchange of information on trends emerging in the use of existing as well as new substances — also with some assessment of their potential to diffuse further and their possible impact. This task will be embarked upon through a pragmatic, horizontal, step-wise approach firstly within the agency and then in close collaboration with national focal points and other technical and professional networks.

As trends develop over time, key indicator data can be used to track their progress and we have already noted the need to improve performance of analysis in this area. However, as new trends

tend to emerge within restricted social groups or geographical settings, more focused local or specialised information sources are also necessary. Information is required from sources that are close to the target population, such as drug prevention and outreach workers, medical professionals, front-line police sources and forensic scientists. Additional information can come from specialist media (both electronic and print) and from advocacy and self-help groups and by taking into account important mega trends that influence lifestyle and youth behaviour.

Providing timely and objective information to policymakers, professionals and interested networks on new trends is a challenge but we recognise the importance of this task given the increasingly dynamic nature of the drug problem. The E-POD case study methodology will be further developed and combined with low-cost data collection, through the utilisation and release of information that is collected routinely within already existing expert networks (Reitox, EWS, ELDD, EDDRA, ESPAD, FESAT, ESSD, Pompidou Group) and through a network of 'trend spotters' in specific areas. Veracity of the information will be established through triangulation of routine indicators, qualitative research and other information sources. Exploratory work will consider the use of currently undeveloped data sources such as drug emergencies. Case studies will also consider specific geographical groups and locations that may be important for the diffusion of new patterns of use. We recognise that predictive data require careful handling and cautious interpretation.

Another important task is to provide policymakers with a rapid synthesis of the information (even when it is partial) on a topic of emerging interest such as the recent concern over 'Spice'. For this reason, developing an appropriate reporting and feedback mechanism is of equal importance to developing appropriate information sources in this area. A new structural mechanism — rapid response team — will be put in place to coordinate a quick turnaround (from problem identification through information collection to dissemination) on issues where reporting is only valuable if it is timely.

Initiatives	Outcomes
Develop an integrated approach for data collection, monitoring and exchange on emerging drug trends	Increased capacity of monitoring and reporting on emerging drug trends at EU level
Further develop E-POD case study methodology	New case studies
Create a complementary network of 'trend spotters'	
Ensure adequate collaboration with relevant EU bodies, networks, experts	Trend-spotting methodology and network
	Assessment made of data sources and potential new sources piloted

IV.4. Area 4 – Improving the capacity of Europe to monitor and evaluate policies and interventions

Goal 4

Support the development of evidence-based actions, standards and guidelines for best practice and develop analytic tools and instruments to facilitate assessment of the impact and effectiveness of drug policy and interventions

This goal will be achieved through the following objectives:

- Monitor and support the development of analytical instruments to better assess the effectiveness and impact of drug policy [4.1]
- Support the development and implementation of good practice, guidelines and quality standards [4.2]

4.1
Monitor and support the development of analytical instruments to better assess the effectiveness and impact of drug policy

The EMCDDA will continue to monitor the evaluation of national drug strategies and action plans and offer methodological support to Member States who need it. A guidelines document will be drawn up to identify conceptual approaches and provide practical steps and methods. Developments in evaluation research – and in particular methods used to assess policy effectiveness and impact – will be monitored and reviewed. Approaches in this area include drug policy indexes, drug policy modelling and economic analysis. The agency will report on approaches used, their benefits and limitations and disseminate resources to facilitate debate.

The EMCDDA will also provide support and data for the annual progress reviews and the final evaluation of the EU drugs action plan (2009–12) and for the final evaluation of the EU drug strategy (2005–12).

The topic of public expenditure will be further followed and developed. Member States will be encouraged and technically supported to increase reporting in this area. Linked to this aspect are the costs of interventions. When the quality of interventions – for example, harm-reduction measures or treatment – is being addressed, the aspect of cost cannot be ignored as it is also part of public expenditure (with varying approaches at national level). Aspects of cost efficiency will increasingly be tackled when interventions are being described. Initially, this will mainly concern treatment and harm-reduction measures.

National laws and regulations will continue to be monitored but with an increasing focus on analyses provided in the form of ELDD legal overviews and reports. This will enable more inter-country comparison case studies. Improving the efficiency of reporting mechanisms and analytical capacity in the legal area will be a developmental task and will include assessing the relative roles of legal correspondents, NFPs and other possible mechanisms.

The existing monitoring of national drug strategies and action plans, legislation and public expenditure will continue but within a more joined-up conceptual and analytical framework. This will include both demand and supply reduction areas. The objective will be to provide a more integrated description of the emphases given to the various interventions and the tools for their implementation. The work will also support the conceptual development of tools to facilitate the monitoring and evaluation of national and EU drug policies.

Initiatives	Outcomes
Continue monitoring evaluation of national drug strategies	Overall improvement of tools for policy evaluation and assessment of impact of drug policy
Conceptualise and develop methods to help monitor and evaluate national and EU policies	Contribution to implementation of the EU action plan and evaluation of EU strategy
Provide adequate methodological support to Member States wishing to evaluate national policies	Regular reporting on policy developments and efforts to evaluate policy impact
Monitor and review methods used to assess policy effectiveness and impact (including indexes)	Analysis/papers based on the cross analysis of response indicators
Provide relevant data to inform progress review of the implementation of the EU action plan	Increased use of the ELDD database
Contribute to the evaluation of the EU drug strategy 2005–12	
Further develop the public expenditure issue (i.e. cost of interventions)	
Increase use and analysis of ELDD data set	
Develop responses indicator, cross analysis (e.g. strategies and policy, laws and public expenditure)	
Ensure adequate and appropriate collaboration with relevant Commission services	

4.2 Support the development and implementation of good practice, guidelines and quality standards

The importance of supporting the development of best practice, guidelines and quality standards is set out in the EU action plan and in the EMCDDA regulation. To ensure effective work, the EMCDDA's activities will be synchronised with those planned by the Commission and sensitive to the need to benefit from the expertise and experiences of Member States. When developing guidelines and quality standards, the agency has to be aware of issues of subsidiarity and the need to build consensus. In this respect, the EMCDDA can play a useful role as a platform for knowledge exchange and for developing agreement on core aspects of a European framework for facilitating the provision of higher quality and more effective interventions. A European approach adds value because it avoids duplication of effort and it allows common benefit to accrue from work already done in this area across the EU.

The approach will build on existing work to identify and disseminate models of good practice. This involves auditing existing quality standards and good practice guidelines as well as examples of evaluated programmes. From this information common elements and key features can be identified as well as examples of good practice. An expert working group will be established to ensure that activities are grounded in the experiences of Member States. There will be close collaboration with the European Commission to facilitate the development of minimum quality standards and benchmarks for prevention, treatment, harm reduction and rehabilitation programmes. Particular attention will be given to how European level approaches can contribute to the work done nationally and to ensuring that the scientific evidence base is appropriately taken into consideration. Initial priority will be given to the areas of drug prevention and substitution treatment.

The EMCDDA's Best practice portal was a significant development in the 2007–09 work programme and it will continue to be expanded. In order to collect relevant research findings, scientific publications will be reviewed regularly from the existing databases as well as from the references provided by the national focal points. Input from the Member States will contribute especially to selecting examples of good practice provided through EDDRA and results from the ongoing guidelines project will be fed into the process. Other important sources of information, such as the systematic reviews provided by the Cochrane collaboration, will also be integrated in the portal, and efforts will concentrate on developing adequate collaboration with relevant experts and networks.

Beyond the overall availability and quality of interventions, there has to be a focus on specific target groups. For example, high-risk groups such as early drug users and school leavers and respective interventions such as indicated prevention. Taking into account the secondary consequences of drug use, the provision of antiretroviral treatment, social rehabilitation measures, psychiatric or psychotherapeutic treatment of mental health co-morbidity and treatment of somatic effects of drug use (heart, etc.) will be followed in more depth.

Initiatives	Outcomes
Further develop the Best practice portal with specific attention to high-risk groups	Better identification of good practice, guidelines and quality standards
Set up an expert group on quality and best practices	
Set up a process for the development of guidelines and standards	Best practice portal regularly updated and more relevant
Ensure adequate and appropriate collaboration with relevant EU bodies, networks, experts	Expert group established
	Consultation exercises undertaken

V

Section V

Framework for supporting the achievement of results

V.1. Relying on effective governance and networks

Statutory bodies

As the governing and supervisory authority of the EMCDDA, the Management Board plays a key role in the success of the proposed 2010–12 work programme, in particular with regard to adopting strategic decisions on the annual work plan and budget. The top-down strategic input and added value provided by the Board will contribute to effective achievement of the goals and objectives set. Further improvement in the processes and information provided for taking these decisions should enhance its contribution.

The EMCDDA's Scientific Committee will continue to be regularly involved in the review of the Annual report package, the production of Scientific monographs and in scientific conferences convened by the agency. Additionally, the agency will benefit from the expertise of the members of the Scientific Committee to assure the scientific quality and standards of its products, catalyse partnerships within the networks of their respective areas of expertise and participation in technical advisory and expert meetings.

Reitox network

The national focal points of the Reitox network will continue to play a pre-eminent role in supporting the EMCDDA to achieve its task of reporting on drug use in Europe. They are key partners in shaping the technical development of the agency's approach and provide valuable feedback and guidance on the analysis we produce. The focal points are the main vehicle for coordinating the implementation of data collection according to European standards within Member States, making the EMCDDA's work visible at national level. They perform an important role in training and knowledge exchange within the network itself and in support of European funded projects with third parties. Their role as a national reference point for information on drugs at national level should be made more visible so as to provide added value at national level of their contribution to the European monitoring system on drugs.

Strengthening the focal point network and further developing its role are therefore important components of the new work programme. Over the next three-year period, a Reitox development strategy will be defined and implemented, the main aims of which will be: to ensure sustainability of the network; to encourage horizontal cooperation between focal points; and to secure and consolidate the funding of national monitoring systems, including the NFPs. Since its review in 2007, the Reitox Academy programme has been providing a strong link between support needed by focal points and the substantive needs of reporting, and also targeting needs for further capacity development in new or less developed areas of monitoring. We will ensure in our information technology developments that more attention is paid to national focal point requirements for data submission and processing. As noted earlier, encouraging networking and knowledge exchange between focal points will become a more explicit objective as will exploring how national reporting by focal points can be enhanced.

The capacity of national focal points is limited in terms of amount of work possible and also with regard to competence on some topics. For example, depending on the hosting organisation, it is often not easy for them to provide information on best practice or to support the development of standards in monitoring supply and supply reduction. For this reason, complementary networks have to be further developed. The NFPs will be involved in the selection of experts for such networks and they will be kept informed about ongoing work.

EU institutions and agencies

The EU drugs strategy and its accompanying action plans are key tools for coordinating actions at European level. The agency has an important role in supporting these activities, both as an information provider and a source of technical expertise. On a less formal basis, on request and if we are able, we provide technical support and input to the work of the EU institutions. We will better organise ourselves to make it easier to deliver this kind of support in the future. More generally, a strong and collaborative relationship now exists between our parent Directorate General, the DG for Justice, Freedom and Security, as well as other DGs in the European Commission, and the EMCDDA and this will continue to deliver benefits by ensuring that future activities conducted in common areas are complementary and mutually supportive.

On a more horizontal level, the EMCDDA cooperates closely with a number of sister agencies and plays an active role in the forum for agency coordination. Memoranda of Understanding exist with Europol and a cooperation agreement with the ECDC which provide a framework for activities and are accompanied by time-limited work plans.

The work plan with Europol was reviewed and updated in 2009 and forms a sound basis for strengthened collaboration. As well as joint responsibilities in support of the Council decision on new psychoactive substances, the two agencies will cooperate on developing and improving supply-side indicators and launching a set of joint publications on the drug market. We will also continue to provide specialist input to Europol's OCTA report and receive information from Europol in our Annual report.

The ECDC and the EMCDDA have a common interest in the effective and efficient monitoring of injecting drug use and its relationship with blood-borne diseases. The close cooperation which exists between the agencies is supported by a cooperation agreement which provides a framework for collaboration. The EMCDDA will continue in its role as a specialist information agency focusing on the drug-related aspects of infectious diseases transmission, particularly the epidemiology of drug injection, and in doing so actively support the work of the ECDC to achieve its broader task of coordinating the surveillance of infectious diseases in Europe.

The EMEA has an important role to play with regard to the Council decision on new psychoactive substances. Moreover, the growing importance of the misuse, diversion and even illegal production and trafficking of medicinal products, including those intended to treat drug dependence, are becoming important issues for discussion and information sharing between the two agencies.

In the next few years, the EMCDDA will further explore areas for possible cooperation with other agencies, such as Eurojust, the European Food Safety Agency (EFSA) and the Fundamental Rights Agency (FRA).

International partners

The EMCDDA will continue to pursue cooperation with relevant international organisations, when this is of value and where activities are in line with those envisaged within its regulation. The International cooperation strategy sets the framework for these activities. Such collaboration allows the international agenda to be informed by technical developments occurring within Europe and is an additional source of information and expertise for the agency.

As the agency's profile has grown, the number of requests to participate in international fora and meetings has increased and as resources are limited, priority will be given to activities of strategic importance. In practice, this means that the EMCDDA will not participate in national events organised outside the EU unless a strong rationale exists for having the agency present. Collaboration is, however, actively pursued with international bodies working in the drugs field in those areas which are mutually beneficial or where it is important to have Europe represented on technical issues. For example, cooperation with the United Nations Office on Drugs and Crime (UNODC) is well established and guided by a Memorandum of Understanding and work plan. The EMCDDA is likely to provide technical input or comment on the proposals being developed within the UN system to rationalise global reporting practice. The two organisations cooperate on building consensus on standards which is important to avoid unnecessary duplication of effort, as European countries also provide data to the UN body as part of their obligations to the Drug Control Conventions.

The agency will also continue its cooperation with the World Health Organization (WHO) as this is important for ongoing work on prisons, modelling infectious diseases and is likely to be useful for planned activities in the area of guidelines and standard setting. The existing collaboration with CICAD and Interpol will also be further developed. Cooperation with the Pompidou Group of the Council of Europe will be further explored especially in the field of drugs research, support provided to the ESPAD survey and contribution to the meetings of the Pompidou Group's platforms.

We also participate as an observer in some international meetings that are relevant to the agency's mandate, notably the World Customs Organization (WCO), the Council of Europe's Monitoring Group of the Anti-Doping Convention, and WHO Medicines Committee. The established practice of inviting experts from non-EU countries to observe EMCDDA technical meetings will continue when this has no significant cost implications.

Third countries and technical assistance

As defined by the International cooperation strategy and the agency's recast regulation (Articles 2, 20 and 21), cooperation activities with third countries are developed with the aim of consolidating the EMCDDA's position as a centre of excellence for providing information on the drugs situation and as the key European reference point for developing a better understanding of the evolution of the drugs phenomenon worldwide.

Some cooperation activities also emanate from EU objectives where assistance programmes with third countries or regions include the need to improve a region/country's system of monitoring and data collection on illicit drugs via the transfer of know-how and best practice from the EU.

For the period 2010–12, our activities in this area will aim:

- to consolidate the preparation of candidate countries for their full participation in the EMCDDA;
- to deepen the cooperation established with the potential candidate countries of the Western Balkans and to build the framework within which these countries will start preparing for future participation in the agency's work;
- to pave the way for future cooperation with European Neighbourhood countries ([2]) and the partnership with Russia, with a priority given to countries with which the EU has specific agreements for encouraging cooperation in the field of justice, freedom and security, including drugs;
- to provide transfer of know-how and best practice in drug monitoring to other third countries (and where appropriate, cooperation with regional groups, subject to the availability of Community external funding sources).

Particular attention will be paid to ensuring that, as much as possible, data and information produced within the framework of these activities will feed the analysis and understanding of the European situation in a global context.

V.2. Pursuing excellence in management, administration and support to core business

Goal 5

Achieve and maintain organisational excellence for best delivery of core results through effective leadership, sound resources management and service-oriented support

This goal will be achieved through the following objectives:

- To further develop leadership and management by building on best practice [5.1]
- To ensure sound management of financial resources and assets, enhancing effectiveness and efficiency [5.2]
- To ensure best use is made of the EMCDDA's workforce and operating capacity [5.3]
- To ensure successful and efficient delivery of results through quality, cost-effective and timely ICT support services, infrastructure and solutions [5.4]

5.1 To further develop leadership and management by building on best practice

One of the major challenges will be to ensure that the objectives set in this three-year strategy are attained through proper planning, implementation and monitoring processes. For this purpose, existing processes will be streamlined and developed in accordance with the principles and methods for activity-based management and budgeting (ABM/ABB) in a more results-oriented approach.

Focus will be placed on improving the working structure, organisation and methods to enhance coordination of related activities, promote transversal work in priority areas and ensure continuous efficient and effective management and leadership. This will include: further developing ICT applications for human resources and financial management, solutions for business continuity and more best-practice based and service-oriented administrative support services.

([2]) Algeria, Armenia, Azerbaijan, Belarus, Egypt, Georgia, Israel, Jordan, Lebanon, Libya, Moldova, Morocco, Occupied Palestinian Territory, Syria, Tunisia, Ukraine.

Actions/outputs:
- Support to the Management Board for strategic decision making on the annual work programmes, budgets and their execution
- Development of ABB/ABM and results-oriented planning, management and reporting processes
- Organisational and managerial solutions that improve coordination, effectiveness, efficiency and transversal/cross-cutting approach

5.2
To ensure sound management of financial resources and assets, enhancing effectiveness and efficiency

Efficient budgetary planning and management continue to be essential in order to make best use of financial resources in line with principles of economy, effectiveness, efficiency and transparency. Therefore, it will remain important to make full use of the opportunities and tools provided by the new financial and accounting system ABAC/SAP, in particular for developing ABM processes. It will also be important to exploit the potential efficiency gains resulting from the move to the new premises.

Furthermore, we will continue to improve our tendering and contracting processes for efficient functioning and implementation of our activities. Further improvements to processes and tools for managing the EMCDDA's co-financing to the Reitox network will also be introduced.

Actions/outputs:
- Efficient and effective budget planning and implementation
- Full use of management and reporting functions of the ABAC/SAP system
- Effective procurement and contracting processes
- Improved processes for managing Reitox grants

5.3
To ensure best use is made of the EMCDDA's workforce and operating capacity

The EMCDDA's staff policy plan for 2009–11 does not anticipate a significant increase in the number of staff. In this context, optimising the use of capacity available internally will be of utmost importance (without prejudicing the possible need for supplementary recruitment if justified). Monitoring needs on an ongoing basis will enable the agency to redeploy its internal working capacity as required to meet the objectives set for 2010–12. Resources may also be reallocated for outsourcing specific activities where external expertise is considered essential and more efficient.

In terms of human resources management, enhancing the scientific excellence and professional capacities of EMCDDA staff and a timely response to merging competency gaps will continue to be a priority. Training actions will be further developed, as well as initiatives aimed to encourage achievement of the highest scientific standards by agency staff. Substantial effort will also be devoted to optimising processes and tools for human resources administration and management, in particular through adopting appropriate ICT solutions to reduce unnecessary administrative workload.

Finally, installation in the EMCDDA's new premises and the new infrastructure will provide improved working conditions in terms of safety, environmental and organisational health standards.

All these activities will enable the EMCDDA to use its resources efficiently and will secure its capacity to attract and retain highly qualified and motivated staff.

Actions/outputs:
- screening/monitoring of the needs for optimal use of available capacity and definition of necessary measures for improvement
- initiatives to enhance scientific excellence and recognition of EMCDDA staff
- streamlined processes for human resources management
- improved working conditions and infrastructures

5.4
To ensure successful and efficient delivery of results through quality, cost-effective and timely ICT support services, infrastructure and solutions

The agency depends on an ICT infrastructure in order to achieve its goals — an ICT infrastructure that is operational, evolves strategically and exploits new technical options to bring added value in terms of efficiency gains. Programmes and projects are defined and implemented on the basis of process, functional and requirements analysis with teams from across the EMCDDA.

Over the next three years, one focus for ICT will be the application of standards to facilitate strategic and structured evolution of the area amidst increasingly complex and varied tasks. Project management standards will be promoted for ICT-related projects and the Information Technology Infrastructure Library (ITIL) — a set of concepts and policies for managing information technology infrastructure, development and operations — will be applied.

The development of the agency's drug data collection system in the form of Fonte proved to be one of the central elements of ICT work during the 2007–09 work programme and will continue to be the common denominator for several activities. In line with common practice in software development, we will continue to maintain and invest in Fonte and improve its user friendliness. We will also ensure the necessary architectural development that comes with changing requirements and an evolving data handling lifecycle that reflects software requirements for users from within the EMCDDA, as well as external partners.

As Fonte is focused on and optimised for data input and validation, a parallel project prepared the ground for an analytical drugs database for data access after verification. In the next three years, access to the validated data will be consolidated and improved for in-house users, but a part may also be opened up for partners in the Member States and researchers — the extent will be established on insight gained from ongoing experience. The various elements of the projects to do with drugs data collection and analysis will be aligned, consolidated and developed.

Actions/outputs:
- Application of ICT standards, including project management standards, ITIL, data structures, business processes and workflows
- Maintenance and improvement of Fonte's functionality and user friendliness
- Ensured continuity, efficiency and a high level of security in all IT-supported business operations

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About the EMCDDA

The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is one of the European Union's decentralised agencies. Established in 1993 and based in Lisbon, it is the central source of comprehensive information on drugs and drug addiction in Europe.

The EMCDDA collects, analyses and disseminates factual, objective, reliable and comparable information on drugs and drug addiction. In doing so, it provides its audiences with an evidence-based picture of the drug phenomenon at European level.

The Centre's publications are a prime source of information for a wide range of audiences including policymakers and their advisers, professionals and researchers working in the field of drugs, and, more broadly, the media and general public.