



NEWS RELEASE from the EU drugs agency in Lisbon

BROADER ROLE FOR EU DRUGS AGENCY

New mission statement helps Centre respond to new challenges in drugs field

(16.1.2007, LISBON) As of today, the **EU drugs agency (EMCDDA)** will play a more active role in monitoring new drug use patterns and emerging trends, following the adoption by the European Parliament and the Council of the EU of a new mission statement for the agency. The revision of the original regulation was launched at the initiative of the European Commission in August 2005.

The revised regulation ⁽¹⁾, which updates and replaces the one founding the agency in 1993 ⁽²⁾, was signed in Strasbourg on 12 December 2006 following a co-decision procedure ⁽³⁾. It enters into force today, 20 days after its publication in the *Official Journal of the European Union* on 27 December.

While reaffirming the **EMCDDA's** main purpose as to provide EU Member States with 'factual, objective, reliable and comparable information at European level concerning drugs and drug addiction and their consequences', ⁽⁴⁾ the new document broadens the scope of the Centre's tasks.

Responding to new challenges in the drugs field which have appeared since 1993, the new document specifically allows the agency to collect, register and analyse information on 'emerging trends in polydrug use' — the simultaneous use of more than one drug — including the combined use of licit and illicit psychoactive substances.

'This is a timely development when multiple drug use is becoming ever more visible within the European drug culture', says **EMCDDA Director Wolfgang Götz** ⁽⁵⁾. 'The new regulation is an important instrument which launches us on a new path and enables us to provide the full picture of today's drug problem. The new EMCDDA three-year work programme for 2007–2009 has been drafted in the light of this new mission statement'.

Particular reference is made in the new document to providing information on best practice in the EU Member States and facilitating exchange of such practice between them. In reality, this will include the sharing of experience in areas such as drug prevention and reducing supply and drug-related harm. The **EMCDDA** is also called on to develop tools and instruments to help Member States and the European Commission monitor and evaluate national and EU drug policies respectively.

Another key aspect of the new remit is closer cooperation with the law enforcement body, Europol, to attain maximum efficiency in monitoring the drugs problem. Among others, the two bodies will continue to work side by side in monitoring new psychoactive substances appearing on the illicit European drug market under a Council Decision adopted in 2005 ⁽⁶⁾.

At the request of the European Commission and with approval of its Management Board, the **EMCDDA** may also be called on to transfer its know-how to certain non-EU countries such as official candidates for EU accession and countries in the Western Balkans. This is likely to entail creating and reinforcing links with the European Information Network on Drugs and Drug Addiction (Reitox) and assisting in the building and strengthening of national drug observatories (national focal points).

The role of the Reitox network of national focal points, from which the Centre draws the bulk of its data, is more clearly defined in the new document. In future, each focal point will collect and analyse national information on drugs and drug addiction, drug policies and solutions, drawing on experience from various sectors such as health, justice and law enforcement.

The Centre's own administration is also being overhauled, with the Management Board (on which all Member States and other stakeholders are represented) to be assisted by a new six-member Executive Committee to prepare the decisions of the Board and to advise the Director. The existing Scientific Committee — currently made up of Member States' nominees — will be slimmed down in the future to a maximum of 15 members chosen through a public selection process based on scientific excellence and independence. Among subjects on which the Scientific Committee will continue to be consulted is the framing of the Centre's three-year and annual work programmes.

Notes:

(¹) See Regulation (EC) No 1920/2006 of the European Parliament and of the Council (12 December 2006) on the European Monitoring Centre for Drugs and Drug Addiction (recast).

http://eur-lex.europa.eu/LexUriServ/site/en/oj/2006/l_376/l_37620061227en00010013.pdf

<http://eur-lex.europa.eu/JOHtml.do?uri=OJ:L:2006:376:SOM:EN:HTML>

(²) Council regulation EEC No 302/93 of 8 February 1993 on the establishment of a European Monitoring Centre for Drugs and Drug Addiction.

(³) Co-decision is based on the principle of parity between Parliament and Council, so that neither may adopt legislation without the other's assent. It is central to EU decision-making and currently covers 43 areas, including statistics, customs cooperation and incentives in the field of public health http://ec.europa.eu/codecision/index_en.htm.

(⁴) The 1993 founding regulation referred to 'objective, reliable and comparable information', the word 'factual' has been added to this new version.

(⁵) See 'Message from the EMCDDA Director', 2006 news releases, at <http://www.emcdda.europa.eu/?nnodeid=971>. A special focus on European drug policies published alongside the *2006 Annual report* also showed that over two-thirds of the countries surveyed now either cite both types of substance explicitly in their drug policy documents or include links to licit substances in the context of prevention and treatment. See *Selected issues* at <http://issues06.emcdda.europa.eu>.

(⁶) Council Decision 2005/387/JHA of 10 May 2005 on the information exchange, risk assessment and control of new psychoactive substances (*Official Journal*, L 127, 20.5.2005). See also <http://www.emcdda.europa.eu/?nnodeID=17869>.