European Monitoring Centre
for Drugs and Drug Addiction

EN

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# General Report of Activities

Key achievements and governance:
a year in review

2015

European Monitoring Centre
for Drugs and Drug Addiction

# General Report of Activities

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

2015

## Legal notice



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European Monitoring Centre
for Drugs and Drug Addiction

Praça Europa 1, Cais do Sodré, 1249-289 Lisbon, Portugal
Tel. +351 211210200
info@emcdda.europa.eu | www.emcdda.europa.eu
twitter.com/emcdda | facebook.com/emcdda

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(*) Available online at: emcdda.europa.eu/publications/gra/2015

2015

## Foreword

Further to my election as Chair of the Management Board in December 2015, I have the honour to introduce the 21st *General Report of Activities* of the European Monitoring Centre for Drugs and Drug Addiction, which provides an account of the EMCDDA's activities and achievements in 2015.

First of all let me pay tribute to my predecessor, João Goulão, who steered the Management Board over the past six years with a constructive approach by continuously seeking to build consensus for decision-making.

The Management Board also selected a new Director in September. As a result, and following his public hearing at the European Parliament later that month, Alexis Goosdeel was formally appointed by the Management Board in October for a five-year mandate and took up his position on 1 January 2016. I look forward to our fruitful collaboration and to maintaining and strengthening the relation of trust between the Management Board and the EMCDDA Director.

My special thanks go to Wolfgang Götz, who completed two mandates as Director of the agency on 31 December 2015. Mr Götz's lead turned the EMCDDA into a mature and internationally recognised agency, dedicated to scientific excellence and efficiency. I am particularly pleased that Mr Götz has been nominated as European Parliament representative on the Management Board and will continue to enrich our work with his experience.

In 2015 the EMCDDA commemorated 20 years of monitoring the drugs problem in Europe. Over the last two decades, much has changed in the extent and nature of the phenomenon and the centre's work has developed to keep pace with this complexity. As this report of activities for 2015 shows, the agency is clearly fulfilling its mission to communicate solid evidence and inform policy in the drugs field in Europe. Building its analyses on scientific evidence and reliable data provided by the European Information Network on Drugs and Drug Addiction (Reitox), consisting of one focal point in each Member State, Norway and Turkey, the EMCDDA plays a key role in the understanding of the drug phenomenon. The agency also makes an essential contribution to strengthening the capacity of EU and non-EU countries to monitor the drug situation.

The year 2015 is the last of the EMCDDA's three-year strategy and work programme for 2013–15. At the same time 2015 was a crucial year for shaping the future of the EMCDDA as it saw the adoption by the Management Board of the agency's new strategy and work

programme for 2016–18, and the commitment by the EMCDDA's Director-elect to develop and implement a long-term strategy.

I would like to express my gratitude to all colleagues on the Management Board for their cooperation, as well as to the Chair and members of the Scientific Committee for their work and commitment.

My very special thanks also go to all the staff of the agency as well as the Heads of the Reitox national focal points and their staff for their dedication and expertise, which helped us to fulfil our legal obligations and achieve a very good level of implementation of the work programme despite the challenges encountered during the year.

**Laura d'Arrigo**
Chair of the EMCDDA Management Board

## Introduction

The year 2015 was outstanding for the agency. It marked a historical milestone — the commemoration of 20 years of European drug monitoring. It also saw the completion of the successful mandates of the Chair of the Management Board, João Goulão, and of the Director, Wolfgang Götz, whom I have the privilege to succeed, and it closed the three-year strategic cycle that ran under the umbrella of the European Monitoring Centre for Drugs and Drug Addiction's (EMCDDA's) 2013–15 strategy and work programme.

The agency could not be prouder of its accomplishments at the end of these three fruitful years. The EMCDDA consolidated its monitoring system in close partnership with its data providers, especially the European Information Network on Drugs and Drug Addiction (Reitox) national focal points (NFPs). Keeping pace with rapid developments, the agency became stronger with regard to detecting new trends and assessing the threats posed by drugs to the health and security of Europeans. A striking example of this is the implementation of the European Union (EU) Early Warning System (EWS) on new drugs, managed by the agency in cooperation with its partners, which led to the detection of almost 300 new psychoactive substances (NPS) between 2013 and 2015 (i.e. almost half of the total number of NPS that have been monitored by the agency since the EU EWS was set up in 1997), and eight NPS were risk assessed (i.e. 40 % of the total number of NPS ever risk assessed). This is a good indication of how our work has developed in this area. Threat assessment was also carried out in the area of harm reduction, in response to concerns regarding the rise in human immunodeficiency virus (HIV) infection among injecting drug users in some Member States.

Strategic analysis was significantly enhanced, as work to produce the second edition of the *EU Drug Markets Report* (EDMR), prepared jointly with Europol and first published in 2013, was carried out by these two agencies in 2015. The global perspective of the drug phenomenon also became a more important dimension of our analyses. The agency worked with its global partners and closely followed developments in other regions, including the United States and Latin America; technical assistance was provided to 14 third countries, candidate and potential candidate countries, and neighbouring countries, which are a priority for the EU. Several analyses based on data from the Western Balkans were performed and disseminated in this context.

The communication of our findings became timelier, and more interactive means and tools were developed and used. In 2013, the *European Drug Report* (EDR) package replaced the former annual reports and new features have been added to this multimedia package ever since. Since its launch, great importance has been attached to the EDR, both at EU level — for instance, on two occasions (in 2013 and 2015), the report was

released in the presence of the Commissioners for Home Affairs — and at the level of Member States, as 26 national launches were also organised.

In addition to the annual EDR and the first EDMR, more than 100 other scientific or institutional outputs were released in 2013–15, and, during the same period, almost 80 scientific articles, co-authored by EMCDDA staff, were published in renowned journals.

A key event for scientists, policymakers and professionals alike (more than 600 participants in total) was the 2015 Lisbon Addictions Conference. The EMCDDA was the main contributor to this event, the first one of its kind ever organised.

Finally, the 2013–15 period was marked by the revision of the national reporting package. In a joint effort, the EMCDDA and its Reitox partners succeeded in developing and starting to implement the changes necessary for the functioning of a more efficient national reporting package.

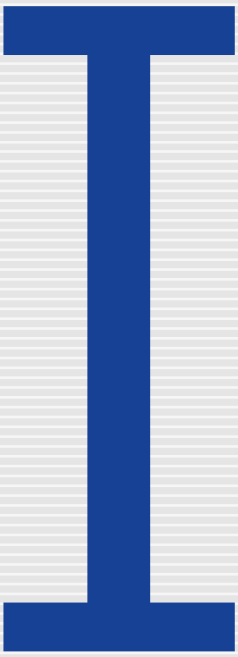
These outstanding achievements have paved a solid ground for the next stage in the life of the EMCDDA; and at the beginning of my mandate as Director, I could not be more confident that the agency will now rise to its future challenges.

I know that I can rely on a committed team of professionals, my dedicated staff, on the valuable guidance of our Management Board and of our Scientific Committee, and on the support of all our partners, in particular the Reitox NFPs. I would like to thank them all for their ongoing efforts, which have made and will make the past and future achievements of the EMCDDA possible.

I could not sign my first *General Report of Activities* as Director without paying tribute to my predecessor, Wolfgang Götz. My gratitude goes to Wolfgang, who has steered the EMCDDA successfully for the last 11 years and had a critical role in building its reputation as the reference point on drugs in Europe.

The 'Observatory of the Future' that I am committed to build throughout the course of my mandate will benefit strongly from the solid foundation laid by his work.

**Alexis Goosdeel**
Director



# PART I

# Report of activities: key achievements and governance

# 1

# CHAPTER 1
# Management Board´s analysis and assessment

The Management Board has analysed and assessed the Authorising Officer's (Director's) *General Report of Activities* for the financial year 2015.

The Management Board appreciates the results achieved by the Centre and notes in particular the following:

## On the content of the report

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

- Data collection, analysis and quality assurance: in June, the EMCDDA presented its annual overview of the European drug situation — the *European Drug Report* (EDR), together with a multimedia package. In terms of the data collection tools and processes, the main development during the year was the entry into force of the revised Reitox national reporting package. The EMCDDA internal statistics code of practice was published.
- Key epidemiological indicators: the third triennial assessment of the implementation of the key epidemiological indicators in the EU Member States, Norway and Turkey was carried out in close collaboration with the focal points. The Swedish Government addressed a formal request to the EMCDDA to assume full coordination of the European School Survey Project on Alcohol and Other Drugs (ESPAD) in the future. In the meantime, the activities agreed upon for 2015 were implemented. The EMCDDA published several analyses based on the results of the key epidemiological indicators monitoring work and annual European expert meetings. An EMCDDA technical conference was held in Lisbon on 21–22 September to understand the dynamics, nature and scale of drug use in Europe, including lessons learnt and challenges for the future, in commemoration of the agency's 20 years of monitoring the drug situation in Europe.
- Demand reduction responses: some new analyses in the prevention field were released and new evidence on environmental strategies was produced. In the area of treatment, harm reduction and social reintegration, three new publications were released on relevant topics. The Best practice portal continued to be improved and new modules were added. In October the EMCDDA organised, for the first time, a meeting dedicated to the topic of health responses to new psychoactive substances (NPS). The agency continued to work with its partners at European and international levels in the field of harm reduction and provided its expertise in the prevention of infectious diseases amongst people who inject drugs, with a main focus on HIV and the hepatitis C virus (HCV).
- Supply and supply reduction interventions: the EMCDDA made important progress in the development of the reporting tools. Jointly with Europol, the agency also drafted the second edition of the *EU Drug Markets Report*, to be released in 2016. The annual

meeting of the reference group on drug supply was organised. Finally, the EMCDDA fulfilled the tasks assigned to it in the operational action plans within the EMPACT framework developed under the new EU Policy Cycle for organised and serious international crime 2013–17 within the Council of the EU's Standing Committee on Operational Cooperation on Internal Security (COSI).

- New trends and developments: 98 NPS were formally notified in 2015. The EMCDDA–Europol 2014 Annual Report on the implementation of Council Decision 2005/387/JHA was submitted to the EU institution stakeholders and published. EMCDDA–Europol joint reports on two NPS, α-PVP and acetylfentanyl, were produced, sent to the European Commission, the Council and the European Medicines Agency, and published. A risk assessment exercise was carried out by the EMCDDA's Extended Scientific Committee on α-PVP.
- Drug policy analysis: the EMCDDA contributed to the biennial progress review of the European Commission as required by the EU action plan on drugs 2013–16. New policy analyses were published. The annual meeting of the legal correspondents of the European Legal Database on Drugs was organised in Lisbon in September.
- Scientific coordination and content support: a top priority was to ensure the quality and coherence of the agency's information collection and reporting system in collaboration with the NFPs. The EMCDDA co-organised the first European conference on addictive behaviours and dependencies — Lisbon Addictions 2015 — on 23–25 September. The agency continued its work on monitoring new trends and misuse of medicines.

In 2015 the EMCDDA continued to collaborate with key external partners, such as the EU Member States, the EU institutions, other EU agencies and international organisations.

In terms of international cooperation, cooperation with candidate and potential candidate countries continued in 2015 within the framework of the new Instrument for Pre-Accession Assistance (IPA 5) technical assistance project, which was awarded to the EMCDDA in June. The EMCDDA published three publications based on its work within the IPA projects in the Western Balkan region. In 2015 the EMCDDA continued the implementation of the first European Neighbourhood Policy technical assistance project, which started in 2014.

The Director signed a Memorandum of Understanding (MoU) between the EMCDDA and the National Security Council of Armenia in Yerevan in July and another with the Georgian Ministry of Justice in Tbilisi in November.

In the area of communicating the EMCDDA's findings, the Centre's product range continued to be adapted to reflect the priority towards online dissemination and to seek the most cost-efficient solution. New dissemination options were explored and social media and targeted electronic updates were used throughout the year in order to enhance communication with stakeholders and target groups. Some 45 scientific and institutional publications were released by the EMCDDA (including a few joint products with our partners) and 27 scientific articles authored or co-authored by EMCDDA staff were published in prestigious journals. EMCDDA staff coordinated or organised 50 visits by external parties, involving 468 visitors.

The agency made significant efforts to further improve its operational efficiency, and once again achieved an outstanding budget execution rate at the end of the year.

## On the structure of the report

The Management Board welcomes the 2015 *General Report of Activities*, which reflects the agency's achievements as set out in the work programme adopted by the Board. The document, which mirrors the structure of the 2015 work programme, presents the most important achievements for each of the 12 main areas of work. A more detailed presentation of the implementation of the 2015 work programme, by objectives, activities and expected outputs/results, is presented in Annex 5.

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

# 2

# CHAPTER 2
# Executive summary

This report presents the implementation of the activities of the European Monitoring Centre for Drugs and Drug Addiction's (EMCDDA's) work programme for 2015 ([1]). The year 2015 was the final year of the EMCDDA's three-year strategy and work programme for 2013–15. It therefore closed a multi-annual planning cycle in the life of the EMCDDA, during which important projects that were designed to contribute to the triennial key expected results were completed. At the same time, 2015 was a crucial year for shaping the future of the EMCDDA, as it saw the adoption, by the Management Board, of the agency's new strategy and work programme for 2016–18.

In 2015, the agency made further progress towards its mission to provide a solid evidence base to support the drug debate. Through its outputs, its direct technical support and its knowledge dissemination activities, the agency offered policymakers the data and analysis required to draw up informed drug laws and strategies; it also helped professionals and practitioners working in the field to pinpoint best practice and new areas of research.

## EMCDDA publications

The most tangible results of our work during a year are our publications. In 2015, 45 scientific and institutional publications were released by the EMCDDA (including a few publications that were produced jointly with our partners), and 27 scientific articles authored or co-authored by EMCDDA staff were published in prestigious journals. The complete list of publications is presented in Annex 3 of this report and brief overviews can be found in the different 'Main Area' sections of this report.

On 4 June 2015, the EMCDDA launched its flagship publication, the *European Drug Report 2015: Trends and Developments*, and its associated multimedia package, at a press conference in Lisbon, Portugal, in the presence of Dimitris Avramopoulos, European Commissioner for Migration, Home Affairs and Citizenship. The Commissioner expressed his concerns and called for a unified response by the European Union (EU) to the increasingly dynamic drug phenomenon.

The year 2015 also saw the development of an impressive list of thematic products, including in-depth reviews on mental health disorders associated with drug use, the prevention of addictive behaviours and the treatment of cannabis-related disorders in Europe. These were complemented by updates on drug-related infectious diseases in Europe, and analyses of mortality among drug users and the effectiveness of naloxone take-home programmes in preventing fatal overdoses.

([1]) Available at: emcdda.europa.eu/publications/work-programmes/2015

Further evidence on the effectiveness of interventions, including new modules on new psychoactive substances (NPS), the misuse of prescribed medicines and interventions in prison, were provided by the EMCDDA's interactive 'Best practice portal' (BPP).

Targeting mainly policymakers, the EMCDDA published a review on alternatives to punishment for drug-using offenders and an overview of drug policies in different cities in Europe.

A much improved understanding of current drug markets will be provided by the second edition of the strategic *EU Drug Markets Report* (EDMR), the launch of which will take place in April 2016. The EMCDDA and Europol (European Police Office) jointly carried out intensive work in 2015 to produce this major output. Collaboration and consultation with other partners, including the European Commission through DG HOME, the EMCDDA's partner DG, and Member States, took place throughout the year, and other different contributions have also been factored into this new flagship report.

The EMCDDA also published four outputs related to the implementation of Council Decision 2005/387/JHA on NPS, and produced a further two reports that were submitted in accordance with this Council decision; these will be published in early 2016. This decision states that the agency has a central role in the implementation of the EU Early Warning System (EWS) on new psychoactive substances, together with the European Commission, Europol and Europol National Units, the European Medicines Agency (EMA) and the European Information Network on Drugs and Drug Addiction (Reitox) (see also below and Main Area 5).

### Knowledge exchange

Scientific and technical meetings and conferences, training and capacity-building activities were other means that were used to disseminate our knowledge in 2015.

During 2015, the EMCDDA contributed its expertise to around 300 key external scientific meetings and conferences, as well as institutional events (see list in Annex 4 of this report).

A major new event in the field of addiction research was the first European conference on addictive behaviours and dependencies — Lisbon Addictions 2015. Hosted by the Portuguese General-Directorate for Intervention on Addictive Behaviours and Dependencies (SICAD), the event was held in collaboration with the scientific journal *Addiction*, the International Society of Addiction Journal Editors (ISAJE) and the EMCDDA. The conference comprised 350 presentations, including keynote speeches, oral presentations and posters, and provided participants (more than 600) with a comprehensive overview of the main issues on the current research agenda of the addictions field.

Training initiatives included the fourth European drugs summer school, 'Illicit drugs in Europe: demand, supply and public policies', which was organised in partnership with ISCTE — Lisbon University Institute (ISCTE-IUL), and a training programme for law enforcement professionals implemented by CEPOL (the European Police College).

Capacity building was mainly implemented through the Reitox Academy Training Programme. During the year, approximately 171 professionals from Member States and third countries were trained as part of events organised or supported by the EMCDDA.

Experience exchange and knowledge sharing were also achieved through network development and management. The EMCDDA relies on different networks of experts, who

contribute their national expertise to the EMCDDA's European drug information and analysis system. In addition to the ongoing technical support and exchange that took place throughout the year in collaboration with these networks, nine expert meetings were held in 2015, with more than 400 participants in total. These included the following annual events: expert meetings on key epidemiological indicators (KIs); a meeting of the EMCDDA Reference Group on Drug Supply Issues; the annual meeting of the Reitox Early Warning System Network; and the Legal Correspondents meeting. Ad hoc (i.e. non-regular) technical meetings on different thematic areas that were priorities for the EMCDDA, such as drug supply reduction measures and responses to NPS, also took place. In addition, the EMCDDA hosted the meetings of relevant project groups (e.g. the Customs Laboratories European Network (CLEN) and the European Drug Emergencies Network (Euro-DEN)).

The agency also received almost 470 visitors during the year. Among the guests were high-level policymakers from EU institutions, Member States and third countries, and practitioners, members of academia and journalists.

## Developments in the EMCDDA's core monitoring system

The basis of the work developed by the EMCDDA to produce its outputs and services and disseminate its knowledge is its complex core monitoring system. This encompasses data collection tools and processes which support the entire annual reporting system of the agency. This includes five KIs, health and social responses instruments, key indicators of supply, and tools to monitor research, policies and laws. Methodological improvements were made to most of these tools in 2015. The third triennial assessment of the implementation of the KIs was carried out in close collaboration with the national focal points (NFPs), and recommendations for improvements were developed for each country and indicator.

The year 2015 also marked the first year of implementation of the revised national reporting system endorsed by the NFPs in 2014. Throughout the year, the EMCDDA supported countries with the implementation of this new system. Further to this joint effort, good performance was achieved by the NFPs with regard to implementing the new reporting package.

## New psychoactive substances and emerging trends

In 2015, 98 NPS were reported for the first time within Europe. This brings the total number of NPS monitored by the EMCDDA through the EU EWS to more than 560, and more than half of these were reported in the last three years alone. The EMCDDA also produced two joint reports with Europol after the EMCDDA identified signals suggesting that serious harms are associated with α-PVP (α-pyrrolidinovalerophenone) and acetylfentanyl in Europe. At the request of the Council of the European Union, the extended Scientific Committee of the EMCDDA undertook a risk assessment of α-PVP, noting that more than 100 deaths and 200 non-fatal acute intoxications have been linked to the drug.

In 2015, the Council adopted a decision to subject the new substances 4,4'-DMAR (4,4'-dimethylaminorex) and MT-45 (1-cyclohexyl-4-(1,2-diphenylethyl)piperazine) to control measures associated with criminal penalties throughout the EU. This important decision came in response to a proposal from the European Commission, which was based on the risk assessment reports produced by the Scientific Committee of the EMCDDA in 2014 — this reflects the strong evidence of action by the agency to EU policymaking. This is the ultimate policy response, at EU level, to a rapidly growing phenomenon.

The EMCDDA also took further steps in 2015 towards understanding the current health responses to NPS in Europe. For the first time, an expert meeting on this topic was organised by the agency; this provided an opportunity for leading European health professionals and researchers to meet in order to identify and discuss existing best practice, as well as training and intervention needs in Europe. The findings will inform an upcoming EMCDDA publication addressing NPS-related harms and health-related interventions.

A publication on the legal responses to NPS and a new module of evidence on the BPP, both produced in 2015, will further improve our knowledge in this area.

In addition to implementing the EU EWS, a key task was to monitor new trends in the drug phenomenon. The internet is becoming an increasingly important vehicle for drug supply, and the agency has started to follow this emerging trend closely. Further to the expert meeting conducted in 2014, a report on the internet and drug markets was published in 2015. This was followed by the preparation of an in-depth review of the phenomenon, which will be published in February 2016. In addition, the EMCDDA launched a 'Trendspotter' study on critical new developments within Europe's MDMA (methylenedioxyphenethylamine)/ecstasy market. This included an exploration of signals suggesting that there has been an increase in MDMA production and availability, that new online markets have opened and that there has been an increase in use and serious adverse events in some countries.

## Working in partnership

In fulfilling its tasks, the agency relies on a large number of partners and, in particular, the Reitox NFPs. These NFPs exercise the critical role of providing national data from the 30 countries that report to the EMCDDA, namely the 28 EU Member States, Norway and Turkey. Together with the information collected from other networks of experts and partners, these data feed the European and global analyses performed by the agency, thereby forming the basis of its world-renowned knowledge and its reputation as a centre of excellence on drugs in Europe. For Reitox, 2015 marked the first year of the implementation of the revised national reporting system, which will be further developed and implemented throughout 2016. Two meetings of the heads of the national focal points (HFPs) took place in 2015, in June and November.

In performing its work and achieving its objectives, the EMCDDA also relies on its other EU and international partners. At EU level, the agency's key stakeholders are the EU institutions (the European Parliament, the Council of the EU (i.e. the Council) and the European Commission) and the Member States. Ongoing technical support was provided throughout the year for issues such as NPS, which remained one of the most important topics on the policy agenda, monitoring minimum quality standards for demand reduction interventions in the EU and the misuse of medicines. The EMCDDA provided written inputs, attended hearings at the European Parliament and meetings of the Horizontal Drugs Group (HDG) of the Council, and participated in other meetings with the Commission's services, as requested.

The agency further enhanced its cooperation with the European School Survey Project on Alcohol and Other Drugs (ESPAD). In 2015, the Swedish Government sent a formal request to the EMCDDA to assume full coordination of this study; as a result, and given the need to employ additional resources, the agency, in cooperation with the European Commission, namely DG HOME as its partner DG, will explore realistic options for the future.

Other important partners are EU agencies and international organisations. There were many joint activities and events in 2015. Cooperation was particularly fruitful with the European Union's Judicial Cooperation Unit (Eurojust), the European Centre for Disease Prevention and Control (ECDC), the EMA, CEPOL and Europol. In addition, synergies with the European Maritime Safety Agency (EMSA), our neighbouring agency in Lisbon, Portugal, were further enhanced. The international organisations most involved with joint work were the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC), the Inter-American Drug Abuse Control Commission (CICAD), which is an agency of the Organization of American States (OAS), and the Pompidou Group.

In terms of cooperation with third countries, 2015 marked the launch of the new Instrument for Pre-Accession Assistance (IPA), IPA 5, technical assistance project; the objective of this project is to further build the capacity for drug monitoring in several candidate and potential candidate countries (i.e. Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Kosovo (*), Serbia and Montenegro). During the year, the agency disseminated three analyses that were produced with data from the western Balkan countries on drug use and its consequences, drug law offences and the prevention of infectious diseases among people who inject drugs. Together with the regular reports provided to the European Commission, these new analyses will contribute to the understanding of our stakeholders on the global dimension of the drug phenomenon. The agency also continued to provide technical assistance to European Neighbourhood Policy (ENP) partner countries (i.e. Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine) in the framework of the technical cooperation project started in 2014. Memorandums of Understanding (MoUs) were signed with Armenia and Georgia.

## Institutional developments

At institutional level, the year was marked by important changes in the governance structure of the EMCDDA. Following the elections held in December 2015, Laura d'Arrigo (France) and Franz Pietsch (Austria) were elected to the positions of Chair and Vice-Chair, respectively, of the EMCDDA Management Board.

Furthermore, a new Director was selected by the Management Board in September 2015. As a result, and following his public hearing at the European Parliament later that month, Alexis Goosdeel was formally appointed by the Management Board in October for a five-year mandate; he took up his new position as EMCDDA Director on 1 January 2016.

In 2015, the EMCDDA commemorated 20 years of monitoring the drugs problem in Europe. Over the last two decades, much has changed with regard to the extent and nature of the phenomenon, and the agency's work has developed to keep pace with this complexity. As this report of activities for 2015 shows, the agency is clearly on the right track in its mission to communicate evidence and inform policy in the drug field in Europe.

The new three-year strategy and work programme for 2016–18, which was adopted by the Management Board in December, and the long-term strategy, which the new EMCDDA Director has committed to develop and implement during his mandate, will ensure that the agency remains on target to become the most authoritative voice on drugs in Europe.

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

3

CHAPTER 3

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

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

Data collection and management tasks are central to the work of the EMCDDA. Policymakers, researchers, the European civil service and the general public have access to reliable and valid data on the drugs situation in each of the 28 Member States, Norway and Turkey through the outputs of the agency.

### Highlights and main achievements

#### The European Drug Report

In 2015, the EMCDDA presented its annual flagship publication package — the *European Drug Report* (EDR) package. This timely, interactive and interlinked annual update on the European drugs situation encompasses the work carried out in all the other core business areas.

The report was launched on 4 June 2015 at a press conference at the EMCDDA, attended by Dimitris Avramopoulos, European Commissioner for Migration, Home Affairs and Citizenship (see also Main Area 9).

He said: 'The report shows that we are confronted with a rapidly changing, globalised drug market and, therefore, we need to be united, swift and determined in our response to the drugs threat. I am particularly concerned that the Internet is increasingly becoming a new source of supply, for both controlled and uncontrolled psychoactive substances'.

During the year, work also started on the preparation of the 2016 EDR package.

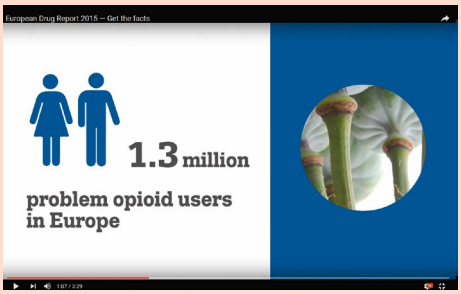
*EDR press conference on 4 June in Lisbon: European Commissioner for Migration, Home Affairs and Citizenship, Dimitris Avramopoulos and EMCDDA Director, Wolfgang Götz*

The 2015 EDR ([1]) is our 20th annual analysis of the drug problem in Europe. The annual overview of the European drug situation offers a rich analysis of the latest trends in drug supply, drug use, and the health and social responses. Changing dynamics in the heroin market, the latest implications of cannabis use, and new features and dimensions of the stimulant and 'new drugs' scene are among the issues highlighted in the *European Drug Report 2015: Trends and Developments*.

In print and online in 24 languages, this multilingual, multimedia package offers easy access to evidence-based information on drugs for the 28 EU Member States, Turkey and Norway.

The report is accompanied by Perspectives on drugs (PODs), online interactive windows on key aspects of the drugs problem. The 2015 PODs are Opioid trafficking routes from Asia to Europe; Drug consumption rooms: an overview of provision and evidence; The role of psychosocial interventions in drug treatment; and Misuse of benzodiazepines among high-risk opioid users ([2]).

The *European Drug Report: Data and statistics* (Statistical bulletin) ([3]) and 30 country overviews ([4]) completed the picture. The Statistical bulletin provides access to the data the EMCDDA uses for reporting on the drug situation. The country overviews consist of a summary of the national drug situations, key statistics at a glance and a barometer showing the ranking of drug use prevalence for each of the 30 countries ([5]) that report to the EMCDDA.




A motion graphic video ([6]) was produced by the agency to mark the launch of the EDR. This snapshot summary of the main issues of the 2015 edition was translated into French, German, Polish, Portuguese and Spanish, which contributed to the multilingualism of the EMCDDA audio-visual content. On its first day, the video received more than 1 400 views.

Furthermore, the EMCDDA participated in national launches organised in nine EU Member States (Croatia, the Czech Republic, Finland, Greece, Lithuania, Poland, Slovakia, Slovenia and Sweden) ([7]).

([1]) Available at: emcdda.europa.eu/edr2015
([2]) All PODs available at: emcdda.europa.eu/edr2015
([3]) Available at: emcdda.europa.eu/data/2015
([4]) Available at: emcdda.europa.eu/countries
([5]) The 28 EU Member States, Turkey and Norway.
([6]) Available at: https://www.youtube.com/watch?v=zPrRIRWalbk
([7]) Another Member State, Portugal, organised the national launch on 3 February 2016.

## Data collection instruments and processes

The main development in this area was represented by the entering into force of the revised Reitox national reporting package (NRP), after its seal of approval at the HFP meeting held in Lisbon, Portugal, in November 2014. The NRP is composed of three components: standard tables for reporting standardised quantitative information; structured questionnaires for reporting qualitative information; and thematic workbooks. To date, 10 thematic workbooks have been endorsed on the following themes: drug policy; legal framework; drugs; prevention; treatment; best practice; harms and harm reduction; drug market and crime; prison; and drug-related research.

The implementation of the package was designed to be progressive, with only 5 of the 10 workbooks compulsory in the first year (i.e. 2015). The implementation of the new package was carried out as planned, and, despite the inherent challenges, all 30 countries managed to complete the five mandatory workbooks; furthermore, 25 out of the 30 reporting countries managed to fully implement the revised NRP and send all 10 workbooks to the EMCDDA.

The guidelines for 2016 national reporting, including the revised standard questionnaire on prevention, were adopted by the HFPs at their meeting in November (see Main Area 10).

### Quality assurance framework

One of the objectives of the 2015 work programme was to strengthen the quality assurance framework with regard to supporting data collection, analysis and reporting. In light of this, an EMCDDA internal statistics code of practice was published in February 2015 ([2]). The code was drawn up in consultation with the EMCDDA Scientific Committee, Reitox and Eurostat, whose European statistics code of practice formed the basis of the work, and was adopted by the EMCDDA Management Board.

The EMCDDA code defines a set of principles that provide the agency with guidance and objectives for its own work. It serves as a declaration of the EMCDDA's intent to pursue a programme of continuous improvement and evaluation of efforts, in order to provide 'factual, objective, reliable and comparable information'.

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

Building on national efforts and formative European-level activities, the EMCDDA has worked for the last two decades to improve the monitoring of Europe's drug problems. A core element of this work has been the epidemiological monitoring work. This is based on a range of core indicators, namely KIs, and is supported by expert groups.

These KIs include the prevalence and patterns of drug use in the general population (based on a general population survey (GPS)); the prevalence and patterns of problem drug use; the number and characteristics of drug users that contact drug services, particularly treatment services (treatment demand indicator (TDI)); the number of drug-induced deaths and mortality rates among drug users (drug-related deaths indicator); and the infectious diseases related to drug use (drug-related infectious diseases (DRID) indicator).

### Highlights and main achievements

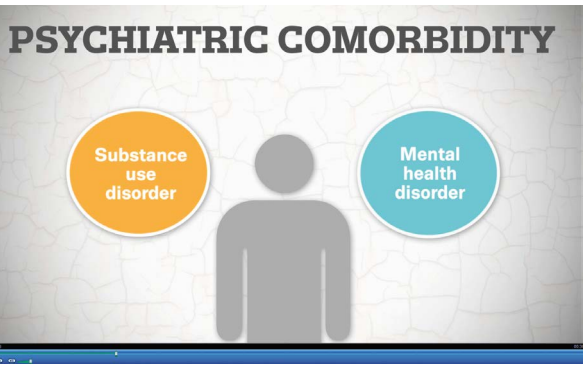
### Methodological development and analysis

The third triennial assessment of the implementation of the key indicators in the EU Member States, Norway and Turkey was carried out in close collaboration with the NFPs. The purpose of this exercise was to document the progress made since the second assessment (in 2012) and formulate recommendations to support the further work of the NFPs. The assessment included a description of the activities conducted at national level to implement the key indicators and a detailed analysis of the scientific quality of the data delivered by each Member State to the EMCDDA, based on a set of predefined criteria developed in consultation with the NFPs.

([2]) Available at: emcdda.europa.eu/publications/manuals/statistics-code-of-practice

The exercise led to the conclusion that the overall level of implementation was relatively high, although specific problems with data availability exist in some countries. Recommendations for improvements in the implementation of the indicators have therefore been developed for each country and indicator, in order to facilitate coordinated actions from the EMCDDA and the Member States concerned.

In 2015, the EMCDDA published several analyses based on the results of the key indicator monitoring work, as described below.




*Comorbidity of substance use and mental disorders in Europe* (EMCDDA Insights No 19, November 2015) ([3])
This publication looks at the co-occurrence of drug use problems and mental health disorders, and describes the theoretical background of psychiatric comorbidity, the tools for clinical diagnosis, and the prevalence and clinical relevance of the problem in Europe. This work, which was based on an exhaustive review of the literature and a wealth of information provided by the Reitox NFPs, will give policymakers, professionals in the drugs field and other interested readers a detailed overview of the concept of comorbidity in the context of drug use, and the tools available for its assessment.

*Drug-related infectious diseases in Europe. Update from the EMCDDA expert network* (EMCDDA Ad hoc publication, September 2015) ([4])
This report provides an update on infectious diseases related to injecting drug use in Europe up to June 2015. The report covers both the EMCDDA DRID indicator, which collects data on the situation, and the responses in the area. It includes highlights and new findings discussed during the annual expert meeting on indicators, held in Lisbon, Portugal, on 15 and 16 June 2015 (see later section below). This report also presents an analysis of the information provided to the EMCDDA by the NFPs and their experts during the 2014 annual reporting exercise. The multi-indicator data set used in the analysis covers and integrates aspects of the epidemiology (prevalence of injection; prevalence of infections among drug users; notifications of newly diagnosed infections; harm; morbidity; and outbreaks) and responses (prevention; infection testing; drug and infection treatments; and harm reduction), and it aims to provide policymakers with early warnings in order to allow prompt responses.

*Estimating trends in injecting drug use in Europe using national data on drug treatment admissions* (EMCDDA Technical report, June 2015) ([5])
The report describes trends in drug injection in EU Member States, Norway and Turkey between 2000 and 2011, through an analysis of data on those admitted for the treatment of drug-related problems. The results indicate that drug injection has declined in recent years in Europe. While heroin remains the drug most frequently used for injection, data show that people who inject drugs are now more likely to inject stimulants than they were in the past.

([3]) Available at: emcdda.europa.eu/publications/insights/comorbidity-substance-use-mental-disorders-europe
([4]) Available at: emcdda.europa.eu/publications/rapid/2015/drug-related-infectious-diseases-in-europe
([5]) Available at: emcdda.europa.eu/publications/technical-reports/estimating-trends-injecting-drug-use-europe-using-national-data-drug-treatment-admissions

In 2015, the EMCDDA continued to invest in the emerging area of monitoring wastewater, as a potential new indicator of population drug consumption (see also Main Area 7). A collaboration with the Sewage Analysis Core Group Europe (SCORE), the Europe-wide network that works to standardise the approach to wastewater analysis and to coordinate national studies, continued; this allowed the EMCDDA to receive, analyse and disseminate the data collected by the project.

To this end, the Perspective on drugs (POD) on wastewater analysis, which was produced in 2014, benefited from a substantial update in 2015, in order to incorporate the most recent data and allow for higher interactivity. A comprehensive overview of the different aspects of wastewater-based epidemiology, covering the latest developments and research results in the domain, was prepared in 2015, and is due for release in spring 2016 as part of the EMCDDA Insights series.

## Support to ESPAD and other partners in the area of monitoring polydrug use

In response to growing concerns regarding the harm associated with the interaction between alcohol and drug use in Europe, the remit of the EMCDDA was broadened in 2006 to include the monitoring of polydrug use, that is, the use of illicit drugs in combination with licit substances or medication.

As part of the effort to develop this part of its mandate, the EMCDDA's three-year strategy and work programme for 2013–15 included a commitment to increase collaboration with ESPAD. ESPAD provides useful and harmonised information on long-term patterns of substance use, including polydrug use, for many EU countries and neighbouring countries. As the Swedish Government is no longer able to host ESPAD, the EMCDDA Management Board, the Swedish Government and the Commission have acknowledged the agency as an appropriate institutional home for the study: they have stressed the need for ESPAD, while remaining as an individual entity, to be progressively anchored in the EMCDDA.

In 2015, the EMCDDA received a formal request from the Swedish Government to fully assume the coordination tasks for the study. While the agency, in close cooperation with the European Commission (DG HOME as its partner DG), will look at options that would make that possible in the future, some important developments already took place in 2015. This included participation of the EMCDDA in two Steering Committee meetings (held on 28–29 January in Stockholm, Sweden, and 15–17 November in Larnaca, Cyprus); preparatory work for the publication, in 2016, of the 2015 ESPAD report; preparatory work related to ensuring that ESPAD will have a strong web presence (website also to be launched in 2016); and the hosting of the study database.

In addition, the EMCDDA published *The ESPAD validity study in four countries in 2013* ([6]). After the publication of the 2011 ESPAD report and in view of the preparation of the 2015 survey, a review of the questionnaire used to collect the data was conducted. The results of that exercise are presented in the aforementioned validity study.

The EMCDDA also continued its collaboration with the 'Joint action on reducing alcohol-related harm' (RARHA) project, funded by the European Commission, in 2015. Led by SICAD, this initiative involves 32 associated partners and 28 collaborating partners from

([6]) Available at: emcdda.europa.eu/publications/joint-publications/espad-validity-study

both EU and non-EU countries. The EMCDDA is among the project's associated partners and is also part of its advisory group.

One of the core activities of the RARHA project (as part of work package 4: 'Monitoring') is to improve the monitoring of alcohol use, risky alcohol use and abuse or dependence, and alcohol-related harms (to the drinker and others), particularly via survey methodology. The EMCDDA plays an active role in implementing work package 4 by, for instance, developing instruments (i.e. questionnaires and scales) and methodologies. The agency plans to build on the work of the project by including a subset of the instruments developed under work package 4 in its 'European Model Questionnaire' (EMQ). The EMCDDA also participated in the meeting of the RARHA project in Athens (13–14 March 2015).

Finally, the third Contemporary Drug Problems Conference, with the theme 'Encountering alcohol and other drugs', was held at the EMCDDA on 16–18 September 2015. Hosted by Contemporary Drug Problems, the EMCDDA, the National Drug Research Institute (Curtin University, Australia), the Centre for Alcohol and Drug Research (Aarhus University, Denmark), the Centre for Population Health (Burnet Institute, Australia) and the Department of Science and Technology Studies (Rensselaer Polytechnic Institute, USA), the conference brought together leading international researchers in drug use and addiction studies from a range of research disciplines and methods — both qualitative and quantitative.

## Capacity building and network support

The added value of the EMCDDA's epidemiological information is, to a considerable extent, based on the work of NFPs and the networks of national experts on the relevant KIs. To that end, an important role of the EMCDDA is the technical support it provides to the NFPs and other national experts with regard to implementing KIs at national level.

Support needs, among others, are identified through the analysis of the final activity reports submitted by the countries.

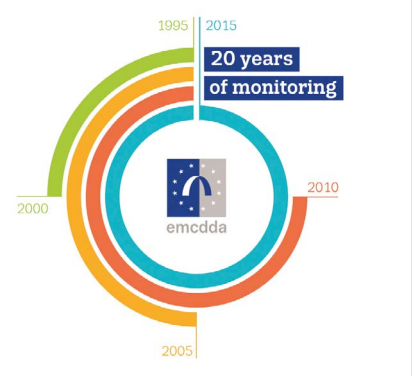
In 2015, ongoing assistance was provided by means of daily exchanges between the agency's staff and the local experts. In addition, EMCDDA representatives attended meetings organised at national level with the objective of helping with the implementation of the new reporting method (e.g. visit to the Italian NFP on 24–25 June in Rome).

Another effective means of fostering experience exchange and supporting network development are the annual European expert meetings organised by the EMCDDA. Two events were held in Lisbon in the course of the year, the DRID annual meeting on 15–16 June and the '20 years of monitoring' event on 21–22 September.

The DRID expert meeting was organised as a stand-alone two-day event which offered a platform for discussion among experts from the 28 EU Member States, Norway and Turkey. Topics that received particular attention included an update on the situation regarding human immunodeficiency virus (HIV) infection and the related concerns in some countries; bacterial infections, including botulism outbreaks in Scotland and

Norway; and changing patterns of injection in Europe and their implications for public health. The challenges of scaling up treatments for HCV infection and good national examples in this area were also discussed. The results of the meeting are presented in the report *Drug-related infectious diseases in Europe. Update from the EMCDDA expert network* (see section 'Methodological development and analysis' above).

Understanding the dynamics, nature and scale of drug use in Europe, including lessons learnt and challenges for the future, was the thrust of an EMCDDA technical conference, which was held in Lisbon, Portugal, on 21–22 September. The event, organised ahead of Lisbon Addictions 2015, commemorated 20 years of the EMCDDA monitoring the drug situation in Europe




This technical conference brought together over 180 experts from across the globe including representatives of the EMCDDA key indicator expert networks; the Reitox NFPs; other technical domains covered by the agency; and the EMCDDA. The event furthered the agency's ongoing efforts to inspire cross-disciplinary, multi-indicator analyses of the drugs problem and the sharing of perspectives from different technical domains.

The two-day agenda featured over 70 interventions, 8 sessions and 11 workshops. The issues covered included maximising the value of information collected; incorporating new tools and topics; and ensuring that the European drug monitoring system remains fit for purpose in the face of new challenges. The final workshop was entitled 'Making monitoring speak louder to policy and more clearly to inform best practice'.

## Technical support to third countries

The quality and consistency of epidemiological monitoring at European level is based on the implementation of the common EMCDDA standards and key indicators in Member States. However, many third countries (e.g. candidate countries, neighbouring countries and others) also use the key indicators as models to develop their own drug monitoring strategies; EMCDDA support is invaluable for this.

For example, the EMCDDA supports third countries with the conduct of their ESPAD surveys. In 2015, three countries — Georgia, Moldova and Ukraine — completed their ESPAD surveys with support from the ENP project implemented by the EMCDDA. In the case of Georgia and Moldova, the surveys were co-funded by the national authorities, and in the case of Ukraine, the survey was co-funded by UNICEF (United Nations Children's Emergency Fund) (see Main Area 8).

Furthermore, Israeli and Moldovan experts attended the DRID expert meeting in June 2015, and experts from Georgia, Israel, Moldova, Morocco and Ukraine participated in the '20 years of monitoring' conference held in September.

The EMCDDA also contributed to MedNET seminars organised by the Council of Europe, namely the Pompidou Group, in Algeria, Egypt, Morocco and Tunisia (see also Main Area 8).

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

The work of the EMCDDA in the area of monitoring demand reduction responses covers prevention, treatment, harm reduction and social reintegration.

Some new analyses in the prevention field were released and new evidence on environmental strategies was produced in 2015. In the areas of treatment, harm reduction and social reintegration, a key task was to continue to support the 30 countries reporting to the agency with the production of harmonised and comparable data on treatment systems in Europe. Three new outputs were released on some highly relevant topics: cannabis treatment, naloxone and consumption rooms.

The EMCDDA continued to work with its partners at European and international levels, and provide its expertise on the prevention of infectious diseases amongst people who inject drugs, with a particular focus on HIV and HCV infections. In this respect, close collaboration was maintained with the EMCDDA's traditional partner in this area, the ECDC.

An important tool for disseminating information on effective interventions is the BPP. In 2015, the EMCDDA continued to develop this portal as a key European resource for evidence of high-quality interventions; new modules were launched and the existing ones were kept updated. New reviews of evidence were also produced, and innovative features and graphics were introduced.

### Highlights and main achievements

#### Prevention

In the area of prevention, online resources were further developed and updated. New data on alcohol control score and tobacco control scale were added for all countries. In addition, new data for family-based prevention were added for a number of countries.

A BPP module on interventions that target the general population was created to host new evidence on environmental strategies ([7]).

Furthermore, in 2015, the EMCDDA published *Prevention of addictive behaviours* (as part of the Insights series) ([8]), which is an update of *Prevention of substance abuse*, published in 2007. Like the previous analysis, this report is a translation of a German state-of-the-art review of prevention science. Although originally targeted at a German audience, the evidence base addressed is global in its scope. The review is broad in its considerations, covering not only the main topic of drug abuse but also alcohol and tobacco, as well as behavioural addictions, such as gambling.

The EMCDDA contributed to the Sixth Conference and Members' Meeting of the European Society for Prevention Research (EUSPR) (held on 22–24 October 2015 in Ljubljana, Slovenia). The presentation delivered by the EMCDDA, entitled 'Quality standards in drug demand reduction: prevention gave the example', offered an

([7]) Available at: emcdda.europa.eu/best-practice
([8]) Available at: emcdda.europa.eu/publications/insights/preventing-addictive-behaviours

opportunity to discuss the Council's conclusions on the implementation of minimum quality standards on drug demand reduction in the EU, as adopted by the Council of the European Union in September 2015 (CORDROGUE 70 (SAN 279)). The Council conclusions document lists 16 standards, which represent a minimum benchmark of quality for interventions in drug use prevention, risk and harm reduction, treatment, social integration and rehabilitation. The EMCDDA disseminates these standards via its BPP (see later section, ´Best practice´) and will monitor their implementation.

A national Reitox Academy on 'Best practice in prevention' was organised by the EMCDDA and the Moroccan National Observatory on Drugs and Addictions (ONDA), and held on 8–9 December in Rabat, Morocco (see also Main Area 8). Approximately 40 prevention professionals attended the event from non-governmental organisations as well as from the education, health and law enforcement sectors. The aim of the meeting was to look at prevention from the perspective of evidence-based approaches to the drugs problem, and to promote information exchange on the tools available to help develop and implement prevention programmes. The meeting provided a unique opportunity for professionals from various regions of Morocco to present their work, network and exchange information. Those attending showed particular interest in the EMCDDA's methodological guidelines and standards, in view of an ongoing national debate on the development of national prevention standards.

## Treatment, harm reduction and social reintegration


During 2015, the EMCDDA continued to provide an ongoing overview of treatments for drug problems in Europe. A consistent picture of this area is provided by the 2015 EDR package (see Main Area 1), including the recent POD analysis *Drug consumption rooms: an overview of provision and evidence* ([9]). This looks at supervised drug consumption facilities, in which illicit drugs can be used under the supervision of trained staff. The primary aim of these facilities is to reduce the acute risks of disease transmission through unhygienic injecting, to prevent drug-related overdose deaths, and to connect high-risk drug users with addiction treatment and other health and social services. To mark the launch of this POD, a video was produced and released in June ([10]). It was filmed in a consumption room in Barcelona and it features interviews with various experts. Between its launch in June and 31 December, the video received some 2 600 views.

Another important resource is the in-depth review *Treatment of cannabis-related disorders in Europe,* published in April (as part of the EMCDDA Insights series) ([11]). Cannabis is the illicit drug used most widely and most frequently in Europe; this publication reviews the interventions used in the treatment of cannabis-related disorders and maps out cannabis treatment in Europe from a geographical perspective.

([9]) Available at: emcdda.europa.eu/topics/pods/drug-consumption-rooms
([10]) See: https://www.youtube.com/watch?v=YhLoLbORzi0
([11]) Available at: emcdda.europa.eu/publications/insights/2015/treatment-of-cannabis-related-disorders

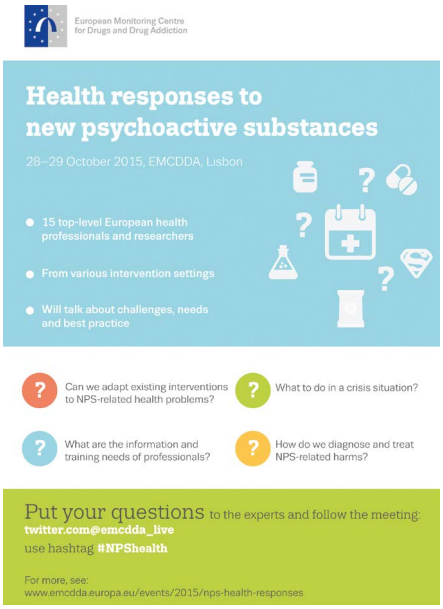
Another publication — *Preventing fatal overdoses: a systematic review of the effectiveness of take-home naloxone* (EMCDDA Paper) — was released in January 2015 ([12]). Drug overdose is one of the major causes of death among young people in Europe. This paper considers how naloxone — an effective antidote to opioid intoxication — combined with first aid training in coping with an overdose for people who are not health professionals can help save lives.

Recognising the importance of the topic, an in-depth topical review on naloxone was also prepared in 2015, for publication in 2016 (as part of the EMCDDA Insights series).

The recreational drug scene has evolved rapidly over the last decade, with NPS posing additional challenges. However, at present, there is no robust pan-European system in place for capturing data from hospital emergency services on the acute toxicity (harms) associated with the use of both 'established drugs' and NPS.

To address deficiencies in the data available, the Euro-DEN project was established in 2013, funded through the European Commission's Drug Prevention and Information Programme. The EMCDDA is a member of the Euro-DEN Steering Committee and the agency hosted a project meeting on 27 February 2015. To mark the occasion, the agency published, in its BPP (see next section under this area), the latest Euro-DEN guidelines 'When to call the emergency services for unwell recreational drug users'.

In 2015, the EMCDDA organised, for the first time, a meeting dedicated to the topic of health responses to NPS (held on 28–29 October in Lisbon, Portugal). The event aimed to identify existing best practice and training and intervention needs, as well as related policy considerations for Europe. It brought together 15 European health professionals and researchers experienced in providing interventions related to NPS, or knowledgeable in this domain. They focused on responding to NPS in a variety of health and intervention settings (i.e. in family and school settings; in hospital accident and emergency departments and poison centres; in bars and clubs and at festivals; in sexual health clinics, specialised treatment centres and low-threshold agencies; in prisons; and via helplines and e-health facilities). The meeting laid the foundations for an EMCDDA report, which will be published in 2016, that addresses NPS-related harms and health-related interventions. The publication will be practice oriented and of particular value to professionals working in these settings.




In 2015, the agency also made further progress in the development and implementation of treatment monitoring instruments. This relates, in particular, to the European Facility Survey Questionnaire (EFSQ) and the treatment maps, which support countries to improve their national estimates on the total number of people in treatment. The EFSQ pilot version was finalised and piloting countries (Greece and Hungary) reported their data in the new treatment workbooks, which were submitted in October 2015. The treatment system map was presented in the EDR 2015; furthermore, its integration into

([12]) Available at: emcdda.europa.eu/publications/emcdda-papers/naloxone-effectiveness

the workbook data collection exercise led to an increase in the number of countries that reported improved estimates.

In 2015, the agency also continued to strengthen its work in the field of harm reduction (see also Main Area 2, particularly the activities related to the implementation of the DRID key indicator). To this end, the EMCDDA continued to work with its partners at European and international levels, and provide its expertise in the prevention of infectious disease amongst people who inject drugs, with a particular focus on HIV and HCV infections.

In June 2015, the EMCDDA published *HIV and hepatitis B and C in Latvia* ([13]), a report that presents the results of a mission to Latvia, which was carried out jointly with the ECDC in September 2014 at the request of the Latvian Ministry of Health, based in Riga. The mission confirmed that there is a very high rate of hepatitis B and C and HIV infections in Latvia, and that there is a large number of people with acquired immune deficiency syndrome (AIDS), mainly among certain high-risk populations. Based on the findings of this country visit, the mission team prepared a comprehensive list of remedial actions.

The EMCDDA and the ECDC co-organised a sponsored session entitled 'Scaling up responses to hepatitis C (HCV) among people who inject drugs (PWID) in Europe: what are the priorities?' and held on 24 September in the margins of Lisbon Addictions 2015 (see Main Area 7). This session brought together drug specialists, user representatives, a hepatologist and staff members from the two co-organising agencies to discuss the challenges ahead with regard to scaling up treatment for HCV infection among people who inject drugs.

On 11 March 2015 in Vienna, Austria, in the framework of the 58th session of the Commission on Narcotic Drugs (CND), the EMCDDA co-organised the side event 'Developing and promoting quality standards in drug demand reduction' and co-chaired another side event, organised by the Government of the Netherlands, entitled 'The public health approach: prevention, treatment, risk and harm reduction, recovery, social reintegration and rehabilitation'.

## Best practice

The BPP ([14]), which was revamped in 2014, continued to be improved in 2015. In an effort to keep up with the rapidly growing new drugs phenomenon, a new module on NPS was developed and launched in 2015. Although research is ongoing in this area, and evidence on what works best is currently lacking, the new module provides useful links to the different analyses that have been carried out by the EMCDDA and other organisations in recent years. As evidence on what works becomes available, this will be captured and disseminated promptly through the BPP. Two more modules, on the misuse of prescription medicines and interventions in prison, were also released.

([13]) Available at: emcdda.europa.eu/publications/ad-hoc-publication/hiv-and-hepatitis-b-and-c-latvia
([14]) Available at: emcdda.europa.eu/best-practice

A comprehensive update of the harm reduction module was also performed. Furthermore, a new analysis entitled *The role of psychosocial interventions in drug treatment* ([15]) was published in June as part of the POD series. As psychosocial interventions are used to treat many different types of drug problems and behavioural addictions, this analysis explains what these are and to whom they are provided.

An interactive tool was released, along with the PODs, to allow users to 'accompany' someone with a drug problem through the different stages of the treatment path: 'Recognising', 'Treating' and 'Staying'.

Another development was the publication, in December 2015, of a map presenting the different quality assurance approaches adopted at national level. This map is based on a questionnaire sent by the EMCDDA to its network of NFPs. Within each country, each focal point was asked the question: 'Are there some types of quality standards implemented in your country to ensure the quality of interventions in drug demand reduction?' The responses were compiled into a useful graphic representation of the situation at EU level.

Finally, the revamped Evaluation Instruments Bank (EIB), which is an online archive of freely available instruments for evaluating drug-related interventions, was launched in December 2015.

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

In 2015, the EMCDDA focused on three main priorities: developmental work to improve tools and concepts for reporting on drug supply (drug markets, drug-related crime and drug supply reduction); the production of the second EDMR jointly with Europol; and the fulfilment of the tasks assigned to the agency in the operational action plans (OAPs) of the European Multidisciplinary Platform Against Criminal Threats (EMPACT) framework, developed under the 2013–17 EU policy cycle for organised and serious international crime of the Council's Standing Committee on Operational Cooperation on Internal Security (COSI).

Central to the work of the EMCDDA in this area is the EMCDDA European Reference Group on Drug Supply Issues. The third meeting of the national correspondents took place in 2015, which provided opportunities for expert advice and consultation on EMCDDA core projects in the supply field.

### Highlights and main achievements

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

([15]) Available at: emcdda.europa.eu/topics/pods/psychosocial-interventions

In 2015, incremental progress was achieved in the development of all the planned instruments, in line with their level of priority (as defined in the EMCDDA work programme) and the available resources.

The level 1 priority instruments, namely 'drug seizures', 'drug law offences', 'drug production facilities' (including synthetic drug production sites) and 'drug precursors', were all implemented as planned, as outlined below.

The drug seizures core data set supports the monitoring of both drug markets and drug supply reduction activities. In 2015, the revised data collection instrument was endorsed by the EMCDDA Reference Group on Drug Supply (see later section under Main Area 4). Pilot data collection was carried out as planned and feedback was provided to the HFPs during their meeting in November 2015. Full implementation is planned for 2016.

The drug law offences core data set supports the monitoring of all three areas (i.e. drug markets, drug-related crime and drug supply reduction). The pilot data collection was implemented using the revised instrument, which was developed in 2014 in cooperation with Eurostat. Data validation and initial analyses were completed in 2015 and the results will be evaluated in 2016.

The drug production facilities core data set allows the monitoring of drug markets and drug supply reduction activities. This includes data related to dismantled synthetic drugs labs, dismantled cocaine secondary extraction labs and cannabis cultivation sites. The activity was implemented in close collaboration with Europol and it is one of the tasks assigned to the EMCDDA as part of the OAPs on heroin/cocaine trafficking and synthetic drugs of the EU policy cycle within COSI (see also below).

With regard to the dismantled synthetic drugs labs (level 1 priority), a joint training course was organised by EMCDDA and Europol (held on 24 March in Lisbon, Portugal) on the use of the European Reporting on Illicit Synthetic Substances Production Sites (ERISSP) tool, which is a data collection tool for the collection of reliable data on the number and characteristics of sites related to the production of synthetic drugs and their precursors (including facilities related to NPS) that have been dismantled by law enforcement agencies. The training course was attended by 22 professionals from 21 Member States. The event also provided the opportunity to collect feedback from participants, based on which the tool was revised before being used for the data collection exercise. During this exercise, 14 Member States provided data, which were analysed and used for the production of the second EDMR (see below).

Progress was also achieved in the implementation of the reporting instrument for dismantled cocaine extraction labs, which was developed in 2014. This tool, known as ERICES (European Reporting Instrument for Cocaine Extraction Sites), was used in 2015 by Europol for data collection from the Member States. These data will be analysed in 2016 by the EMCDDA.

Finally, work continued on the European Reporting Instrument for Cannabis Production (ERICP), which was presented to Member States during an expert meeting held at Europol and was later revised to incorporate their feedback. Implementation will start in 2016.

With regard to drug precursors, after close cooperation with the Directorate-General (DG) for Taxation and Customs Union (TAXUD), data for the last three years were provided to the EMCDDA and have been included in the 2015 EDR. Furthermore, a representative from DG TAXUD attended the Reference Group on Drug Supply Meeting and actively contributed to the 2016 EDMR, including the analysis of precursor monitoring data from the perspectives of both the EU and the International Narcotics Control Board (INCB).

In line with the available resources and the lower assigned priority level (i.e. level 2 priority) for 'drug prices' and 'drug purity and content', less progress was made in the development of the reporting instruments for these activities. With regard to drug prices, the mapping exercise has been prepared and it will be launched in 2016. With regard to drug purity and content, the pilot study was launched and the data were collected through the questionnaire sent to all Member States; these data were presented at the meeting of the EMCDDA Reference Group on Drug Supply in November 2015.

A technical meeting on drug supply reduction measures was held on 1–2 July at the EMCDDA. The topics included drug supply indicators; drug supply reduction and strategic drugs intelligence in Europe; the EU policy cycle for serious and organised crime and the role of Europol; and national intelligence models and law enforcement intelligence strategies. The event was attended by law enforcement professionals from Belgium, Germany, the Netherlands, Sweden and the United Kingdom, and by analysts from the EMCDDA, Europol and the Maritime Analysis and Operations Centre — Narcotics (MAOC-N).

A key event for Main Area 4 was the third meeting of the national correspondents of the EMCDDA European expert Reference Group on Drug Supply Issues, which took place on 5–6 November 2015 in Lisbon, Portugal. This reference group is composed of representatives from each Member State, the European Commission (DG HOME and Eurostat), Eurojust and Europol. At the meeting, the supply reporting instruments were discussed and endorsed as appropriate, and the reference group provided expert advice on the drafting and structuring of the second EDMR.

Possibly the most important activity of 2015, in terms of resources employed and the importance of its outcome, was the preparation of the second EDMR jointly with Europol. This is a top priority product for the EMCDDA, as it is one of the agency's flagship publications. The work to produce it involves many of the agency's resources, including scientific analysts, data managers, editors and other communication experts, and ultimately the EMCDDA's Director and Scientific Director. This important joint project involved an efficient collaboration between the EMCDDA and Europol. Good cooperation was also ensured with external contributors to the report (e.g. Eurojust, Frontex, CEPOL and MAOC-N), and consultations with stakeholders, such as the Commission, the EMCDDA Reference Group on Drug Supply Issues and Europol National Units, were held throughout the year.

As with the first EDMR, this second edition will be launched in Brussels (on 5 April 2016) by the EU Commissioner in charge of Migration, Home Affairs and Citizenship and the EMCDDA and Europol Directors.

The analysis *Opioid trafficking routes from Asia to Europe* was published as part of the POD series in June 2015 ([16]). It describes the main routes by which heroin reaches the European market from producers located mainly in South-East Asia.

In 2015, the agency fulfilled the tasks assigned to it under the OAPs within the EMPACT framework developed under the 2013–17 EU policy cycle for organised and serious international crime of COSI. The EMCDDA provided contributions in the field of synthetic drugs, cocaine and heroin.

The primary task was the preparation of the 2016 EDMR. Other activities included contributing to training initiatives organised by CEPOL (for details see Annex 6 — key performance indicator (KPI) 4.4.1), including residential courses and webinars; and

([16]) Available at: emcdda.europa.eu/topics/pods/opioid-trafficking-routes

assisting Europol with the follow-up of activities initiated under the previous policy cycle (2012–13), particularly the reporting of drug production facilities (see section 'Main highlights and achievements from Main Area 4' on the reporting instruments for synthetic drugs (ERISSP), cannabis production sites (ERICP) and secondary cocaine extraction sites (ERICES)). Furthermore, the fourth law enforcement expert meeting on NPS was organised jointly and co-chaired by the EMCDDA and Europol, and held on 14–15 September 2015 in Warsaw, Poland. The meeting was hosted by the Polish Ministry of the Interior and Administration, and chaired by the driver of the EMPACT 'Synthetic Drugs' priority. At this meeting, 24 Member States were represented.

Finally, on 10 March 2015, under the framework of the 58th session of the CND in Vienna, Austria, the EMCDDA Scientific Director, Paul Griffiths, acted as an expert, nominated by the Western European Group, for the panel discussion 'Supply reduction and related measures; responses to drugs-related crime; countering money-laundering and promoting judicial cooperation'.


*CND panel discussion on 'Drugs and Crime' on 10 March in Vienna: EMCDDA Scientific Director Paul Griffiths as expert nominated by the Western European Group*

## Monitoring new trends and developments, and assessing the risks associated with new substances (Main Area 5)

The EMCDDA has been assigned a key role in the detection and assessment of new drugs in the EU under the terms of Council Decision 2005/387/JHA on the information exchange, risk assessment and control of NPS. To ensure efficient information exchange, as specified by this Council decision, ongoing and dynamic work is required. In 2015, as in previous years, the EMCDDA, together with the European Commission, the EMA, Europol, the Reitox NFPs and the Europol National Units, ensured that the information exchange component of this Council decision — known as the EU EWS on NPS — was implemented.

In 2015, 98 NPS were identified on the European drug market for the first time. In total, the EMCDDA monitors more than 560 substances — which is more than double the number of substances controlled under the international drug conventions of the United Nations — and more than half of these were reported in the last three years alone.

However, while the number and type of NPS reported each year is critical to understanding the development and growth of the market, these data fail to convey the enormous amount of work undertaken, by the EMCDDA and partners in the EU EWS network, at national and EU levels to help ensure that emerging threats are identified, reported and responded to in a timely manner.

In addition, it is clear from recent developments that earlier identifications of and responses to emerging threats will increasingly benefit from more proactive data collection systems. As a result, the EMCDDA has started working to improve the ability of the EU EWS to detect signals of public health relevance from open source information (OSI). This requires the development and implementation of OSI monitoring and analysis systems that can provide new data on areas such as serious adverse events, online drug markets and epidemiology.

## Highlights and main achievements

At a glance, the main highlights and achievements in Main Area 5 in 2015 were:

- 98 NPS were formally notified;
- 101 new substance profiles were created and 328 existing substance profiles were updated — the total number of NPS currently monitored is now over 560;
- 17 public health alerts (including updates) were produced and provided to EWS correspondents;
- a risk assessment exercise was carried out, by the EMCDDA's Extended Scientific Committee, on α-PVP, and this revealed that α-PVP was associated with 116 deaths and 205 non-fatal acute intoxications in 2015;
- as a result of the decision adopted by the Council in October 2015, in response to the recommendation formulated by the European Commission on the basis of risk assessments carried out by the EMCDDA in 2014, two new substances — 4,4'-DMAR and MT-45 — were subjected to control measures and criminal penalties throughout the EU;
- two risk assessment reports were published on 4,4'-DMAR and MT-45, which were risk assessed in September 2014;
- an EMCDDA–Europol joint report on α-PVP was produced and sent to the European Commission, the Council and the EMA, and published.

The European Database on New Drugs (EDND) — Europe's information hub on NPS — was expanded further in 2015 to include 101 new substance profiles; in addition, a further 328 existing profiles were updated, including the provision of further analytical data; this is essential in order to allow laboratories across Europe to detect these new substances. Furthermore, a total of 564 reporting forms (new substances, first notifications, and significant updates from the Reitox NFPs and Europol National Units) were received, reviewed, validated and analysed in a timely manner. The resulting data and information were then incorporated into monitoring strategies.

Network management and the provision of technical assistance on a daily basis to the members of the Reitox NFPs continued to be a central activity of the EMCDDA in 2015. This reflects the importance of maintaining strong networks to ensure that early warning activities are effective.

The 15th Annual Meeting of the Reitox Early Warning System Network took place on 8–9 June 2015. Prior to this meeting, a questionnaire on recent developments in national EWSs was disseminated and the results were collated, reviewed, validated and analysed in order to identify relevant themes and issues for discussion at the meeting, as well as to inform the development of the Toxicovigilance System Framework and the Risk Communication System Framework; this work will help strengthen Europe's ability to identify and react to emerging threats. All presentations given at the meeting and the minutes of the meeting were made available in the EDND.

In accordance with Article 10 of Council Decision 2005/387/JHA, the *EMCDDA–Europol 2014 annual report on the implementation of Council Decision 2005/387/JHA* was prepared by the two agencies, submitted to the EU institutions in June 2015 and published in July 2015 ([17]). The report presented the key activities performed by the EMCDDA and Europol in 2014, including a list of the NPS that were notified, the joint reports produced, the risk assessments conducted and the public health alerts issued.

Substances posing serious health risks were intensively monitored throughout 2015. Two substances, α-PVP and acetylfentanyl, met criteria for the launch of a joint report, in accordance with Article 5 of Council Decision 2005/387/JHA.

To that end, an ad hoc data collection for the preparation of a joint report on α-PVP was launched in May 2015. Structured data were requested from the Reitox NFPs, the EMA and the WHO. In addition, a search of OSI was performed and the results were collated, reviewed, validated and analysed.

The data from the joint report questionnaire on α-PVP and the results from the OSI search and review were collated, reviewed, validated and analysed, and a joint report was prepared within a four-week period. The joint report was submitted to the Council, the Commission and the EMA in August 2015, by the legal deadline stipulated by Council Decision 2005/387/JHA.

This was followed by a request from the Council to carry out a risk assessment on α-PVP, which was conducted by the extended Scientific Committee of the EMCDDA in November 2015. Prior to this exercise, and in order to support the work of the Scientific Committee, a detailed technical report was produced by the EMCDDA in accordance with the EMCDDA Risk Assessment Operating Guidelines, based on the information collected from Member States and Europol, and on a comprehensive analysis of all the available data.

The risk assessment report was subsequently submitted to the Council and the Commission within the timeline stipulated in Article 6 of Council Decision 2005/387/JHA.

Following the same procedure as for α-PVP, an ad hoc data collection for the preparation of a joint report on the other substance deemed to pose a serious health risk, namely acetylfentanyl, was launched in September 2015. The joint report was submitted to the Council, the Commission and the EMA in December, by the legal deadline stipulated by Council Decision 2005/387/JHA.

These developments in 2015 suggest that there are no signs that the emergence of NPS is slowing down. On the contrary, this phenomenon continues to generate significant public health concerns: hence it remains very high on the EU policy agenda. For the EMCDDA, this translates into an increased amount of work, which is necessary in order to cope with the demanding implementation of Council Decision 2005/387/JHA, particularly with large to the EWS and risk assessments, and the ability to respond promptly to the large number of requests for information or technical support from the EMCDDA's stakeholders and partners, including Member States, EU institutions, other agencies and international organisations, and third countries, as well as from the large majority of visitors (of which there were more than 400) to the agency in 2015.

([17]) Available at: emcdda.europa.eu/publications/implementation-reports/2014


Furthermore, as a world-renowned authority in the area, the EMCDDA delivered presentations and keynote speeches at more than 15 important drug-related conferences and technical meetings; this helped to increase the understanding of the NPS phenomenon and the visibility of EU actions in this area (for details, see Annex 4).

In the margins of the 58th session of the UN CND, which took place in March 2015 in Vienna, Austria, the agency released the short report *New psychoactive substances in Europe. An update from the EU Early Warning System* ([18]). The report highlights recent developments, including the growth of the market over the last few years, as illustrated by seizures by law enforcement and other indicators, as well as the growing number of serious harms that have been reported as a result of NPS.

A poster/wall chart was also published to accompany this EMCDDA publication ([19]).

In addition, the agency was invited to disseminate its knowledge at training initiatives carried out in Member States (see Main Area 10) and third countries (see Main Area 8).

In 2015, the EMCDDA further strengthened its links with informal forensic science and toxicology networks. Ongoing exchange took place throughout the year between the agency's staff and international leading forensic, toxicology and law enforcement experts in the field of NPS. The EMCDDA also delivered presentations at the 2015 Annual Meeting of the European Network of Forensic Science Institutes (5–8 May 2015, Dublin, Ireland).

Furthermore, the agency, together with the Portuguese Taxes and Customs Authority, hosted the second meeting of the European Commission's CLEN project group, funded by the European Commission Customs 2020 Programme. The meeting, which took place on 5–6 February 2015, focused on 'Designer drugs and other illicit products'. The event was organised by the European Commission, DG TAXUD, and the Institute for Health and Consumer Protection of the Joint Research Centre, with the participation of DG HOME.

The CLEN project group is composed of customs laboratories from the 28 EU Member States and aims to promote cooperation among them. The two-day meeting provided a unique opportunity for representatives of these laboratories to share experiences, compare their practices and discuss the next steps of the project. One of the objectives of this project is to strengthen the ability of customs labs to detect NPS — this, in turn, will strengthen Europe's early warning capacity.

The information exchange with the EMA and the EU pharmacovigilance system on medicines and substances with medicinal properties was ongoing in 2015, as required by Regulation 1235/2010 and Council Decision 2005/387/JHA. Among other things, this included a request for information on α-PVP and acetylfentanyl from the EMA, and the production by the EMCDDA, at the request of the EMA, of a report on ketamine use in Europe.

([18]) Available at: emcdda.europa.eu/publications/2015/new-psychoactive-substances
([19]) Available at: emcdda.europa.eu/publications/2015/new-psychoactive-substances/poster

A coordination meeting took place with the EMA in March 2015. This meeting addressed cooperation, with a specific focus on strengthening data collection on the misuse and abuse of medicinal products defined as NPS, under Article 3 of Council Decision 2005/387/JHA.

The Toxicovigilance System of the EU EWS was further developed in 2015. To this end, a reporting tool to monitor serious adverse events associated with NPS was developed; the final implementation of this tool is planned for mid-2016. Also, more than 30 reporting forms on serious adverse events associated with NPS were received, reviewed, validated and analysed in 2015, and the resulting data and information were prioritised. The resulting data and information were then incorporated into monitoring strategies. In addition, with a view to detecting signals of NPS that pose health concerns, daily searches and reviews of major English-language OSI, including scientific and medical literature, were performed. A dedicated EMCDDA Twitter feed was also used to identify and disseminate relevant signals from social media. The resulting data and information were then incorporated into monitoring strategies, and this has helped to strengthen the EMCDDA's capacity to detect signals regarding public health at an earlier stage than before.

Based on information received from the EU EWS network that was then reviewed, validated and analysed, and from searches and reviews of OSI, 17 public health alerts (including updates) were produced. These alerts were then issued to the EU EWS network.

A Toxicovigilance System Framework was under development in 2015; this included the preparation of draft standard operating procedures for the signal management system. In order to support this, a study on the role of poison control centres in monitoring acute intoxications associated with NPS was undertaken. Another study examining the current body of knowledge and practice with respect to communicating, to drug users and the general population, the serious hazards and risks of an urgent nature that are associated with NPS and illicit drugs is also in progress.

The development of the next-generation replacement for the EDND made slower progress in 2015. This activity is resource intensive and implemented in parallel with the already very demanding tasks of ensuring the functioning of the EU EWS. A prototype system was designed and produced; this prototype focuses on the reporting and review of event-based data and is currently being tested by the EMCDDA. The prototype will be used to inform the development of the EDND, as outlined in the 2016 work programme.

The methodology for monitoring OSI was strengthened, allowing daily monitoring of events, reported in English-language OSI, that may be classified as serious and requiring an urgent response. Any relevant information identified was cross-referenced with data reported by Member States in order to prioritise monitoring and responses. This included the issuance of public health alerts on the synthetic cannabinoid ADB-CHMINACA after detection by the EMCDDA of a large multi-state outbreak in the United States ([20]).

([20]) Available at: https://www.federalregister.gov/articles/2016/02/05/2016–02302/schedules-of-controlled-substances-temporary-placement-of-the-synthetic-cannabinoid-mab-chminaca

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

In response to overarching indicator number 14 of the EU action plan on drugs 2013–16, work in Main Area 6, to monitor developments in legislation, national drug strategies, coordination mechanisms and public expenditure estimates in EU Member States, continued in 2015.

One important aspect of this effort is the monitoring and analysis of EU-level policy. In parallel, the EMCDDA also closely follows developments in drug policies at the international level. The agency is tasked with supporting the decision-making process by providing neutral, non-partisan, reliable information on all aspects of the drugs phenomenon.

### Highlights and main achievements

In 2015, the EMCDDA contributed to the biennial progress review of the European Commission as required by the EU action plan on drugs 2013–16 (specifically Action 47: Promote scientific evaluations of policies and interventions at national, EU and international level) (see Main Area 8).

Furthermore, the agency launched its analysis *Drugs policy and the city in Europe* in June 2015 ([21]). Drug problems often emerge, and are most acutely felt, in urban environments, making Europe's cities a valuable observation window for new drug trends. The EMCDDA Paper *Drugs policy and the city in Europe* describes how modern cities play host to a diverse set of drug-using populations, and the related health, social and security problems.

The term 'open drug scene' is used to describe the congregation of people who take drugs in public spaces. Such open drug scenes were found in several cities. These open drug scenes vary in visibility, size and the type of location in which they occur.

Also in June 2015, the agency published the short report *New psychoactive substances in Europe: Innovative legal responses* ([22]), which provides an overview of how European countries are developing innovative legal responses to the challenges presented to public health and drug policy by the rapidly evolving market for NPS (see Main Area 5).

The rehabilitative measures of treating, educating or reintegrating drug users as alternatives or additions to conviction or punishment were considered in the framework of the EMCDDA Paper *Alternatives to punishment for drug-using offenders* ([23]), published in July 2015.

([21]) Available at: emcdda.europa.eu/attachements.cfm/att_240226_EN_TDAU15001ENN1.pdf
([22]) Available at: emcdda.europa.eu/publications/ad-hoc-publication/new-psychoactive-substances-europe-innovative-legal-responses
([23]) Available at: emcdda.europa.eu/publications/emcdda-papers/alternatives-to-prison

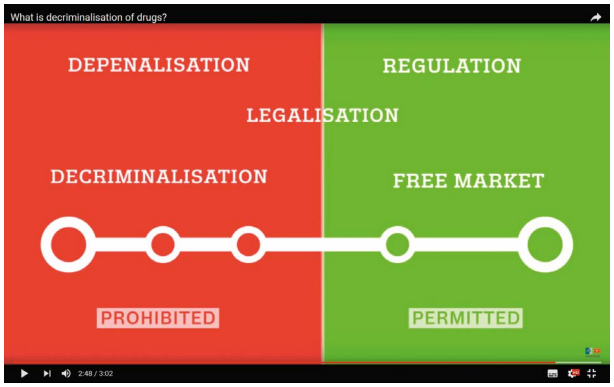
The European Legal Database on Drugs (ELDD) and the network of legal correspondents are the main resources that support the EMCDDA's reporting on drug laws. The agency also continued to provide Member States with support for their evaluation of drug policies on request. In 2015, input and/or technical support was provided to policymakers and professionals from EU Member States such as Germany, Ireland and Luxembourg.

The 16th Meeting of the Legal Correspondents of the ELDD was held in Lisbon, Portugal, on 8–9 September 2015. The two-day meeting brought together representatives from the 30 EMCDDA reporting countries and experts from the Russian Federation, Armenia and Ukraine, and provided delegates with the opportunity to exchange up-to-date information on national and EU drug-related legal issues, including updates on laws controlling new drugs.

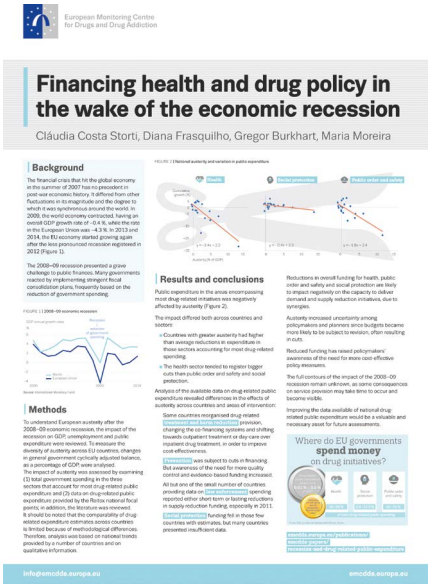
The meeting included four main sessions: 'National and EU updates on legislative developments'; 'Medicinal cannabis and derivatives'; 'Drugs and driving — legislative developments and enforcement practices'; and a special session entitled 'Alternatives to punishment', following the publication of an EMCDDA paper on this topic in July 2015 ([24]). The paper found that alternatives to punishment are available across Europe to varying degrees, and evaluations suggest that these alternatives to punishment have been associated with positive results; however, these evaluations are inconclusive. This topic was also highlighted by a study funded by the European Commission ('Study on alternatives to coercive sanctions as response to drug law offences and drug-related crimes'), for which the EMCDDA was tasked with providing support throughout the process.

Knowledge exchange in this field was further reinforced at international level, in the framework of a study visit of an EMCDDA staff member to CICAD, under the OAS, which led to the EMCDDA's contribution to a CICAD/OAS report entitled *Technical report on alternatives to incarceration for drug-related offences* ([25]). In addition, an intense exchange of views and information on various topics of common interest, such as developments in the area of cannabis legislation, took place; this was incorporated into the ongoing preparation of the EMCDDA Paper *Cannabis legislation in Europe — an overview*. This analysis, to be published in 2016, aims to summarise our knowledge on cannabis legislation at a time of great interest in legalisation and decriminalisation.

The terms 'depenalisation', 'decriminalisation' and 'legalisation' are often used in the debate on how to control the supply and use of drugs. An EMCDDA video entitled 'What is decriminalisation of drugs?' was released in June 2015 ([26]). There is no universal agreement on the precise meanings of these terms, but it is helpful to explore the different ideas associated with them in order to better understand what they mean in the context of the debate on different approaches to controlling the supply and use of drugs.




([24]) Available at: emcdda.europa.eu/system/files/publications/1020/TDAU14007ENN.pdf
([25]) Available at: https://drugpolicydebateradar.files.wordpress.com/2015/05/report-on-alternatives-to-incarceration.pdf
([26]) Available at: https://www.youtube.com/watch?v=9NKhpujqOXc


European Monitoring Centre for Drugs and Drug Addiction

**Financing health and drug policy in the wake of the economic recession**

Cláudia Costa Storti, Diana Frasquilho, Gregor Burkhart, Maria Moreira

**Background**

**Methods**

**Results and conclusions**

Where do EU governments **spend money** on drug initiatives?

info@emcdda.europa.eu

emcdda.europa.eu

To mark the first European conference on addictive behaviours and dependencies — Lisbon Addictions 2015 (see Main Area 7) — the EMCDDA released various posters on topics linked to this area, such as 'Drugs policy and the city in Europe' ([27]), 'Regional drug strategies across the world' ([28]) and 'Financing health and drug policy in the wake of the economic recession' ([29]).

Public expenditure in the areas encompassing most drug-related initiatives was negatively affected by austerity. Some countries reorganised drug-related treatment and harm reduction provisions, and changed co-financing systems and shifted towards outpatient or day-care treatment rather than inpatient treatment for drug problems, in order to make treatment more cost-effective.

A current project in the area of drug-related public expenditure aims to gather a set of representative examples of methods for estimating public expenditure on treatment for drug problems in Europe and internationally. The analysis *Methods to estimate the costs of drug treatment*, which should be published in 2016, envisages the monitoring of public expenditure estimates and an improvement of the European capacity to provide tools for evaluating policies.

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

The commitment to improve the scientific quality of our work is a prerequisite for fulfilling our role as a centre of excellence for the collection, analysis and dissemination of drug-related information. This primary objective, laid down in the three-year strategy and work programme 2013–15, was implemented in 2015 through a number of separate quality-related projects that addressed both substantive and process issues.

The top priorities in this area in 2015 were to ensure the development, quality and coherence of the agency's information collection and reporting system through the adoption of a revised national reporting system (in collaboration with the NFPs). In addition, the EMCDDA aims to ensure a high quality of scientific publishing and the coordination of other cross-cutting activities, particularly in the areas of training, emerging trends and monitoring the misuse of medicines in the context of polydrug use.

([27]) Available at: emcdda.europa.eu/attachements.cfm/att_242521_EN_03_LXAddictions_EQ_cities_FINAL.pdf
([28]) Available at: http://www.lisbonaddictions.eu/start, then go to section e-posters
([29]) Available at: emcdda.europa.eu/attachements.cfm/att_242515_EN_04_LXAddictions_CCS_recession_FINAL.pdf

## Highlights and main achievements

### Scientific Committee

In performing its scientific work, the EMCDDA benefits from the support of the Scientific Committee. This is one of the two statutory bodies of the EMCDDA and it plays an important scientific advisory role.

The 42nd Scientific Committee Meeting was held in Lisbon on 28–30 April. This meeting focused on the EMCDDA's draft 2016–18 strategy and the 2016 work programme. Discussions were organised in break-out sessions, allowing all Committee members to provide input on their particular areas of expertise and to exchange views with EMCDDA scientific staff. Also addressed at the meeting was the implementation of the agency's recently adopted policy on conflicts of interest and the preparation of contributions to the EU action plan on drugs (2013–16), namely on drug-related research priorities and the scientific evaluation of policies. In addition, the Committee reviewed the 54 eligible articles nominated for the fifth round of the EMCDDA Scientific Paper Award.

A formal opinion on the agency's 2016–18 strategy and work programme was adopted by written procedure.

The second meeting of the Scientific Committee in 2015 took place on 18–20 November. During this meeting, the extended Scientific Committee, and additional experts from the EU Member States, the European Commission, Europol and the EMA, carried out a formal risk assessment of the synthetic cathinone α-PVP, after over 100 deaths and 30 non-fatal poisonings associated with this substance were reported to the agency. After the meeting, on 18 December 2015, the European Commission published a proposal for a Council decision subjecting α-PVP to control measures (see Main Area 5).

During the days after the meeting, the new concept of EMCDDA multi-annual programming was also discussed, along with the Committee's contributions to the EU action plan on drugs (2013–16). Furthermore, the Director-elect, Alexis Goosdeel, addressed the Scientific Committee, and presented his vision for the EMCDDA. A debate followed, during which the members of the Scientific Committee and the Director-elect exchanged views on the topic.

In line with the agency's new policy on the prevention and management of conflicts of interest, members' declarations have now been published on the EMCDDA website. As decided by the Management Board in December 2015, the mandate of the Scientific Committee and reserve list was extended to cover the period 2017–19.

Members of the Scientific Committee were also actively involved in the 2015 EMCDDA Scientific Paper Award process, as reviewers of the concept, nominators of articles and members of the jury. The Committee also prepared and adopted its final contribution to the HDG's annual dialogue on research, which took place in November 2015.

The Scientific Committee members who reviewed EMCDDA publications during the year were (in alphabetical order) Anne Line Bretteville-Jensen, Gerhard Bühringer, Paul Dargan, Brice De Ruyver, Gabriele Fischer, Henk Garretsen, Dirk Korf and Rainer Spanagel. The publications peer reviewed were: *European Drug Report: Trends and Developments*; *The internet and drug markets* (EMCDDA Insights, released in February 2016); *Preventing opioid overdose deaths with take-home naloxone (*EMCDDA Insights, released in January 2016); *Emergency department-based brief interventions for*

*individuals with substance-related problems: a review of effectiveness* (EMCDDA Papers, released in January 2016); *Strategies to reduce diversion of substitution drugs for the treatment of opioid dependence* (EMCDDA Papers, 2016 release); and *Drug supply reduction and external security (*EMCDDA Papers, also to be released in 2016).

| MEETINGS OF THE SCIENTIFIC COMMITTEE | | |
|---|---|---|
| 28–30 April | Lisbon | 42nd meeting of the Committee |
| 18–20 November | Lisbon | 43rd meeting of the Committee |

## Scientific coordination

A key priority in 2015 was to further improve the quality and coherence of the EMCDDA's information collection and reporting system. A revised Reitox NRP entered into force in 2015; this determines how data from Member States are reported to the EMCDDA, in order to provide an overall picture of Europe's drug phenomenon. The aim of the new NRP is to ensure efficiency, match priorities and resources, and better address the information needs of European and national stakeholders (see also Main Area 1).

In terms of quality assurance measures, a proposal for a top-level data quality assurance model at the EMCDDA was finalised. The *EMCDDA internal statistics code of practice* was published in February. This represents a milestone in the path to reassessing quality standards: it establishes the goals to be pursued by the agency and reflects its commitment to ensuring high-quality data collection, analysis and reporting (see Main Area 1).


Furthermore, the work on the implementation of a mechanism to check the quality and coherence of data collection tools has continued under the framework of the work carried out by the Data Coherence Group (DCG).

The EMCDDA also has a duty to share knowledge, and partnerships with academic institutions help us to achieve this. One example is the European drugs summer school. The agency continued its partnership with the ISCTE — University Institute of Lisbon (ISCTE-IUL) in 2015 and, together, these two organisations held the fourth summer school on 'Illicit drugs in Europe: demand, supply and public policies' ([30]). The initiative was also supported by the US National Institute on Drug Abuse (NIDA).

The two-week summer school, which took place from 29 June to 10 July 2015, brought to Lisbon a record 37 academics and professionals from Asia, Europe, Latin America and North America, four of whom had received scholarships from ISCTE–IUL or NIDA.

As in previous years, the students expressed their views on the course via evaluation questionnaires. The overall satisfaction score, on a scale of 1 to 10 (not satisfied to very satisfied), was 8.73, and the large majority of participants (97 %) indicated that they would recommend the summer school to others.

([30]) For more information: http://www.drugsummerschool.cies.iscte-iul.pt/np4/home

Another important channel for knowledge dissemination is scientific publishing. In 2015, 45 scientific publications were released by the EMCDDA (including a few joint products with our partners), and 27 scientific articles authored or co-authored by EMCDDA staff were published in prestigious journals.

The complete list of publications is presented in Annex 3, and brief overviews of these publications are given under the different Main Areas discussed in this report.

A crucial element for ensuring the high value of our publications is the implementation of the EMCDDA overall scientific quality control framework. This includes a robust quality control procedure, which is supported by an internal tool — the products database — that includes all EMCDDA products in different stages of preparation, with clear indications of the staff responsible and the production timeline. Furthermore, a peer-review system sets out the procedures for internal coordination, quality control processes, and internal and external peer-review mechanisms for products.

## Emerging trends

Monitoring new developments was also an important field of work in 2015. The activities of the agency in this field reflect an increasing recognition of the importance of facilitating the development of early responses to potential threats by strengthening the systems for identifying, tracking and understanding new and emerging trends in drug use and availability, and the associated adverse consequences.

The speed with which the internet is transforming drug markets poses a major challenge to law enforcement, public health, research and monitoring agencies, according to the EMCDDA Technical report *The Internet and drug markets — summary of results from an EMCDDA Trendspotter study*, which was released in January 2015 ([31]).

The study kicked off with data collection and a literature review in September 2014, and culminated in an expert meeting in Lisbon on 30–31 October 2014. Insights were provided from experts in the fields of information and communication technology (ICT), research, monitoring and law enforcement, and with regard to the internet and drug users. Special focus was placed on the online sale of NPS and medicinal products for illicit use; the role of social media and apps; and drug sales on the 'deep web' (inaccessible via standard web browsers). The terms 'surface web', 'deep web' and 'dark net' are explained in an EMCDDA video, which will be released in 2016 ([32]).

This topic will be further explored in the EMCDDA Insights publication *The internet and drug markets*, to be published in early 2016.

In addition, the EMCDDA launched a 'Trendspotter' study on critical new developments within Europe's MDMA/ecstasy market, such as signs of increased MDMA production and availability, the opening of new online markets, and reports of increased use and even MDMA-associated deaths in some countries. The study commenced with a phase of data collection and literature review, and culminated in an expert meeting in Lisbon on 22–23 October 2015. This resulted in an in-depth analysis of the topic, providing insights from the perspectives of drug research and monitoring, wastewater analysis, law enforcement and health, which is due for publication in the first half of 2016.

([31]) Available at: emcdda.europa.eu/publications/technical-reports/internet-drug-markets
([32]) Available at: https://www.youtube.com/watch?v=x2lAqiLxj98

## Monitoring the misuse of medicines

In 2015, the EMCDDA continued its work in the area of monitoring the misuse of medicines and released a new analysis that places the spotlight on benzodiazepine misuse among high-risk opioid users, who may take these medicines to self-medicate or to enhance the effects of opioids. This analysis was released in June as part of the POD series under the framework of the EDR 2015 ([33]). This POD aims to provide a better understanding of the motives for, and the consequences of, the co-use of opioids and benzodiazepines, the pharmacological interactions between opioids and benzodiazepines, the clinical implications, the responses and the existing medical guidelines.


Benzodiazepines are a widely prescribed group of medicines with a range of clinical uses, including the treatment of anxiety and insomnia, and the management of alcohol withdrawal. For a number of reasons, this group of medicines are often misused by high-risk opioid users and are associated with morbidity and mortality among this group. The analysis shows how the combined use of opioids with benzodiazepines or other central nervous system depressants (e.g. alcohol) contributes to an increase in the risk of overdose-related deaths. Prescribing and clinical practice guidelines could play a key role in the management of this complex issue. Furthermore, the agency released a video on this topic, showcasing not only interviews with renowned experts in the field, but also with users ([34]).

The case study was designed with the objective of testing the EMCDDA's data collection tools, existing networks and mechanisms, and their potential for future in-depth analyses in the area of the misuse of medicines. Therefore, the analyses in the publication are based on the EMCDDA's expert meetings and main data sources, but also on literature reviews and external sources (e.g. the Euro-DEN project (see Main Area 3)).

## Drug-related research

The EMCDDA continued to follow EU and national drug-related research projects closely and to present the information on its public website ([35]), as well as on dedicated intranet pages. Ongoing contacts and collaboration with drug-related research consortia and projects took place in 2015. These included ALICE-RAP ([36]), SEWPROF (a sewage profiling project), SCORE (Sewage Analysis Core Group Europe), LINKSCH ([37]), ERANID ([38]) and DECIDE (Developing and evaluating communication strategies for supporting informed decisions and practice based on evidence). Furthermore, the

([33]) Available at: emcdda.europa.eu/topics/pods/benzodiazepines
([34]) Available at: https://www.youtube.com/watch?v=hKnQ6-HLjws
([35]) http://www.emcdda.europa.eu/topics/research
([36]) ALICE-RAP (Addiction and Lifestyles in Contemporary Europe — Reframing Addictions Project) is a five-year research project funded through the Socio-economic Sciences and Humanities theme of the European Commission's Seventh Framework Programme for Research and Development (FP7) (see http://www.alicerap.eu/).
([37]) LINKSCH is a project that was set up under the FP7 and unites researchers from France, Germany, the Netherlands and the United Kingdom.
([38]) ERANID (European Research Area Network on Illicit Drugs) is a European Research Area Network (ERA-NET) project funded through the Socio-economic Sciences and Humanities theme of the FP7 (see http://www.eranid.eu/).

EMCDDA provided support for the satellite events of the ERANID and ALICE-RAP projects, held in the margins of Lisbon Addictions 2015.

The EMCDDA co-hosted, on 11–15 October in Ascona (Switzerland), the second international conference on the analysis of drugs in wastewater, 'Testing the Waters 2015', organised by the Swiss Federal Institute of Aquatic Science and Technology (Eawag) in association with EU-funded SEWPROF and SCORE.

The conference hosted presentations on the latest research findings and technical advances in the field. Wastewater analysis is a rapidly developing and novel scientific discipline with the potential for monitoring near-real-time, population-level trends in illicit drug use. The EMCDDA, which was represented on the conference's organising and scientific committees, described its work in this domain, and also presented an award for the best poster at the event.

In 2015, over 50 papers in five categories were nominated for the fifth round of the EMCDDA Scientific Paper Award. The primary authors of the five winning papers gathered in Lisbon on 23 September in the margins of Lisbon Addictions 2015. The award, inaugurated in 2011 by the EMCDDA and its Scientific Committee, celebrates scientific writing and distinguishes high-quality research in the field of illicit drugs. The six primary authors of the winning papers were Monique Vallée (France), Christoph Ort (Switzerland), Tim Weaver and Nicola Metrebian (United Kingdom), Ricardo Gonçalves (Portugal), and Pierre-Arnaud Chouvy (France) ([39]).

*Scientific paper awardees 2015: Ricardo Gonçalves; Nicola Metrebian; Tim Weaver; Monique Vallée; Kenza Afsahi (representing primary author Pierre-Arnaud Chouvy); Christoph Ort, with EMCDDA Director and the Chairs of the EMCDDA Management Board and of the Scientific Committee*

In 2015, the agency continued to contribute to various studies and research. The EU action plan on drugs 2013–16 indicates that the EMCDDA's Scientific Committee had an important role to play in three of the plan's actions (Actions 30, 46 and 47), all of which are related to drug research in Europe. The EMCDDA, advised by its Scientific Committee, supports the European Commission in the preparation of the Council's annual dialogues on drug-related research; these dialogues take place under the framework of the HDG. The 2015 contribution of the Scientific Committee was submitted to the HDG on 15 October 2015.

In 2015, the EMCDDA co-organised a major new event in the field of addiction research: the first European conference on addictive behaviours and dependencies — Lisbon Addictions 2015 — which was also held in Lisbon on 23–25 September 2015 ([40]). Hosted by SICAD, the event was held in collaboration with the scientific journal *Addiction* and the ISAJE

([39]) Available at: emcdda.europa.eu/activities/scientific-paper-award
([40]) For more information: www.lisbonaddictions.eu

The 350 presentations, comprising keynote speeches, oral presentations and posters, provided participants at Lisbon Addictions 2015 with a comprehensive overview of the main issues on the research agenda in the addictions field today.

Lisbon Addictions 2015

First European conference on addictive behaviours and dependencies

The agency was not only co-organiser of the event, but it was also represented by numerous oral and poster presentations. Lisbon Addictions 2015 included a one-week-long array of satellite meetings and side events, as well as 10 sessions 'sponsored' by organisations to address specific themes ([41]).

The EMCDDA organised several sessions:

- 'EMCDDA face-to-face' to showcase the work of the agency as it commemorates 20 years of monitoring the drug phenomenon;
- 'Scaling up responses to hepatitis C (HCV) among people who inject drugs (PWID) in Europe: what are the priorities?' (co-organised with the ECDC);
- 'Capacity building in research and programme implementation in the addictions: promoting synergies and sustainability' (co-organised with NIDA);
- 'Understanding the risks and benefits of OST in Europe: triangulating data from monitoring and research sources' (Reitox).

Alongside the conference, the EMCDDA organised an event, held on 21–22 September 2015, on the main issues arising from 20 years of drug monitoring, with a focus on KIs (see Main Area 2).

**Lisbon Addictions 2015** reached its maximum capacity three months ahead of its opening. Over 600 participants — researchers, practitioners and policy experts from 58 countries and a range of specialist areas — attended the event.


The success of the conference, however, is reflected not only in this high level of interest and attendance, but also in the satisfaction expressed by participants in a post-conference survey. Over half of the conference participants responded to the online questionnaire and the results speak for themselves. A notable 86 % of respondents rated the 16 conference keynote speakers as 'excellent' or 'very good', while two-thirds of respondents also rated the 200 oral presentations in this way. There were more than 100 rapid communications (posters) and these were also considered to be of high quality by the participants: half of respondents rated them as 'excellent' or 'very good'.

Finally, over 80 % of respondents rated the 'overall impression' of the conference as 'excellent' or 'very good', which explains why 85 % of respondents said that they would recommend the event to others.

As a result of this success, the organisers have decided to launch Lisbon Addictions 2017, which will take place from 24 to 26 October 2017.

([41]) EMCDDA contributions are available at: emcdda.europa.eu/events/lisbon-addictions-2015/emcdda-staff

# 4

# CHAPTER 4
# Cooperation and collaboration with key partners (Main Area 8)

The cooperation with key external partners, namely EU institutions and bodies, national policymaking bodies, international organisations, civil society organisations and third countries, represented an important part of the EMCDDA's work within the 2013–15 strategy and work programme, which committed the agency to strengthening and enhancing cooperation with European, national and international partners.

Throughout 2015, the agency provided technical support to EU institutions and Member States, and continued to build synergies with other EU agencies and international organisations; furthermore, the EMCDDA continued its successful work with candidate and potential candidate countries, and ENP countries, with a view to supporting them with the development of their drug monitoring capacities, in line with the EMCDDA's data collection tools and methods. This transfer of knowledge was mainly accomplished through the implementation of the latest technical assistance project funded by the European Commission under the new IPA — IPA 5 — and the continuation of the technical assistance project in partner ENP countries, which started in 2014.

## Highlights and main achievements

### The EU institutions

In 2015, the EMCDDA continued to support drug policy dialogue at EU level by providing expertise and technical information to the European Parliament, the Council and the European Commission.

With regard to the collaboration with the European Parliament, the findings from the most important EMCDDA publication — the 2015 EDR (see Main Areas 1 and 9) — were presented by the Director, Wolfgang Götz, to the Civil Liberties, Justice and Home Affairs Committee of the European Parliament (LIBE Committee) in Brussels on 17 June. This was followed by meetings of the Director with Members of the European Parliament (MEPs) Péter Niedermüller (Hungary), Tomáš Zdechovský (Czech Republic) and Gérard Deprez (Belgium), on issues concerning the work of the agency. Furthermore, the Director participated in an exchange of views with European members of the Global Commission on Drug Policy at the European Parliament on 27 January 2015, and the Scientific Director attended the event 'EU policies on the fight against drugs trafficking and organised crime: assessing a new approach for soft drugs', which was co-hosted by the MEPs Ignazio Corrao and Elly Schlein (Italy) on 13 July.

The Director also met the MEP Tomáš Zdechovský on 13 May during a visit of the latter to the EMCDDA. A written answer was prepared in response to a request from the MEP

Michal Boni about an outbreak of approximately 200 serious adverse events associated with a branded 'legal high' product called 'Mocarz' in Poland, and agency staff participated in the United Nations General Assembly Special Session on Drug Policy (UNGASS) at the European Parliament in Brussels, which was organised by the MEP Michal Boni and EURAD (Europe Against Drugs), on 23 September.

Finally, the candidate selected by the Management Board for the post of Director, Alexis Goosdeel, had an exchange of views with members of the LIBE Committee at the European Parliament in Brussels on 22 September; on the basis of the subsequent positive opinion of the European Parliament, the EMCDDA Executive Committee adopted, on behalf of the EMCDDA Management Board, the formal decision to appoint Mr Goosdeel as the new Director of the EMCDDA (see also Main Area 10).

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

In terms of cooperation with the Council, the EMCDDA presented the EDR 2015 to the HDG of the Council on 16 June 2015 in Brussels. The agency also participated in nine other meetings of the HDG held throughout the year under the Latvian Presidency and the Luxembourgish Presidency of the Council, and provided presentations and active contributions to the discussions, particularly with regard to NPS, which remained one of the topics of highest interest, the monitoring of EU minimum quality standards of interventions and the misuse of medicines.

Contributions were also made to the dialogues with Russia, the Western Balkans, the Eastern Partnership countries and the United States, and to the meetings of the National Drug Coordinators, EU-CELAC (CELAC is the Community of Latin American and Caribbean States) and the Dublin Group. A comprehensive list of the events attended by the EMCDDA in this area can be found in Annex 4.

Another important task of the EMCDDA is to support the 2013–17 EU policy cycle for organised and serious international crime under COSI. In 2015, the EMCDDA fulfilled the tasks assigned to it in the OAPs, namely by providing contributions in the fields of synthetic drugs, cocaine and heroin (see Main Area 4).

The cooperation with the European Commission was further strengthened in 2015, in particular with the DG for Migration and Home Affairs (DG HOME) being the EMCDDA's partner DG. Coordination dialogues with other DGs, such as the DG for Health and Food Safety (DG SANTE), the DG for Neighbourhood and Enlargement Negotiations (DG NEAR) and the European External Action Service (EEAS) took place throughout the year.

A key contribution was the input provided by the EMCDDA to the first bi-annual progress assessment of the EU action plan on drugs 2013–16, at the request of DG HOME.

At a technical level, cooperation was ongoing, particularly in the areas of NPS (with DG HOME and DG TAXUD — see Main Area 5) and supply (with DG HOME and Eurostat — see Main Area 4). In addition, the EMCDDA participated in the meetings of the EU's HIV/AIDS Think Tank, organised by the European Commission (DG SANTE). These meetings gather representatives from EU Member States, as well as the main European and international organisations working in the infectious disease field.

The EMCDDA provided the European Commission, upon request, with briefing notes on the drug situation in third countries (see last two sections under this main area) such as Brazil, Kosovo, Morocco, Russia, Serbia, Tunisia, Turkey, Pakistan and Peru. These briefing

notes supported visits of high-level European Commission representatives to these countries and the preparation of various subcommittee meetings. Furthermore, country situation analyses for each of the candidate and potential candidate countries were drafted and sent to DG NEAR for the preparation of its progress reports. The EMCDDA also participated in the oral consultation, organised by DG HOME and DG NEAR, held on 15–16 June in Brussels, on the progress reports for the candidate and potential candidate countries.

The agency also contributed to the drafting of the evaluation report of the Cooperation Programme between Latin America and the European Union on Drugs Policies (COPOLAD) 1 project.

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

### Member States

The cooperation between the EMCDDA and EU Member States is key to the successful implementation of EMCDDA activities. The monitoring systems of the agency rely on the information provided by the 30 reporting countries, including the 28 Member States. Throughout 2015, technical support was provided to national data providers through, for instance, ongoing contact and assistance, and the Reitox Academy Training Programme (see Main Area 10).

In addition, the EMCDDA participated in various bilateral meetings with Member State representatives. Examples include meetings with the Governmental Commission on Drugs of the Slovenian Ministry of Health in March; the Slovak authorities in April; the Italian NFP in June; and the United Kingdom Home Office and NFP in July. The EMCDDA also accepted an invitation to attend an event to mark the International Day Against Drug Abuse and Illicit Trafficking, which was organised by the Cyprus Antidrug Council and held on 26 June. In the margins of the event, Alexis Goosdeel of the EMCDDA received an award from the national drug coordination committee, the Cyprus Antidrug Council, for his valuable contribution to its work since 2001 and for the creation of a national drug monitoring centre and Reitox NFP in Cyprus (known as EKTEPN).

In addition, the agency received visits from several high-level Member State delegations. The Minister of Health of Luxembourg, Lydia Mutsch, and other delegates visited the EMCDDA in April 2015. The German Drug Commissioner, Marlene Mortler, and members of the Health Committee of the German Parliament also visited the EMCDDA in April. Another highlight was the visit of members of the Committee on Justice, Defence and Equality of the Irish Parliament on 4–5 June; these visitors were given the opportunity to attend the launch of the EDR 2015 on 4 June.

Because Portugal is the host country of the EMCDDA, particular attention has been paid to continuously improving the collaboration with its authorities, namely with the Portuguese Parliament and Government, and the Presidency of the Portuguese Republic. In 2015, there was ongoing contact between the EMCDDA and the Portuguese authorities, within the framework of the Seat Agreement, and there were also institutional and technical visits to the agency. To that end, representatives of the Portuguese Ministry of Defence and members of the Committee on European Affairs of the Portuguese Parliament visited the EMCDDA in June and July, respectively.

## EU agencies and international organisations

The year 2015 also saw important developments in the collaborations with other EU agencies, within existing agreements and work programmes.

At institutional level, the EMCDDA contributed to the Heads of Agencies network meetings (held on 20 February and 28 May in Brussels and 22–23 October in Dublin). EMCDDA staff also contributed to work carried out within inter-agency networks, such as the EU Agencies Network of Scientific Advisors (EU-ANSA); the Heads of Administration network; the Heads of Communication network; the Performance Development network; the Inter-Agency Legal network (IALN); and the Inter-Agency ICT Managers' network (ICTAC).

Joint work was also carried out under the framework of the network of Justice and Home Affairs (JHA) agencies, which was created in 2006 to foster JHA inter-agency cooperation. The newly elected EMCDDA Director attended the annual meeting, which was organised and held by the 2015 Chair of the JHA network, eu-LISA, in Tallinn, Estonia, on 3 November. In 2015, the EMCDDA was in charge of organising the 5th Informal Strategy Meeting between the European Commission's Director-General for Migration and Home Affairs and the directors of the DG HOME agencies, which took place on 8–9 May in Grândola, Portugal. The EMCDDA also contributed to the meetings of the JHA agencies' contact group ([42]), which took place in Tallinn (on 4 March, 11 June and 6 October) and the meeting of the working group on training (on 10 June in Tallinn).

Building on the already existing excellent collaboration, further synergies continued to be built with EMSA, particularly in the areas of staff training, logistics and infrastructure management, and information and ICT.

Finally, the EMCDDA consulted the JHA agencies, as well as the ECDC and the EMA, on its draft strategy and work programme for 2016–18. In turn, the agency was invited to provide feedback on the work programmes developed by Eurojust, the European Asylum Support Office (EASO), CEPOL and Europol.

On a technical level, the collaborations were further strengthened with Europol (see Main Areas 4 and 5), CEPOL and Eurojust (see Main Area 4), the EMA (see Main Area 5) and the ECDC (see Main Areas 2 and 3). A coordination meeting with the ECDC took place on 9 October 2015 in Lisbon, during which Michael Catchpole, ECDC Chief Scientist, paid a visit to the EMCDDA.

Cooperation with international organisations was also enhanced in 2015, in particular with the UNODC, the WHO, CICAD and the Pompidou Group.

Extensive participation in UNODC meetings took place throughout the year in Vienna, Austria. Examples of such meetings include the 58th session of the CND (9–17 March — see also Main Areas 3 and 4); the Global SMART Advisory Board meeting, (17 March); and the reconvened 58th session of the CND (9 December). The agency contributed to a side event, organised by SICAD, of the reconvened 58th session of the CND; this side event was entitled 'A public health approach as a base for drugs policy'.

([42]) The JHA agencies' contact group is composed of representatives from Europol, Eurojust, CEPOL, Frontex, the Fundamental Rights Agency, eu-LISA, EASO, OLAF (European Anti-Fraud Office) and the European Commission (DG HOME, DG JUST and the Secretariat-General). This informal group was set up by Europol under the Swedish Presidency of the Council to support and prepare the annual meetings of the JHA agencies' directors, and to monitor multilateral cooperation.

The EMCDDA also contributed its NPS data to the UNODC Global SMART programme, namely by providing a list of newly notified NPS and the aggregated data on NPS seizures; and to the annual risk assessment meeting of the WHO Expert Committee on Drug Dependence by providing data on serious adverse events and seizures.

In recent years, cooperation with the WHO Regional Office for Europe (WHO Europe) has covered issues related to prison and infectious diseases, whereas cooperation with WHO headquarters has focused on the quality standards of interventions and the monitoring of treatment systems. In 2015, the EMCDDA contributed to work on defining a minimum public health data set for prisons, and provided input to the European consultation on health sectorial strategies launched by WHO Europe. As a member of the steering group of the Health In Prisons Programme (HIPP) of WHO Europe, the EMCDDA attended two meetings related to prisons and drug use organised by the latter: one was held in Copenhagen, Denmark, on 28–29 May, and one was held in Bishkek, Kazakhstan, on 27–29 October.

In terms of collaboration with CICAD, the EMCDDA edited a CICAD/OAS report on alternatives to incarceration (*Technical report on alternatives to incarceration for drug-related offenses*). Furthermore, an exchange programme took place with CICAD in 2015, during which an EMCDDA staff member was assigned to work with CICAD for one month.

In terms of cooperation with the Pompidou Group, the EMCDDA participated in several MedNET meetings during 2015 (in Tunis, Tunisia, on 19 May; in Cairo, Egypt, on 3–5 September; and in Paris, France, on 15–16 December). Furthermore, the agency contributed to the MedNET Euro-Mediterranean seminar on substitution treatment and harm reduction, which took place in Algiers, Algeria, on 21–22 April. The agency also contributed to the Pompidou Group's expert group on 'Possible adverse effects and associated cost of drug control policies' during a meeting that took place in Oslo, Norway, on 8–9 June.

### Candidate and potential candidate countries

Cooperation with candidate countries and potential candidate countries continued in 2015 within the framework of the new IPA (IPA 5) technical assistance project, which was awarded to the EMCDDA in June. Within the 24-month project, seven IPA beneficiary countries (Albania, Bosnia and Herzegovina, Montenegro, Kosovo, Serbia, the former Yugoslav Republic of Macedonia and Turkey) will be provided with further capacity building and technical support in order to prepare them for their participation in the work of the EMCDDA.

The EMCDDA drafted roadmaps which assess the level of progress made by each country towards being fully prepared to participate in EMCDDA activities (i.e. what each country has in place and still needs to put in place in order to establish a functional drug observatory and meet the EMCDDA's requirements for data collection and reporting). In particular, data collection mechanisms were analysed and recommendations for improvement were formulated. These recommendations will be the basis for developing and implementing further activities in 2016–17, in close cooperation with the countries and depending on their commitment to participate.

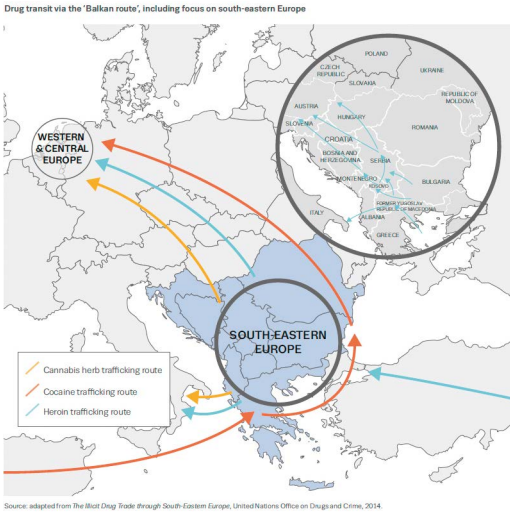
Based on the needs identified so far at country level and on EU-specific priorities, overall support for establishing functional observatories, harmonising data collection in the drug supply area and establishing national EWSs will be the main areas of upcoming cooperation. To this end, country visits by the EMCDDA to Albania, Montenegro and

Serbia were organised in order to agree upon future activities, and a meeting entitled 'Establishing national EWS in Serbia' took place on 17 December in Belgrade, Serbia, at the request of the Drug Monitoring Centre of the Serbian Ministry of Health. Approximately 45 participants, representing a wide range of governmental partners, attended the event at which the setting-up of an EWS for new drugs in Serbia was discussed.

Furthermore, experts from IPA 5 beneficiary countries attended different EMCDDA meetings throughout the year. These included the '20 years of monitoring' event (see Main Area 2) and the 4th extended Reitox Week (in Lisbon on 22–26 November) (see European Neighbourhood Policy countries and other third countries section under this Main Area).

In 2015 the EMCDDA published three publications based on its work within IPA projects, as follows:

- *Drug use and its consequences in the Western Balkans 2006–14* ([43]) (EMCDDA Ad hoc publication, March 2015). This report is the result of many years of cooperation between the EMCDDA and countries in the Western Balkans, and is the first of its kind. It gives insights into the drug-related problems faced by six countries in this region, based on the data gathered by a range of partners and the EMCDDA. Funded by the European Commission's IPA instrument, the report is a starting point for building a more detailed and accurate picture of the drug situation and related responses in the Western Balkans, and will lead to information and analyses that represent an added value for the countries involved, as well as European and national stakeholders.




- *Drug law offences in the Western Balkan region: from definition to monitoring: A report based on the Reitox Academy 'Drug law offences in the Western Balkan region: from definition to monitoring', organised on 2 and 3 April 2014 in Podgorica, Montenegro* ([44]) (EMCDDA Technical report, February 2015). This report was prepared based on materials from the Reitox Academy 'Drug law offences in the Western Balkan region: from definition to monitoring', which took place on 2–3 April 2014, and was organised by the EMCDDA under the framework of the IPA 4 project 'Preparation of IPA beneficiaries for their participation with the EMCDDA'.
- *Prevention of infectious diseases among people who inject drugs in some Western Balkan countries: A report based on the Reitox Academy organised on 29–30 October 2013 in Sarajevo, Bosnia and Herzegovina* ([45]) (EMCDDA Technical report, February 2015). This report was prepared based on materials from the Reitox Academy 'Prevention of infectious diseases among people who inject drugs in some Western Balkan countries', which took place on 29–30 October 2013, and was organised by the EMCDDA under the framework of the IPA 4 project 'Preparation of IPA beneficiaries for their participation with the EMCDDA'.

([43]) Available at: emcdda.europa.eu/publications/2015/western-balkans-report
([44]) Available at: emcdda.europa.eu/publications/technical-reports/drug-law-offences-western-balkan-countries
([45]) Available at: emcdda.europa.eu/publications/technical-reports/prevention-infectious-diseases-western-balkan-countries

## European Neighbourhood Policy countries and other third countries

In 2015, the EMCDDA continued to implement the first ENP technical assistance project started in 2014. This project, called 'Towards a gradual improvement of ENP partner countries' capacity to monitor and to meet drug-related challenges', aims to strengthen the capacity of ENP partner countries (Armenia, Azerbaijan, Georgia, Israel, Moldova, Morocco and Ukraine) to react to new challenges and developments in the drugs situation.

Capacity development activities are central to the project. In 2015, three Reitox Academies were organised for 88 participants, as follows:

- The Reitox Academy 'Monitoring and control of new psychoactive substances' took place on 16–17 April in Tbilisi, Georgia. Twenty-seven professionals, representing national monitoring bodies, national law enforcement agencies and national forensic laboratories, from Azerbaijan, Belarus, Georgia, Israel, Moldova and Ukraine, participated in the event.
- The National Reitox Academy in Israel, 'Building the Treatment Demand Indicator: Challenge for monitoring and evaluation systems to support coherent national policies', was hosted by the Israel Anti-Drug Authority (IADA) in Jerusalem on 10 and 11 November. The event was attended by 22 participants in total.
- The National Reitox Academy in Morocco, 'Best practices in drug use prevention', took place in Rabat on 8 and 9 December. A total number of 39 participants were involved in the event (see Main Area 3).

In addition, one study visit was organised, to Romania, for four experts from Moldova. The participants visited the Romanian NFP from 26 to 28 May with a view to sharing experiences on issues related to the organisation of the NFP and the management of data collection. Furthermore, the ENP technical assistance project team visited Armenia, Georgia and Moldova, which allowed next year's work programme and the framework for cooperation to be agreed.

Other key project results include the completion of three ESPAD studies, co-funded through the ENP project, in Georgia, Moldova and Ukraine. Furthermore, ONDA launched, in Rabat on 2 March, its first national report on the drug situation, with the support of the Council of Europe's Pompidou Group and the EMCDDA. The agency also accepted an invitation to the MedNET meeting on NFP building, organised by the Pompidou Group in Tunis on 20–21 May, at which the EMCDDA presented the added value and outcomes of national drug observatories in Europe.

At the institutional level, important events were the signing of two Memorandums of Understanding (MoUs) with authorities from Armenia and Georgia.

The MoU between the EMCDDA and the National Security Council of Armenia (NSC) was signed in Yerevan, Armenia, on 28 July, by the EMCDDA Director and the NSC Chief of Staff, Aram Tananyan. The agreement will allow an exchange of technical expertise and knowledge between the two bodies, the co-sponsoring of technical meetings, and the pooling of human and financial resources to launch joint programmes. The NSC will endeavour to present to the EMCDDA an annual report on the drug situation in Armenia. The EMCDDA, for its part, will facilitate training as well as the exchange of expertise and scientific research findings on issues of mutual interest.

The MoU between the EMCDDA and the Georgian Ministry of Justice was signed by the EMCDDA Director and the Georgian Minister of Justice, Tea Tsulukiani, in Tbilisi, Georgia, on 4 November. The agreement will boost cooperation between the two bodies with regard to monitoring the drugs problem, and will facilitate the collection, processing and dissemination of information.


*Signature of Memorandum of Understanding between the EMCDDA and the Georgian Ministry of Justice on 4 November in Tbilisi: Director Wolfgang Götz and Minister of Justice of Georgia, Tea Tsulukiani*

The fourth Reitox Week took place on 22–26 November in Lisbon. This annual event, initiated in 2012 and enlarging the regular HFP meeting (see Main Area 10), brought together representatives from almost 45 nations, including representatives from the 30 Reitox network members (i.e. the 30 EMCDDA reporting countries), Albania, Armenia, Azerbaijan, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Georgia, Israel, Kosovo, Lebanon, Moldova, Morocco, Serbia and Ukraine. The purpose of this annual event is to broaden the scope of regular Reitox meetings, underline the importance of the EU drug monitoring model and add impetus to the agency's technical cooperation with countries outside the EU.

In addition, the 2015 event focused on a question of potential interest for national drug observatories from all countries: 'What do we know about women using illicit drugs, what are the gaps in our knowledge, and what are the consequences for the monitoring of the situation and the organisation of responses?'.

On 24 November 2015, under the framework of the fourth Reitox Week, the EMCDDA organised, for the first time, a meeting dedicated to the topic '**Women and drugs**'.

The aim of the event was to share the knowledge and experience of the participating countries on the implications of gender for drug use and treatment for drug problems, in order to identify the potential needs and opportunities for monitoring and research, and explore how this knowledge could be used to inform national decision-makers and feed the planning and organisation of services. The meeting brought together researchers, as well as participants from 40 different countries.


Furthermore, the ENP project supported the participation of drug monitoring experts from Georgia, Israel, Moldova and Morocco in Lisbon Addictions 2015, held in September (see Main Area 7). A session entitled 'Capacity building in research and programme implementation in the addictions: Promoting synergies and sustainability' was held during the conference in order to share the agency's extended experience of working in the ENP region.

The agency contributed to a training course organised by CICAD (held on 26–27 March in San José, Costa Rica) on national reporting under the framework of the national drug observatories of Central America.

Upon invitation, the EMCDDA also supported a training course on the national drug observatory in Abu Dhabi (United Arab Emirates) on 23–26 March, which was attended by approximately 30 participants.

5

CHAPTER 5

# Supporting the achievement of results

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

Communication is a core activity of the EMCDDA in terms of both supporting its role as an information agency and promoting its reputation as the 'reference point on drugs in Europe'. Work in 2015 was guided by the integrated *EMCDDA communication strategy* ([46]), which sets out the EMCDDA's fundamental principles for communicating knowledge and presents the tools available for building and nurturing relationships with stakeholders, target audiences and partners.

The EMCDDA product range continued to be adapted in 2015, which reflects the priorities to disseminate information online and to seek the most cost-efficient solution. New dissemination options were explored, and social media and targeted electronic updates were used throughout the year to enhance communication and dialogue with stakeholders and target groups.

### Highlights and main achievements

#### Ongoing development of communication tools

Identifying the most effective channels for communicating with our audiences and innovating and constantly developing our means to reach these audiences are core tasks of the agency. This involves close collaboration between the internal teams in charge of content production and publication, coordination with external partners, close contact with stakeholders, and ongoing monitoring of the external environment in order to make sure that our dissemination efforts are coordinated with key drug events and policy developments.

Efficient communication also implies a constant effort to review and rationalise the EMCDDA product range. Work aimed at achieving a better mix of print and online products continued in 2015, while taking into account new information-seeking behaviours but also the need to save costs. As an information agency, the EMCDDA is constantly innovating and making use of creative solutions for the dissemination of its knowledge. To this end, new formats were trialled for rapid communication products (e.g. the NPS-related products which were disseminated at major events, such as the 58th session of the CND, the International Day Against Drug Abuse and Illicit Trafficking, etc.). Furthermore, various audio-visual formats were conceived, including

([46]) Available at: emcdda.europa.eu/publications/communication-strategy

motion graphics, as well as interactive products and explanatory and exploratory data visualisations.

The EMCDDA has also made efforts to implement a revised linguistic policy, which, on the one hand, observes the EU multilingual policy, but, on the other hand, follows efficiency principles. Budget constraints, however, meant that choices had to be made: during 2015, in addition to the multilingual editions of the *European Drug Report 2015: Trends and Developments*, only a few other reports were translated, namely those that are particularly relevant to certain Member States. For example, the *ECDC and EMCDDA guidance. Prevention and control of infectious diseases among people who inject drugs* (Joint publication, 2011) was translated into Latvian; *Building a national drugs observatory: a joint handbook* (Joint publication, 2010) was translated into Portuguese; and some PODs of strategic importance were identified for translation into French, German, Portuguese and Spanish.

In 2015, the EMCDDA made some further progress in the implementation of the terminology/glossary project and continued the efforts made in previous years in collaboration with the NFPs. This is part of the EMCDDA strategy to improve translation quality. A total of 42 translated terms were sent to the NFPs for checking and validation.

Keeping abreast of the needs of our customers requires a regular review of how we are serving them and by what means. The audience engagement strategy and action plan were adopted internally and six training sessions were held throughout the year for staff responsible for managing the six stakeholder categories identified in the *EMCDDA communication strategy*. Action plans for better engagement with each of these categories were drafted by the group and presented in a final project report. This will be taken forward in 2016 and analysed in line with the new EMCDDA strategy to 2025, which will define the agency's stakeholder priority groups.

## Publishing high-quality and timely products

In 2015, 45 products were published, including:

- the EDR package, which comprised the *European Drug Report: Trends and developments*; four PODs; a Statistical bulletin; 30 country overviews; and 30 national reports;
- three EMCDDA Insight publications;
- two Joint publications;
- four outputs linked to the implementation of the Council decision on NPS (2005/387/JHA) – see Main Area 5;
- four EMCDDA Papers;
- two Brochures;
- one Manual;
- four Technical reports and literature reviews;
- five Ad hoc publications;
- one national report from the former Yugoslav Republic of Macedonia;
- seven institutional publications;
- four issues of *Drugnet Europe*.

In addition, nine PODs that were produced as part of previous EDR packages were updated. Significant updates were made to the POD on wastewater analysis and drugs (to which an exploratory data visualisation option was added) and the POD on legal approaches to cannabis (to which a motion graphic that explains related definitions was added).

Furthermore, 27 scientific articles co-authored by EMCDDA staff were published in prestigious journals.

For a full list of EMCDDA publications in 2015, see Annex 3.

As mentioned before, keeping abreast of the numerous products that the EMCDDA produces has been greatly facilitated by the processes and tools that were put in place as part of the overall publication quality assurance framework. These include a products database, which is kept up to date, and regular Editorial Board and follow-up meetings, during which work is planned and decisions are made with regard to the best use of the available resources.

All of the 2015 products were disseminated via the EMCDDA website and social media channels, along with news releases to mark the launch of key products.

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

The EMCDDA website is the agency's primary means of communicating to all target audiences and is the key to reinforcing the agency's profile as the main source of drug information in Europe.

In 2015, as part of the new website development project that started in 2013, significant resources were invested in preparing the infrastructure necessary for integrated web content development and the associated migration. During the year, various technical difficulties were encountered and solved, and an architecture for the new platform was launched, along with reviews of security. The migration of various sections (home page, news and publications) of the new content management system (Drupal) was completed. The launch of the new website will take place in 2016. A particularly positive development during the year was the implementation of the useful monitoring instrument Piwik, which is a web metrics application that provides reliable statistics on website visits. As a next step, the agency will ensure that these metrics feed back into the conception process and inform decisions on what products and content are suitable for web-based dissemination.

In parallel, work continued to improve the presentation of key EMCDDA outputs. Special attention was given to the EDR 2015 package (see Main Area 1), which was fine-tuned according to the feedback received. In particular, the graphics were overhauled with the use of an external graphic designer (e.g. the 'At a glance graphic'). A fully responsive HTML version of the report was developed for integration into the website, as well as an e-book version for use on handheld devices. A motion graphic video that summarises the key findings was also produced.

Out of the four PODs produced in 2015, two had supporting interactive elements and two had audio-visual elements. The new method and process for displaying data tables in Statistical bulletin publications (introduced in 2014) was further developed. The methods and definitions section was also overhauled.

The web interface of the 30 country overviews was redesigned, the country data sheets were better integrated and new display features were introduced (e.g. modal dialogue, view in one page and star charts). Furthermore, the other country-specific products, namely health and social responses profiles, prevalence maps, drug-related research pages, and information on public expenditure and national drug strategies, were also updated.

The interactive development of the ways in which data collected under the EWS are displayed was a significant step forward.

## Enhancing visibility, reputation and recognition

The channels at our disposal to promote the results of the EMCDDA's work include the internet, publications and print products, events and conferences, media relations, audio-visual material and social media. Exploring new dissemination options and tools is part of our commitment to efficiency, and participation in external events must be rationalised in line with the existing resources and priorities.

Exchanging experience with other EU agencies is an important means of keeping abreast with rapid developments in this area. The agency is a member of the inter-agency Heads of Communication and Information network (HCIN), to which it continued to actively contribute in 2015. One of the highlights of this contribution was the organisation, jointly with the European Training Foundation in Turin and neighbour agency EMSA, of the Data Visualisation Workshop (held on 16–17 July 2015 in Lisbon). The event brought together almost 90 participants from European Commission and EU agencies that are members of HCIN. The three organising agencies provided an update of their work on data visualisation and presented recent projects. Topics included 'Data, story, chart, design'; 'Flat graphics: how to tell stories and designing visual stories'; and 'The right chart: interactive data visualisation'.


In order to enhance their visibility and increase uptake by audiences, all of the EMCDDA products in 2015 were launched via news releases, fact sheets, news items, newsletters, the website and social media, when appropriate. A total of 23 campaigns were publicised in 2015 via 'Mailchimps', which issued, for instance, 'Just published' e-mail updates, best practice updates, summer school updates and information about Lisbon Addictions 2015.

In terms of the web presence, the structure and metadata of the EMCDDA website were adjusted to improve the 'findability' of information.

There were approximately 990 000 unique visitors to the EMCDDA website in 2015 and 1.23 million unique page views.

Social media activities were particularly dynamic in 2015. An external consultancy contract was launched to take stock and assess the progress made so far in this regard, and to gather ideas on how the agency can develop its social media channels further. In this context, attention was paid to better tailoring the content of these channels for their audiences.

The EMCDDA successfully increased its social media presence on Facebook, Twitter and LinkedIn. In addition, its audio-visual service has been further developed. EMCDDA videos were viewed nearly 25 000 times in 2015. For the first time, multilingual content was offered on YouTube (the EDR 2015 motion graphic was made available in French, German, Polish, Portuguese and Spanish). Furthermore, a 'live' Twitter account was established to cover two high-profile meetings — 'Responses to NPS' (see Main Area 3) and 'Women and drugs' (see Main Area 8). At the end of 2015, we had 6 800 followers on Twitter.

In addition, the EMCDDA organised, or was at least represented at, several prominent events throughout 2015. To name but a few, the agency had displays at the 58th session of the CND (Vienna, 9–17 March); the 'Exhibition Futurália, Representation of the European Commission in Portugal' (Lisbon, 11–14 March); the third Contemporary

Drug Problems conference: 'Encountering alcohol and other drugs' (Lisbon, 16–17 September); Lisbon Addictions 2015 (Lisbon, 23–25 September); and the 2nd international conference on 'Wastewater-based drug epidemiology' (Ascona, Switzerland, 11–15 October).

Annex 4 presents a comprehensive list of events attended by EMCDDA staff in 2015.

A number of feature articles were written for specialised journals and magazines. A more comprehensive campaign to promote the EDR was introduced with audio-visual elements, and advertisements were posted on viEUws, E!Sharp, *EP magazine*, etc.

Building sound contacts and relationships with journalists and providing media-friendly information continued to be priorities in 2015. During the year, 11 news releases, 10 fact sheets, 14 web news items and one feature article were released to mark major events. In total, 36 items were issued in 2015, almost 10 % more than in 2014.

In 2015, 331 requests were received by the press office, which was 86 more requests than the previous year; this shows constant and significant annual growth (166 requests in 2012, 194 in 2013, and 245 in 2014). Timely responses were ensured to all these requests. Furthermore, in line with the communication strategy, a new product ('A look ahead') aimed at improving the advance warnings given to journalists ahead of key events was launched, and two editions of this new product were released prior to EDR 2015-related events and Lisbon Addictions 2015. Two media training courses were also organised in 2015: one to prime staff members on key messages ahead of the EDR launch and one that focused specifically on crisis communication. These courses resulted in a final training report at the end of the year.

The full EDR 2015 package was launched to the media on 4 June at a press conference in Lisbon in the presence of Dimitris Avramopoulos, European Commissioner responsible for Migration, Home Affairs and Citizenship. Also on the panel were the Chairman of the EMCDDA Management Board, João Goulão, the EMCDDA Director, Wolfgang Götz (who presented the main findings), and the EMCDDA Scientific Director, Paul Griffiths. In addition to the visiting journalists, a further 27 journalists from the Portuguese media and foreign press in Portugal attended the press conference, bringing the total to 51. This is the highest number of journalists that have attended an EDR press conference since the EMCDDA began launching the report in Lisbon in 2010. There were 2 871 items of media coverage of this launch, which was 40 % more items than in 2014.

Visits are another important aspect of the communication policy of the agency. They support the EMCDDA in its role as an information agency and help to promote its reputation as the 'reference point on drugs in Europe'. Target groups are perceived as any groups with a potential interest in EMCDDA outputs and authoritative information on drugs. This approach is in line with the 'European Parliament resolution of 29 April 2015 on discharge in respect of the implementation of the budget of the EU agencies for the financial year 2013: performance, financial management and control', in which the European Parliament invites EU agencies to expand their visibility in order to ensure that European citizens are well informed, in a transparent manner, about EU agencies' work.

In 2015, EMCDDA staff coordinated or organised 50 visits for external parties, involving 468 visitors, meaning that, on average, the EMCDDA received approximately one visit per week. The number of visitors in 2015 was 15 % more than it was in 2014 (407 visitors); this reflects a growing interest in the agency's activities. These visits help to improve visitors' understanding of the EMCDDA's mandate and activities. Visitors included

students from the Netherlands, France and Germany, lawyers of the Regional Courts of Germany, and interpreters from the European Parliament.

Other types of visit focused more on discussions about possible cooperation and exchanges of technical knowledge in specific scientific areas. In 2015, such visits included those by the Regional Director for the Europe and Africa Division and the Regional Intelligence Manager of the Drug Enforcement Agency (DEA) of the USA; the Chief Scientist of the ECDC; the Home Office Director-General of Crime and Policing Group of the United Kingdom; a representative of the National Crime Agency of the United Kingdom; and professionals working in the drug and alcohol field in regional competence centres in Norway.

There was also a high level of interest in the EMCDDA's activities among policymakers and professionals from third countries. For example, leaders of treatment centres from Switzerland, a delegation from the Ukraine Ministry of Health, university students from the USA, representatives of the Family Drug Treatment Court of Melbourne, Australia, a Judge of the Supreme Federal Court of Brazil and the Deputy Director-General of the Centros de Integración Juvenil of México visited the agency in 2015.

### Supporting scientific knowledge and research

In 2015, the EMCDDA ensured the availability of an efficient public information desk, which operated in line with guidelines set by the European Ombudsman. A total of 149 enquiries made to enquiries@emcdda.europa.eu were responded to promptly.

In addition, tailored information was proactively distributed to EMCDDA staff, and literature searches were carried out to support projects. The library answered over 620 individual requests during the year (compared with 540 in 2014). Over 1 500 resources in various media were also ordered, catalogued and made available.

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

The year 2015 was the final year of the EMCDDA's three-year strategy and work programme for 2013–15. It therefore closed a multi-annual planning cycle in the life of the EMCDDA, during which important projects that were designed to contribute to the triennial key expected results were completed.

At the same time, 2015 was a crucial year for shaping the future of the EMCDDA, as it saw the adoption, by the Management Board, of the agency's new strategy and work programme for 2016–18.

There was also a change in the leadership of the agency in 2015. The 10-year mandate of the EMCDDA Director, Wolfgang Götz, came to an end, and the new Director, Alexis Goosdeel, was appointed by the Management Board.

## Highlights and main achievements

### Management

The management of the agency was the responsibility of the EMCDDA Director, who was supported by his team of managers, namely the heads of units, who were, in turn, assisted by the heads of sectors.

Regular heads of unit meetings were held throughout the year. These meetings are the agency's main managerial forum, during which both strategic and operational issues are addressed. Furthermore, regular scientific coordination meetings took place during the year, involving the heads of unit, and the heads of sector, from the Scientific Division.

The main issues on the agenda were regular reviews of the performance with regard to implementing the agency's work programme, the preparation and implementation of the new programming cycle introduced by Article 32 of the EMCDDA's Financial Regulation (see the section 'Strategic planning, monitoring and reporting' later under this area), and measures to ensure efficient budget execution, to name just a few.

In the final part of 2015, after the appointment of the new EMCDDA Director, ongoing dialogue and close collaboration took place between the outgoing and the incoming directors with a view to preparing the ground for the start of the new EMCDDA Director's mandate, effective from 1 January 2016.

### EMCDDA Director — main activities in 2015

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

For instance, Director Götz strengthened relationships with the European Parliament. In January 2015, he had a working lunch in Brussels with the President of the European Parliament, Martin Schulz. On 21 January, Mr Götz attended a meeting of the LIBE Committee, during which he presented the EMCDDA's work programme for 2015, as well as an overview of the situation in Europe with regard to NPS. At the end of January, he also participated in an exchange of views between the members of the LIBE Committee and European members of the Global Commission on Drug Policy (GCDP). The Director presented the *European Drug Report 2015: Trends and Developments* to the LIBE Committee on 17 June. The MEP Tomáš Zdechovský, member of the CONT (Committee on Budgetary Control) and LIBE Committees and Shadow Rapporteur for the Discharge of Agencies for the year 2013, visited the EMCDDA on 13 May.

Throughout the year, the Director had regular meetings with the European Commission's services, including meetings with the Cabinet of Commissioner Avramopoulos and the Director-General of Migration and Home Affairs, Matthias Ruete.

With regard to building relationships with the other EU agencies, the Director participated in two meetings of the Heads of Agencies and organised the Fifth Informal Strategy Meeting of the Heads of Home Affairs Agencies, held on 8–9 May in Grândola (Portugal), which was also attended by the Director-General for Migration and Home Affairs.

*EMCDDA Director Wolfgang Götz (centre) receives the Grand Decoration of Honour in Gold for Services to the Republic of Austria on 8 September in Lisbon. Left: Ambassador of Austria, Thomas Stelzer; right: Vice-Chair of the EMCDDA Management Board, Franz Pietsch*

In March 2015, the Director participated in the high-level segment of the 58th session of the CND, and in December, he participated in the reconvened 58th session of the CND organised by the UNODC and held in Vienna.

Mr Götz had bilateral meetings with EU Member State ambassadors and attended a number of receptions held to mark national days at the embassies of various EU and non-EU countries.

On 8 September, Mr Götz was awarded the Grand Decoration of Honour in Gold for Services to the Republic of Austria in a ceremony hosted by the Austrian Embassy in Lisbon.

The award was bestowed on Mr Götz by His Excellency the Ambassador of Austria, Thomas Stelzer, on behalf of the President of the Federal Republic of Austria, Dr Heinz Fischer.

## Tribute to Wolfgang Götz, EMCDDA Director between 2005 and 2015

Director Wolfgang Götz ended his two mandates as leader of the EMCDDA on 31 December 2015. He joined the agency in December 1996, when he was recruited to head the agency's then Information unit, to oversee, among other things, the early editions of the *Annual report on the state of the drugs problem in Europe*.

In April 2005, the EMCDDA Management Board appointed him as EMCDDA Director for an initial five-year term. His mandate was unanimously renewed by the Management Board for a second five-year term, which began on 1 May 2010.

*Wolfgang Götz, EMCDDA Director 2005–15*

Throughout his tenure as Director, Wolfgang fought hard to attract and secure the best possible personnel and budget for the agency; empower staff; build sound working relationships with the Management Board and Scientific Committee; secure the partnership with the Reitox NFPs; and improve the quality and relevance of EMCDDA products and services.

## Data protection activities

Data protection activities were carried out throughout the year, in order to ensure compliance with rules applicable to EU bodies (Regulation (EC) 45/2001). Some of the issues addressed included data protection aspects of access to the SIENA (Secure Information Exchange Network Application) database (Europol); declarations of conflicts of interest; future EDPS (European Data Protection Supervisor) guidelines on mobile devices; the recording of images during public events; privacy statements for public events; and security clearance procedures.

The data protection officer (DPO) participated in two DPO network meetings. The first one took place in Luxembourg, in June 2015, and the second in Athens, Greece, in November 2015. These meetings have three purposes: firstly, they serve as important training activities (mainly on future data protection regulations); secondly, they allow contacts

with EDPS services (i.e. on the future compliance survey) to be maintained and developed; and, finally, they provide an excellent framework for the development of synergies among the different institutions and bodies of the EU (as is the case with the European Fisheries Control Agency.

## Strategic planning, monitoring and reporting

The *General Report of Activities 2014* ([47]) was published online on 12 June 2015 and sent, on the same day, to the European Parliament, the Council, the European Commission and the European Court of Auditors (ECA), as required by the EMCDDA's recast Founding Regulation. The content and format of the 2014 report were improved, in comparison with previous years, and they were fully aligned with the template for the Consolidated Annual Activity Report for decentralised agencies, as provided in Communication from the European Commission Communication C(2014) 9641, issued in December 2014.

The communication companion of the general report, entitled *A year in review: Highlights from the EMCDDA's General Report of Activities 2014*, was also published in June 2015 ([48]). Both documents were printed and made available for dissemination at an event held on 26 June.

In terms of monitoring the EMCDDA's activities, a 2015 mid-year monitoring exercise was conducted and the corresponding performance report was submitted to internal stakeholders. The report included a comprehensive annex dedicated to the KPIs that the agency had, for the first time, defined for all the main areas of its annual work programme.

The 2016–18 strategy and work programme and the 2016 work programme were adopted as parts of a single document by the Management Board in December 2015. This document was structured into two parts: Part I presents the EMCDDA's multi-annual work programme for 2016–18, while Part II introduces the EMCDDA's annual work programme for 2016, which will be the first annual work programme in the new three-year strategic cycle. The EMCDDA implemented this new approach in response to the requirement to submit a single multi-annual programming document (SPD), as of January 2016, that is, once Article 32 of the EMCDDA Financial Regulation enters into force.

According to Article 32, by 31 January 2016, the agency will be obligated to submit a SPD to its stakeholders; this SPD will incorporate the information currently contained in four different programming documents, namely the multi-annual work programme, the relevant annual work programme, the applicable multi-annual staff policy plan (MASPP) and a financial statement. The SPD will need to be updated each year, on a rolling basis.

In parallel, the agency started to develop its first SPD, for 2017–19. The draft document, which was submitted to the European Parliament, the Council, the European Commission and the Scientific Committee on 29 January 2016, was fully aligned with the template provided by the guidelines for programming for decentralised agencies issued by the European Commission as part of Communication C(2014) 9641 in December 2014.

([47]) Available at: emcdda.europa.eu/publications/gra/2014
([48]) Available at: emcdda.europa.eu/publications/gra/2014-highlights

**EMCDDA strategy and work programme for 2016–18:** This is the fourth strategy and work programme since the EMCDDA's Founding Regulation was recast in 2006. At the heart of the new triennial strategy and work programme is the EMCDDA's vision to contribute to a more secure and healthier Europe. This overarching commitment will drive the agency in the coming years and guide it in delivering added value to its stakeholders. Knowledge transfer, strategic analysis and threat assessment will be the main drivers for the achievement of this goal.

There are three main challenges for our work over the coming period: (1) to gain a better understanding of the global dimension of the drugs problem we face in Europe; (2) to respond more quickly to emerging threats and challenges; and (3) to become more solution oriented in our reporting.

As an organisation, the EMCDDA will be guided by a core set of values in order to ensure that its work is of the highest standard. These values are scientific rigour; neutrality and independence; and service orientation.

In terms of structure, the new strategy and work programme is built around six strategic action areas, composed of three key areas: 'Communicating evidence and knowledge exchange'; 'Early warning and threat assessment'; and 'Situation, responses and trend analysis'. There are also three cross-cutting areas: 'Information collection and management'; 'Quality assurance'; and 'Cooperation with partners'. Together, these areas cover the agency's core tasks and form the conceptual building blocks needed to assemble a comprehensive understanding of the European drug phenomenon. This structure reflects the EMCDDA's production flow as an information agency, from inputs to outputs, through monitoring and analysis processes.

In addition, two corporate areas – 'Governance' and 'Administration and ICT' – will provide the management and support activities that are key to ensuring that the work planned within the strategic areas can be successfully performed.

## Reitox national focal points

In fulfilling its tasks, the agency relies on a large number of partners and, in particular, the Reitox NFPs. The NFPs exercise the critical role of providing national data from the 30 countries that report to the EMCDDA, namely the 28 EU Member States, Norway and Turkey. Together with information collected from other networks of experts and partners, these data feed the European and global analyses performed by the EMCDDA, thereby forming the basis of its world-renowned knowledge and reputation as a centre of excellence on drugs in Europe.

In 2015, Reitox coordination tasks focused on two main priorities and challenges: to coordinate the implementation of the first phase of the revised national reporting system (see Main Area 1); and to provide adequate institutional and capacity development support to the NFPs.

The main priority for this area was therefore to support the NFPs with the implementation of the first phase of the revised national reporting package. Ongoing dialogue took place throughout the year between the EMCDDA and the NFPs, and progress was extensively discussed at both meetings of the HFPs held in 2015. As a result, successful implementation was achieved by the end of this phase: all the NFPs submitted the five mandatory workbooks and 25 out of the 30 countries submitted all 10 workbooks.

| REITOX MEETINGS IN 2015 | | |
|---|---|---|
| 16–18 June | Lisbon | 52nd meeting of the heads of focal points |
| 24–26 November | Lisbon | 53rd meeting of the heads of focal points |

The 53rd Reitox meeting was preceded by the fourth Reitox Week (see Main Area 8).

During the first half of 2015, the EMCDDA undertook a detailed desk check of all 2014 grant agreement accounting documents, as provided by the EU Reitox NFPs. A more detailed on-site verification of the accounting system was undertaken in four Member States, namely Bulgaria, the Czech Republic, Italy and Slovakia. These on-site verifications complied with the request for increased control by the European Court of Auditors, and also allowed bilateral feedback to be given, with a view to improving the financial and narrative reporting under the framework of the grant agreements signed by all 28 EU NFPs.

Furthermore, two Reitox Academies were organised or supported in 2015, as follows:

- The Regional Reitox Academy 'Monitoring and responses to new psychoactive substances' took place in Krakow, Poland, on 3–4 September. The objective was to allow experts from the Baltic countries, Poland and the EMCDDA to share knowledge on different aspects of the NPS phenomenon (i.e. markets, laws, user profiles and responses) and monitoring methods. A total of 21 participants attended this academy.
- The National Reitox Academy 'Peer involvement' took place in Vienna, Austria, on 4 December and was attended by 17 experts from Austria. The academy fostered discussions on how peer projects can be initiated, under which frameworks; how roles are distributed among peers and professionals; and what the exclusion and inclusion criteria are for peers.

In addition, in consultation with Reitox NFPs, progress was made in the development of an initial reference model for accreditation of the NFPs. Several internal discussions took place throughout the year in order to define the basic principles and scope of a future accreditation system. The proposal, which was presented at the 53rd Reitox HFP meeting, defined the scope of the accreditation and three main domains. The HFPs gave positive feedback on the project and agreed to cooperate with the EMCDDA in the future developments in 2016.

The development of the management information system (HERMES), which supports the technical cooperation activities and the management of grants, continued in 2015. All 2015 grant agreements, including applications and addenda, were fully managed through the HERMES system. In addition, HERMES was used to manage both HFP meetings in 2015.

## Administration — supporting core business (Main Area 11)

In line with the goals set for the 2013–15 programming period, enhancing efficiency, further developing the sound management of available resources and providing service-oriented administrative support to the EMCDDA's operations continued to be the main priorities within Main Area 11 in 2015, along with the application of best practice.

The EMCDDA sustained its active cooperation with other EU agencies on administrative matters. For instance, EMCDDA staff members were formally appointed to represent all decentralised EU agencies in the network of EU inter-institutional administrative bodies. Further synergies with EMSA were also promoted and developed in 2015.

## Highlights and main achievements

### Financial and budget management and accounting

As in the previous year, financial management activities in 2015 also focused on aligning EMCDDA rules and processes with the revised EU Financial Regulation, pursuant to the entry into force, on 1 January 2014, of the revised Framework Financial Regulation for EU Agencies and the new Financial Regulation of the EMCDDA.

With regard to procurement activities, the agency continued to implement measures to rationalise and optimise tendering and other financial processes, in order to execute the budget and work programme in close cooperation with all units. The EMCDDA participated — as an active member of the Network of Agencies Procurement Officers (NAPO) — in the annual NAPO meeting, organised by the then Office for Harmonization in the Internal Market (OHIM) (held in Alicante, Spain, on 1–2 October 2015); this offered further opportunities for experience exchange and provided an update on the status of different procurement initiatives of the EU bodies.

The implementation of digitalised tools and processes contributed to organisational efficiency gains; however, progress in this area was dependent on available resources. Work continued on the development of the ICT-based tool for the management of missions throughout 2015, and it is expected that the final tool will be ready for launch in 2016. Options for a tool for the electronic management of the working time of EMCDDA staff were explored, taking into account solutions applied by other agencies in order to allow synergies.

The EMCDDA, once again, achieved an outstandingly efficient management of its budget (in terms of execution rate) in 2015: a 99.83 % execution rate was achieved for commitment appropriations and a 97.4 % execution rate was achieved for payment appropriations (99.8 % for Title 3 payment appropriations). Historically, these are among the best results for the EMCDDA (in terms of commitments) and exceed the 2015 targets, namely for 97 % of the total commitment appropriations (KPI 11.1.1) and 93 % of the total payment appropriations (KPI 11.1.2) (see Annex 6).

| | |
|---|---|
| Commitment appropriations | 99.83 % |
| Payment appropriations | 97.35 % |
| Consumption of 2014 (C8) credits | 93.69 % |

Another important parameter that reveals the outstanding budget performance of the EMCDDA in 2015 is the rate of cancelled payment credits, which was only 0.25 %; the benchmark used for EU agencies is 5 % (criterion for penalisation).

This excellent budget execution rate was possible only because of the efforts of all staff involved across all core business and support areas, as well as the improved budget management practices applied throughout the year.

In addition, the 2016 budget and a preliminary budget for 2017 were adopted by the EMCDDA Management Board.

## Human resources

The implementation of human resources processes and policies by the EMCDDA, in line with new EU staff regulations, continued successfully in 2015.

As in the previous year, the EMCDDA continued to play an active, and sometimes leading, role in discussions held by several inter-agency working groups dedicated to the examination of different issues of interest for all agencies, such as the application and implementation of the Staff Regulations of Officials of the European Communities and the Conditions of Employment of Other Servants of the European Communities (CEOS); the revision of the service level agreement between all agencies and EU bodies and the DG HR, etc.

An important objective in 2015 was to further develop EMCDDA working and production capacity by maximising training opportunities for EMCDDA staff. Individual training plans were set during the annual staff performance appraisal exercise, and training was delivered in line with the available resources.

The target for 2015 was to provide an average number of three training days per staff member (KPI 11.2.3 — see Annex 6); as presented in the table below, this target was overachieved.

| TRAINING PROVIDED IN 2015 | |
|---|---|
| Total number of training days | 473.6 |
| Training courses per staff member (average) | 1.9 |
| Training days per staff member (average) | 4.6 |
| Budget spent on training (EUR) | 51 913 |

## Infrastructure and logistics

In the area of logistics and infrastructure management, ensuring a healthy and safe working environment remained the key priority in 2015. Another priority was to further optimise the use of space and the functioning of existing facilities. Special attention was given to the development of solutions for business continuity. In this context, the agency signed a MoU with EMSA agreeing that EMSA will host the EMCDDA business continuity systems in its data centre in Madrid (see Main Area 12).

As a result of the annual risk assessment that was delivered in 2015, the information included in the risk registry was adapted. After the terrorist attacks in November 2015 in Paris, the agency, in accordance with recommendations from the European Commission, tightened up its security measures and put the 'yellow alert code' into force.

The new internal EMCDDA environmental policy was further implemented in 2015. The aim of this policy is to adopt an environmental management system that ensures that the agency complies with EU norms and achieves further savings.

In the same regard, the agency continued to contribute to the Greening Network, whose ninth annual meeting was organised by the European Food Safety Authority (EFSA) (and held in Parma, Italy, on 17–18 September 2015); the EMCDDA provided technical input for this meeting.

Further measures to rationalise the costs of utilities and service contracts were implemented in 2015. The identification of health and safety risks for staff remained one of the main priorities of the agency, as well an increase in effectiveness, efficiency gains and cost savings through the creation of further synergies with EMSA.

## Information and communication technology (ICT) (Main Area 12)

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

Three overarching ICT priorities were identified in the 2013–15 work programme: to develop and maintain instruments for supporting core business; to implement a 'business and information architecture management' programme; and to implement a 'technical services management' programme, including ongoing service management. These priorities guided ICT-related work in 2015.

### Highlights and main achievements

Fonte, the EMCDDA's web-based data collection instrument, and the Drugs Data Warehouse are the main applications that support the agency's data collection, validation and analysis. A substantial part of the work in the area of ICT was dedicated to maintaining and adjusting these applications to the needs of the 2015 work programme.

A major Fonte update (version 3.0) was developed in 2015. Updates were also applied to the analytical drugs database.

With regard to the website development project, work continued in close collaboration with the Communication unit and the other core business units. The production architecture was defined and set up to support the new platform, the configuration was refined, penetration tests were performed, and architecture reviews were launched to mitigate risks and allow full implementation in 2016 (see also Main Area 9).

Further developmental work was carried out on the EDND in order to adapt the tool to the requirements imposed by the monitoring of NPS, which are appearing on the market at an unprecedented rate (see Main Area 5). However, the progress made in 2015 was slower than expected. The EDND is extremely complex, and, therefore, this project requires significant investment, not only in terms of money, but also in terms of human resources (e.g. business owners, scientific analysts and ICT staff). These resources were heavily involved in other level 1 priorities (particularly the management of the EU EWS); therefore, it was difficult to make any real progress on the development of the EDND. In addition, again because of project complexity, difficulties were encountered by the internal business owners with regard to working with the deliverables provided by contractors.

Additional efforts were made to support corporate and administrative projects. This included the development of a management information system to support the new performance measuring system (see also Main Area 10). However, progress was also slower than planned in this area, because of the need to prioritise, from the point of view of

the business owner, the work on the new planning instruments imposed by the Financial Regulation (see Main Area 10), and, from the ICT perspective, the work on level 1 projects.

Other projects were related to the development of solutions for missions and human resources management (see Main Area 11), for which work progressed in line with available resources.

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

The further execution of the 'Business and information architecture management' programme was carried out in 2015 through the conclusion of an ex post evaluation on information security. Work in this area will continue in order to encompass the planning of business/IT architecture development and its technical implementation, while trying to keep pace with the changing global landscape of ICT architectures and the related threats to security and privacy.

The majority of resources were, however, earmarked for the ongoing service management programme, which accounts for most of the effort dedicated to business-as-usual services. In addition, measures to rationalise the use of resources and to improve organisational performance were taken through enhanced cooperation with other agencies, as well as through the use of shared framework contracts for the acquisition of services and equipment. In this context, in 2015, the EMCDDA signed a MoU with EMSA agreeing that EMSA will host the EMCDDA business continuity systems in its data centre in Madrid.

After an audit by the Internal Audit Service of the European Commission (IAS) on ICT project management in September 2015, efforts were reinforced to improve ICT project management. The selection of a project management platform for ICT projects was finalised in 2015. The further development of the role of the ICT steering committee and the implementation of best practice are also part of this intervention.

# II

# PART II

# Management and internal control systems: annual activity report as per the Financial Regulation applicable to the EMCDDA

# 1

# CHAPTER 1
# Management

## Management Board

### Main decisions

As usual, the Management Board met twice in 2015, on 9–11 September and 3–4 December.

At the September meeting, the Management Board congratulated Wolfgang Götz, who was awarded, on 8 September 2015, the Grand Decoration of Honour in Gold for Services to the Republic of Austria. The award was bestowed by His Excellency the Ambassador of Austria, Dr Thomas Stelzer, on behalf of the President of the Federal Republic of Austria, Dr Heinz Fischer. Dr Franz Pietsch, the representative of Austria with regard to international matters of addiction and drug issues, Deputy Director-General and Head of Department for Tobacco, Alcohol, Non-substance-related Addictions and International Affairs of Addiction at the Austrian Federal Ministry of Health, nominated Mr Götz for the award in appreciation of his accomplishments in the drugs field in general, and in Austria in particular, and the sound relationships he has forged with the country.

On 10 September 2015 the Management Board decided to select Alexis Goosdeel as the candidate for the appointment as EMCDDA Director for a five-year term, starting on 1 January 2016. The Board gave the Executive Committee the mandate to adopt, on behalf of the EMCDDA Management Board, the formal decision on the appointment of the selected candidate, after the statement made by the Director-elect before the European Parliament and the answers provided to the questions put by the members of this institution, as required by the EMCDDA Founding Regulation for first-term appointments. This exchange of views took place on 22 September at the European Parliament in Brussels, and the Chair of the LIBE Committee gave a positive opinion to the Chair of the Management Board on 29 September. On the basis of the positive opinion of the European Parliament, the EMCDDA Executive Committee adopted, by written procedure, on behalf of the Management Board, a formal decision on the appointment of the new Director. The decision of appointment and a contract to engage the appointed Director was signed by the Chairman of the Board on 15 October.

After an overview by the European Commission on the state of affairs and the priorities for the years to come, the Management Board first discussed the strategic priorities of the EMCDDA strategy and work programme for 2016–18. The Board adopted the tools to implement the EMCDDA policy for the prevention and management of conflicts of interest, which concern Management Board and Scientific Committee members. The Board also decided to close the follow-up process to the recommendations made by the last external evaluation of the EMCDDA, which was completed in 2012. Finally, the Board mandated the Director to sign a MoU between the EMCDDA and the Ministry of Justice of Georgia.

Norway presented the aims and thematic priorities of its current Presidency of the Pompidou Group of the Council of Europe, while Portugal updated the Board members on the preparation of the first European conference on addictive behaviours and dependencies, Lisbon Addictions 2015, held in September 2015. The Director provided feedback on the launch of the EDR to the European press, which took place on 4 June at the EMCDDA's headquarters in Lisbon in the presence of Commissioner Avramopoulos and 51 journalists. He further informed the Board that a new technical cooperation project for IPA beneficiary countries, referred to as IPA 5, started on 1 July 2015 and will run for 24 months. Finally, the Management Board discussed a letter from the Federal Department of Home Affairs of the Swiss Confederation of 7 August 2015 expressing interest in a more formal framework for cooperation with the EMCDDA, possibly by means of a MoU. It was agreed that the European Commission would consult with the EEAS and then provide the members of the Board with an opinion.

At its 52nd meeting on 3–4 December 2015, the Management Board adopted the EMCDDA's 2016–18 strategy and work programme, together with the 2016 work programme, on which the European Commission and the EMCDDA Scientific Committee gave a favourable opinion.

The Board also adopted the EMCDDA's 2016 budget and preliminary budget for 2017, both of which were based on an EU subsidy of EUR 14 794 000. The budget for 2016 is based on EUR 14 794 000 of main revenue, to be provided by the EU 2016 subsidy to the EMCDDA; EUR 389 962, which is the contribution expected from Norway; and EUR 210 000, which is the contribution expected from Turkey for its third year of participation in the work of the EMCDDA. The preliminary draft budget for 2017 is based on EUR 14 794 000 of main revenue, to be provided by the EU 2017 subsidy to the EMCDDA; EUR 389 962, which is the contribution expected from Norway; and EUR 271 000, which is the contribution expected from Turkey.

Laura d'Arrigo (France), Diplomatic Advisor of the French Interministerial Mission for Combating Drugs and Addictive Behaviours (Mission interministérielle de lutte contre les drogues et les conduites addictives (MILDECA)), was elected as Chair for a mandate of three years, from 1 January 2016 to 31 December 2018. Franz Pietsch (Austria) was elected as Vice-Chair for the same period.

Claude Gillard (Belgium) was re-elected as a member of the Budget Committee for a mandate from 1 January 2016 to 31 December 2018. The Management Board also unanimously elected Mr Gillard as Chair of the Budget Committee. João Goulão (Portugal) and Susan Scally (Ireland) were elected as members of the Executive Committee for the same period.

In line with the provisions of Article 32 of the Framework Financial Regulation applicable to EU agencies and of the EMCDDA Financial Regulation, the Management Board unanimously adopted the definition of 'non-substantial amendments' to the annual work programme as proposed by the Director, and delegated the power to make such 'non-substantial amendments' to the EMCDDA Director.

The mandate of the EMCDDA Scientific Committee and the validity of the current reserve list will expire at the end of 2016. The current members indicated that they would like to continue to serve for the period 2017–19. Upon recommendation by the Executive Committee, the Management Board decided to renew the mandate for the current members of the EMCDDA Scientific Committee for a further three-year period from 2017 to 2019, and to extend the validity of the reserve list for the same period.

The Management Board adopted a temporary modification to the organisational structure of the EMCDDA. The former 'Governance' unit was merged with the 'Reitox and international cooperation' unit to give a new 'Reitox and external partners' unit, in order to group the activities related to relationships between the EMCDDA and its external partners under the same umbrella. In addition, the 'Executive Office' was created to support the Director with the drafting and implementation of the long-term strategy for 2025, and with the monitoring and reporting on the execution of the three-year and annual work programmes, including the KPIs, and financial analysis and budgetary monitoring. The Board also adopted the charter of the EMCDDA accounting officer.

The Management Board considered that 'Business continuity' and 'Management of data collection, validation and quality assurance' should be the only topics audited by the IAS under the Strategic Internal Audit Plan for 2016–18. The Board decided that the cooperation between the EMCDDA and Switzerland should be clarified through an exchange of letters that clearly specify the areas of cooperation, after the signing of working arrangements between the European Commission, represented by DG HOME as the agency's partner DG, and the EMCDDA on the agency's international activities.

The Board took note of an assessment of the implementation of the KIs in Europe and an overview of recent developments in the implementation of the international cooperation strategy with third countries and international organisations, and EU agencies. Finally, the Management Board members welcomed the conclusions presented by Portugal about the first European conference on addictive behaviours and dependencies (Lisbon Addictions 2015), which took place in Lisbon on 23–25 September 2015.

| MEETINGS OF THE MANAGEMENT BOARD | | |
|---|---|---|
| 9–11 September | Lisbon | 51st meeting of the Board |
| 3–4 December | Lisbon | 52nd meeting of the Board |

## Executive Committee

### Main decisions

In 2015, the Executive Committee met three times in Lisbon (see box below).

At its meeting on 13 May, the Executive Committee commented on the draft agenda and documents of the subsequent Management Board meeting of 9–11 September. The Executive Committee discussed, in particular, in restricted session, the procedure for the appointment and selection of the EMCDDA Director. The Executive Committee further adopted, on behalf of the Management Board, the proposed implementing rules related to the engagement and use of temporary staff under Article 2(f) of the CEOS, the annual appraisal of officials and temporary agents, and the annual appraisal of contract agents.

On 9 September 2015, the Executive Committee prepared for the Management Board meeting starting later that day. The Executive Committee prepared for the selection of the new EMCDDA Director by the Management Board on 10 September and addressed the issue of possible conflicts of interest, which was raised by the Commission after the adoption of the shortlist of candidates. The Executive Committee agreed to recommend to the Management Board that the mandate for the current members of the EMCDDA

Scientific Committee be renewed for a further three-year period, from 2017 to 2019, and to extend the validity of the reserve list for the same period, at the Board meeting of December 2015. The Executive Committee also adopted general provisions for leave on personal grounds for officials and unpaid leave for temporary staff and contract staff, on behalf of the Management Board.

On 22 September 2015, the Director-elect, Alexis Goosdeel, made a statement and answered questions put by members of the LIBE Committee. On the basis of the positive opinion of the European Parliament, the EMCDDA Executive Committee adopted, by written procedure, on behalf of the EMCDDA Management Board, a formal decision on the appointment of the new Director.

The Executive Committee passed in review on 2 December the items of the draft agenda of the Management Board meeting of 3–4 December, and prepared the election of the new Chair and Vice-Chair of the Board. An addendum to the MoU between the Ministry of Health of Ukraine and the EMCDDA was discussed, in order to take into consideration the fact that the state agency the Ukrainian Monitoring and Medical Centre on Drugs and Alcohol of the Ministry of Health of Ukraine (UMMCDA) had become the competent authority for collecting and processing information on drugs and on the alcohol situation in Ukraine. It was agreed that the European Commission would consult the EEAS and the EU delegation in Ukraine on this matter before an exchange of letters between the EMCDDA and the UMMCDA may take place. The Executive Committee further exchanged views on a decision of the Director on a working language for day-to-day administration and internal communication at the EMCDDA.

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

| MEETINGS OF THE EXECUTIVE COMMITTEE | |
|---|---|
| 13 May | Lisbon |
| 9 September | Lisbon |
| 2 December | Lisbon |

## Summary of main events

In 2015, there were a number of events which will have an important impact on the agency in the future. These events were the election of a new Chair and a new Vice-Chair of the Management Board; the selection of a new EMCDDA Director; the temporary modification of the organisational structure of the agency; and the adoption, by the Management Board, of a new EMCDDA three-year strategy and work programme. All these events are presented in detail in earlier sections of this report and a summary is provided below.

### The selection of a new EMCDDA Director

The Management Board decided on 10 September to select Alexis Goosdeel as the candidate for the appointment of EMCDDA Director for a five-year term, starting 1 January 2016. This was followed, on 22 September, by a statement made by the Director-elect before the European Parliament. He then answered questions put to him by the members of this

institution, as required by the EMCDDA Founding Regulation in cases of an appointment for a first term. On the basis of the subsequent positive opinion of the European Parliament, the EMCDDA Executive Committee adopted, by written procedure, on behalf of the EMCDDA Management Board, the formal decision to appoint the new Director.

### The elections of a new Chair and Vice-Chair of the Management Board

Laura d'Arrigo (France), Diplomatic Advisor at MILDECA, was elected as Chair, with a mandate of three years, from 1 January 2016 to 31 December 2018. Franz Pietsch (Austria) was elected as Vice-Chair for the same period.

### The adoption of a temporary modification of the organisational structure of the EMCDDA

In December 2015, the Management Board adopted the following temporary change in the organisational structure of the EMCDDA: the former 'Governance' unit was merged with the 'Reitox and international cooperation' unit under a new 'Reitox and external partners' unit, in order to group activities related to relationships between the EMCDDA and its external partners under the same umbrella. In addition, the 'Executive Office' was created to support the Director with the drafting and implementation of the long-term strategy for 2025, and with the monitoring and reporting on the execution of the three-year and annual work programmes, including the KPIs, and financial analysis and budgetary monitoring.

### The adoption of the EMCDDA's 2016–18 strategy and work programme

The Management Board adopted, at its 52nd meeting on 3–4 December 2015, the new EMCDDA three-year strategy and work programme, together with the 2016 work programme, on which the European Commission and the EMCDDA Scientific Committee gave favourable opinions.

## Budgetary and financial management

### Information in the report on budgetary and financial management (Article 93 of the Framework Financial Regulation)

Information on budgetary and financial management is covered by the report included in the EMCDDA *Annual Accounts 2015* (available on our website).

In terms of procurement execution, the procurement plan was put in place, in line with the EMCDDA 2015 management plan, and successfully executed in close collaboration with all units.

| Tendering | 2015 figures | Number of direct contracts | Number of framework contracts |
|---|---|---|---|
| Negotiated procedures — disp. Article 134 — Rules of implementation of the Financial Regulation (exceptional procedures) | 0 | 0 | 0 |
| Negotiated procedure — single tender ([a]) | 106 | 106 | 0 |
| Negotiated procedure — at least three candidates | 6 | 6 | 0 |
| Open procedures | 4 | 2 | 2 |
| European Commission frameworks joined | 2 | | |

([a]) including appointment letters and low-value contracts

The negotiated procedures launched during the course of the year are outlined in the table below.

| Negotiated procedures launched in 2015 | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| Value (EUR) | Works | | Supplies | | Services | | Total for 2015 | | | |
| | Number of contracts | Volume of contracts (EUR) | Number of contracts | Volume of contracts (EUR) | Number of contracts | Volume of contracts (EUR) | Number of contracts | % | Volume of contracts (EUR) | % |
| > 1 000 and ≤ 15 000 | 10 | 50 927.45 | 18 | 67 115.27 | 78 | 562 727.16 | 106 | 91.38 | 680 769.88 | 37.62 |
| > 15 000 and ≤ 60 000 | 0 | 0 | 3 | 93 153.62 | 3 | 143 080.00 | 6 | 5.17 | 236 233.62 | 13.05 |
| > 60 000 | 0 | 0 | 1 | 47 771.00 | 3 | 845 000.00 | 4 | 3.45 | 892 771.00 | 49.33 |
| **Total** | **10** | **50 927.45** | **22** | **208 039.89** | **84** | **1 550 807.16** | **116** | **100** | **1 809 774.50** | **100** |

### Summary information on budgetary operations for 2015 in terms of budget operations, revenue and expenditure

The information about the appropriations transferred in 2015 can be found in the report on budgetary and financial management included in the EMCDDA *Annual accounts 2015*. The EMCDDA Management Board approved two amending budgets in 2015, which were duly published.

In 2015, the EMCDDA received 100 % of the revenues envisaged in its 2015 budget. In this context, the EMCDDA once more achieved an outstanding performance in terms of budget execution, which is reflected by the following rates of execution: 99.83 % for commitment appropriations, which is the best performance in EMCDDA history; 97.35 % for payment appropriations; 93.70 % for appropriations carried forward from 2014; and 0.2 % for cancelled/non-used payment appropriations.

## Human resources management

### Major human resources events

The work to align the EMCDDA human resources processes and policies with the reform of EU staff regulations continued in 2015. This included, in particular, the adoption of implementing provisions for the use and appraisal of temporary staff. Furthermore, a more structured process was put in place for the definition and implementation of annual training plans.

A table detailing the number of days of leave authorised to each function group and grade, in accordance with the rules in force concerning flexitime and compensatory leave, is presented below.

| Number of days of leave authorised to each grade under the flexitime and compensatory leave schemes, 2015 | | | |
|---|---|---|---|
| **Function group and grade** | **Number of days** | **Function group and grade** | **Number of days** |
| AD5 | 1.5 | AST9 | 0 |
| AD6 | 29.5 | AST10 | 0.5 |
| AD7 | 23.0 | AST11 | 0 |
| AD8 | 42.5 | GFI1 | 0 |
| AD9 | 18.5 | GFI2 | 0 |
| AD10 | 5.0 | GFI3 | 11.0 |
| AD11 | 12.5 | GFII4 | 0 |
| AD12 | 14.0 | GFII5 | 0 |
| AD13 | 0 | GFII6 | 27.0 |
| AD14 | 0 | GFII7 | 30.0 |
| AD15 | 0 | GFIII8 | 0 |
| AD16 | 0 | GFIII9 | 5.5 |
| AST1 | 0 | GFIII10 | 9.5 |
| AST2 | 0.5 | GFIII11 | 0 |
| AST3 | 2.5 | GFIII12 | 16.0 |
| AST4 | 11.5 | GFIV13 | 0 |
| AST5 | 43.0 | GFIV14 | 7.0 |
| AST6 | 28.5 | GFIV15 | 0 |
| AST7 | 5.0 | GFIV16 | 8.0 |
| AST8 | 26.0 | | |
| | | **Total** | **378.0** |

No major changes occurred in the EMCDDA 2015 establishment plan, apart from the reduction of two authorised posts compared with 2014, as requested by the European Commission and adopted by the EU budget authority.

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

The results of the EMCDDA 2015 staff screening exercise reflect the EMCDDA's efforts to ensure the effective and efficient allocation and use of its resources. It shows that 68.56 % of its human resources were devoted to operational activities in 2015 and only 20.68 % were allocated to administrative support and coordination; the remaining 10.76 % were assigned to operations considered neutral (see Annex 2).

## Assessment by management

The EMCDDA has set its internal procedures for budget execution and internal control, while defining and implementing a partially decentralised management model, in accordance with the EMCDDA Financial Regulation, which integrally transposes the text of European Commission Delegated Regulation (EU) No 1271/2013 on the Framework Financial Regulation for EU agencies.

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

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

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

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

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

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

The EMCDDA's activities and operations are scrutinised by several processes and actors:

- external audits by the ECA (twice a year);
- external audits for specific projects (e.g. IPA-funded projects, etc.);
- discharges by the European Parliament (once a year);
- internal audits by the IAS (once a year);
- opinions of the European Commission's services on the agency's SPD (once a year);
- external periodical evaluations (set as every six years in the EMCDDA Founding Regulation);
- agreements by the European Commission on implementing rules for staff regulations (one agreement for each rule);
- consent by the European Commission on the possible deviation of the EMCDDA Financial Regulation from the European Commission's Framework Financial Regulation for decentralised agencies;
- the European Data Protection Supervisor for compliance with Regulation 45/2001 (by prior notification and upon complaint);
- the European Anti-Fraud Office (upon complaint);
- the Ombudsman (upon complaint);
- the Civil Service Tribunal — Court of First Instance — European Court of Justice (upon complaint).

| Key features of the EMCDDA's partially decentralised management model | |
|---|---|
| **Level of operations (and actors)** | **Role/operations** |
| Decentralised level (operational and technical units) | Operational initiative/input and operational and financial decisions by delegation in order to implement the work programme and budget |
| Central level (Directorate and Administration unit) | Coordination and management of executive planning, monitoring, reporting and assessment of the implementation of the work programme and budget. Administrative and financial support, management and control of implementation |

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

Ex ante controls of financial transactions were applied exhaustively throughout 2015 to verify their compliance with the EMCDDA Financial Regulation and the corresponding implementing rules. These controls were carried out swiftly in order to ensure that payment deadlines were met, legal commitments were concluded in a timely manner and income was recovered promptly, without prejudice to the application of corrections, if required.

Financial workflows were properly defined and a sound system of authorisation of access to the ABAC system was put in place. The manual of procedures was applied and updated, as required.

In line with the applicable provisions of the EMCDDA Financial Regulation, in late 2014, the need for an ex post control exercise on security-related issues concerning ICT operations was identified, taking into account the medium to high level of risk affecting this area. This exercise was performed in early 2015 and relied on external expertise to complete the existing internal capacity. The recommendations resulting from this exercise will be implemented throughout 2016 and 2017, along the lines of the action plan designed to deal with the risks and weaknesses identified therein.

## Assessment of audit results during 2015 and the follow-up of audit plans, audits and recommendations

In 2015, following up on observations and recommendations expressed by the ECA, the EU Budget Authority and the IAS, the EMCDDA implemented measures to further improve its management and internal control systems, as outlined below.

### Internal Audit Service

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

As regards the implementation of IAS recommendations arising from the 2011 audit on 'Annual activity reporting and building blocks of assurance', only two recommendations have not yet been formally closed by the internal auditor. Regarding the first of these (the setting up of a performance monitoring system that includes KPIs), the EMCDDA is already at an advanced stage of implementation, as its 2015 annual work programme defines KPIs for all main areas of work. The second outstanding recommendation, which concerns ex post controls, has also been followed up. In fact, pursuant to the assessment of ICT security-related risks, an ex post verification exercise in this area was performed in the first half of 2015.

In February 2013, the IAS carried out an audit on 'Budget and monitoring within the EMCDDA', in respect of which the only main outstanding recommendation (namely recommendation 2 on documenting and describing the budget preparation process) was formally closed in 2015.

In September 2015, the IAS carried out an audit on 'IT project management' within the EMCDDA; the corresponding draft audit report (dated 9 December 2015) yielded six main recommendations, covering three main issues, as described below.

*Issue No 1: Business–IT alignment*

- The finalisation and adoption of a long-term ICT strategy, including a strategic roadmap for core ICT systems, are required, as well as guidelines for future objectives and priorities in light of business needs.
- An enterprise architecture management framework should be defined and adopted.

*Issue No 2: IT project management*

- The design of an IT project management methodology should be finalised and adopted, notably by tailoring best practices and actively involving business; in addition, required resources should be planned and accounted for across the whole project's life cycle.
- The project management process should be automated, involving a definition of both business and technical requirements for a project management platform covering the complete project life cycle.

*Issue No 3: Requirements management and systems development*

- A requirements management process should be defined and adopted by tailoring relevant best practices and incorporating lessons learnt from past experiences.
- A systems development methodology should be defined and adopted.

The recommendations above ought to be followed in substance by the EMCDDA, along the lines established under a suitable action plan and endorsed by the Management Board.

In June 2015, the IAS also visited the EMCDDA to carry out a comprehensive risk assessment of the agency's governance, core business and support processes; this assignment included, notably, desk reviews and interviews of key staff in order to gain insight into the agency's processes and related key controls. As a result, the IAS Strategic Internal Audit Plan for 2016–2018 targeted two main topics for future auditing (namely 'Management of data collection, validation and quality assurance' and 'Publications Management'); further to these recommendations, a so-called 'Limited Review' on business continuity has also been planned.

### European Court of Auditors

The need to carry forward originated from external factors, namely the unexpected ruling of the EU Court of Justice on the retroactive adjustment of EU staff members' remuneration for 2011, 2012 and 2013. The EMCDDA confirmed that this carry-forward was the result of a well-founded and structured process put in place to ensure the sound management of these operations. Furthermore, the EMCDDA confirmed its capacity to properly and effectively use carried forward appropriations (C8), as the rate of use of such appropriations consistently exceeded 95 %.

## Follow-up on observations from the discharge authority

### Measures taken in light of the observations and comments that accompanied the decision on discharge for 2012

#### 1. Comments on the legality and regularity of transactions

Observations Nos 3, 4 and 5 of the European Parliament discharge decision

*Notes from the Court's report that the Centre launched a procurement procedure to rent office equipment over a four-year period and that the technical requirements were subject to a significant modification during the course of the procedure; is concerned that the*

*technical requirements were further adjusted for the conclusion of the contract, in accordance with the option announced in the published specifications, leading to a decrease in the contract value; regrets that the information published on the contract's price structure was not sufficiently clear, which led to a misinterpretation by one bidder who therefore had a smaller chance of being awarded the contract;*

*Notes with concern that the evaluation criteria for the abovementioned procedure were not sufficiently specific to ensure full transparency and the equal treatment of bidders; observes that the abovementioned weakness affected the efficiency and effectiveness of this procurement procedure, as well as creating the risk of hindering the competition;*

*Acknowledges from the Centre that the relevant contract notice was published via the information system for European public procurement, which imposes some restrictions on the information that can be published; acknowledges furthermore that all tenderers were treated equally and evaluated in accordance with the established and published award criteria and method; calls on the Centre to nonetheless improve its procurement processes and to report to the discharge authority on the measures taken.*

In 2015, the EMCDDA pursued its effort to reduce, as much as possible, the need to adjust technical specifications. Furthermore, it ensured a more effective communication of information to all relevant actors whenever such adjustments were needed, namely via the publication of more explicit notices on its website.

## 2. Prevention and management of conflicts of interest and transparency

Observation No 9 of the European Parliament discharge decision

*Acknowledges from the Centre that it has reviewed its policy on the prevention and management of conflicts of interests in line with the Commission's guidelines; notes that the revised policy was approved by the Centre's Management Board at its meeting of 4 and 5 December 2014; awaits the publication of declarations of interests of the Management Board, senior management and the Director.*

Pursuant to the approved policy and the relevant templates, the declarations referred to were published as required.

## 3. Other comments

Observation No 13 of the European Parliament discharge decision

*Takes note that the 'Cais do Sodre Relógio' building remains mostly unused as only a few expressions of interest for leasing the building materialised into concrete proposals; acknowledges that negotiations for a short-term lease are currently ongoing with an offer well below the renting costs endured by the Centre and that it is negotiating with the building's landlord for a possible reduction of the rent in order to neutralise rental costs as much as possible; calls on the Centre to inform the discharge authority about future developments once more information is available.*

The EMCDDA continued to pursue its effort to find a suitable solution with regard to the areas referred to. For this purpose, the Relógio building was visited by potentially interested parties (mostly represented by the real estate agencies in charge of facilitating the operation at stake). None of these parties have yet confirmed their interest or any intention to conclude a sub-lease contract. The EMCDDA will inform the discharge authority of any relevant developments in this situation.

# 2

# CHAPTER 2
# External evaluations

In line with Article 23 of the EMCDDA's recast Founding Regulation, the European Commission initiates an external evaluation of the agency every six years and submits the evaluation report to the European Parliament, the Council and the Management Board of the EMCDDA.

The last external evaluation of the agency was completed in June 2012. The main findings of this evaluation can be summarised as follows ([49]):

- As stated in the overall conclusions and recommendations, the EMCDDA performed well, during the 2007–2012 period, in its mission to provide the EU and Member States with factual, objective, reliable and comparable information at the European level on drugs and drug addiction, and their consequences. This overall conclusion is supported by evidence from a number of different sources, including survey work.
- In relation to the various tasks set out in the EMCDDA's 2006 recast Founding Regulation, the evaluation findings are generally positive. Firstly, in relation to its role of providing 'factual, objective, reliable and comparable information at the European level concerning drugs and drugs addiction, and their consequences', the EMCDDA performed strongly. In addition to the demand side of the drugs problem, progress was also made towards improving the understanding of supply.
- The EMCDDA also performed well in relation to the second task defined in the 2006 recast Founding Regulation, namely to 'collect, register and analyse information on emerging trends'. During the period under review, the upwards trend in NPS being detected accelerated, but the EMCDDA kept pace with developments through its EWS and related activities, and provided information to the Commission and Member States that was used to shape policy responses. Feedback from the research on the EMCDDA's performance in relation to the third task set out in the recast Founding Regulation, namely 'identifying best practices in Member States and facilitating the exchange of such practices between them', is not as positive as it is for the other tasks. The EMCDDA's fourth task ('to promote cooperation with other European and international bodies and with third countries') has been successfully promoted.

The final report contains 15 recommendations and the agency has prepared an action plan to implement these. This action plan was adopted by the Management Board at its meeting of 5–6 July 2012.

With a view to monitoring the implementation of the follow-up action plan, an annual internal assessment exercise was put into place and the results were presented in the *General Report of Activities* for 2013 and 2014 ([50]).

([49]) The full result of the evaluation can be found online at: emcdda.europa.eu/html.cfm/index184823EN.html
([50]) Available at: emcdda.europa.eu/publications/searchresults?action=list&type=PUBLICATIONS&SERIES_PUB=w8

Furthermore, in order to measure the progress achieved, a KPI (10.1.6: Degree of implementation of the follow-up action plan to the third external evaluation of the EMCDDA) was defined in the 2014 work programme and adopted by the Management Board in July 2012.

At the end of 2014, total implementation (100 %) was shown for this KPI for all of the actions that resulted from the 15 recommendations under the control of the EMCDDA. The EMCDDA therefore concluded that all of these recommendations could be closed. This was adopted by decision by the Management Board at its 51st meeting in September 2015.

However, the agency maintains its commitment to ensuring that its future activities are aligned with these recommendations. This commitment is fully reflected in the EMCDDA's 2016–18 strategy and work programme, which was adopted by the Management Board at its 52nd meeting in December 2015, as well as in the SPD for 2017–19.

The fourth external evaluation of the EMCDDA by the European Commission is likely to be carried out during the period 2017–18. The exercise will evaluate the implementation of the new three-year strategy and work programme for 2016–18, as well as the previous strategy and work programme for 2013–15.

3

CHAPTER 3

# Assessment of the effectiveness of the internal control systems

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

As in previous years, a comprehensive risk identification and assessment exercise aimed at improving risk management in the EMCDDA was carried out in 2015. The central risk register, as well as the sector risk register set up by the ICT unit, were kept updated. Risk analysis was a continuous exercise at the EMCDDA during the year, although at the stage of preparation of annual work programmes, more systematic reviews were conducted by managers.

A comprehensive document that reviews and lays down the progress made in the implementation of the EMCDDA internal control standards (ICS) was drawn up in early 2013, and has been reviewed regularly since then. As a result of these reviews, two main areas in which implementation of the EMCDDA ICS should be improved have been identified, namely (and by order of priority): 'Business continuity' (ICS 10) and 'Governance in IT', notably regarding 'Projects' management' (one key feature under ICS 7 — 'Operational structures'). The EMCDDA has continued to take measures across the agency to mitigate risks.

The adoption, in September 2013, of a fully fledged business continuity plan (BCP) for the agency as a whole reflected a major improvement in the implementation of the aforementioned ICS. Without prejudice to future improvements, this plan already appears to be detailed and comprehensive enough to allow the EMCDDA to act swiftly and operate recoveries in the event of an emergency or disaster. It is also worth mentioning the continuous effort made in relation to governance and technical management of ICT operations. In this area, business continuity was achieved without major incidents, namely by ensuring sound procurement procedures, adequate licensing and proper testing of applications. Furthermore, some mitigating measures were taken during 2015 in order to achieve nearly tolerable levels of risks inherent to the management of some ICT-related investments and projects.

In combination with the IT sector risk register, an adequate risk management plan was set up. This plan identifies, for each area, the estimated risk level, the controls that should be put in place, and the list of the ongoing programmes and projects that will contribute to the reduction of the risks at stake. As mentioned in the 'Assessment by management' section above, the IAS carried out an audit on 'IT project management in the EMCDDA' in September 2015: the implementation of the resulting recommendations will allow the agency to make further improvements in this area, including a better alignment of IT projects with core business needs.

The monitoring of performance supported by KPIs (ICS 5) was further developed in 2015. This was the first year in which KPIs were established for all the main areas of work in the annual work programme; therefore, the agency had to establish the necessary data collection and reporting mechanism, pilot some of the new measurement tools, refine working definitions and develop the internal monitoring and evaluation plan. The KPIs will require further improvement, in light of the results of the first round of complete data collection carried out at the end of the year and the lessons learnt from implementing the new methodologies.

Moreover, the agency started to develop an IT tool to integrate the planning and monitoring of activities (management information system). However, the progress achieved in 2015 was slower than planned because of the need to prioritise work on the SPD (top-level priority), from the perspective of the business owner (the planning function), and the development of other level 1 priority projects, from the perspective of the ICT team. The timeline for the completion of this tool hinges on the availability of the necessary resources (in terms of both human resources and funding).

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

The risks more directly associated with operational activities, particularly the lack of proper funding for the Reitox NFPs, which was already apparent in 2014, were further aggravated throughout 2015. Cuts in funding from national sources to certain NFPs occurred once again in 2015, increasing the risk that all core monitoring activities of the EMCDDA will be affected. In addition, these difficulties were compounded by the budget constraints faced by the EMCDDA itself, which led to decreases in the amounts granted to NFPs for properly complying with their reporting obligations to the agency.

As a consequence of these events, the rationalisation of the present NFP reporting package had to be carried out and should probably continue; notably, this involves regular assessments of core data needs on the basis of soundly defined priorities.

Furthermore, in 2015, there were reductions in the reporting capacities of Member States, because core data of sufficiently high quality were either completely lacking or available to only a limited extent. As a consequence, the timeliness and comprehensiveness of the reporting by Member States on new threats and drug developments were affected; moreover, some comparative data became unavailable, which curtailed the possibility of carrying out useful analyses at European level. In addition, the reporting of matters related to NPS was often missing or delayed.

Following the materialisation of this risk, a closer monitoring of and feedback to the Member States on their reporting performance was envisaged and is currently ongoing. This measure should allow corrective action to be taken by Member States, if required.

# 4

# CHAPTER 4
# Management assurance

## Declaration of assurance by the Authorising Officer

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

In my capacity as Authorising Officer

- Declare that the information contained in this report gives a true and fair view ([1]).
- State that I have reasonable assurance that the resources assigned to the activities described in this report have been used for their intended purpose and in accordance with the principles of sound financial management, and that the control procedures put in place give the necessary guarantees concerning the legality and regularity of the underlying transactions.
- This reasonable assurance is based on my own judgement and on the information at my disposal, such as the results of the self-assessment, the observations of the Internal Audit Service and the lessons learnt from the reports of the Court of Auditors for years prior to the year of this declaration.
- Confirm that I am not aware of anything not reported here which could harm the interests of the institution.

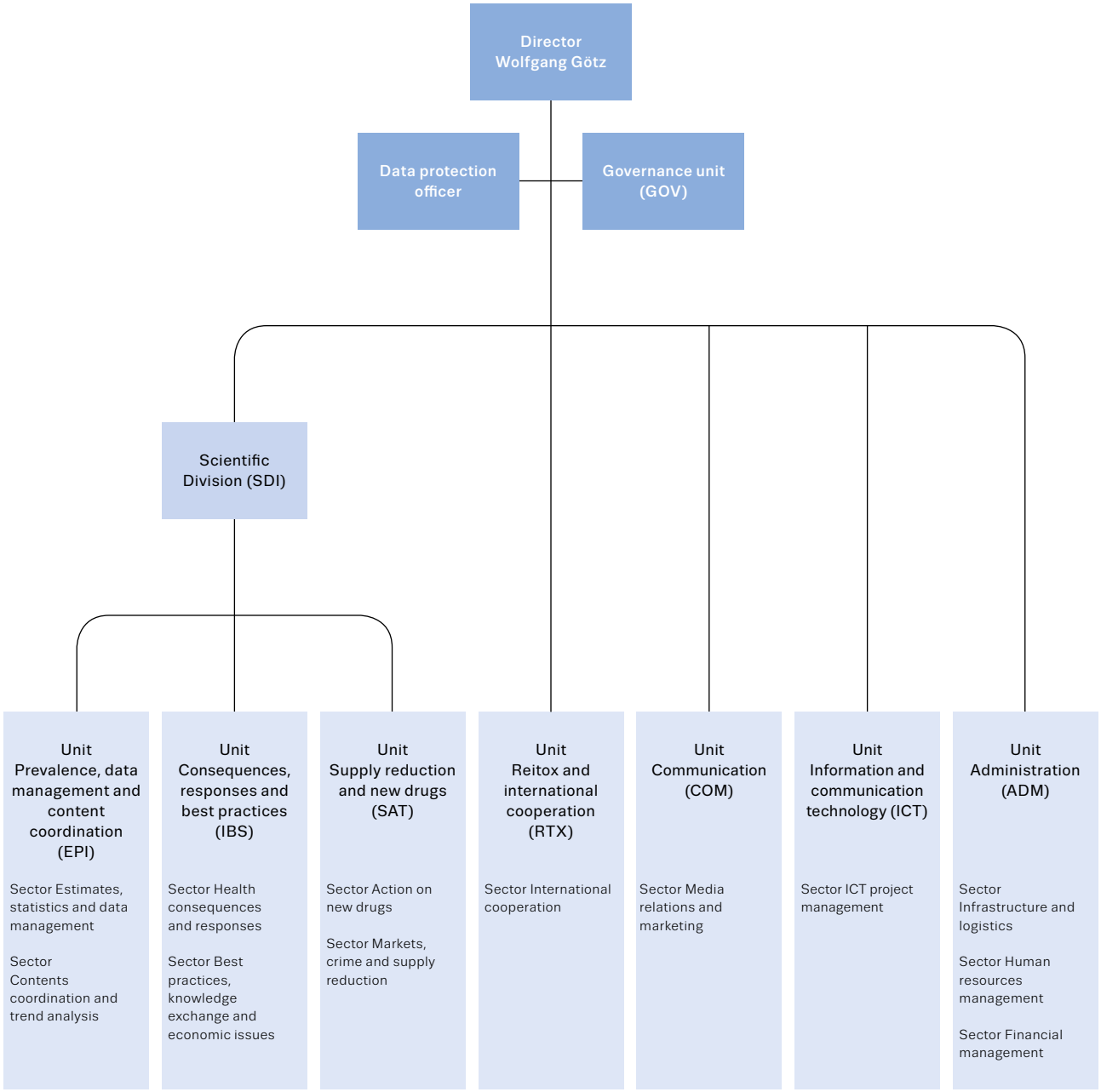
Done in Lisbon on 23 May 2016

**Alexis Goosdeel**
Director

([1]) 'True and fair' in this context means a reliable, complete and correct view on the state of affairs in the service.

# Annexes

# ANNEX 1
## Organisational chart



ANNEX 2

# Staff details

## A. Breakdown of EMCDDA staff as of 31 December 2015

### EMCDDA contract agents (CA), temporary agents (TA) and officials

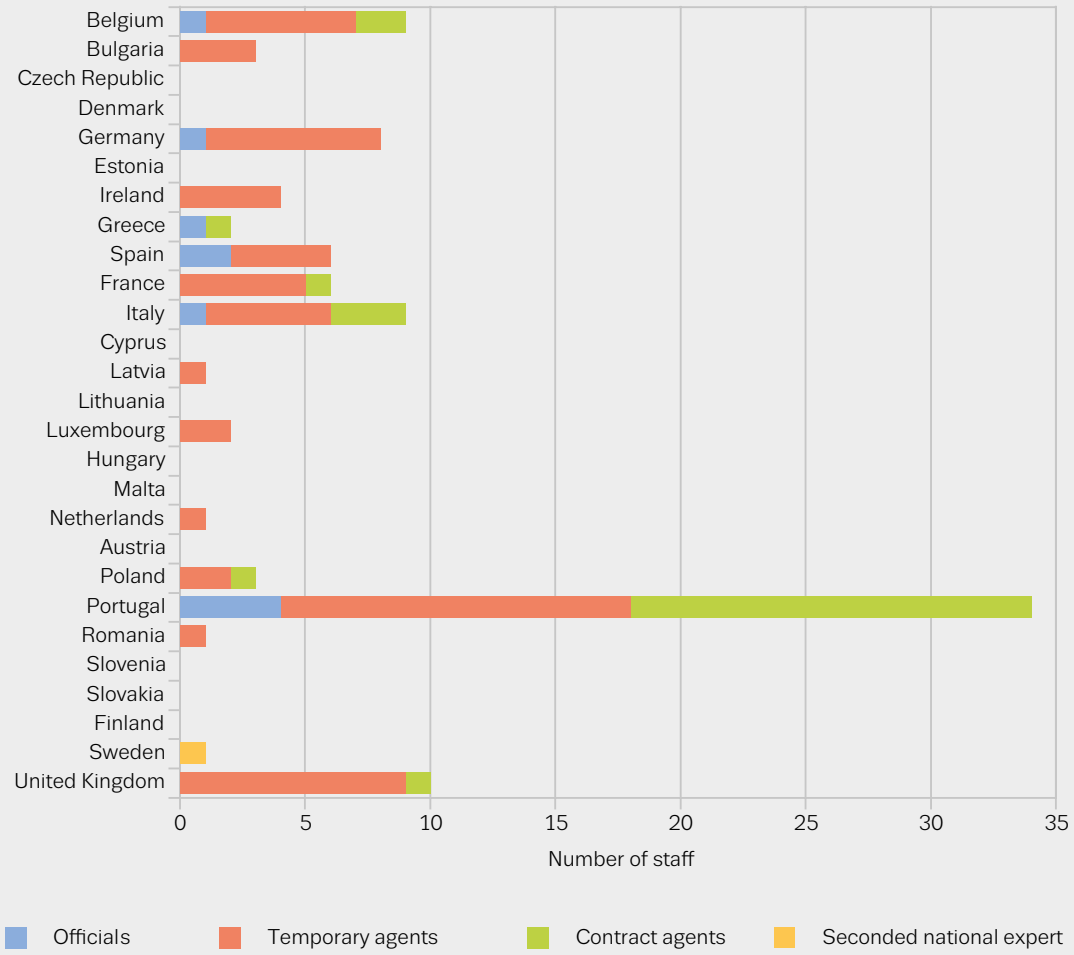
| | Category/ Grade | Officials | Gender | | TA | Gender | |
|---|---|---|---|---|---|---|---|
| | | | Male | Female | | Male | Female |
| AD | 15 | 0 | | | 1 | 1 | |
| | 14 | | | | | | |
| | 13 | 1 | 1 | | 3 | 2 | 1 |
| | 12 | 3 | 3 | | 6 | 5 | 1 |
| | 11 | | | | 5 | 2 | 3 |
| | 10 | | | | 3 | 2 | 1 |
| | 9 | 1 | 1 | | 3 | 2 | 1 |
| | 8 | 1 | 1 | | 8 | 2 | 6 |
| | 7 | | | | 8 | 2 | 6 |
| | 6 | | | | 4 | 2 | 2 |
| | 5 | | | | 1 | 1 | |
| | **Subtotal AD** | **6** | **6** | **0** | **42** | **21** | **21** |
| AST | 11 | | | | | | |
| | 10 | | | | 1 | | 1 |
| | 9 | | | | 3 | 2 | 1 |
| | 8 | 1 | | 1 | 1 | 1 | |
| | 7 | 1 | | 1 | 2 | 2 | |
| | 6 | | | | 4 | 1 | 3 |
| | 5 | 1 | | 1 | 8 | 5 | 3 |
| | 4 | | | | 2 | | 2 |
| | 3 | | | | 1 | 1 | |
| | 2 | 1 | | 1 | | | |
| | 1 | | | | | | |
| | **Subtotal AST** | **4** | **0** | **4** | **22** | **12** | **10** |
| | **TOTAL** | **10** | **6** | **4** | **64** | **33** | **31** |

| | Function group | | Gender | |
|---|---|---|---|---|
| | | | Male | Female |
| Contract Agents | IV | 2 | | 2 |
| | III | 8 | 3 | 5 |
| | II | 12 | 1 | 11 |
| | I | 3 | 3 | |
| | **Total CA** | **25** | **7** | **18** |

| Total EMCDDA staff | Gender | |
|---|---|---|
| | Male | Female |
| 99 | 46 | 53 |
| % | 46.46 % | 53.54 % |
| SNE | 1 | |

Administrator = AD
Assistant = AST
Seconded national expert = SNE

## B. Staff by nationality



## C. Results of the 2015 benchmarking exercise

| Job type (sub-) category | 2015 (%) |
|---|---|
| **Administrative support and coordination** | **20.68** |
| Administrative support | 19.83 |
| Coordination | 0.85 |
| **Operational** | **68.56** |
| Top level operational coordination | 5.34 |
| Programme management and implementation | 49.49 |
| Evaluation and impact assessment | 0 |
| General operational | 13.73 |
| **Neutral** | **10.76** |
| Finance/control | 10.76 |
| Linguistics | 0 |

# ANNEX 3
# Outputs and products

## Annual reporting

*European Drug Report 2015: Trends and developments,* EMCDDA, Lisbon, June 2015
A yearly overview of the drug phenomenon in Europe.
Available in 24 languages — all EU official languages (except MT and GA), plus TR and NO.
http://www.emcdda.europa.eu/publications/edr/trends-developments/2015

*Statistical bulletin (Data and statistics)*

The epidemiological basis on which the EDR is based, with over 300 tables and 100 graphics collated by the EMCDDA from the information submitted by the network of Reitox NFPs.
Available as a website in EN: http://www.emcdda.europa.eu/data/2015

*Perspective on drugs (PODs)*

Designed-for-the-web interactive analyses providing deeper insights into a selection of important issues.
*Drug consumption rooms: an overview of provision and evidence*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/topics/pods/drug-consumption-rooms

*The misuse of benzodiazepines among high-risk opioid users in Europe*, EMCDDA, Lisbon, June 2015.
www.emcdda.europa.eu/topics/pods/benzodiazepines

*Opioid trafficking routes from Asia to Europe*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/topics/pods/opioid-trafficking-routes

*The role of psychosocial interventions in drug treatment*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/topics/pods/psychosocial-interventions

*Country overviews*

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

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

*Country overviews (FSU)*

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

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

*National reports*

Commissioned each year by the EMCDDA and produced by the Reitox NFPs, the national reports provide an overall picture of the drugs phenomenon at the national level in each EU Member State. Published on the EMCDDA website: http://www.emcdda.europa.eu/publications/searchresults?action=list&type= PUBLICATIONS&SERIES_PUB=w203

## Institutional publications

*General Report of Activities 2014 including the annual activity report of the EMCDDA's authorising officer* (for 2014), EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/gra/2014

*A year in review. Highlights from the EMCDDA's General Report of Activities 2014*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/gra/2014-highlights

*Annual accounts 2014*, EMCDDA, Lisbon, August 2015.
http://www.emcdda.europa.eu/publications/annual-account/2014

*Budget 2015*, EMCDDA, Lisbon, July 2015.
http://www.emcdda.europa.eu/publications/budget-2015

*Work programme 2015*, EMCDDA, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/work-programmes/2015

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

*EMCDDA–Europol 2014 Annual Report on the implementation of Council Decision 2005/387/JHA* (New drugs in Europe, 2013), EMCDDA, Lisbon, July 2015.
http://www.emcdda.europa.eu/publications/implementation-reports/2014

This report presents the results and outlines the key achievements for 2014 on the information exchange, risk assessment and control with regard to NPS.

EMCDDA–Europol Joint Report on a new psychoactive substance: 1-phenyl-2-(1-pyrrolidinyl)-1-pentanone (α-PVP), EMCDDA, Lisbon, September 2015.
http://www.emcdda.europa.eu/publications/joint-reports/alpha-pvp

## Risk assessments

*Report on the risk assessment of MT-45 in the framework of the Council Decision on new psychoactive substances*, EMCDDA, Lisbon, October 2015.
http://www.emcdda.europa.eu/publications/risk-assessments/mt-45

*Report on the risk assessment of 4,4'-DMAR in the framework of the Council Decision on new psychoactive substances*, EMCDDA, Lisbon, October 2015.
http://www.emcdda.europa.eu/publications/risk-assessment/44-dmar

### EMCDDA Insights

*Treatment of cannabis-related disorders in Europe*, EMCDDA, Lisbon, April 2015.
http://www.emcdda.europa.eu/publications/insights/2015/treatment-of-cannabis-related-disorders

*Prevention of addictive behaviours*, EMCDDA, Lisbon, September 2015.
http://www.emcdda.europa.eu/publications/insights/preventing-addictive-behaviours

*Comorbidity of substance use and mental disorders in Europe*, EMCDDA, Lisbon, November 2015.
http://www.emcdda.europa.eu/publications/insights/comorbidity-substance-use-mental-disorders-europe

### Joint publications

*Wound botulism in people who inject heroin in Norway and the United Kingdom*, EMCDDA and ECDC, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/joint-publications/wound-botulism-norway-uk-2015

*The ESPAD validity study in four countries in 2013*, EMCDDA and ESPAD, Lisbon, July 2015.
http://www.emcdda.europa.eu/publications/joint-publications/espad-validity-study

### EMCDDA Papers

*Preventing fatal overdoses: a systematic review of the effectiveness of take-home naloxone*, EMCDDA, Lisbon, January 2015.
http://www.emcdda.europa.eu/publications/emcdda-papers/naloxone-effectiveness

*Mortality among drug users in Europe: new and old challenges for public health*, EMCDDA, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/emcdda-papers/mortality-among-drug-users-in-europe

*Drugs policy and the city in Europe*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/emcdda-papers/drug-policy-and-the-city

*Alternatives to punishment for drug-using offenders*, EMCDDA, Lisbon, July 2015.
http://www.emcdda.europa.eu/publications/emcdda-papers/alternatives-to-prison

### Technical reports

*The internet and drug markets — summary of results from an EMCDDA Trendspotter study,* EMCDDA, Lisbon, January 2015.
http://www.emcdda.europa.eu/publications/technical-reports/internet-drug-markets

*Prevention of infectious diseases among people who inject drugs in some Western Balkan countries: A report based on the Reitox Academy organised on 29–30 October 2013 in Sarajevo, Bosnia and Herzegovina,* EMCDDA, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/technical-reports/prevention-infectious-diseases-western-balkan-countries

*Drug law offences in the Western Balkan region: from definition to monitoring: A report based on the Reitox Academy 'Drug law offences in the Western Balkan region: from definition to monitoring', organised on 2 and 3 April 2014 in Podgorica, Montenegro*, EMCDDA, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/technical-reports/drug-law-offences-western-balkan-countries

*Estimating trends in injecting drug use in Europe using national data on drug treatment admissions*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/technical-reports/estimating-trends-injecting-drug-use-europe-using-national-data-drug-treatment-admissions

## Rapid communications

*New psychoactive substances in Europe. An update from the EU Early Warning System (March 2015),* EMCDDA, Lisbon, March 2015.
http://www.emcdda.europa.eu/publications/2015/new-psychoactive-substances

*New psychoactive substances in Europe: Innovative legal responses*, EMCDDA, Lisbon, July 2015.
http://www.emcdda.europa.eu/publications/ad-hoc-publication/new-psychoactive-substances-europe-innovative-legal-responses

*Drug-related infectious diseases in Europe. Update from the EMCDDA expert network*, EMCDDA, Lisbon, September 2015.
http://www.emcdda.europa.eu/publications/rapid/2015/drug-related-infectious-diseases-in-europe

*Estimating trends in injecting drug use in Europe using national data on drug treatment admissions*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/technical-reports/estimating-trends-injecting-drug-use-europe-using-national-data-drug-treatment-admissions

## Brochures

*European Drug Report 2015: promotional brochure*, EMCDDA, Lisbon, June 2015.
http://www.emcdda.europa.eu/publications/brochures/edr2015

*20 years: Monitoring, communicating evidence, informing policy*, EMCDDA, Lisbon, September 2015.
http://www.emcdda.europa.eu/publications/brochures/20-years

## Drugnet Europe

The EMCDDA's quarterly newsletter provides regular information on the agency's activities to a broad readership. There were four editions in 2015 (89, 90, 91 and 92). These are available in EN.
http://www.emcdda.europa.eu/publications/drugnet

## Other

*Drug use and its consequences in the Western Balkans 2006–14*, EMCDDA, Lisbon, March 2015.
http://www.emcdda.europa.eu/publications/2015/western-balkans-report

EMCDDA internal statistics code of practice, EMCDDA, Lisbon, February 2015.
http://www.emcdda.europa.eu/publications/manuals/statistics-code-of-practice

## Media products

*News releases*

Eleven news releases

No 11/2015: EMCDDA Management Board elects new Chair and Vice-Chair (4.12.2015) EN/DE/FR/PT

No 10/2015: New EMCDDA report explores combined mental health and substance use disorders (27.11.2015) EN

No 9/2015: 4,4'-DMAR and MT-45 to be placed under control across the EU (20.10.2015) EN

No 8/2015: Annual award ceremony to celebrate excellence in scientific writing on illicit drugs (22.9.2015) EN/DE/FR/PT

No 7/2015: EMCDDA conference: 20 years of monitoring and communicating evidence on drugs (18.9.2015) EN/DE/FR/PT

No 6/2015: EMCDDA Management Board selects new Director (10.9.2015) EN/DE/FR/PT

No 5/2015: Europe's cities offer valuable observation window on new drug trends (25.6.2015) EN/DE/FR/PT

No 4/2015: EMCDDA explores new dynamics and dimensions of Europe's drugs problem (4.6.2015) BG/CS/DA/DE/EL/EN/ES/ET/FI/FR/HR/HU/IT/LT/LV/NL/PL/PT/RO/SK/SL/SV/NO/TU

No 3/2015: EMCDDA underlines growing importance of effective treatment for cannabis use (21.4.2015) EN

No 2/2015: Coming soon: European Drug Report 2015 (15.4.2015) BG/CS/DA/DE/EL/EN/ES/ET/FI/FR/HR/HU/IT/LT/LV/NL/PL/PT/RO/SK/SL/SV/NO/TU

No 1/2015: EMCDDA presents latest update on 'new drugs' from EU Early Warning System (9.3.2015) EN/DE/FR/PT

*Fact sheets*

Ten fact sheets available only in EN

No 10/2015: Over 40 countries attend 2015 Reitox week in Lisbon (24.11.2015)

No 9/2015: EU drugs agency boosts cooperation with Georgian Ministry of Justice (4.11.2015)

No 8/2015: EMCDDA co-hosts 'Testing the waters 2015' (9.10.2015)

No 7/2015: EMCDDA Director Wolfgang Götz receives award for services to the Republic of Austria (8.9.2015)

No 6/2015: EU drugs agency steps up cooperation with National Security Council of Armenia (28.7.2015)

No 5/2015: EMCDDA publishes first overview of the drug situation in the Western Balkans (23.3.2015)

No 4/2015: New EMCDDA annual work programme published today (12.2.2015)

No 3/2015: New EMCDDA trendspotter study explores online supply of drugs (30.1.2015)

No 2/2015: New EMCDDA review studies the effectiveness of overdose antidote, naloxone 19.1.2015)

No 1/2015: Registration opens for fourth European drugs summer school (15.1.2015)

News items are also published throughout the year. For a full listing, please see: http://www.emcdda.europa.eu/news/2015

*Videos*

European Drug Report 2015 to be launched on 4 June (13.4.2015)
https://www.youtube.com/watch?v=vzzyp3k6pSk

Lisbon Addictions 2015: first European conference on addictive behaviours and dependencies (13.4.2015)
https://www.youtube.com/watch?v=83bKhj3LQZc

Drug consumption rooms (28.5.2015)
https://www.youtube.com/watch?v=YhLoLbORzi0

European Drug Report 2015 — Get the facts (28.5.2015)
https://www.youtube.com/watch?v=zPrRlRWaIbk

Misuse of benzodiazepines among high-risk opioid users (28.5.2015)
https://www.youtube.com/watch?v=hKnQ6-HLjws

What is decriminalisation of drugs? (3.6.2015)
https://www.youtube.com/watch?v=9NKhpujqOXc

Europäischer Drogenbericht 2015 — Die Hauptfakten (21.7.2015) DE
https://www.youtube.com/watch?v=CO-mBjG2tXc

Relatório Europeu sobre Drogas 2015 — Conheça os factos (21.7.2015) PT
https://www.youtube.com/watch?v=UCrZQbRNDdQ

Europejski raport narkotykowy 2015 — najnowsze fakty (19.8.2015) PL
https://www.youtube.com/watch?v=RA59mkvvdL0

Informe Europeo sobre Drogas 2015 — conoce las cifras (5.10.2015) ES
https://www.youtube.com/watch?v=X5Wy4JQZves

Rapport européen sur les drogues 2015 — Les principaux faits (11.11.2015) FR
https://www.youtube.com/watch?v=MeBGcvS8fEo

## Online tools and web-based resources

*EMCDDA public website*

The gateway to drug information in Europe
http://www.emcdda.europa.eu

Prevention profiles
http://www.emcdda.europa.eu/countries/prevention-profiles

Action on new drugs
http://www.emcdda.europa.eu/activities/action-on-new-drugs

Drug-related research
http://www.emcdda.europa.eu/themes/research

Best practice portal: A resource for professionals, policymakers and researchers in the areas of drug-related prevention, treatment, harm reduction and social reintegration.
http://www.emcdda.europa.eu/best-practice

ELDD (European Legal Database on Drugs)
http://www.emcdda.europa.eu/eldd

Treatment profiles
http://www.emcdda.europa.eu/responses/treatment-overviews

## Articles and book chapters published in 2015 (bold indicates EMCDDA staff member(s))


1. Allara, E., **Ferri, M., Bo, A.**, Gasparrini, A. and Faggiano, F. (2015), 'Are mass-media campaigns effective in preventing drug use? A Cochrane systematic review and meta-analysis', *British Medical Journal*.

2. Allara, E., **Ferri, M., Bo, A.**, Gasparrini, A. and Faggioano, F. (2015), 'Are mass-media campaigns effective in preventing drug use? A Cochrane systematic review and meta-analysis', *BMJ Open*, 5:e007449. doi:10.1136/bmjopen-2014-007449.

3. **Burkhart, G.** and **Simon, R.** (2015), 'Prevention strategies and basics', in el-Guebaly, N., Carrà, G. and Galanter, M. (eds), *Textbook of Addiction Treatment: International Perspectives*, Springer, Milan.

4. **Burkhart, G.** (2015), '¿Confiamos demasiado en el valor de la cognición y de la educación en la prevención?', *Revista Española de Drogodependencias* 40, pp. 61–70.

5. **Burkhart, G.** (2015), 'International standards in prevention: how to influence prevention systems by policy interventions?', *International Journal of Prevention and Treatment of Substance Use Disorders* 1, pp. 18–37.

6. **Burkhart, G.** (2015), 'Is the Strengthening Families Programme feasible in Europe?', *Journal of Children's Services* 10, pp. 133–150.

7. Cruciani, M., **Wiessing, L.**, Serpelloni, G., Genetti, B., Andreotti, A., Iulia, C., Zermiani, M. and Suligoi, B. (2015), 'Increasing prevalence of HIV infection among first time clients in Italian drug treatment services – is it sexual transmission?', *BMC Infectious Diseases* 15, p. 201.

8. **Hedrich, D.** and Hartnoll, R. (2015), 'Harm reduction interventions', in el-Guebaly, N., Carrà, G. and Galanter, M. (eds), *Textbook of Addiction Treatment: International Perspectives*, Springer, Milan.

9. Dines, A. M., Wood, D. M., Galicia, M., Yates, C. M., Heyerdahl, F., Hovda, K. E., **Giraudon, I.** and **Sedefov, R.** (2015), 'Presentations to the emergency department following cannabis use — a multi-centre case series from ten European countries', *Journal of Medical Toxicology* 11, pp. 415–421.

10. Dines, A. M., Wood, D. M., Yates, C., Heyerdahl, F., Hovda, K. E., **Giraudon, I.**, **Sedefov, R.**, Dargan, P. I. and Euro-DEN Research Group (2015), 'Acute recreational drug and new psychoactive substance toxicity in Europe: 12 months data collection from the European Drug Emergencies Network (Euro-DEN)', *Clinical Toxicology* 53, pp. 893–900.

11. **Ferri, M.** and Dias, S. (2015), 'Time, consensus and implementation: challenges for effective knowledge exchange', *Addiction* 110, pp. 900–902.

12. **Ferri, M.**, **Ballotta, D.**, Carra, G. and Dias, S. (2015), 'A review of regional drug strategies across the world: How is prevention perceived and addressed?', *Drugs: Education, Prevention and Policy* 22, pp. 444–448.

13. **Griffiths, P.** and **Ferri M. (2015)**, 'Systems, approaches, public policies, evaluation and outcome of treatment', in el-Guebaly, N., Carrà, G. and Galanter, M. (eds), *Textbook of Addiction Treatment: International Perspectives*, Springer, Milan.

14. Hatzakis, A., Sypsa, V., Paraskevis, D., Nikolopoulos, G., Tsiara, C., Micha, K., Panopoulos, A., Malliori, M., Psichogiou, M., Pharris, A., **Wiessing, L.**, van de Laar, M., Donoghoe, M., Heckathorn, D. D., Friedman, S. R. and Des Jarlais, D. C. (2015), 'Design and baseline findings of a large-scale rapid response to an HIV outbreak in people who inject drugs in Athens, Greece: the ARISTOTLE programme', *Addiction* 110, pp. 1453–1467.

15. **Mounteney, J.**, **Griffiths, P.**, **Sedefov, R.**, **Noor, A.**, **Vicente, J.** and **Simon R.** (2015), 'The drug situation in Europe: an overview of data available on illicit drugs and new psychoactive substances from European monitoring in 2015', *Addiction* 111, pp. 34–48.

16. **Mounteney, J.**, **Gallegos, A.**, **Sedefov, R.** and **Hughes, B.** (2015), 'Identifisering, riskovurdering og regulering as NPS', *Nye psykoaktive stoffer: en rusmiddelrevolusjon?* Universitetsforlaget, Oslo, pp. 118–130.

17. **Mounteney, J.**, **Giraudon, I.**, Denissov, G. and **Griffiths, P.** (2015), 'Fentanyls: are we missing the signs? Highly potent and on the rise in Europe', *International Journal of Drug Policy* 26, pp. 626–631.

18. Hartnoll, R. and **Hedrich, D.** (2015), 'Harm reduction policies, settings and challenges', in el-Guebaly, N., Carrà, G. and Galanter, M. (eds), *Textbook of Addiction Treatment: International Perspectives*, Springer, Milan.

19. Rosińska, M., Sierosławski, J. and **Wiessing, L.** (2015), 'High regional variability of HIV, HCV and injecting risks among people who inject drugs in Poland: comparing a cross-sectional bio-behavioural study with case-based surveillance', *BMC Infectious Diseases* 15, p. 83.

20. **Simon, R.** and **Burkhart, G.** (2015), 'Regional and cultural aspects of prevention', In el-Guebaly, N., Carrà, G. and Galanter, M. (eds), *Textbook of Addiction Treatment: International Perspectives*, Springer, Milan.

21. **Simon, R.** and West, R. (2015), 'Models of addiction and types of interventions: An integrative look', *The International Journal of Alcohol and Drug Research* 4, pp. 13–20.

22. **Simon, R.** and **Hughes, B.** (2015), 'Cannabis und Drogenrecht in Europa: Gesetzeslage, Umsetzung und aktuelle Diskussionen zur Weiterentwicklung', *Sucht Aktuell*, Heft 2, pp. 18–26.

23. Strang, J., **Groshkova, T.**, Uchtenhagen, A., van den Brink, W., Haasen, C., Schechter, M., Lintzeris, N., Bell, J., **Pirona, A.**, Oviedo-Joekes, E., Simon, R. and Metrebian, N. (2015), 'Heroin on trial: systematic review and meta-analysis of randomised trials of diamorphine-prescribing as treatment for refractory heroin addiction', *British Journal of Psychiatry* 207, pp. 5–14 (doi: 10.1192/bjp.bp.114.149195).

24. Sypsa, V., Paraskevis, D., Malliori, M., Nikolopoulos, G., Panopoulos, A., Kantzanou, M., Katsoulidou, A., Psichogiou, M., Fotiou, A., Pharris, A., Van De Laar, M., **Wiessing, L.**, Jarlais, D., Friedman, S. and Hatzakis, A. (2015) 'Homelessness and other risk factors for HIV infection in the current outbreak among injection drug users in Athens, Greece', *American Journal of Public Health* 105, p. 196.

25. **Wiessing, L.**, **Hughes, B.**, **Ferri, M.** and **Griffiths, P.** (2015), 'Cannabis: monitor policy changes', *Nature* 527, p. 305.

26. Wood, D., **Sedefov, R.**, **Cunningham, A.** and Dargan, P. I. (2015), 'Prevalence of use and acute toxicity associated with the use of NBOMe drugs', *Clinical Toxicology*, 53, pp. 85–92.

27. Wood, D., Dines, A. M., Heyerdahl, F., Yates, C., **Giraudon, I.**, Paasma, R., Hovda, K. N. and Dargan, P.I. (2016), 'Review of European-Drug Emergencies Network (Euro-DEN) training package for non-specialist workers to assess acute recreational drug and new psychoactive substance toxicity in night-time economy environments', *Drugs: Education, Prevention and Policy* 23, pp. 73–77. Published online: 24 September 2015 (http://www.tandfonline.com/doi/full/10.3109/09687637.2015.1081379).

## ANNEX 4
## Key external events, conferences and meetings, 2015

During 2015, EMCDDA staff participated in many external events, conferences and technical meetings. Through this participation, they brought their knowledge and expertise to international scientific discussions and the various political debates currently active in the drugs field. For details of these events, see emcdda.europa.eu/publications/gra/2015

## ANNEX 5
## Implementation of the 2015 work programme by objectives, activities and expected outputs/results

This annex presents, in detail, the activities contained within the work programme for 2015 and how these activities were carried out during the course of the year. It can be found at emcdda.europa.eu/publications/gra/2015

## ANNEX 6
## Key performance indicators

Attaining good performance was a strategic goal for the EMCDDA in 2013–15, and the agency made significant progress in this area during this three-year period. This included establishing KPIs for all the main areas of work. In line with the two-step approach endorsed by the Management Board, the process started with the definition of KPIs for three areas in the 2014 work programme; in the second phase, which was completed under the framework of the preparation of the 2015 work programme, KPIs were developed for all areas of work (51 KPIs in total).

These KPIs were designed to measure the achievement of the specific objectives defined in the 2015 work programme. As much as this was possible, annual targets were defined in order to support the measurement of the KPIs. The results are presented in the online annex at emcdda.europa.eu/publications/gra/2015

# ANNEX 7
# Members of the EMCDDA's statutory bodies

## Members of the Management Board

The Management Board consists of one representative from each Member State, two representatives of the European Commission, two independent experts that are particularly knowledgeable in the field of drugs, designated by the European Parliament, and one representative from each country that has concluded an agreement with the EMCDDA (i.e. Norway and Turkey). Non-voting observers, such as those from international organisations with which the agency cooperates, may also be invited to Management Board meetings.

| Country/organisation | Member | Substitute |
|---|---|---|
| **Belgium** | Claude GILLARD **(Vice-Chairman)** | Vladimir MARTENS |
| **Bulgaria** | Momtchil VASSILEV | |
| **Czech Republic** | Jindrich VOBOŘIL | Lucia KISSOVA |
| **Denmark** | Lars PETERSEN | Dennis PIHL THOMSEN |
| **Germany** | Marlene MORTLER | Dirk LESSER |
| **Estonia** | Anna-Liisa PÄÄSUKENE | Ain PEIL |
| **Ireland** | Susan SCALLY | Marie McBRIDE |
| **Greece** | Christina DIAMANTOPOULOU | Gerasimos PAPANASTASATOS |
| **Spain** | Francisco BABÍN VICH | Maria Sofia ARAGÓN SÁNCHEZ |
| **France** | Laura d'ARRIGO | Danièle JOURDAIN MENNINGER |
| **Croatia** | Željko PETKOVIĆ | Sanja MIKULIĆ |
| **Italy** | Patrizia DE ROSE | Elisabetta SIMEONI |
| **Cyprus** | Stelios SERGIDES | Marios ADONIS |
| **Latvia** | Dzintars MOZGIS | |
| **Lithuania** | Inga JUOZAPAVIČIENĖ | Gražina BELIAN |
| **Luxembourg** | Xavier POOS | Alain ORIGER |
| **Hungary** | Mónika SZÁSZIK | Ibolya CSÁKÓ |
| **Malta** | Richard MUSCAT | Marilyn CLARK |
| **Netherlands** | Wil DE ZWART | |
| **Austria** | Franz PIETSCH | Christina SCHAFFER-KRAL |
| **Poland** | Piotr JABŁOŃSKI | Bogusława BUKOWSKA |
| **Portugal** | JOÃO GOULÃO **(Chairman)** | Manuel CARDOSO |
| **Romania** | Sorin OPREA | Cătălin NEGOI-NIȚĂ |
| **Slovenia** | Vesna-Kerstin PETRIČ | Jože HREN |
| **Slovakia** | Mario MIKLOSI | Dominika GREISIGEROVÁ |
| **Finland** | Elina KOTOVIRTA | Kari PAASO |
| **Sweden** | Lina PASTOREK | Bo PETTERSON |
| **United Kingdom** | John McCRACKEN | Sam WEBB |
| **European Commission** | Matthias RUETE and Luigi SORECA | Floriana SIPALA and Philippe ROUX |

| Country/organisation | Member | Substitute |
|---|---|---|
| **European Parliament** | Barbara DÜHRKOP DÜHRKOP and Carla ROSSI | Massimo CANU and Katalin FELVINCZI |
| **Norwegian representatives** | Lilly Sofie OTTESEN | Hege Christina BREDESEN |
| **Turkish representatives** | Cengiz ERİŞİR | Murat SARIKAMIŞLI |
| **Observers** | | |
| **Scientific Committee** | Gerhard BÜHRINGER | |
| **Reitox spokesperson** | Tim PFEIFFER-GERSCHEL | |
| **UNODC** | Gilberto GERRA | |
| **Council of Europe Pompidou Group** | Thomas KATTAU | |
| **WHO** | Lars MØLLER | |

## Members of the Executive Committee

The Management Board is assisted by an Executive Committee. The Executive Committee is made up of the Chairperson and the Vice-Chairperson of the Management Board, two other members of the Management Board representing the Member States and appointed by the Management Board, and two representatives of DG HOME, as the EMCDDA's partner DG, for the European Commission. The Executive Committee prepares and follows up the decisions of the Management Board, and assists and advises the EMCDDA Director.

| | |
|---|---|
| João GOULÃO | Portugal (Chairman of the Management Board) |
| Claude GILLARD | Belgium (Vice-Chairman of the Management Board and Chair of the Budget Committee) |
| Laura d'ARRIGO | France |
| Franz PIETSCH | Austria |
| Two representatives of the European Commission (DG HOME) | |

## Members of the Scientific Committee

The members of the Scientific Committee are selected for their independence and proven expertise in a particular field/specialty, as indicated below.

| Field/specialty | Scientific Committee Member(s) |
|---|---|
| **Basic biological, neurobiological and behavioural research** | Fernando RODRIGUEZ DE FONSECA |
| | Rainer SPANAGEL |
| **Drug policy** | Henri BERGERON |
| | Anne Line BRETTEVILLE-JENSEN |
| | Krzysztof KRAJEWSKI |
| **Population-based research and epidemiology** | Catherine COMISKEY |
| | Paul DARGAN |
| | Dirk KORF |
| | Matthew HICKMAN |
| **Supply, supply reduction and crime** | Brice DE RUYVER |
| | Letizia PAOLI |
| **Demand reduction** | Gerhard BÜHRINGER |
| | Marina DAVOLI |
| | Gabriele FISCHER |
| | Henk GARRETSEN |

# ANNEX 8
# Use of the available resources in 2015

## EMCDDA 2015 budget execution by objectives and activities in the 2015 work programme

### A. Monitoring and reporting on the drugs problem in Europe (vertical operations)

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| Data collection, analysis and quality assurance | EPI + RTX | 0.5 | 3.0 | 3.5 | 0.0 | 7.0 |
| Monitoring and understanding drug use and problems: key indicators and epidemiology | EPI | 0.5 | 3.5 | 0.5 | 0.0 | 4.5 |
| Monitoring demand reduction responses applied to drug-related problems | IBS | 2.0 | 6.0 | 0.5 | 0.0 | 8.5 |
| Monitoring drug supply and supply reduction interventions | SAT | 1.0 | 4.0 | 2.0 | 1.0 | 8.0 |
| Monitoring new trends and developments and assessing the risks of new substances | SAT | 0.0 | 4.0 | 3.0 | 0.0 | 7.0 |
| Improving Europe's capacity to monitor and evaluate policies | EPI + IBS + SAT | 0.0 | 2.5 | 0.0 | 0.0 | 2.5 |
| Scientific coordination, research and content support | SDI + EPI | 0.5 | 4.0 | 2.5 | 0.0 | 7.0 |
| **TOTAL** | | **4.5** | **27.0** | **12.0** | **1.0** | **44.5** |

### B. Cooperation and collaboration with key external partners (transversal operations)

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| Cooperation and collaboration with key partners | DIR + SDI + RTX | 0.5 | 4.0 | 0.5 | 0.0 | 5.0 |
| **TOTAL** | | **0.5** | **4.0** | **0.5** | **0.0** | **5.0** |

Note: Figures are in EUR.

| Initial allocation of budget resources — non assigned appropriation | | | Final allocation of budget resources — non assigned appropriation | | | Executed budget — non assigned appropriation | | |
|---|---|---|---|---|---|---|---|---|
| Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget execution |
| 596 433.00 | 545 130.62 | 1 141 563.62 | 793 012.73 | 347 720.70 | 1 140 733.43 | 568 822.47 | 754 458.40 | 1 323 280.87 |
| 624 776.09 | 509 994.38 | 1 134 770.47 | 534 313.96 | 208 788.75 | 743 102.71 | 684 081.35 | 705 830.00 | 1 389 911.35 |
| 641 369.28 | 269 711.76 | 911 081.04 | 336 767.81 | 99 148.99 | 435 916.80 | 637 971.37 | 746 559.79 | 1 384 531.16 |
| 488 383.04 | 360 604.36 | 848 987.40 | 360 382.53 | 104 497.24 | 464 879.77 | 471 259.41 | 499 074.86 | 970 334.28 |
| 583 311.82 | 385 658.43 | 968 970.25 | 411 831.87 | 104 497.24 | 516 329.11 | 473 885.34 | 533 749.58 | 1 007 634.91 |
| 244 585.90 | 194 619.78 | 439 205.68 | 555 697.52 | 208 788.81 | 764 486.33 | 224 835.69 | 269 352.92 | 494 188.61 |
| 780 054.65 | 482 379.56 | 1 262 434.21 | 433 395.28 | 123 072.16 | 556 467.44 | 768 591.70 | 936 964.12 | 1 705 555.82 |
| **3 958 913.78** | **2 748 098.89** | **6 707 012.67** | **3 425 401.70** | **1 196 513.89** | **4 621 915.59** | **3 829 447.34** | **4 445 989.66** | **8 275 437.00** |

| Initial allocation of budget resources — non assigned appropriation | | | Final allocation of budget resources — non assigned appropriation | | | Executed budget — non assigned appropriation | | |
|---|---|---|---|---|---|---|---|---|
| Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget execution |
| 604 345.37 | 419 104.70 | 1 023 450.07 | 341 116.70 | 113 280.73 | 454 397.43 | 576 202.98 | 580 039.07 | 1 156 242.05 |
| **604 345.37** | **419 104.70** | **1 023 450.07** | **341 116.70** | **113 280.73** | **454 397.43** | **576 202.98** | **580 039.07** | **1 156 242.05** |

### C. Supporting the achievement of results (transversal operations)

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation = | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| Communicating the EMCDDA's findings to external audiences (including translation) | COM | 1.0 | 9.0 | 2.0 | 0.0 | 12.0 |
| Governance, management and networks (executive and corporate management + governing bodies' activities) | DIR + SDI | 3.5 | 5.0 | 2.0 | 0.0 | 10.5 |
| | RTX + NFPs' co-financed activities | 0.5 | 3.0 | 0.5 | 0.0 | 4.0 |
| **TOTAL** | | **5.0** | **17.0** | **4.5** | **0.0** | **26.5** |
| **GRAND TOTAL FOR OPERATIONS** | | **10.0** | **48.0** | **17.0** | **1.0** | **76.0** |

### D. Support to operations under A, B and C above (overheads)

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| Administration: supporting core business | ADM (administration and resources/assets management) | 3.0 | 11.0 | 7.5 | 0.0 | 21.5 |
| Information and communication technologies | ICT (equipment and services) | 0.0 | 8.0 | 2.5 | 0.0 | 10.5 |
| **TOTAL** | | **3.0** | **19.0** | **10.0** | **0.0** | **32.0** |

### E. Grand total for operations and support to operations

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| **TOTAL** | | **13.0** | **67.0** | **27.0** | **1.0** | **108.0** |

### F. Special projects

| Objectives and activities of EMCDDA 2015 WP | Main organisational actors for implementation | Assigned HR | | | | |
|---|---|---|---|---|---|---|
| | | O | TA | CA | SNE | Total HR |
| Preparation of IPA beneficiary countries for their participation in the EMCDDA (IPA 5 project — first year) | RTX | 0.0 | 0.0 | 0.5 | 0.0 | 0.5 |
| Project for technical assistance aimed at strengthening the capacity of the ENP partner countries to react to new challenges and developments in the drug situation (ENP 1 project — second year) | RTX | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 |

Note: Figures are in EUR.
Remarks:
Assigned HR = full-time time equivalent per year; O = officials; TA = temporary agents; CA = contract agents; SNE = seconded national experts.
Appropriations for cost/expenditure for operational activities and staff that directly aim to implement the EMCDDA mission/task/WP.
Overheads, i.e. appropriations for cost/expenditure for activities, equipment, infrastructure and staff that are used indirectly to implement the EMCDDA mission/task/WP, as their immediate aim is to support operational activities and staff. These overheads are distributed to operational activities in proportion with the human resources assigned to the implementation of these activities.

| Initial allocation of budget resources — non assigned appropriation | | | Final allocation of budget resources — non assigned appropriation | | | Executed budget — non assigned appropriation | | |
|---|---|---|---|---|---|---|---|---|
| Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget | Direct cost of operations | Indirect costs of operations | Total budget execution |
| 1 654 324.53 | 930 443.01 | 2 584 767.54 | 1 475 955.19 | 404 853.88 | 1 880 809.07 | 1 683 571.97 | 1 287 729.06 | 2 971 301.03 |
| 1 221 884.49 | 920 774.54 | 2 142 659.03 | 1 001 965.05 | 298 269.62 | 1 300 234.67 | 1 208 297.22 | 1 373 889.24 | 2 582 186.46 |
| 2 559 847.18 | 316 226.15 | 2 876 073.33 | 2 807 417.53 | 91 867.04 | 2 899 284.57 | 2 446 631.84 | 437 655.60 | 2 884 287.44 |
| **5 436 056.20** | **2 167 443.70** | **7 603 499.90** | **5 285 337.77** | **794 990.54** | **6 080 328.31** | **5 338 501.03** | **3 099 273.90** | **8 437 774.94** |
| **9 999 315.35** | **5 334 647.29** | **15 333 962.64** | **9 051 856.17** | **2 104 785.16** | **11 156 641.33** | **9 744 151.36** | **8 125 302.63** | **17 869 453.99** |

| Initial allocation of budget resources for direct cost of supporting activities to be distributed to operations | Final allocation of budget resources for direct cost of supporting activities to be distributed to operations | Executed budget — non assigned appropriation |
|---|---|---|
| 2 954 104.75 | 6 835 912.08 | 6 835 912.08 |
| 1 073 216.56 | 1 320 500.96 | 1 289 390.55 |
| **4 027 321.31** | **8 156 413.04** | **8 125 302.63** |

| Allocated budget resources for direct costs of supporting activities to be distributed to operations (see above) — non-assigned appropriations |
|---|
| **17 869 453.99** |

| Budget –assigned appropriations | | | |
|---|---|---|---|
| Budget allocation — financing received in 2015 | Carried over and carried forward from 2014 | Total available in 2015 | Budget execution |
| 600 000.00 | 0.00 | 600 000.00 | 74 349.09 |
| 111 787.83 | 135 982.17 | 247 770.00 | 187 849.99 |

*Statement of financial performance*

| | 2015 | 2014 | Variation |
|---|---|---|---|
| Contributions of EFTA countries belonging to the EEA | 394 005.50 | 392 177.02 | 1 828.48 |
| Recovery of expenses | 41 614.00 | 27 910.85 | 13 703.15 |
| Revenues from administrative operations | 2 649 174.72 | 1 936.25 | 2 647 238.47 |
| Other operating revenue | 14 965 604.27 | 15 293 808.38 | –328 204.11 |
| **TOTAL OPERATING REVENUE** | **18 050 398.49** | **15 715 832.50** | **2 334 565.99** |
| Administrative expenses | –13 589 506.36 | –11 325 830.20 | –2 263 676.16 |
| All staff expenses | –9 100 284.26 | –8 654 377.38 | –445 906.88 |
| Fixed asset-related expenses | –1 988 158.10 | –256 302.53 | –1 731 855.57 |
| Other administrative expenses | –2 501 064.00 | –2 415 150.29 | –85 913.71 |
| Operational expenses | –3 819 662.72 | –4 223 010.71 | 403 347.99 |
| Other operational expenses | –3 819 662.72 | –4 223 010.71 | 403 347.99 |
| **TOTAL OPERATING EXPENSES** | **–17 409 169.08** | **–15 548 840.91** | **–1 860 328.17** |
| **SURPLUS/DEFICIT FROM OPERATING ACTIVITIES** | **641 229.41** | **166 991.59** | **474 237.82** |
| Financial revenues | 20 944.90 | 9 105.05 | 11 839.85 |
| Financial expenses | –3 102.80 | –3 651.30 | 548.50 |
| **SURPLUS/DEFICIT FROM NON-OPERATING ACTIVITIES** | **17 842.10** | **5 453.75** | **12 388.35** |
| **SURPLUS/DEFICIT FROM ORDINARY ACTIVITIES** | **659 071.51** | **172 445.34** | **486 626.17** |
| **ECONOMIC OUTTURN FOR THE YEAR** | **659 071.51** | **172 445.34** | **486 626.17** |

*EMCDDA 2015 budget appropriations and execution by nature of expenditure*

| Title | Description | EUR |
|---|---|---|
| 1. | **Expenditure relating to persons working with the EMCDDA** | |
| | Staff in active employment | 9 026 729.19 |
| | Other staff-related expenditure (exchange of officials, etc.) | 132 431.59 |
| | **Total under Title 1** | **9 159 160.78** |
| 2. | **Expenditure for support activities** | |
| | Investment in immovable property, rental of buildings and associated costs | 4 018 349.82 |
| | Data processing | 575 683.25 |
| | Movable property and associated costs | 134 713.08 |
| | Current administrative expenditure + postal charges and telecommunications | 104 986.38 |
| | Socio-medical infrastructure | 22 049.52 |
| | **Total under Title 2** | **4 855 782.05** |
| 3. | **Expenditure for operational activities** | |
| | Statutory meetings | 169 999.50 |
| | Expenditure on formal and others meetings + representative expenses | 336 764.38 |
| | Studies, surveys, consultations | 469 221.83 |
| | Publishing and translations | 558 832.41 |
| | European Network on Drugs and Drug Addiction Reitox | 2 069 945.41 |
| | Missions | 249 747.63 |
| | **Total under Title 3 –** Section 1.01 | **3 854 511.16** |
| | Section 1.02 – **Total core budget** | **17 869 453.99** |
| | Section 1.03 | |
| 4. | **Expenditure relating to other subsidies** | |
| | EU financing of specific projects | |
| | **4a.** IPA 5: financing for implementing pre-accession strategy | **74 349.09** |
| | **4b.** ENP1: strengthening the capacity of the partner countries to react to new challenges and developments in the drug situation | **187 849.99** |
| 5 | **Other expenses (reserve)** | **0.00** |
| | **Total budget** | **18 131 653.07** |

Note: The amounts committed under 4a and 4b contain the commitment appropriations carried forward from the previous year.

*Execution of the budget: Credit consumption, 2015 (commitments)*

| Title | Description | % consumption of available credits |
|---|---|---|
| 1 | **Staff** | 100.00 |
| 2. | **Expenditure for support activities** | 100.00 |
| 3. | **Expenditure for operational activities** | 99.20 |
| 4a. | **Expenditure relating to IPA5** | 12.39 |
| 4b. | **Expenditure relating to ENP1** | 75.82 |
| | **Total consumption of core budget (Titles 1, 2, 3 )** | **99.62** |

*Balance sheet: ASSETS (in EUR)*

| | 31.12.2015 | 31.12.2014 | Variation |
|---|---|---|---|
| **ASSETS** | | | |
| **A. NON-CURRENT ASSETS** | | | |
| **Intangible assets** | **290 584.25** | **96 308.03** | **194 276.22** |
| **Property, plant and equipment** | **387 925.97** | **2 104 365.66** | **–1 716 439.69** |
| Land and buildings | 0.00 | 1 810 069.20 | –1 810 069.20 |
| Plant and equipment | 83 809.05 | 93 654.67 | –9 845.62 |
| Computer hardware | 211 191.35 | 137 275.28 | 73 916.07 |
| Furniture and vehicles | 92 925.57 | 63 366.51 | 29 559.06 |
| **Long-term pre-financing** | **1 966 664.00** | **0.00** | **1 966 664.00** |
| Long-term pre-financing | 1 966 664.00 | 0.00 | 1 966 664.00 |
| **TOTAL NON-CURRENT ASSETS** | **2 645 174.22** | **2 200 673.69** | **444 500.53** |
| **B. CURRENT ASSETS** | | | |
| **Short-term pre-financing** | **546 199.38** | **0.00** | **546 199.38** |
| Short-term pre-financing | 546 199.38 | 0.00 | 546 199.38 |
| **Short-term receivables** | **913 418.65** | **767 915.59** | **145 503.06** |
| Current receivables | 737 782.43 | 398 410.97 | 339 371.46 |
| Other | 175 636.22 | 369 504.62 | –193 868.40 |
| Deferred charges | 175 636.22 | 369 504.62 | –193 868.40 |
| **Cash and cash equivalents** | **1 467 861.10** | **1 071 938.39** | **395 922.71** |
| **TOTAL CURRENT ASSETS** | **2 927 479.13** | **1 839 853.98** | **1 087 625.15** |
| **TOTAL** | **5 572 653.35** | **4 040 527.67** | **1 532 125.68** |

*Balance sheet: LIABILITIES (in EUR)*

| | 31.12.2015 | 31.12.2014 | Variation |
|---|---|---|---|
| **LIABILITIES** | | | |
| **A. Net assets** | **3 385 544.54** | **2 726 473.03** | **659 071.51** |
| **Accumulated surplus/deficit** | **2 726 473.03** | **2 554 027.69** | **172 445.34** |
| **Economic outturn for the year — profit +/ loss-** | **659 071.51** | **172 445.34** | **486 626.17** |
| **TOTAL NET ASSETS** | **3 385 544.54** | **2 726 473.03** | **659 071.51** |
| **D. Current liabilities** | **2 187 108.81** | **1 314 054.64** | **873 054.17** |
| **Accounts payable** | **2 187 108.81** | **1 314 054.64** | **873 054.17** |
| Current payables | 617 488.80 | 4 102.64 | 613 386.16 |
| Sundry payables | –256.00 | 0.00 | –256.00 |
| Other | 866 469.68 | 1 110 134.23 | –243 664.55 |
| Accrued charges | 863 815.15 | 946 780.70 | –82 965.55 |
| Deferred income | 2 654.53 | 2 253.53 | 401.00 |
| *Deferred income with consolidated EU entities* | 0.00 | 161 100.00 | –161 100.00 |
| Accounts payable with consolidated EU entities | 703 406.33 | 199 817.77 | 503 588.56 |
| *Pre-financing received from consolidated EU entities* | 699 240.03 | 199 817.77 | 499 422.26 |
| *Other accounts payable against consolidated EU entities* | 4 166.30 | 0.00 | 4 166.30 |
| **TOTAL D. CURRENT LIABILITIES** | **2 187 108.81** | **1 314 054.64** | **873 054.17** |
| **TOTAL** | **5 572 653.35** | **4 040 527.67** | **1 532 125.68** |

*Budget result account for the financial year 2015 (in EUR)*

| | | 2015 | 2014 |
|---|---|---|---|
| **REVENUE** | | | |
| Balancing Commission subsidy | + | 14 794 000.00 | 14 793 959.00 |
| Other subsidy from Commission (IPA, ENP, etc.) | + | 711 787.83 | 488 900.00 |
| Own revenue (sale of building) | + | 2 500 000.00 | |
| Other income (Norway, Turkey, internal assigned revenue, bank interests, Translation Centre refund 2015) | + | 626 434.98 | 407 822.92 |
| **TOTAL REVENUE (a)** | | **18 632 222.81** | **15 690 681.92** |
| **EXPENDITURE** | | | |
| *Title I: Staff* | | | |
| Payments | – | 9 122 210.74 | 8 644 335.30 |
| Appropriations carried over | – | 138 169.78 | 38 178.67 |
| *Title II: Administrative expenses* | | | |
| Payments | – | 4 458 390.98 | 1 932 659.31 |
| Appropriations carried over | – | 443 069.65 | 701 335.34 |
| *Title III: Operating expenditure* | | | |
| Payments | – | 4 045 844.43 | 4 417 989.82 |
| Appropriations carried over | – | 599 237.01 | 153 508.06 |
| **TOTAL EXPENDITURE (b)** | | **18 806 922.59** | **15 888 006.50** |
| **RESULT FOR THE FINANCIAL YEAR (a–b)** | | **–174 699.78** | **–197 324.58** |
| Cancellation of unused payment appropriations carried over from previous year | + | 38 712.08 | 8 622.14 |
| Adjustment for carry-over from the previous year of appropriations available on 31 December arising from assigned revenue | + | 188 102.04 | 262 588.50 |
| Exchange differences for the year (gain: +; loss: –) | +/– | 4 976.68 | –1 272.22 |
| Pro rata Norway 2015 | | –1 995.71 | –2 253.53 |
| Pro rata Turkey 2015 | | –658.82 | |
| **BALANCE OF THE RESULT ACCOUNT FOR THE FINANCIAL YEAR** | | **54 436.49** | **70 360.31** |
| Balance year *n*–1 | +/– | 70 360.31 | 151 386.27 |
| Positive balance from year *n*–1 reimbursed in year *n* to the Commission | – | –70 360.31 | –151 386.27 |
| **Result used for determining amounts in general accounting** | | **54 436.49** | **70 360.31** |
| **Commission subsidy — agency registers accrued revenue and Commission accrued expense** | | **14 739 563.51** | **14 723 598.69** |
| **Pre-financing remaining open to be reimbursed by agency to Commission in year *n*+1** | | **54 436.49** | **70 360.31** |

ANNEX 9

# List of acronyms and abbreviations

| | |
|---|---|
| ABAC | The EMCDDA's electronic management and accounting system |
| AIDS | Acquired immune deficiency syndrome |
| ALICE-RAP | Addiction and Lifestyles in Contemporary Europe — Reframing Addictions Project |
| BCP | Business continuity plan |
| BPP | Best practice portal |
| CEPOL | European Police College |
| CICAD | Inter-American Drug Abuse Control Commission |
| CLEN | Customs Laboratories European Network |
| CND | Commission on Narcotic Drugs |
| COPOLAD | Cooperation Programme between Latin America and the EU on Drugs Policies |
| COSI | The Council of the European Union's Standing Committee on Operational Cooperation on Internal Security |
| DEA | Drug Enforcement Agency |
| DG | Directorate-General |
| DG HOME | Directorate-General for Migration and Home Affairs |
| DG HR | Directorate-General for Human Resources and Security |
| DG NEAR | Directorate-General for Neighbourhood and Enlargement Negotiations |
| DG SANTE | Directorate-General for Health and Food Safety |
| DG TAXUD | Directorate-General for Taxation and Customs Union |
| 4,4'-DMAR | 4,4'-Dimethylaminorex |
| DRID | drug-related infectious diseases (indicator) |
| EASO | European Asylum Support Office |
| Eawag | Swiss Federal Institute of Aquatic Science and Technology |
| EC | European Commission |
| ECA | European Court of Auditors |
| ECDC | European Centre for Disease Prevention and Control |
| EDMR | EU Drug Markets Report |
| EDND | European Database on New Drugs |
| EDR | European Drug Report |
| EEAS | European External Action Service |
| EFSA | European Food Safety Authority |
| EFSQ | European Facility Survey Questionnaire |
| ELDD | European Legal Database on Drugs |
| EMA | European Medicines Agency |
| EMCDDA | European Monitoring Centre for Drugs and Drug Addiction |
| EMPACT | European Multidisciplinary Platform Against Criminal Threats |
| EMQ | European Model Questionnaire |
| EMSA | European Maritime Safety Agency |

| | |
|---|---|
| ENFSI | European Network of Forensic Science Institutes |
| ENP | European Neighbourhood Policy |
| ERANID | European Research Area Network on Illicit Drugs |
| ERICES | European Reporting Instrument for Cocaine Extraction Sites |
| ERICP | European Reporting Tool for Cannabis Production |
| ERISSP | European Reporting on Illicit Synthetic Substances Production Sites |
| ESPAD | European School Survey Project on Alcohol and Other Drugs |
| EU | European Union |
| EU-ANSA | EU Agencies Network of Scientific Advisors |
| Euro-DEN | European Drug Emergencies Network |
| Eurojust | the European Union's Judicial Cooperation Unit |
| Europol | European Police Office |
| EUSPR | European Society for Prevention Research |
| EWS | Early Warning System |
| FP7 | Seventh Framework Programme for Research and Development |
| FRA | Fundamental Rights Agency |
| Frontex | The European External Border Agency |
| GPS | General population survey |
| HCIN | Heads of Communication and Information network |
| HCV | Hepatitis C virus |
| HDG | Horizontal Drugs Group |
| HFP | Head of national focal point |
| HIPP | Health in Prisons Programme |
| HIV | Human immunodeficiency virus |
| IALN | Inter-Agency Legal Network |
| IAS | Internal Audit Service of the European Commission |
| ICS | Internal Control Standard |
| ICT | Information and communication technology |
| ICTAC | Inter-Agency ICT Managers' Network |
| INCB | International Narcotics Control Board |
| IPA | Instrument for Pre-Accession Assistance |
| ISAJE | International Society of Addiction Journal Editors |
| ISCTE-IUL | ISCTE — University Institute of Lisbon |
| JHA | Justice and Home Affairs |
| KI | Key epidemiological indicator |
| KPI | Key performance indicator |
| LIBE Committee | Civil Liberties, Justice and Home Affairs Committee of the European Parliament |
| MAOC-N | Maritime Analysis and Operations Centre — Narcotics |
| MDMA | Methylenedioxyphenethylamine |
| MEP | Member of the European Parliament |

| | |
|---|---|
| MILDECA | French Interministerial Mission for Combating Drugs and Addictive Behaviours |
| MoU | Memorandum of Understanding |
| NAPO | Network of Agencies Procurement Officers |
| NFP | National focal point |
| NIDA | US National Institute on Drug Abuse |
| NPS | New psychoactive substance(s) |
| NRP | National reporting package |
| NSC | National Security Council of Armenia |
| OAP | Operational action plan |
| OAS | Organization of American States |
| ONDA | Moroccan National Observatory on Drugs and Addictions |
| OSI | Open source information |
| POD | Perspectives on drugs |
| α-PVP | α-Pyrrolidinovalerophenone |
| PWID | People who inject drugs |
| RARHA | Joint action on reducing alcohol-related harm |
| Reitox | European Information Network on Drugs and Drug Addiction |
| SEWPROF | Sewage profiling project |
| SICAD | Portuguese General-Directorate for Intervention on Addictive behaviours and Dependencies (Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências) |
| SPD | Single multi-annual programming document |
| TAIEX | Technical Assistance and Information Exchange Instrument managed by DG NEAR of the European Commission |
| TDI | Treatment demand indicator |
| UMMCDA | Ukrainian Monitoring and Medical Centre on Drugs and Alcohol of the Ministry of Health of Ukraine |
| UNGASS | United Nations General Assembly Special Session on Drug Policy |
| UNODC | United Nations Office on Drugs and Crime |
| WHO | World Health Organization |

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The *General Report of Activities* is an annual publication providing a detailed progress report of the EMCDDA's activities over a 12-month period. Published every spring, it catalogues the agency's achievements in each area of its annual work programme. The report is a useful information source for all those seeking comprehensive information on the agency and its work.

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The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) is the central source and confirmed authority on drug-related issues in Europe. For over 20 years, it has been collecting, analysing and disseminating scientifically sound information on drugs and drug addiction and their consequences, providing its audiences with an evidence-based picture of the drug phenomenon at European level.

The EMCDDA's publications are a prime source of information for a wide range of audiences including: policymakers and their advisors; professionals and researchers working in the drugs field; and, more broadly, the media and general public. Based in Lisbon, the EMCDDA is one of the decentralised agencies of the European Union.

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