European Monitoring Centre
for Drugs and Drug Addiction

WORK PROGRAMME 2009

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2009

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European Monitoring Centre
for Drugs and Drug Addiction

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Contents

Abbreviations and acronyms used in this document			
CUP	Cross unit project	EWS	Early warning system
DRD	Drug-related deaths	IDU	Injecting drug use
DRID	Drug-related infectious diseases	NFP	National focal point
EDDRA	European drug demand reduction action	PDU	Problem drug use
EIB	Evaluation instruments bank	PERK	Prevention evaluation resources kit
ELDD	European legal database on drugs	TDI	Treatment demand indicator
E-POD	European perspectives on drugs		

2003
2004
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I.
Introduction

Context

The priority in 2009, the last year of work falling under the three-year strategy and work programme (2007–09), is to ensure that commitments that have been made for this period are realised and that the EMCDDA is on a firm footing for moving forward with a new plan of activities for the 2010–12 period.

In order to draw up the 2009 work programme, a thorough inventory has been carried out of the objectives stated in the three-year strategy and the extent to which they have been achieved. Thus, planning for 2009 kicks off work on commitments that are outstanding while continuing activities already under way.

The follow-up actions to the recommendations of the 2007 external evaluation that were discussed and approved by the Management Board in July 2008 also receive attention.

At the time of writing, the content of the EU drugs action plan (2009–12) is being finalised and activities may need to be adjusted further on in the drafting process to take into account new needs.

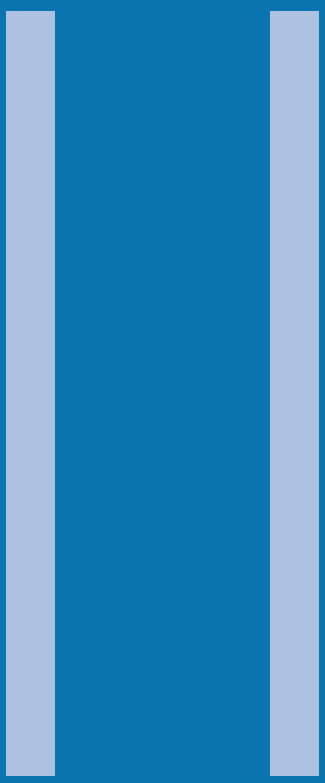
This year, as every year, the task of working closely with Reitox national focal points to produce a high quality, reliable and comprehensive report on the drugs problem, will remain at the core of the Centre's work.

The resources required for implementing the 2009 work programme will be provided by the EMCDDA budget for 2009, as adopted by its Management Board, on the basis of the decision of the Budgetary Authority on the EC annual subsidy to the EMCDDA's budget. The EC annual subsidy on which the 2009 EMCDDA budget relies is expected to amount to EUR 14 500 000.

Summary of key outputs in 2009 and their intended audience

Output	Policy	Other target audiences		
		Science	Practice	Citizen
Annual report on the state of the drugs problem in Europe (23 languages)	X	X	X	X
Selected issues: Sentencing statistics Trends in injecting drug use Polydrug use in Europe (EN with summary in 23 languages)	X	X	X	X
Statistical bulletin (EN)		X	X	
Country overviews (including situation summary, data sheet and barometer) (EN and national language)	X		X	X
Drugs in focus policy briefings (provisional titles): Europe's evolving opiate situation — issues for policy and practice Working with the criminal justice setting — a key area for drug interventions Indicated prevention and neurobiology (25 languages)	X			
EMCDDA Insights: New groups of psychoactive substances in Europe Internet-based treatment (EN, printed publication)	X		X	
EMCDDA Manuals: Guidelines for risk assessment of new psychoactive substances (EN)			X	
EMCDDA Risk assessments (*If requested by the Council of the European Union*) (EN)	X			
Drug profiles: GHB, Ketamine, Methadone, Buprenorphine (DE, EN, FR)	X	X	X	X
Drugnet Europe newsletter (EN, 4 issues, printed and online)	X	X	X	X

A detailed list of outputs can be found in section II.



II.

Core business — monitoring and reporting on the drugs problem

Overview

Building on fundamentals

Fundamental aspects of the Centre's work were refocused in the 2007–09 strategy and work programme. Activities were rationalised and regrouped under three central priorities: developing reporting capacity, improving the analytical value of the information available, and communicating it effectively. These priorities were underpinned by the guiding principles of the need for scientific rigour, commitment to partnership and good governance and efficiency. In order to support the strategy, the scientific area was reorganised to make better use of existing capacity, and resources dedicated to scientific work were increased where possible. In 2009, these changes need to be further consolidated so as to provide a sound basis for developing a new and more outward looking 2010–12 work programme.

Identifying future priorities

Reflecting on the future direction of EMCDDA activities is particularly relevant in 2009. First of all, there is the launch of the new European drugs action plan (2009–12), where the EMCDDA has an important responsibility as information provider to facilitate the European Commission's ongoing monitoring and assessment of the action plan's implementation. Planned EMCDDA activities will be reviewed in the context of the new action plan to evaluate how existing information resources may be used and also to identify areas of work that require development or adjustment to better meet the plan's information needs.

The 2007 external evaluation of the Centre raised a number of developmental issues and consideration of these is likely to impact on the future direction of the EMCDDA's work. One of the important matters to address is how to make the Centre's reporting more timely to maximise its policy relevance and this will be a priority in the 2010–12 work programme. Another one is how to strike a balance between the need to focus efforts on core activities whilst at the same time investing sufficiently in areas requiring development — such as modelling the drug economy, polydrug use, public expenditure and improving information resources in the area of supply reduction. The evaluation also urged the EMCDDA to make better use of its Scientific Committee.

Beyond Europe, the follow-up activities to the UNGASS (United Nations General Assembly Special Session) process may also have implications for data collection. The Memorandum of Understanding between the EMCDDA and UNODC (United Nations Office for Drugs and Crime) provides a framework for technical activities of common interest.

In 2009, data collection and processing issues remain at the fore with Fonte (the EMCDDA's recently developed data collection and management system) used for the complete data submission and analysis cycle. Fonte strengthens the technical backbone of data collection

considerably and the new data warehouse facilitates data extraction and manipulation. A more rationalised approach to data management accompanies these developments and is intended to bring greater efficiency and higher quality standards in data management and validation. The newly established data management and statistical support team will provide more integrated support.

Ensuring Europe's monitoring approach is fit for purpose

The European drug situation and responses made to it by Member States have evolved considerably since the EMCDDA started its work. So too has the information available to inform policies and actions. The more complex drug problem we face today means that monitoring approaches have to be reviewed to ensure that they are fit for purpose. A key event where this will be addressed is the EMCDDA conference on identifying Europe's future information needs for effective drug policy. Bringing together policymakers, scientists and practitioners, this conference will reflect on the lessons learned and how they can inform discussion on the challenges for the future. Planned for spring 2009, the conference will assemble themes which will be reflected in the 2010–12 work programme.

Joined up working — inside the EMCDDA

Drug issues are multifaceted. A key aim of the three-year strategy was to reflect this complexity better through more joined up and transversal working. Dividing the EMCDDA's scientific work into two units targeting situation analysis (EPI) and interventions (RES) has proved effective in organising ongoing work and in sharing management responsibilities. Nevertheless, it has become clear that some topics have to be followed more thematically with a cross unit approach. In 2007, a working group on treatment was initiated, which brought together monitoring of treatment demands (EPI) with monitoring of treatment quality and availability (RES). Concrete results from this group included proposals to streamline reporting for the Member States and to improve data collection instruments. Work in 2009 will continue to develop an overall strategy for monitoring this field in the future. Treatment in prison — a topic of increasing relevance in policy discussions — will also be taken into account.

In 2008, the concept of a cross unit project (CUP) was launched to provide a more formalised vehicle for collaboration between units in areas of strategic importance. The first CUP started on supply/supply reduction with the clear objective of evaluating existing sources, conceptualising the field and developing options for future improvement. CUPs are set up by the Director with clearly defined objectives, time schedules, members and coordinators. This first CUP will provide its output at the end of 2009.

The EPI unit was restructured in 2008 which should improve efficiency in delivering results in 2009. Three new teams were established to give more coherence to key areas and provide more management support. As well as the Action on new drugs section and data management and statistical support team, a new analytical section has been established that will allow a more integrated approach between key epidemiological indicators, including a common framework for updating the standards themselves and criteria for assessing their implementation.

Joined up working — with the Reitox network and wider community

With input and support from both scientific units, the Reitox unit offers capacity-development activities — called Reitox academies — to help national focal points (NFPs) develop a more

in-depth understanding of specific issues and to improve their capacity to monitor areas such as treatment quality and best practice in interventions as a whole. These training activities will continue in 2009.

In 2009, the new approach adopted for the Selected issues in 2008 will both rationalise the system and increase the relevance and value of the product. Changes to the approach include: better prepared guidelines and background documents to avoid duplication of effort; a choice of subjects that is integrated with the overall work plan and strategic needs; and more flexibility with regard to choice and participation. Focal points will be allowed to opt in on topics of particular interest or relevance.

The EMCDDA works in close partnership with the European Commission and provides support to facilitate the Commission's work. The central example here is the technical input provided to the Commission's activities to evaluate progress made in realising the goals set out in the EU drugs action plan (2005–08). The EMCDDA also provides advice and ensures complementarity with other European Commission activities in the drugs domain such as the 'Drug prevention and information programme'. Beyond this, many studies funded by European institutions require access to data held by the EMCDDA and here the Centre actively promotes the use of its data (for example in the JLS study 'Comparative analysis of research into illicit drugs in the EU'). Where required the EMCDDA represents Europe in international technical fora to discuss methodologies or to provide an update on the European situation. A very productive relationship now exists between the work of the Commission and the EMCDDA. Ensuring that the European Commission's information needs are met remains a core objective of the work programme.

The purpose of the new civil society forum on drugs is to serve as a platform for the informal exchange of views and information between the European Commission and civil society organisations in the EU, candidate countries and, as appropriate, European neighbourhood policy countries. The forum includes 26 organisations representing a wide spectrum of views. The EMCDDA will report on the main topics addressed by the forum and its key outputs in its *Annual report on the state of the drugs problem in Europe*.

The EMCDDA's strategy for international cooperation and the Memoranda of Understanding (MoU) with partners provide the framework for ongoing development of partnership activities and these are delineated in section II.

Early identification of new trends and potential problems

The emphasis placed on improving the identification of new trends in the recast of the EMCDDA regulation is reflected in a number of activities in 2009. A new case study is planned for E-POD (European perspectives on drugs) and work will continue to assess the inclusion of information from selected sites on accident and emergency rooms reporting on drug emergencies. Activities in this area will be closely coordinated with work conducted to support the Council decision on new psychoactive substances (Council

Decision 2005/387/JHA on the information exchange, risk assessment and control of new psychoactive substances). The EMCDDA is mindful of the requirement to report in a timely fashion and to efficiently identify new trends and potential threats (as set out in Article 2e of its recast Regulation, (EC) No 1920/2006). A strategic reflection is planned during 2009 to ensure that this issue is well developed in the forthcoming three-year strategy and work programme.

Communicating more effectively

The number and range of outputs produced by the EMCDDA has grown significantly over the past two years. And targets for publications in nearly all areas have been exceeded. In 2009, the focus will be on developing a more integrated process for scientific writing and editing. The emphasis will also be on driving up scientific standards, improving working practices, rationalising web-based and printed material, providing better access to information and better targeting products to audience needs. The marketing and awareness raising of EMCDDA scientific products will also be addressed.

Two issues arising from the 2007 external evaluation will be given special attention: how to increase the number of publications appearing in scientific journals and how to improve the timeliness of reporting. In this context the Statistical bulletin will be again launched in the first half of 2009 and made more user-friendly by separating the product into two distinct sections — data showcase and data archive.

Objectives and activities

Consolidate monitoring and reporting activities

Specific objective	Main activities
Key epidemiological indicators	
To improve and strengthen the implementation and coverage of the key epidemiological indicators in the Member States on the basis of the work done in 2008 by clarifying and updating standards and criteria.	Carry out ongoing methodological and developmental activities.
	Put into practice minimum implementation standards and criteria for key indicators.
	Further develop and conceptualise problem drug use and other intensive, long-term and risky patterns of drug use and improve estimation techniques.
	Continue efforts to apply new estimation techniques both on PDU (problem drug use) prevalence and incidence.
To review and update, where necessary, the definition and data collection requirements of the key epidemiological indicators to ensure relevance and appropriateness.	Explore solution for monitoring polydrug use, in particular how to better exploit the data that is already collected in existing systems.
	Continue efforts to implement monitoring of intensive use in general population surveys.
	Carry out critical review of the treatment demand indicator (TDI).
	Conceptualise a monitoring approach to mental health co-morbidities in people with drug dependence.
	Promote implementation and analysis of mortality cohort studies and total mortality estimation studies.
	Participate in the WHO working group on the revision of the ICD10 (International Classification of Diseases) for the monitoring of drug-related deaths.

Specific objective	Main activities
	Contribute to EU HIV/AIDS and hepatitis surveillance with partner institutions.
	Update and implement guidelines on DRID (drug-related infectious diseases) seroprevalence and behavioural surveillance.
	Enhance understanding of DRID spread and intervention effectiveness (through modelling).
	Further improve and develop the web-based key indicator gateway.
	Organise annual and ad-hoc meetings in support of key epidemiological indicators and other information domains as appropriate.
Monitoring and reporting in support of the Council decision on new psychoactive substances (2005/387/JHA)	
To provide efficient support to the areas of work detailed in the Council decision on the information exchange, risk assessment and control of new psychoactive substances (2005/387/JHA) that fall within the remit of the EMCDDA, such as the early warning system and risk assessment exercises.	Ensure efficient information exchange mechanism to support the areas of work detailed in the Council decision.
	Complete the set of tools necessary for implementation of the decision.
	Ensure the active involvement of the Scientific Committee in the risk-assessment process.
Annual reporting	
To continue to improve the quality of the Annual report and the accessibility of its findings.	Carry out annual reporting exercise: data processing, cleaning and liaison with national focal points for data requests on all reporting tools (standard tables, structured questionnaires, ad hoc questionnaires/reports, and national reports for 2008 cycle (Annual report 2009) and, from October, for 2009 cycle (Annual report 2010).
To improve the utility of the Statistical bulletin by rationalising the presentation of data.	Prepare and publish Statistical bulletin focused around two distinct sections: data showcase and data archive.
To improve content, presentation and timeliness of the Country overviews.	Prepare and publish Country overviews (situation summary, data sheet and barometer).
	Produce updated and improved guidelines and quality assurance procedure.
	Update the quality reports to the national focal points.
To further develop the EMCDDA's quality assurance policy for data submitted and internal control checks.	Continue E-POD project on new trends and launch new case study.

Specific objective	Main activities
Revision of reporting tools	
To revise national reporting tools in line with ongoing discussions with national focal points (continuation of work launched in 2007). To develop an integrated approach to monitoring drug treatment and harm reduction. To have a better framework for developing tools and introducing data collection approaches in the areas of crime and drug supply.	Revise/finalise the following data-collection instruments and protocols: • Structured questionnaires on Social rehabilitation, Alternatives to prison, Policy and institutional framework. • Finalise DRID protocol in synergy with other European infectious disease projects. • Revise the protocol on mortality cohort studies among drug users. • Examine how the European drug survey databank on existing national population drug surveys can be developed. • Reconstruct and rationalise historical data sets, e.g. on drug-law offences, drug use in prison and substitution treatment. • Develop the tool used to report on emerging trends (former standard table 17) to allow feasibility testing in voluntary countries in 2010.
	Further to the revision process of the national reporting system launched in 2008, define quality criteria for the national reports and update the quality and implementation criteria for the five key epidemiological indicators.
	Analyse current information resources and needs on drug treatment (availability, supply, quality) to enable better estimation of treatment needs and capacity.
	Carry out critical review of existing data collection tools in area of drug supply as part of an ongoing strategy development in this area.
Fonte/data management	
To assure a successful first complete year of Fonte reporting and validation by providing efficient maintenance, support and improved functions and data management procedures. To further develop, expand and make the Fonte application more accessible and useful to its users. To consolidate EMCDDA knowledge and expertise by knowledge sharing and data streamlining.	Provide day-to-day system support, organise training and assure maintenance.
	Develop additional functions for Fonte in line with users' needs.
	Identify further items that would benefit from data collection and management through Fonte.
	Stimulate earlier reporting and validation through the use of Fonte.
	Implement first full cycle of data warehouse to facilitate data extraction and manipulation.
Network management and capacity building	
To improve the capacity of the national focal points to fulfil EMCDDA tasks, including the implementation of the five key epidemiological indicators and other core data and to develop the training materials.	Organise Reitox academies that meet capacity-building needs of focal points.
	Revise and update the implementation profiles of the five key epidemiological indicators according to the new standards and criteria and tailored strategy defined in 2008.

Specific objective	Main activities
To improve data collection network management.	Provide ad hoc and tailored support to NFPs for the five key epidemiological indicators and core data implementation.
To further develop networking activities and partnerships in the research area, in particular through the Scientific Committee.	Provide ad hoc and tailored support to NFPs for the five key epidemiological indicators and core data implementation.
	Consolidate grant management system.
	Further develop the monitoring and follow-up of deliveries from NFPs.
	Actively involve the Scientific Committee and other scientific partners in the work of the Centre and in other research activities.
Developmental and conceptual activities	
To continue to improve the focus, scope and appropriateness of EMCDDA data collection and reporting tools and mechanisms.	Develop and field test standard tables on drug availability (based on the result from the EMQ module on drug availability).
	Improve methods for collecting retail drug prices and determine feasibility for collecting wholesale drug prices.
To review annual reporting infrastructure in the context of information needs arising from the EU action plan.	Assess options to obtain more up-to-date IDU estimates.
	Develop and field test standard tables on drug availability (based on the result from the EMQ module on drug availability).
	Build up data collection on responses in custodial settings.
	Improve public expenditure estimates on drug issues through further development of instruments for data collection.
	Develop a conceptual framework for monitoring illicit drug markets from an economic perspective.
	Continue to develop reporting and analytical capacity on EU drug legislation and associated activities.
	Develop a reporting approach for collecting information on drug-related science and research, based on the 2008 Selected issue on research and the Commission study 'Comparative analysis of research into illicit drugs in the EU'.
	Analyse information needs and resources to ensure, where possible, action plan requirements are well served.

Enhanced analysis of data

Specific objective	Main activities
Key epidemiological indicators	
To improve analysis of key epidemiological indicator data.	Carry out ongoing analysis of trends in key indicators necessary for reporting purposes.
To gain greater value from data through cross-indicator analysis.	Conduct joint data analysis from general population surveys including psychometric scales to measure intensive forms of cannabis use.
To conduct focused analysis on issues of particular policy relevance.	Assess the feasibility of better identifying the specific components of drug-related mortality (e.g. AIDS, HCV, accidents, suicides).
	Assess the epidemiology, responses and health impact of non fatal overdoses.
	Increase understanding of mortality related to specific opioids (substitution drugs, Fentanyl, etc.) and drug combinations.
	Improve the analysis of overlap between treatment demand and other treatment data sets.
	Analyse intervention effects and other protective factors for HIV and hepatitis C using modelling approaches.
	Enhance analysis of infectious diseases and injecting patterns and their relation to harm reduction measures.
	Continue work to improve the measurement of intensive use of cannabis and its impact.
	Carry out initial work to conceptualise the relationship between drug use and social exclusion.
Analysis of patterns and trends	
To ensure European level analyses of patterns and trends are available and up to date.	Analyse new trends and developments for annual reporting exercise (Annual report, Statistical bulletin and Country overviews).
	Carry out the special analyses necessary for 2009 selected issues (Sentencing statistics, Trends in injecting drug use and Polydrug use in Europe).
To develop an improved statistical approach for analysing long- and medium-term trends in drug use in Europe based on synthesising data from different sources.	Carry out the analyses needed for EU action plan, planned technical papers and update existing reports where needed.
	Analyse long- and medium-term trends based on synthesis of indicator data.
	Carry out a preliminary assessment of data availability in order to assess treatment needs.
To increase understanding of polydrug use in mortality and other aspects related to drug use.	Analyse the validity of a new method to estimate incidence of heroin use in Europe.
	Further develop analysis of patterns of polydrug use in survey data (school students and other groups).

Specific objective	Main activities
To better link the analysis of demand- and supply-side data.	Develop an improved approach to assessing the health impact of the consumption of non–opioid drugs (cannabis, cocaine, volatile substances, etc.).
	Conduct an analysis of European trends of hepatitis C in injecting drug users.
	Provide an overview of the economics of illicit drugs using a case-study approach.
	Continue to develop approaches and indicators to allow public expenditure across EU countries to be better compared.
	Conduct initial analysis necessary for the 2010 Selected issues (mandatory topic: Market and production of cannabis; voluntary topics Chronic methamphetamine and amphetamine problems and Treatment for older drug users).
	Produce preliminary total consumption estimates based on linked analysis of demand- and supply-side data (where possible).
Analytical focus on responses and best practice	
To better report on best practice in different fields of intervention.	Provide analysis to support the evaluation process of the EU action plan.
To improve analysis of the extent to which European responses meet estimated needs.	Analyse strategies, coordination mechanisms and evaluation methodology. Draft a proposal for developing European guidelines for evaluating national drug strategies and action plans.
	Further develop understanding of addiction medicine by stimulating European discussion and providing online information on related subjects.
To further develop the economic analysis of drug issues.	Identify the prevention needs of the most vulnerable within a universal programme approach.
	Maintain and further develop the Best practice portal, the EIB (Evaluation instruments bank) and PERK (Prevention and evaluation resources kit).
	Launch new modules in the Best practice portal on selective prevention and treatment (including treatment guidelines, efficacy and effectiveness of drug treatment).
	Further analyse data on opioid substitution treatment.
	Improve the dissemination of information on interventions for non opiate drug problems.
	Continue to develop reporting and analytical capacity of EU and national laws and of ELDD (European legal database on drugs), including extending legal topic overviews.
	Coordinate and review scientific content of the EMCDDA Monograph on harm reduction (to be published in 2010).
	Explore alternative methods for capturing the economic benefit of drug use treatment programmes.
	Assess the efficiency of selected interventions for the drugs problem.

Communicate more effectively with key audiences

Specific objective	Main activities
High-quality, timely and accessible products	
To publish high-quality and timely products in line with the targets committed to in the 2007–09 work programme. To improve the relevance and accessibility of products. To further improve the quality of products and efficiency of the editorial process.	Publish, promote and disseminate products that make EMCDDA work results widely available. In particular, assure that minimum output targets are met (see table on page 8).
	Continue to improve coordination of the production process ensuring effective collaboration between analysts, scientific writers and editors.
	Continue to develop tools that assist in preparing high-quality products e.g. statistical reporting standards, glossary, EMCDDA preferred usage and style, and standardisation of linguistic terms.
	Expand network of subcontractors so that a better range of services can be offered and turnaround times of products can be improved.
	Improve the quality and accessibility of some key scientific outputs (based on assessment details in the 2007 external evaluation report), especially the Statistical bulletin.
	Continue to rationalise and/or repackage product range, by typology of information and needs of target audiences (continue publications database development).
	Keep content of website more up to date particularly in the area of scientific developments.
	Improve practical value of products for targeted end users by collecting feedback from them on accessibility and relevance (through focus groups).
	Continue to develop a user-focused policy for multilingualism (tracking use of multilingual materials).
	Develop interactive tools that allow users to independently interrogate online statistical data.
	Assure quality of EMCDDA guidelines and other products through peer review and utilisation of Scientific Committee (where appropriate).
	Encourage and enable staff and partners to prepare papers for publication in scientific journals, engage with appropriate technical and scientific fora, and ensure EMCDDA products make appropriate reference to scientific literature.
	Assure an up-to-date documentation service on drugs and drug addiction and specific literature assistance for staff analytical work.

Specific objective	Main activities
Dialogue with stakeholders and partners	
To intensify dialogue with stakeholders and partners.	Find the most fitting form and suitable channel for communicating with each target audience (policymakers, practitioners, scientists and researchers, the general public).
To facilitate access to drug-related science and research and promote exchange with the scientific community.	Develop ways of reaching policymakers and media at national level more effectively.
	Clarify and analyse the type of EMCDDA information that is disseminated by NFPs to their national contacts. Then propose actions and develop tools for NFPs to expand their role in disseminating EMCDDA products.
To better facilitate the dissemination of good practice and sharing of experience with drug professionals.	Make the scientific work of the EMCDDA more visible and accessible to the wider scientific community and keep them informed of research funding opportunities.
	Ensure adequate reporting of civil society and European parliamentary debates and relevant actions of the European institutions.
To better represent developments and dialogue of civil society and the drugs issue.	
Cohesive representation and communication	
To promote a cohesive and shared approach to representation activities across the EMCDDA.	Develop tools and training activities that facilitate a coherent presentation of the EMCDDA's purpose, values and identity.
	Promote excellence in public speaking and giving presentations by developing quality standards and supporting training activities.
	Introduce measures to enable more systematic monitoring and analysis of the EMCDDA's representation and external communication activities (including collecting and storing contacts).
	Ensure that key results of meetings and conferences are published on the web promptly.
'EMCDDA, your reference point on drugs in Europe'	
To enhance the EMCDDA's reputation and recognition as the European central reference point and authoritative information source in the drugs field.	Organise a conference to mark 15 years of drugs monitoring in Europe and to help inform future strategic direction. Conference theme: 'Learning from the past, looking to the future: identifying Europe's information needs for effective drug policy'.
	Continue to: build sound contacts and relations with journalists (from general and specialist publications); provide media-friendly information with clearly defined messages; and assess impact of media coverage.

Strengthening cooperation and communication with partners

A commitment to partnership is one of the guiding principles in the 2007–09 strategy and it commits the agency to seeking synergy with other international and EU public health, law enforcement and statistical reporting organisations.
This is to ensure that efficient use is made of the limited resources available and that duplication of effort is avoided.
As a specialist data provider and technical reference point for Europe, and within this context, the EMCDDA has a role in the international dialogue on drugs. When requested (and within budgetary constraints) this role may extend to technical backstopping work for EU capacity-building and knowledge-transfer programmes. The EMCDDA's strategy for international cooperation sets out clearly the range of options for collaboration.

With regard to technical assistance, priority is given to candidate and potential candidate countries to prepare themselves to become members of the EMCDDA. In some cases, and at the request of the European Commission, the EMCDDA organises training activities for experts from third countries, for example, in the framework of the European Neighbourhood Programme or within the context of the cooperation between the EU and Latin American countries.

Specific objective	Main activities
European Commission services	
To collaborate actively with the European Commission services involved in the field of drugs.	Consolidate and increase cooperation with European Commission services active in the field of drugs (DG JLS, DG SANCO, DG ELARG, AIDCO, DG Relex, DG TREN, EUROSTAT and DG Research, etc.).
	Participate in and support (where appropriate) meetings of the Horizontal working party on drugs, Presidency events, troikas, national coordinators meetings, etc. promptly.
Cooperation and collaboration with European and international partners	
To actively collaborate with other EU agencies in the field of drugs, including the action on new drugs.	Cooperate and collaborate with Europol, the European Medicines Agency (EMEA), European Centre for Disease Prevention and Control (ECDC) and other relevant EU agencies.
	Collaborate on a day-to-day basis with Europol and the EMEA on the new action on drugs.
	Coordinate and align data collection with the ECDC.
To strengthen cooperation with international organisations and agencies on cross-cutting drug-related issues	Develop and follow up on activities organised in the framework of the agreements with international organisations (UNODC, WHO, WCO, Interpol, CICAD and the Pompidou Group).
	Collaborate with the UNODC for the revision and validation of the Addiction severity index toolkit.
	Cooperate with the UNODC and WHO on best practices in custodial settings and data collection on treatment.
	Collaborate with relevant international organisations on drafting guidelines to improve data collection and reporting on retail drug prices in the EU.

Specific objective	Main activities
	Participate actively in the WHO 'Health in prisons project' steering group.
	Further develop cooperation with NIDA in fields of indicated and selective prevention.
	Continue collaboration and support for analytical working groups with ESPAD (European school survey project on alcohol and drugs), HBSC (Health behaviour in school-aged children) and FESAT (European foundation of drug helplines).
	Publish and distribute a joint manual for establishing national drug information systems and national drug observatories (in collaboration with UNODC and with CICAD-OAS).
Scientific community and professional networks	
To promote scientific partnerships and professional networking.	Expand relations with the scientific community through proactive networking with international, European and national research organisations and networks, and libraries and documentation centres.
	Develop collaboration with the NFP networks of national experts and researchers in the fields of best practice, drug economy and supply/supply reduction.
	Continue working with and further strengthen the key epidemiological indicator expert networks.
Technical assistance to candidate and potential candidate countries	
To prepare candidate and potential candidate countries to the EU for their participation in the EMCDDA.	Finalise the CARDS-EMCDDA technical assistance project with the Western Balkans.
	Finalise the IPA-1 (Instrument of pre-accession) technical assistance project with Croatia and Turkey.
	Implement the IPA-2 technical assistance project with candidate and potential candidate countries (Western Balkans, Croatia and Turkey).
	Draft the IPA-3 technical proposal for 2010–11.
	Prepare with the European Commission (JLS) criteria for technical and capacity assessment of candidates for membership to the EMCDDA.
	Define a mechanism for monitoring and supporting the integration of new members into EMCDDA work.

Specific objective	Main activities
International cooperation with non–EU countries	
To coordinate, facilitate and support cooperation between the EMCDDA and non–EU countries.	Collaborate with the European Commission services regarding participation of candidate countries in EMCDDA activities.
	Develop and follow up on activities organised in the framework of agreements organised with non–EU countries (e.g. MoU with Russia).
	Coordinate the negotiations and signing of the MoU with Ukraine.
	Redefine the principles and methods for the Country overviews for neighbouring countries and third countries.
	Organise training activities and provide assistance to experts from non–EU countries in the framework of European funded projects.

Outputs for 2009

Output/product	Notes on timing
Conference	
Learning from the past, looking to the future: identifying Europe's information needs for effective drug policy (the conference itself)	6–8 May 2009
Conference proceedings	2009
Conference website	2009
EU drugs legislation in practice (linked publication)	May 2009
General report of activities	
General report of activities including annual activity report of the EMCDDA's authorising officer (for 2008) (EN, pdf)	March 2009 (with provisional accounts) May 2009 (with final accounts)
Annual reporting	
Annual report on the state of the drugs problem in Europe (23 language versions)	First draft: end–February Consultation with Member States: April Incorporation of comments: May Translation: June–August Production: September–October Publication: November
Selected issues for 2009 • Sentencing statistics • Trends in injecting drug use • Polydrug use in Europe	To be launched at appropriate intervals throughout the year
Statistical bulletin (web–based with new approach)	Consultation with Member States: April Incorporation of comments: May Publication: end–June
Country overviews (includes situation summary, data sheet and barometer)	Production: January–May Publication: early July
National reports on the drug situation	Prepared by the NFPs. Delivery to EMCDDA: 30 October
Support to the evaluation of the EU drugs action plan (2009–12)	
As appropriate	*To be clarified in October/November 2008 when new action plan is launched*
Outputs linked to the implementation of the Council decision on new psychoactive substances (2005/387/JHA)	
Risk assessment guidelines (Manual series)	2009

Output/product	Notes on timing
EMCDDA–Europol annual report on the implementation of Council Decision (2005/387/JHA) on the information exchange, risk assessment and control of new psychoactive substances	2009
Risk assessment report on a new psychoactive substance	Only if requested by the Council
Further development of European database on new drugs (EDND)	2009
Monographs	
Harm reduction monograph (preparation)	Contributions commissioned in 2008. Peer review, editing and production in 2009. To be published beginning of 2010
Insights	
New groups of psychoactive substances in Europe	end–2009
Internet-based treatment	2009
Manuals	
Guidelines for the risk assessment of new psychoactive substances	2009
Drug profiles	
GHB Ketamine Methadone Buprenorphine	2009
Barbiturates	2009–10
Drugs in focus policy briefings (indicative)	
Europe's evolving opiate situation — issues for policy and practice	2009
Working with the criminal justice setting — a key area for drug interventions	2009
Indicated prevention and neurobiology	2009
Drugnet Europe	
Drugnet Europe newsletter (4 issues)	January, April, July, November
Online tools and web-based resources	
EMCDDA public website	Continuous improvement and thematic development (e.g. thematic area on addiction medicine and on science and research, mapping of intervention measures)

Output/product	Notes on timing
Country intervention profiles	Annual update of web-based profiles on interventions as background detail information for the Country overviews
ELDD (European legal database on drugs) and legal topic overviews: • Use/consumption (update of illegal consumption) • Limit quantities of drugs • Drug laws and the Internet	Ongoing update of website and legal topic overviews
Best practice portal (including maintenance of EDDRA, EIB and PERK, further work on selective prevention, launch of treatment module)	Ongoing update and launch of new modules
Joint publications and contribution to partners' reports	
Developing and sustaining a national drugs observatory	With CICAD. May 200
A systematic review of drug surveys and methods used in the EU Member States	With Institute for Social Drug Research, Ghent
Vulnerable groups and individuals in youth population	In collaboration with NIDA
Contribution to the revision of the Addiction Severity Index (UNODC)	2009
Handbook of economics of illicit drugs	Writing/editing in 2009. Publication 2010

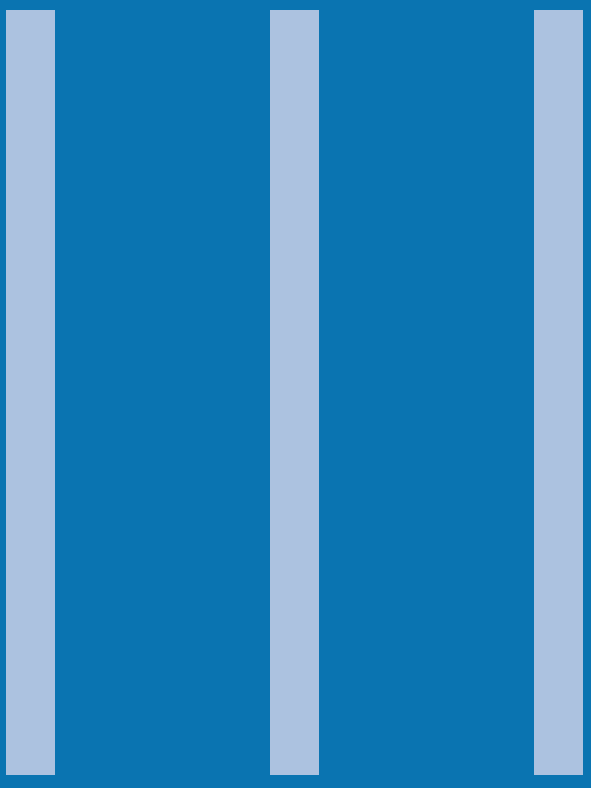
EMCDDA technical reports, papers, reviews and articles

The list below is indicative as it depends on progress made in technical working groups. Until initial analysis has been conducted the feasibility of formal papers is sometimes difficult to predict. Furthermore, priorities may be changed to reflect new opportunities or critical information needs that emerge during the course of the work programme.

- State of implementation of the EMCDDA key epidemiological indicators based on newly defined criteria
- Drug-related infectious diseases (DRID) revised protocol
- Mortality cohort study revised protocol
- Treatment demand indicator (TDI) revised protocol
- Report on the first results of the extensive data collection on treatment prevalence
- Update on cannabis markets in Europe
- Hospital emergency data: conclusion on feasibility (article)
- Heroin use incidence estimation: comparison of two methods in five European countries
- Review of IDU estimation in EU countries
- Modelling hepatitis C trends (articles)

EMCDDA technical reports, papers, reviews and articles

- Specific analysis on drug-related infectious diseases/injecting drug use/harm reduction (article)
- Review of available data, potential indicators and options for monitoring strategies in the areas of drug supply and drug supply reduction
- Guidelines on collecting retail drug prices
- Estimates of drug consumption
- Treatment prevalence analysis (article)
- Gender analysis among treated clients (article)
- Working/discussion paper on methodology, sources and issues to assess health consequences of non–opiate substances use
- Preliminary results of literature review on epidemiology, risk factors and health impact of non fatal overdoses
- Polydrug use and substances involved in drug-related deaths in EU countries (draft article)
- Guidelines for estimating number of persons in treatment
- Analysis of current office-based opioids treatment — prescription and practices (article)
- Review of current practices in problem polydrug use treatment in Europe
- Alternative methods to capture the economic benefit of drug use treatment programmes (literature review)
- Cost-effectiveness of drug-related interventions
- Common view on addiction medicine in Europe
- Qualitative analysis of information on psychosocial treatment guidelines



III.

Supporting activities — improving efficiency and effectiveness

Specific objectives	Main activities
Planning and reporting	
To improve efficiency, effectiveness and transparency in planning, reporting and monitoring processes.	Streamline planning and reporting processes towards key EMCDDA objectives.
	Pilot the definition and use of performance indicators that can assist with monitoring progress towards key EMCDDA objectives.
	Further apply the activity-based management (ABM) and activity-based budgeting (ABB) methods to EMCDDA work.
	Explore the possibility of establishing a system for obtaining feedback on the capacity of EMCDDA production/dissemination activities to meet the needs of its target audiences.
Human resources	
To implement and monitor rules, procedures and tools for managing and developing human resources at the EMCDDA.	Continue to develop and apply a structured and effective human resources policy and ensure implementation of the updated EMCDDA staff policy plan.
	Ensure efficient recruitment procedures and coherent career management to maintain highly qualified staff that are fully operational.
	Ensure an effective and efficient overall administration of personnel rights, entitlements and obligations.
	Regularly monitor needs for enhancing competencies and conduct relevant training.
	Ensure that the flow of information between EU institutions and Regulatory Agencies is managed appropriately by representing the latter (EMCDDA coordinator of the EU agencies until 1 March 2009).
Financial management	
To implement and assure appropriate processes and procedures for financial management and control.	Analyse and assess internal procedures and tools.
	Provide assistance and training on financial management and procurement.
	Carry out *ex post* verification of EMCDDA activities.

Specific objectives	Main activities
Accountancy	
To ensure that accounting data and related information used for preparing EMCDDA accounts and financial statements are accurate and timely through the application of a new integrated accounting and payment system.	Fully implement the new accounting system (ABAC and SAP).
	Provide CSS (Common Support Services) support for historical accounting data.
ICT developments for improving organisational efficiency	
To provide ICT systems that help to enhance EMCDDA organisation, productivity and resource allocation.	Manage ICT infrastructure, data centre operations, standardisation and enhancement; improve reliability, service quality and security and ensure emerging IT risks management.
	Develop and pilot service level agreement at Unit level for the provision of project services and establish a user round table (ICT Operations and Project Management Office).
	Integrate solutions for document management, records management, forms management and workflow.
	Provide technical support for transfer to and maintenance of the new accounting system, ABAC; provide support for human resources management system.
ICT support for data management and dissemination	
To support core EMCDDA scientific activities including ICT applications for existing and new scientific fields.	Improve Fonte's technical strategy, architecture and integration, and provide appropriate support for further evolution and development of the Fonte software.
	Support data acquisition with analytical tools in a data warehouse.
To support EMCDDA networking and efficient communication to target audiences.	Maintain and enhance web-based database management interfaces and the content management application (CMA).
Infrastructure and logistics	
To ensure that the EMCDDA premises and assets are managed according to best practice within the business; to maintain and enhance protection and security of EMCDDA buildings, assets and personnel including a smooth transition after the move to the new buildings; and to maintain smooth provision of transportation, mail and reception services.	Develop work safety, sound environmental management and security in the new buildings, including reducing utility costs and promoting use of renewable energy.
	Finalise the move project to the Ribeira das Naus premises.
	Provide suitable work environment and related services, and improve efficiency and effectiveness through promoting a customer-oriented approach.

IV

IV.
Potential risk factors

Risk factors

At the time of drawing up the 2007–09 work programme, the EMCDDA identified potential risk factors that could affect planned deliveries and presented them to its Management Board. The table below recalls these risks and assesses the likelihood of their impact on the 2009 work programme.

Risk factors identified for delivery of 2007–09 work programme	Likelihood of impact on 2009 work programme
1. Substantial change in the current financial perspectives for the EMCDDA budget relying on the EC grant over the 2007–09 period.	The 2009 work programme has been drawn up on the basis of the EMCDDA draft budget for 2009 which relies on EC funding of EUR 14 500 000. Any reduction in this sum would require outputs to be reviewed.
2. Unplanned operational impact entailed by the further possible enlargement of the EU and the increasing number of applicant countries.	The 2009 draft budget already takes into account the impact of the expected additional 'EMCDDA member countries'.
3. Supplementary specific requests from EU institutions to provide technical support for the implementation of EC programmes and actions.	A number of core tasks in support of the EU institutions (contribution to implementation assessment and evaluation of action plan, implementation of Council decision on psychoactive substances, etc.) have been foreseen for 2009. Additional requests from EU institutions to provide technical support for implementing actions and programmes would require priorities to be reviewed ([1]) and the supplementary resources to be identified.
4. Supplementary requests from Member States to provide expertise in specific domains.	The current level of requests can be accommodated in routine work, but a significant increase in demand for this type of expertise would need additional scientific resources dedicated to it and would need to be balanced against other priorities of the work programme ([1]).
5. Delay in the full implementation of the Fonte project, affecting the planned rationalisation and improvement of the efficiency of EMCDDA data collection and management, in order to process the growing data set.	The full launch of Fonte in autumn 2008 was carried out successfully. Necessary steps have been taken to ensure that the tool is of high enough quality to gain user acceptance and that its introduction does not jeopardise basic reporting obligations (including the annual reporting package — Annual report, Statistical bulletin, Country overviews). The data warehouse which will be used for the first time in 2009 is expected to facilitate data extraction, manipulation and analysis.

([1]) The process for reviewing priorities is as follows: identify projects/meetings/studies/recruitments that can be delayed, downsized or cancelled and reassign resources appropriately.

Risk factors identified for delivery of 2007–09 work programme	Likelihood of impact on 2009 work programme
6. Unexpected departure of key members of staff.	Given the highly specialised and technical nature of much of the Centre's work, finding suitable replacements can be a time-consuming task. Recent reorganisation of scientific expertise provides sounder back-up arrangements. Investment in the human resources area ensures that arising needs can be acted upon with minimum delay.
7. Delay in the schedule currently provided for the construction and delivery of the new EMCDDA headquarters in Lisbon. Cooperation with EMSA may not result in significant synergies and cost savings.	The construction work was completed by the end of 2007. However, due mainly to the lack of administrative licences (both to build and to use), it was not possible to start using the building shortly after its completion. The licence to build was eventually issued in late April 2008 and the licence to use will hopefully be issued in autumn 2008. It must also be noted that before entering the building an inspection had to be made with a view to assessing its conformity with the current Community standards. This inspection was made by the European Commission's OIB on behalf of the EMCDDA in July 2008. As a result of this inspection, the OIB recommended the EMCDDA not to enter in the buildings before several essential modifications were made. The EMCDDA communicated these results to its future landlord (the Lisbon Port Authority, APL), and underlined that these works have to be performed before entering the building. Furthermore, before moving to the new building, the EMCDDA must agree and sign with APL and EMSA the lease contracts regarding the buildings. At the time of writing, it is therefore not possible to put forward an accurate estimate of when the EMCDDA will be in a position to move into the new building. Further delay on this project will continue to disrupt communications and working routines and the day-to-day problems of supporting the needs of staff working in two separate buildings will remain and will continue to accrue until the staff are united once more in a single premises. The fact that both the EMCDDA and EMSA share the same compound (common spaces and services) in Lisbon creates opportunities for synergies and cost savings, but it also implies reaching a good understanding both at decision making and executive levels. Although there are several positive aspects in the cooperation achieved between the EMCDDA and EMSA, the agencies have expressed two quite different approaches as regards the management policy of the future common facilities and the services for the whole compound. The EMCDDA's initial approach was towards fully shared responsibility management, as well as to encourage the cooperation between the two agencies, increasing their interaction and establishing common procedures. This would promote not only the reduction of expenditure, but also a positive internal and external image of the agencies. EMSA expressed concerns that joint management would require cumbersome, complex financial and administrative coordination and pledged for the division of the common facilities and services between the users and for the allocation to each of them the sole responsibility of a specific area. Both agencies are currently working towards finding a compromise between these two positions. This agreement has to be finalised before the signature of the lease contracts, hopefully before the end of 2008.

Risk management

The types of consequences that any of the above scenarios could have are:

a) reduction in the scope or quality of planned outputs;

b) delay or postponement of necessary developmental work, support and capacity-building activities;

c) reduction in capacity for analytical work and transversal products;

d) reduced activities in support of partners and for non-core tasks.

Should any of the above scenarios occur, a detailed assessment of their impact both in budgetary terms and in terms of the work and outputs of the Centre will need to be conducted. The implications of this assessment will then need to be considered in terms of the overall priorities of the work programme.

The EMCDDA will use its internal monitoring and evaluation capacity to prevent, manage and minimise the impact of the abovementioned risks. For this purpose, it has adopted a series of measures aimed at improving the planning, monitoring, assessment and execution of its work programme and budget.

Annex

Estimated allocation/use of the appropriations provided under the EMCDDA 2009 budget for implementing the EMCDDA 2009 work programme

The amounts indicated in the table below are based on the EMCDDA's budget for 2009 as adopted by the EMCDDA's Management Board in December 2008 and therefore it is possible that the amounts may still be revised. This budget relies as revenues on EUR 14 400 000, to be provided by the EC subsidy to the EMCDDA, and EUR 476 795 to be provided by the contributions of Norway and Turkey for their participation in the EMCDDA.

The table below presents the allocation of the 2009 budget appropriations for implementing the 2009 work programme:

Priorities in 2009 work programme	Main actors responsible for implementation	Estimated budget appropriations (EUR) forecast
Consolidate monitoring and reporting activities and Enhanced analysis of data (core business)	Epidemiology, crime and markets (EPI),Interventions, law and policy (RES) and Scientific partners and documentation (SCD) units	3 981 531
	Reitox and international cooperation (RTX) unit	918 891
	Reitox national focal points (EMCDDA co-financing)	2 677 500
Communicate more effectively with key audiences (core business)	Communication (COM) unit	1 796 211
	Total core business	**9 374 133**
Improving efficiency and effectiveness (supporting and management activities)	Directorate (DIR), Administrations (ADM) and Information and communication technology (ICT) units	5 502 662
	Total supporting and management activities	**5 502 662**
	Total EMCDDA 2009 budget	**14 876 795**
Technical assistance and international cooperation (External assistance and cooperation)	Reitox unit by implementing the relevant projects under CARDS and IPA Programmes	1 050 000
Total technical assistance and international cooperation (assigned appropriations entered in previous budgets)		**1 050 000**

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About the EMCDDA

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

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

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