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NOTE

from :	Presidency
to :	COREPER/Council
Subject :	EU Drugs Strategy (2005-2012)

1. Please find herewith in annex the text of beforementioned strategy resulting from the work of the Horizontal Working Party on Drugs (meeting 26 October 2004) and the Article 36 Committee (meeting 11-12 November 2004).
2. Only outstanding problem is the reservation of the Swedish delegation on paragraph 27 point 3 (supply reduction) (cf. page 15).

EU Drugs Strategy (2005-2012)

Preface

1. On 17/18 June 2004 the European Council invited the Council to agree proposals no later than December 2004 for a new EU Drugs Strategy for the period 2005-2012. The framework and priorities established by the new Strategy are to serve as the basis for two consecutive four-year EU Action Plans on Drugs.
2. This new Drugs Strategy is based first and foremost on the fundamental principles of EU law and, in every regard, upholds the founding values of the Union: respect for human dignity, liberty, democracy, equality, solidarity, the rule of law and human rights. It aims to protect and improve the well-being of society and of the individual, to protect public health, to offer a high level of security for the general public and to take a balanced, integrated approach to the drugs problem.
3. The Strategy is also based on the relevant UN conventions (the UN Single Convention on Narcotic Drugs of 1961 as amended by the 1972 protocol, the Convention on Psychotropic Substances (1971) and the Convention against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988)), which are major legal instruments for addressing the drugs problem. Furthermore, the UN General Assembly Special Session on Drugs of 1998 confirmed the importance of the integrated and balanced approach, in which supply reduction and demand reduction are mutually reinforcing elements in drugs policy.
4. The Strategy was drafted within the current legal framework of the EU and EC treaties and based on the respective competences of the Union, Community and individual Member States, with due regard to subsidiarity and proportionality. The Strategy also takes into account the future Constitution of the EU.

The drugs problem is experienced primarily at local and national level, but it is a global issue that needs to be addressed in a transnational context. In this regard, action carried out at EU level plays an important role. At an overall level, EU efforts are geared towards a coordination of all the actors involved. In the field of public health, the Community complements Member States' action in reducing drugs-related health damage, including information and prevention.

As for chemical precursors, which can be diverted into the manufacturing of illicit drugs, the EC legislation provides a framework for control of trade in precursors both within the Community and with third countries. With regard to money laundering, Community legislation sets out a number of measures to also prevent the laundering of drugs proceeds. Concerning justice and home affairs, cooperation between police, customs and judicial authorities is an essential element in preventing and combating drug trafficking. In this context, the adoption of the framework decision on drugs trafficking is a major step laying down minimum provisions on the constituent elements of criminal acts and penalties in the field of drug trafficking. Finally, in the area of external relations the EU takes international action with a combination of political initiatives, like the action plans and dialogue on drugs with various regions of the world, as well as assistance through development programmes.

5. The aim of this European Union Strategy is to add value to national strategies while respecting the principles of subsidiarity and proportionality set out in the Treaties. This Strategy stresses that Member States should consider the impact of their national strategies on other Member States, the ways national strategies of different Member States can be mutually supportive, and the contributions such strategies can make towards achieving the objectives of this European Union Strategy. It is also intended to allow scope for local, regional, national and transnational dynamics and potentialities and to make optimal use of the resources available. Account is also taken of the organisational and financial constraints of Member States and EU institutions.

6. Finally, this Strategy builds on the EU Drugs Strategy 2000-2004 and Action Plan on Drugs 2000-2004 and has taken into consideration these texts as well as the Mid-Term Evaluation of the Action Plan, the Council's response to this Mid-Term Evaluation and the results of the Final Evaluation.

§1. Introduction

7. The drugs problem can be viewed from various perspectives, ranging from the political, to health, to research, to everyday practice in the field and to operational cooperation against drug trafficking. Legislation and policies through which the approach will ultimately take shape have to take account of all these aspects and bring them together in coherent and consistent propositions.

8. The current drug situation in the EU is described in the European Monitoring Centre for Drugs and Drug Addiction's (EMCDDA) and Europol's annual reports. Despite the fact that patterns of drug consumption have always varied between the 25 EU Member States, especially in respect of scale, new problems have emerged in some areas, and there are no data to suggest a significant fall in drug use. However, the incidence of drug related health damage and the number of drug-related deaths have stabilised and even declined. Treatment provisions for drug users have increased and services diversified. Concerning the supply reduction side we can conclude that in spite of notable and often successful efforts at both national and EU level, drug trafficking remains one of the most productive trades for organised criminal groups in the EU. These facts underline the necessity of an active stand on drugs for the coming years.

9. The results of the final evaluation of the EU Drugs Strategy and Action Plan 2000-2004 indicate that progress has been made in achieving some of the targets of the current Strategy. In addition, many of the actions set out in the current Action Plan have been implemented or are in some stage of being implemented. However, the available data do not suggest that there has been a significant reduction in drug use prevalence or that the availability of drugs has been substantially reduced. The results of the final evaluation also lead to the conclusion that:

- Clear and precise objectives and priorities should be set that can be translated into operational indicators and actions in the future Action Plans, with responsibility and deadlines for their implementation clearly defined.
- Continued progress should be made in the availability, quality and comparability of information on monitoring the drugs situation.

- The Multi-annual Programme consolidating the area of freedom, security and justice should reflect the objectives of the new Drugs Strategy and Action Plans.
- The primary focus of the work of the Horizontal Working Party on Drugs should be on moving forward and monitoring the implementation of the actions set out in the future EU Action Plans on Drugs, as well as having a leading role in coordinating the work of the other Council working groups on drug issues.

10. Considering the Treaties, other relevant European policy documents and the experience of the last decade, the Council identifies two general aims with regard to drugs. They can be summed up as follows:

- the EU aims at a contribution to the attainment of a high level of health protection, well-being and social cohesion by complementing the Member States' action in preventing and reducing drug use, dependence and drug-related harms to health and society.
- the EU and its Member States aim to ensure a high level of security for the general public by taking action against drugs production, cross-border trafficking in drugs and diversion of precursors, and by intensifying preventive action against drug-related crime, through effective cooperation embedded in a joint approach.

In pursuing those aims, the EU acknowledges its share of responsibility for the world drugs problem, both as a consumer of narcotic drugs and psychotropic substances originating in third countries, and as a producer and exporter of synthetic drugs in particular; and resolves to address these issues.

11. The present integrated, multidisciplinary and balanced approach of combining demand and supply reduction will remain the basis of the Union's approach to the drugs problem in the future. This approach requires cooperation and coordination. Given the horizontal nature of the problem, this cooperation and coordination will need to be further developed not only in numerous sectors, including welfare, health, education and justice and home affairs, but also in relations with non-Member States and relevant international fora. A balanced approach to the drugs problem also requires adequate consultation with a broad group of scientific centres, professionals, representative NGOs, civil society and local communities.

12. This Union's Drugs Strategy for 2005-2012 stresses the importance of enhancing the use of existing instruments. But it also emphasises the EU's willingness to develop new ones in order to meet challenges that occur during implementation.

The strategy explicitly proposes a 'thematic' or 'regional' approach, which in certain cases may be appropriate. This means that Member States facing a common problem may explore the option of intensified (operational) cooperation in order to address it in an efficient and effective way. Other Member States, which may not be confronted with the same problems, are free to decide whether or not to participate in any initiative of this kind. The Council will be kept informed of relevant developments in relation to such initiatives through the Horizontal Working Party on Drugs (HDG).

13. The Strategy concentrates on two policy fields, demand reduction and supply reduction, and on two cross-cutting themes, international cooperation and research, information and evaluation. To facilitate practical implementation, there will be two consecutive Drugs Action Plans, based on this Strategy, describing specific interventions and actions. The Commission undertakes to bring forward a proposal, having consulted with the EMCDDA and Europol, early in 2005 for an Action Plan on Drugs 2005-2008, for consultation with the European Parliament and for endorsement by the Council. Adequate consultation with a broad group of experts, professionals and representatives of civil society will also take place.

The Commission will draw up annual progress reviews of the state of play regarding the implementation of the actions contained in this action plan, for consideration by the Council. It will organise an impact assessment in 2008, with a view to proposing a second Action Plan for the period 2009-2012 for consultation with the European Parliament and for endorsement by the Council. During 2009-2012, the Commission will continue to draw up annual progress reviews, and in 2012 the Commission will organise an overall evaluation of the EU Drugs Strategy and Action Plans for the Council and the European Parliament.

Both Action Plans will contain a framework with actions and a time table for the proposed actions. The framework may be adjusted, on the basis of the annual progress review, should any significant changes in the EU drugs situation emerge during the period of duration of the Action Plans.

14. Taking due account both of the current state of play on drugs in each of the 25 Member States and of differences in the drugs situation between regions, Member States and groups of Member States, actions will be selected for inclusion in the Action Plans on the basis of five criteria:

1. Actions at EU level must offer clear added value and their results must be measurable and realistic. The intended results should be stated in advance.
2. The Action Plans must expressly state the timeframe in which the actions should be implemented (preferably within the action plan period), as well as those responsible for executing them and for reporting on their progress.
3. Activities must contribute directly to the achievement of at least one of the goals or priorities set out by the Strategy.
4. Interventions must be cost-effective.
5. There must be a limited number of interventions or activities in each field.

15. Initiatives in the field of demand or supply reduction may have an impact on one another. The Commission is asked to take this into account when developing initiatives in the fields of demand and supply reduction, e.g. by giving preference to research and exchange of best practices that focus on these links. With regard to this issue, the Commission and the Council will constantly draw on the knowledge and expertise available in specialist organisations, both within the EU (the EMCDDA, Europol, Eurojust and the European Crime Prevention Network) and outside it (the Council of Europe and UNODC). The Commission, the Council and the European Parliament will also be encouraged to ensure clear coordination between their own activities on drugs. Within the Council, the Horizontal Working Party on Drugs will play a key role in this effort.

16. By the end of 2012, progress should have been made on all the priorities in the fields defined in the Strategy. This will be achieved through interventions and actions at the level of individual Member States, groups of Member States or the EU as a whole and in cooperation with third countries and international organisations such as Council of Europe and the United Nations. The evaluation of the strategy and the Action Plans on Drugs will be conducted by the Commission, in cooperation with the EMCDDA, Europol and the Member States.

§ 2. Coordination

17. Coordination is key to the establishment and conduct of a successful strategy against drugs. The accession of ten new countries to the European Union makes it an even more pressing issue. Its importance was highlighted by the European Commission's Communication on the subject, issued at the end of 2003¹. To achieve an integrated, multidisciplinary and balanced approach to the problem, the EU coordination mechanism described hereunder should be further developed in order to facilitate and improve cooperation activities at all levels and to contribute to the fulfilment of the goals of this Strategy and the action plans that will ensue from it. The Action Plans should include actions that will contribute to the further development of a European coordination mechanism.

18. EU-level coordination of drugs policy should take place through the Horizontal Working Party on Drugs (HDG). The functions of the HDG are first to prepare a clear and coherent drugs policy for adoption by the Council, and second to pursue the implementation of that policy on the Council's behalf. To do this, it will use the mechanism of this strategy and action plans made under it to ensure that the actions against illicit drugs taken at EU level are properly and effectively coordinated with each other and with actions taken at Member State level. The HDG will fulfil this role without precluding other working groups and institutions from exercising functions that are in their specific remits. But it should:

- monitor and, if necessary, chase up activities in all the other bodies of the EU that are relevant to the drug strategy;
- help to avoid duplication of drugs work between itself and other bodies;
- signal gaps;
- suggest, where needed, the launching of initiatives.

19. To enable it to carry out its leading role in the drugs field, the HDG needs to be kept informed of relevant developments at a national level and of activities carried out by other relevant Council working groups, such as the Police and Customs Cooperation Working Parties, the Multidisciplinary Group on Organised Crime, the Health Working Group, the Economic Issues Working Group and, where relevant, common foreign and security policy working groups. At the same time, these working groups should not only be kept informed on the content of the Drugs Strategy, but also be involved in implementation of the Action Plans.

¹ CORDROGUE 98 / COM (2003) 681 Final

20. One of the areas in which coordination is of great importance is that of international cooperation (i.e. external to the EU). More effective coordination is needed between the EU and its international and European partners. The Horizontal Working Party on Drugs should regularly devote attention to external aspects of drugs policy. It should provide for the exchange of information and prepare EU common positions on the external relations elements of the EU's drug policy.

21. The national authorities responsible for coordinating drug issues and policies will contribute to the practical implementation of the EU Action Plans within the context of the implementation of national programmes. It is therefore important that those national authorities be kept informed about developments within the HDG (and vice versa) in general. The Presidency of the Council shall provide regular opportunities, in principle twice a year, for National Drug Coordinators or those responsible for the coordination of drug issues and policies, to meet to exchange information on national developments and to review opportunities for increased cooperation.

§3. Policy field: demand reduction

22. In the field of demand reduction the EU Drugs Strategy 2005-2012 will aim for the following concrete, identifiable result:

Measurable reduction of the use of drugs, of dependence and of drug-related health and social risks through the development and improvement of an effective and integrated comprehensive knowledge-based demand reduction system including prevention, early intervention, treatment, harm reduction, rehabilitation and social reintegration measures within the EU Member States. Drug demand reduction measures must take into account the health-related and social problems caused by the use of illegal psychoactive substances and of poly-drug use in association with legal psychoactive substances such as tobacco, alcohol and medicines.

23. Such a demand reduction system implies the following measures using all the options available according to the latest state of scientific knowledge:

- preventing people from starting to use drugs;
- preventing experimental use becoming regular use;
- early intervention for risky consumption patterns;
- providing treatment programmes;
- providing rehabilitation and social reintegration programmes;
- reducing drug-related health and social damage.

All these measures are complementary and should be offered in an integrated manner and ultimately contribute to reducing the use of drugs and dependence and to reducing the drug-related health and social consequences.

24. In view of the need to achieve added value at European level, the Council and Commission are asked to give priority to the following areas and address them in the coming Action Plans by means of joint action, the transfer of knowledge and experience and intensified cooperation, especially in operational areas, between Member States. In this regard it is also necessary to take into account the different levels of health risks involved with different forms of drug use (such as polydrug use) or life periods and specific situations (such as early adolescence, pregnancy, driving under the influence of drugs).

25. In the area of demand reduction the following priorities have been identified:

1. Improving access to and effectiveness of prevention programmes (from initial impact to long term sustainability) and raising awareness about the risk of the use of psychoactive substances and related consequences. To these ends, prevention measures should include early risk factors, detection, targeted prevention and family-community-based prevention.
2. Improving access to early intervention programmes (measures) especially for young people with experimental use of psychoactive substances.
3. Improving access to targeted and diversified treatment programmes, including integrated psychosocial and pharmacological care. The standard of effectiveness of treatment programmes should be continuously evaluated. Treatment of health problems resulting from the use of psychoactive substances should become an integral part of health policies.
4. Improving access to services for the prevention and treatment of HIV/AIDS, hepatitis, other infections, diseases and drug related health and social damage.

§4. Policy field: supply reduction

26. In the field of supply reduction, the EU Drugs Strategy 2005-2012 and the Action Plans are to yield the following concrete, identifiable result by 2012:

A measurable improvement in the effectiveness, efficiency and knowledge base of law enforcement interventions and actions by the EU and its Member States targeting production, trafficking of drugs, the diversion of precursors, including the diversion of synthetic drug precursors imported into the EU, drug trafficking and the financing of terrorism, money laundering in relation to drug crime. This is to be achieved by focusing on drug-related organised crime, using existing instruments and frameworks, where appropriate opting for regional or thematic cooperation and looking for ways of intensifying preventive action in relation to drug-related crime.

27. In the field of EU judicial and law enforcement drugs policy focus should be on the following priorities, and activities selected for inclusion in the Action Plans accordingly:

1. Strengthening EU law enforcement cooperation on both strategic levels and crime prevention levels, in order to enhance operational activities in the field of drugs and the diversion of precursors on issues of production, (intra EU)cross-border trafficking of drugs, criminal networks engaged in these activities and related serious crime, while respecting the principle of subsidiarity.

Strategic cooperation at EU level in the area of law enforcement with regard to drugs and precursors should give priority to those issues and crime forms that have an impact on the EU as a whole and thus clearly provide an added value to all Member States. This includes production, illicit (intra EU) cross-border drug trafficking, criminal networks engaged in these activities and related serious crime. Furthermore, while strategic action is needed to curb the flow of drugs from third countries into the EU, it is

To implement this priority, it is necessary for policy makers as well as law enforcement agencies – both EU and national – to improve and share their knowledge. This can be done through the exchange of best practices, mainstreaming and strategic and operative analyses of the drug crime phenomena. Detection of new drug crime developments in above-mentioned areas will have consequences for policy decision-making, and consequently EU law enforcement prioritisation, in this field.

This ambition cannot be realised without strengthening, through the EU, cooperation and cooperation structures between law enforcement agencies. Law enforcement with regard to money laundering in relation to illicit drug trafficking, drug trafficking and the financing of terrorism and confiscation of assets should be given particular attention. The involvement of Eurojust in this regard must be further explored.

The prioritisation of serious crime forms in policy-making does not mean that Member States are not completely free to take additional action (for instance directed against street-level crime), be it alone or in conjunction with other Member States and/or third countries.

2.Intensifying effective law enforcement cooperation between Member States using existing instruments and frameworks.

Many instruments and frameworks have been established in recent years, such as the Framework Decision laying down minimum provisions on the constituent elements of criminal acts and penalties in the field of drug trafficking, Joint Investigation Teams, the European Arrest Warrant, Europol and Eurojust, the Financial Intelligence Unit, confiscation of assets measures, and the United Nations Convention against Transnational Organized Crime and its Protocols.

These instruments and frameworks should be used to their full potential. The Union and Member States should learn more about their effectiveness, impact and full potential before introducing new EU-wide measures and regulations. Duplication and overlap should be avoided and resources used to best effect.

The role that Europol has to play in coordinating the collection and dissemination of data and intelligence is crucially dependent on the information it receives from Member States. Ways of increasing the systematic reporting of such material by Member States must be explored.

The options created with the Convention on Mutual Legal Assistance in Criminal Matters, concluded in 2000, must be considered of particular importance in this regard and be considered closely when addressing drug related crime.

3. Prevention and punishment of the illicit import and export of narcotic drugs and psychotropic substances, including towards the territories of other Member States

While the Strategy stresses the importance of paying due regard to the principle of subsidiarity, it also acknowledges that consistent national prosecution policies in all Member States with regard in particular to drug related organised crime, criminal networks and cross-border trafficking of drugs are the condition precedent to a common and credible drug enforcement policy of the EU. The Member States will make efforts towards consistency of the standards of the prosecution practices in the Member States.¹

4. Enhancing law enforcement, criminal investigation and forensic science cooperation between EU member states, within an EU framework, that have common interests and/or face the same drug-related problems.

Greater scope could be created for Member States which find themselves facing the same problem (for example, diversion of precursors, cocaine-, heroin- or cannabis smuggling, production of synthetic drugs, criminal investigation and forensic science issues) to join together on a project basis in search of solutions. These efforts will presumably make law enforcement, customs and judicial action in the field of drugs more effective. Such projects might, for example, take the form of joint investigations, investigation teams, the setting up of exchange networks in any given field, drug profiling projects, trainings, seminars or conferences on particular themes. In this field, full use should be made of the capabilities of Europol, Eurojust and CEPOL.

¹ Reservation made by Sweden.

The knowledge and experience gained through joint projects should be shared with all EU Member States, the Commission, Europol and Eurojust, within the appropriate Council framework so that best practices can be applied elsewhere.

5. Intensifying law enforcement efforts directed at non-EU countries, especially producer countries and regions along trafficking routes.

The disappearance of most border checks at internal borders has made the EU an ever more attractive market for illegal drugs and the diversion of precursors. Once inside the Union's borders, illegal products can be traded more or less freely without attracting the attention of customs or nationally-oriented law enforcement authorities. International organised crime does not respect national borders or national authority.

Therefore, European cooperation on control of high-risk goods entering the Union, as well as law enforcement with regard to drug trafficking within the EU, should be stepped up. In order to make the Union less attractive for criminal organisations, it is imperative for law enforcement and customs authorities to improve the checks on their respective territories. National controls complement the measures taken at the external borders of the EU. Customs and other law enforcement services should work together to carry out this policy.

In the case of enforcement efforts outside the EU, it is vital to monitor, improve and – where necessary – expand the EU Member States' liaison officers network in third countries. With due regard to the EU's fundamental principles, vigorous action should be taken to encourage and expand cooperation with third-country enforcement agencies, providing them with financial and logistical support as well as more joint projects where Member States pool knowledge and expertise to tackle a common problem. For the implementation of this priority full use should be made of Common Foreign and Security Policy (CFSP) instruments.

§ 5. Cross-cutting theme: international cooperation

28. In the field of international cooperation the EU Drugs Strategy 2005-2012 will aim for the following concrete, identifiable result:

A measurable improvement in effective and more visible coordination between Member States and between them and the Commission in promoting and furthering a balanced approach to the drugs and precursor problem in dealings with international organisations, in international fora and with third countries. This with the aim to reduce the production and drugs supply to Europe and to assist third countries in priority areas in reducing the demand for drugs as an integral part of political and development cooperation.

29. The global nature of the drugs problem calls for regional, international and multilateral approaches. In acknowledgement of the principle of shared responsibility coordination and cooperation need to be intensified, both bilaterally (between the Union and third countries) and within international organisations and fora.

It also calls for a comprehensive effort that includes law enforcement, eradication, demand reduction and alternative livelihoods and alternative development initiatives backed by local communities. Third country drug programmes are unlikely to succeed unless all four elements are tackled together, with increased commitment of the European Union and the Member States.

30. In external relations, the following priorities have been identified:

1. *Coordinated, effective and more visible action by the Union in international organisations and fora enhancing and promoting a balanced approach to the drugs problem.*

The EU should aim to expand its political influence in the international arena and to achieve maximum impact with the resources it devotes to combating drugs production and trafficking and reducing the demand for drugs and related negative consequences.

The Member States and Commission should continue to hold consultations in the Council with a view to establishing a common approach and to coordinating their action in international fora concerned with the drugs problem. This common approach should – as in the past – be directed both at efforts in international organisations and fora such as the Council of Europe (Pompidou Group), UNODC, the Dublin Group, the WHO and UNAIDS and at the Union's relations with third countries.¹

2. *Special efforts in relation to the candidate countries², and potential candidate countries³, such as the countries of the Stabilisation and Association Process.*

The Union should strive to encourage candidate countries and potential candidate countries to adopt and apply the EU acquis and to participate to the fullest extent possible in existing structures such as the EMCDDA, Europol and Eurojust.

3. *Assisting third countries, including European Neighbourhood Countries, and key drug producing and transit countries to be more effective in both drugs demand and drugs supply reduction, both through closer cooperation among EU-member States, and by mainstreaming drugs issues into the general common foreign and security policy dialogue and development cooperation*

New cooperation agreements between the EU and third countries should continue to include a specific clause on cooperation in drugs control. The clause should be tailored to the region or country and should invariably be based on the principles agreed at the 20th UNGASS (a balanced and integrated approach based on the notion of shared responsibility). Moreover, the evaluation of EC and Member States cooperation programmes should include –whenever pertinent- an evaluation of drugs control projects.

¹ In the Council conclusions on EU-UN relations adopted in December 2003, the Council stated inter alia that it is determined to improve the coherence of the EU message at the UN through proper management of its statements and better coordination of support.

² Currently: Bulgaria, Romania, Turkey and Croatia*

³ Currently Albania, Bosnia and Herzegovina, the former Yugoslav Republic of Macedonia, Serbia and Montenegro, *Croatia continues to be part of the Stabilisation and Association Process.

It is clear that any policy can only be effective if it establishes clear priorities. The EU Drugs Action Plans and mechanisms with other regions, notably the EU/LAC high-level mechanism on drugs, should remain a cornerstone of the Union's drugs cooperation with them. The efforts of the EU should be based both on the relevance of the particular country or region to the drugs problem in the Union and on the impact of the drugs problem on sustainable development in that country or region.

Particular attention should be paid to the cooperation with the countries on the Eastern border of the Union¹, the Balkan States, Afghanistan and its neighbours, the Latin American and Caribbean countries, Morocco, and other drug routes.

Integrating consideration of the drugs problem into development cooperation (inter alia by continuing to encourage alternative livelihoods) can also greatly help to enhance the sustainability of EU efforts to reduce the supply of drugs and the consequences of drug use.

In addition, support to facilitate international police and customs cooperation will remain important if production and trafficking are to be tackled effectively. In this regard, regional cooperation arrangements which include all countries along particular drug routes and possible key partners can play an important role in ensuring that comprehensive solutions are in place.

The EC and Member States endeavour to reflect these priorities in their budgets for external relations, including possible thematic drugs budget lines. The Member States and Commission can and should make better use of their collective knowledge, know-how and expertise in dealings with third countries in the area of drugs.

¹ Currently the Russian Federation, Belarus and Ukraine.

§ 6. Cross-cutting theme: information, research and evaluation**31. Information and Research**

In the field of information and research, the EU Drugs Strategy 2005-2012 will have the following identifiable result:

A better understanding of the drugs problem and the development of an optimal response to it through a measurable and sustainable improvement in the knowledge base and knowledge infrastructure.

In the field of information and research the following priorities are identified:

1. Improving the EU knowledge infrastructure in the field of drugs and consolidating the drug information systems and tools developed over the 2000-2004 period, making full use of the EMCDDA and Europol.
2. Each of the EU action plans should include priority research topics to be fostered at EU level, taking into account the rapid evolution of the drugs problem. Large-scale exchanges and dissemination of research results, experiences and good practices should be promoted at Member State and EU levels, taking into account the work done by the relevant international organisations. Special attention should be given to the training of professionals and to consulting civil society.

32. Evaluation

In the field of evaluation, the EU Drugs Strategy 2005-2012 will have the following identifiable result:

To give clear indications about the merits and shortcoming of current actions and activities on EU level, evaluation should continue to be an integral part of an EU approach to drugs policy.

In the field of evaluation the following priority is identified:

The Commission will be responsible for the continuous and overall evaluation of the Strategy and Action plan with the support of the Member States, the EMCDDA and Europol. This should be conducted on the basis of appropriate methodological tools and parameters, taking into consideration the work done by EMCDDA and Europol in this field.
