

European Monitoring Centre for Drugs and Drug Addiction

International Cooperation Framework

Background and aim of this document

In December 2016, the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) Management Board adopted the EMCDDA Strategy 2025 (¹). This key document, which sets the direction of travel for the agency in the long term, envisages the adoption of a new International Cooperation Framework, which will guide the activities of agencies in the area of international cooperation, updating the International Cooperation Strategy adopted in 2007 and the accompanying 2009 implementation document for third countries. The aim of the present document is thus to update the priority setting of 2007-2009 and to set the direction of travel for the EMCDDA's work with these partners under the new strategic framework.

Strategic objectives for cooperation

Drugs have long been a cross-border phenomenon — heroin and cocaine manufactured in distant regions are smuggled into Europe, while amphetamine and ecstasy are made in Europe from imported chemicals. Globalisation has added complexity to the phenomenon and is nowadays a key driver of change, influencing drug flows, availability and demand. All forms of serious organised crime are increasingly intertwined and together form a complex network, facing Europe with new security and safety challenges. To address this issue effectively — by increasing the capacity to react quickly and to prevent new problems — it is extremely important to strengthen the capacity of the European Union (EU) to assess the situation and developments abroad and, in particular, their potential impact on the European situation.

Working with partners is key for the EMCDDA to increase its capacity to assess the external dimension of the phenomenon. This is why the EMCDDA Strategy 2025 explicitly identified partnerships and synergies with relevant international organisations, and cooperation with third countries, as one of the agency's main business drivers to strengthen the EU drug information system. The Strategy recognises in particular the critical importance for the EMCDDA's performance, at European and international levels, of pursuing synergies and maintaining effective working arrangements with other relevant EU agencies and international organisations, especially United Nations (UN) organisations active in drug issues.

To strengthen the EU drug information system through partnerships and synergies with relevant international organisations, and cooperation with third countries, the EMCDDA will articulate its activities through the following three strategic objectives (SOs):

SO1 — better assess the global drug situation, including the key drug policy developments occurring internationally.

The EMCDDA will achieve this by:

 strengthening cooperation with key organisations at international level, such as the United Nations Office on Drugs and Crime (UNODC), the World Health Organization (WHO) and the Pompidou Group, to improve EU/EMCDDA knowledge about the drug situation and drug policy developments at global level, and their impact on the European drug situation and market; and

⁽¹⁾ www.emcdda.europa.eu/publications/work-programmes-and-strategies/strategy-2025

 strengthening the role of the EMCDDA as a key player in defining international drugmonitoring systems and standards.

SO2 — improve knowledge of EMCDDA stakeholders regarding the drug situation in third countries, in particular in those bordering the EU, to understand the implications for public health in the EU and its impact on the European drug market.

The EMCDDA will achieve this by:

- cooperating actively with EU enlargement countries, with a view to facilitating their approximation to the EU drug information system, and the integration of the available information about their national situations, in particular data aligned with EMCDDA standards, into EMCDDA products and outputs; and
- engaging actively in a technical dialogue with EU Eastern and Southern Neighbours countries, aiming to support improved availability of national data in these countries and the exchange of information with the EMCDDA on overall analyses of important developments in the drug situation.

SO3 — support EU policies and initiatives in the drug field.

The EMCDDA will achieve this by:

- engaging actively in EU-funded projects that aim to provide technical assistance to third countries in the area of drugs and drug monitoring, through EU financial instruments such as the Instrument on Pre-accession Assistance (IPA) and the European Neighbourhood Instrument (ENI), and by sharing EU/EMCDDA expertise through technical assistance projects, such as EMCDDA-IPA and EU4Monitoring Drugs projects, and IcSP (Instrument contributing to Stability and Peace), EDF (European Development Fund) and DCI (Development Cooperation Instrument).
- cooperating with other third countries in the framework of arrangements concluded under regional EU-funded projects, including the Central Asia Drug Action Programme (CADAP) and EU Action against Drugs and Organised Crime (EU-ACT), the Cooperation Programme on Drugs Policies (COPOLAD) in Latin American countries and the Cocaine Route Programme, and maintaining current ad hoc cooperation with other third countries — including Russia, Canada and the United States of America — or developing new partnerships at the request of the EU institutions; and
- supporting the EU and its Member States in promoting EU policies and values (evidence-based policies and a balanced approach) in international drug-related fora, through expertise and technical advice.

The overarching statements in the EMCDDA Strategy 2025, as well as the strategic objectives of this International Cooperation Framework, will have to be articulated with the yearly operational programming tools, and within an integrated strategic and operational framework that guides the EMCDDA's work and supports the definition of its annual priorities.

Principles

The guiding principles of the EMCDDA's cooperation with third countries and international organisations are being defined taking into account the legal basis for the activities of the EMCDDA. This draws upon the EMCDDA Regulation, in particular Articles 2(d) and Articles 20 and 21, on the EU policies on drugs and, more generally, on the EU acquis in this area, in particular the EU drug strategy and action plans.

- Added value: any activity in this area has to contribute directly or indirectly to the
 objectives of the EMCDDA Strategy 2025 in general, and to those of this International
 Cooperation Framework in particular, with a view to ensuring that there is a benefit for
 the EMCDDA and for its stakeholders.
- Resources: cooperation with third countries is organised in accordance with the priorities set out under Article 2(d) of the recast EMCDDA Regulation (²), and for technical assistance projects is subject to the availability of additional resources through external financial instruments or from alternative sources of funding.
- **Proportionality**: the importance of the work done in this area has to be in proportion to the expected benefit for the Centre and for the EU, and to the availability of budgetary and human resources.
- Quality and technical requirements: the quality of the data and the reports produced by a third country and requested for inclusion in the Centre's knowledge base and datasets needs to be either in line with the EMCDDA's standards or clearly identified as a separate source based on scientific criteria, the aim of which is to help increase understanding of the country's drug situation and the role of the EMCDDA as a key reference point for information on drugs.

Conditions for cooperation

The possibility of a cooperation project with non-EU countries shall depend on a number of conditions:

- compatibility with the EU policies and instruments and with the decisions taken at European level regarding the establishment of cooperation with these countries in the area of drug monitoring;
- compatibility of the expected outputs with the EMCDDA's objectives and interests, in line with the mission of the Centre;
- availability of the necessary resources to make cooperation feasible in practice;
- synergies with other international and European partners working in the same 'technical space';
- possibility of other cooperation projects with regions, e.g. represented by their respective regional organisations or communities.

^{(&}lt;sup>2</sup>) Regulation (EC) No 1920/2006, Article 2(d)(v): 'The EMCDDA shall transfer, at the request of the Commission and with the approval of the Management Board, its know-how to certain third countries such as candidate countries or the countries of the Western Balkans and assist in the creation and the strengthening of structural links with REITOX network and the setting up and consolidation of the REITOX national focal points.'

Modalities, resources and expected deliveries

Modalities: various forms of cooperation are possible:

- simple exchange of information, data and/or methodologies;
- provision of ad hoc advice on the setting up or running of drug observatories, drug information systems, national early warning systems, etc.;
- capacity-building, and scientific and technical assistance;
- full participation in the work of the EMCDDA by a third country (with a medium-term or long-term perspective, depending on the status of the country — see Table 1 on page 7) where the EU has negotiated an agreement.

Resources: there are three potential sources of funding for technical cooperation activities: (1) national resources; (2) funds from EU actions that include provisions for cooperation with the EMCDDA; and (3) EU programmes seeking the participation of, and cooperation with, EU agencies.

Expected deliveries: outputs to be produced by the partner countries in the context of technical cooperation can vary from the full range of standard deliveries for future members of the EU and/or of the EMCDDA to the communication of research and ad hoc deliverables, such as reports and datasets, for European Neighbourhood and third countries.

EMCDDA products: where appropriate, the outcome of the cooperation should — as far as possible — be integrated into the EMCDDA's knowledge base and datasets, depending on the objectives of the cooperation in question, or the status of the country or group of countries concerned. The level of inclusion ranges from progressive integration of outcomes into EMCDDA products, for future members of the EU or of the EMCDDA, to limited integration or targeted use of outcomes in EMCDDA products, for other third countries.

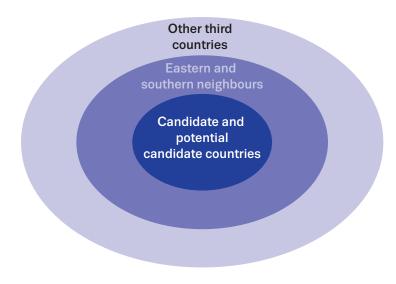
Priorities

Notwithstanding the primacy of the participating countries of the EMCDDA — the EU Member States and the countries with which the EU has concluded agreements for their participation in the work of the EMCDDA — three groups of countries are identified, each of them under specific EU policies, instruments and programmes:

 candidate countries — currently Albania, the former Yugoslav Republic of Macedonia, Montenegro and Serbia — and potential candidate countries — Bosnia and Herzegovina, and Kosovo (³) — of the EU, which receive the main focus of priority as defined by the recast Regulation 1920/2006;

^{(&}lt;sup>3</sup>) This designation is without prejudice to positions on status, and is in line with UNSCR 1244/1999 and the ICJ Opinion on the Kosovo declaration of independence.

FIGURE 1 The order of priority of the EMCDDA's work with third countries



- eastern and southern neighbours Algeria, Armenia, Azerbaijan, Belarus, Egypt, Georgia, Israel, Jordan, Lebanon, Libya, Moldova, Morocco, Palestine (⁴), Syria (⁵), Tunisia, Ukraine — and the Russian Federation;
- other third countries, if it is in the interest of the EU and subject to bilateral working arrangements and the availability of EU-funded projects at regional level.

Modalities of the cooperation and instruments

According to the groups of countries, different modalities are set with specific expected outputs, which are served by different instruments:

- Candidate and potential candidate countries of the EU: since the ultimate goal is the full participation of these countries in the EMCDDA, it is expected that in the long term the countries will develop the capacity for their data to be fully integrated into EMCDDA products. Participation depends on an EU agreement on participation in the work of the EMCDDA being concluded and ratified between the Council of the EU and the relevant country. Finally, a formal working arrangement can also be concluded by the EMCDDA.
- Eastern and southern neighbouring countries: the objective is to support and contribute, when requested, to the cooperation on drugs between these countries and the EU, which envisages the option in the long term of participation in European agencies. It is expected that this cooperation will result in outcomes that will be integrated to a limited extent into EMCDDA products. Where appropriate, a formal agreement for longer term cooperation can be signed in the form of a working arrangement.
- Other third countries: the aim and scope of cooperation is limited to the transfer of know-how and best practice in drug monitoring, with targeted use in EMCDDA products of the results of such projects. When relevant, such cooperation can be formalised through ad hoc working arrangements.

⁽⁴⁾ This designation does not entail any recognition of Palestine as a state and is without prejudice to positions on the recognition of Palestine as a state.

⁽⁵⁾ The EU suspended all its bilateral cooperation with the Government of Syria in May 2011.

Implementation — coordination

When developing cooperation projects with third countries, the EMCDDA will take into account the working arrangement on cooperation on external action signed in 2016 with the European Commission's Directorate-General for Migration and Home Affairs (DG HOME), aiming to further ensure better coordination between the EMCDDA and EU institutions in the area of external activities. Furthermore, specific projects and activities will continue to be discussed in coordination meetings at the technical level with the Commission, before being incorporated into the annual work programme. The objective of the coordination at the technical level with the Commission is to identify the needs and possibilities for technical assistance to be provided by the EMCDDA, within the context of agreements or assistance programmes between the European Commission and third countries. This would enable the Commission to build on the EMCDDA's scientific and technical input for the terms of reference for EU programmes and projects regarding data information and collection systems in the field of drugs.

The EMCDDA's planning should ideally be flexible enough to take into consideration the additional needs of this nature that may arise in the course of the year.

A report on international cooperation will continue to be presented annually to the Management Board, covering activities implemented, the main results, the challenges met and the solutions found.

TABLE 1 Summary

| Countries | Modalities | Resources | Expected outputs | Expected contribution to EMCDDA products |
|---|--|--|--|--|
| Candidate and potential candidate countries | Capacity-building, scientific and technical assistance | EU and national funds and programmes | Full participation in the work of the EMCDDA | Progressive integration into EMCDDA products |
| Eastern and Southern Neighbouring countries and the Russian Federation | Capacity-building, scientific and technical assistance | EU and national funds and programmes | Ad hoc reports | Limited integration into EMCDDA products |
| Other third countries | Ad hoc cooperation to assist implementing bodies responsible for EU-funded projects Simple exchange of information, data and/ or methodologies | EU and national funds and programmes | Ad hoc reports | Targeted use for EMCDDA products |

About the EMCDDA

The European Monitoring Centre for Drugs and Drug Addiction is the hub of drugrelated information in Europe. Its mission is to provide the European Union and its Member States with 'factual, objective, reliable and comparable information' on drugs and drug addiction and their consequences. Established in 1993, it opened its doors in Lisbon in 1995, and is one of the European Union's decentralised agencies. The Centre offers policymakers the evidence base they need for drawing up drug laws and strategies. It also helps professionals and researchers pinpoint best practice and new areas for analysis.

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EMCDDA, Praça Europa 1, Cais do Sodré, 1249-289 Lisbon, Portugal Tel. (351) 211 21 02 00 info@emcdda.europa.eu emcdda.europa.eu itwitter.com/emcdda facebook.com/emcdda