

**COMMISSION OF THE EUROPEAN COMMUNITIES**

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**Communication from the Commission to  
the Council and the European  
Parliament on a European Union  
action plan to combat drugs**

**(1995 - 1999)**

## NOTE TO THE COUNCIL

In transmitting the enclosed communication on drugs to the Council and the Parliament, the Commission draws the Council's particular attention to the complex and horizontal nature of the drugs issue. The need to address in parallel the separate but closely related aspects of demand reduction, international cooperation and trafficking not only reflects the "three-pillar" structure of the Treaty on European Union, but also highlights the importance of a global and balanced approach and the need for effective coordination, both internally and externally, of the many and various dimensions of the problem. In this respect the Council and COREPER will have a key role to play to ensure this global and coherent approach.

It is indeed the entry into force of the TEU which provides the principal justification for the Union to look again at the existing European Plan against Drugs which was approved by the European Council in Edinburgh (1992) and which revised and updated the earlier European Plan approved by the European Council in Rome (1990). The substance of those earlier plans remain valid. The TEU has, however, introduced a new level of political commitment by the Member States of the Union, together with a new institutional framework bringing all aspects under the aegis of the Council and its structures. This imposes - and public and Parliamentary opinion will expect - a reinforced effort to put these new possibilities to early and effective use to implement both what remains to be done arising from the existing Plan and those new elements contained in the present Communication, in accordance both with the division of tasks as set out in the Treaty and the equally important principle of subsidiarity. The responsibility of the Council for these general and institutional aspects is clear, and points to a need for its sustained monitoring of the implementation of this plan.

On the external side also, the Council needs to follow closely the coherence of the Union's action in the many international fora in which drugs issues are treated, thus ensuring that full use is made both of the traditional Community instruments, in the fields of trade, development and other economic cooperation policies, and of the possibilities opened up by the Common Foreign and Security Policy and the relevant provisions of Title VI of the TEU. This means not only ensuring that the drugs dimension finds its place in the Union's bilateral relations with the relevant third countries, and that all the available multilateral trade and development instruments be fully exploited, but also that the Union, where appropriate, undertakes joint action and coordinates its work and defines common positions in key international fora. These international fora include notably the United Nations, in particular the Vienna-based UNDCP and the UN Commission on Narcotic Drugs, the Chemical Action Task Force and the Financial Action Task Force created under the auspices of the G7 and the Council of Europe's Pompidou Group.

Finally, there is an inevitable link between any effective drugs plan and the financial and human resources committed to it. The present economic and budgetary climate may make this a difficult moment to envisage a significant additional effort as far as such resources are concerned; but it also places an enhanced responsibility on all the institutions of the Union to ensure the maximum exploitation, coherence and synergy of the possibilities which do exist, in keeping with the solemn commitment into which the TEU has entered to cooperative action against the plague of drugs.

## EXECUTIVE SUMMARY

[The purpose of this document is to outline the principal themes of the Commission's Communication to the Council and European Parliament on a European Union Action Plan to Combat Drugs.]

### INTRODUCTION

Drug addiction and drug trafficking continue to constitute a major threat to the citizens of Europe. That threat demands a response at all levels, from local to Union, if the strategies which the Union and its Member States adopt are to have a real impact on this scourge and contribute to the broader international effort to combat drugs.

The need for cooperation at the level of the Union has long been recognised. It is demonstrated by the prominent place which drugs has occupied on the European political agenda for many years now. It is equally demonstrated by the adoption of the first European Plan to Combat Drugs by the European Council in Rome in 1990 and the adoption of a revised and updated version of that Plan by the European Council in Edinburgh in 1992. Much has already been achieved at the level of the Community and through inter-governmental co-operation in translating key elements of those plans into measures capable of supporting practical co-operation.

### THE TREATY ON EUROPEAN UNION

The desire to build on what has already been achieved and promote wider and deeper cooperation at the level of the Union finds expression in the Treaty on European Union, where the fight against drugs and drug dependence is specifically mentioned in the context of the provisions it has introduced governing public health and co-operation in fields of justice and home affairs.

The TEU opens up important new possibilities to consolidate existing Community achievements and promote the further development of Union-wide strategies. That potential has already been recognised by the European Council which has stressed the need for a comprehensive anti-drugs strategy. This Communication responds to that need by reviewing the results of what has been achieved at Community level and examining how actions foreseen in the first European Plans can now be put into practice and pursued more effectively in the new framework created by the TEU.

The Communication is expressed therefore in terms of a European Union Action Plan to Combat Drugs and can provide a new framework for cooperation capable of taking full advantage of the possibilities opened up by the TEU.

### AN INTEGRATED APPROACH TO DRUGS

Effective action to combat drugs requires a comprehensive and integrated response to the drugs phenomenon. The new Union Action Plan proposed in the Communication, in accordance with established international practice and the framework provided by the earlier European Plans, addresses the three key elements of such any such integrated response. They are :

- Action on Demand Reduction;
- Action to Combat Illicit Trafficking; and
- Action at the International Level.

Equally important for the purpose of an integrated response to the drugs phenomenon is ensuring coherence of the actions to be pursued at each level and coordination at national and Union level. The Communication examines how that necessary coordination and coherence might be achieved.

### ACTION ON DEMAND REDUCTION

Article 129 of the Treaty on European Union provides a new basis for Community action for the purposes of the health aspects of the drug problem. The Commission has already identified drug dependence as a priority area for Community public health action in its Communication of November 1993 on the framework for action in the field of public health.

The Commission will therefore be submitting, under Article 129, to the Council and Parliament a further Communication and a proposal for a Decision on a First Programme of Community Action in the Field of Drug Dependence. That proposal represents both one element of this Action Plan and a follow up to the Commission's November 1993 Communication.

The Action Plan sets out the main elements of the proposed programme. These deal with :

Prevention Measures - information activities directed at target groups, health education, vocational training programmes, and continuation of work in the area of screening and surveillance;

Measures to promote Social and Occupational Reintegration support for reintegration initiatives for drug addicts;

Specific measures - activities targeted at high risk groups in specific settings

### ACTION TO COMBAT ILLICIT TRAFFICKING

Action for the purpose of tackling the problem of trafficking in drugs will require action both at the level of the Community and in the context of the implementation of the provisions of Title VI of the TEU on Cooperation in the field of Justice and Home Affairs.

Much has already been achieved within the Community framework in the area of measures to prevent the diversion of precursors and psychotropic substances for the purposes of the illicit manufacture of drugs by way of putting the necessary legislative instruments in place. That is equally the case in the area of money laundering where a Directive has been adopted on the prevention of the use of the financial system for the purpose of money laundering.

Action at the level of the Community will therefore be directed to :

implementation of existing legislative instruments - development of networks for the rapid exchange of information, training etc.

promoting co-operation with third countries through adoption of the Community model and other relevant international agreements negotiation of specific agreements, participation in relevant international initiatives, provision of technical assistance in the development of legislation and administrative structures, exchange of information etc.,

keeping practical operation of those measures under review.

Title VI of the TEU also creates new possibilities for action at Union level in areas traditionally the preserve of inter-governmental cooperation. It represents a Treaty based commitment to cooperate on matters such as police, customs, and judicial cooperation in the criminal field as matters of common interest for the Member States of the Union and for which they have exclusive right of initiative. It also creates the possibility of developing new lines of action by designating combatting drug addiction, insofar as it is not covered by other provisions of the Title or Community instruments, as a matter of common interest. Cooperation on these matters is now therefore integrated into a single institutional framework.

The Communication stresses the importance of the Member States using these possibilities and taking forward work on the Action Plan on Drugs, Europol and Money Laundering and the Priority Work Programme for 1994 adopted by the Council of Justice and Home Affairs Ministers in November 1993. Those measures include :

EUROPOL - implementation of the Ministerial Agreement on the Europol Drugs Unit and completion of the work on the drafting of the Convention to enable the establishment of Europol:

Development of a strategy for combating illicit trafficking in drugs including tighter controls at the Community's external frontiers ;

Implementation of measures to promote police co-operation.

Looking beyond those programmes, the Communication suggests that attention also needs to be given to other measures to give expression to priorities previously identified by the European Council for this field.

The Commission shares with the Member States the right of initiative for the purpose of Article K.1.4) which covers measures to combat drug addiction not dealt with by other aspects of Title VI or areas of Community competence. The Communication therefore includes a number of suggestions as to how that provision might be used to complement existing activities. These include:

interdisciplinary exchanges between bodies and professional organisations responsible for reducing drug demand and drug supply;

creation of a European multi-city exchange and co-operation network;

co-operation on the links between drugs and crime.

#### ACTION AT THE INTERNATIONAL LEVEL

Action at the level of the Union will be complemented by action at the international level. That will involve using Community instruments and, arising from the entry into force of the Treaty on European Union, the new possibilities created by Common Foreign and Security Policy.

Community action will consolidate what has already been achieved through Community participation in the broader international fight against drugs and through the use of dedicated Community instruments in that fight.

Action at the level of the Community will therefore involve:

multilateral co-operation through continued involvement in global-level efforts to tackle drugs-related problems - participation in the United Nations Drug Control Programme, the Council of Europe Pompidou Group etc. in areas related to Community competence;

bilateral cooperation directed to reinforcing national and regional strategies to fight drugs in co-operation with specified countries or regions which pose a particular risk because of their proximity to the Union ;

using the possibilities which anti-drugs clauses in the external agreements of the Community with third countries provide for promoting cooperation;

making co-operation in the fight against drugs a priority in terms of trade and development policy - through use of the possibilities created by such instruments as the Generalised System of Preferences and the Lome Convention.

Common Foreign and Security Policy offers a new dimension allowing the full weight of the Union's political and diplomatic relations to be added to the commercial and development co-operation mechanisms already in place. The European Council has identified the fight against trafficking in illicit drugs as an area suitable for common action under CFSP and has identified the MAGHREB and the Middle East as priority regions in that context.

The Communication therefore suggests that action in the area of CFSP might focus on the adoption of common positions regard to ensuring strengthened cooperation in international fora on matters not coming within Community competence and joint actions to ensure support for Community efforts to help third countries to engage fully in the fight against drugs.

## COORDINATION

A comprehensive or integrated response to combating drugs will require ongoing efforts to ensure co-ordination both at institutional level and in relation to the certain types of actions to be pursued where those actions are common to more than one sector.

The Communication accordingly stresses the importance of maintaining and enhancing coordination at Member State and Union level. It addresses the wider aspects of that issue in terms of three priority subjects:

Coordination within and between the Member States - where national coordinators and COREPER will all have important roles to play;

The European Monitoring Centre for Drugs and Drug Addiction - which will be able to contribute to the political decision making process through the important information and analysis role it will perform in conjunction with its associated network of national centres (REITOX);

Multi-disciplinary issues - information, research, training are identified as priority issues and possibilities for improving coherence in their treatment discussed.

### CONCLUSION

The Commission believes that the European Union Action Plan to Combat Drugs set out in the Communication can provide a framework for the Union's future approach to the issue of drugs in the period up to 1999. That framework seeks to make full use of the new possibilities created by the entry into force of the Treaty on European Union in providing the comprehensive anti-drugs strategy which the European Council has already identified as being necessary. Translating that framework into practical cooperation and action will represent the next step and will require a committed effort on the part of each of the Union's institutions.

**INTEGRATED APPROACH AND GENERAL  
DIRECTIONS OF THE EUROPEAN UNION'S  
ACTION TO COMBAT DRUGS**

**(1995 - 1999)**

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# I. THE EUROPEAN UNION AND THE FIGHT AGAINST DRUGS

## The fight against drugs, a global theme

- 1 Since the mid-1980s the international community has been increasingly aware of the global nature of the drugs phenomenon, and has come to realise that the various aspects of the problem, i.e. production, trafficking and consumption, are closely interlinked. This has led to an increasing recognition of the need to coordinate and integrate the response to these aspects, both nationally and internationally, and greater emphasis being placed on prevention.
- 2 At worldwide level, the United Nations reflected this trend through the creation in 1990 of the United Nations International Drug Control Programme (UNDCP), pooling within a single institutional framework the efforts conducted by the international community in this field. In substance, this led to the drafting and adoption by the United Nations of programmes such as the Comprehensive Multidisciplinary Outline (1987) and the Global Programme of Action (1990), designed to increase the impact of the international fight against drugs, based on the international instruments already adopted (United Nations Conventions of 1961, 1971 and 1988).
- 3 The trend is also reflected at the level of and within the European Union. The increasing attention Member States have given to drafting and implementing national drug control policies and strategies has in turn required closer coordination between the various actors at national level. The trend was consolidated at Community level with the creation in 1989 of the European Committee to Combat Drugs (CELAD), a forum which brought together senior officials from each of the Member States and from the Commission, with the task of coordinating drug control policies. CELAD's work bore fruit in December 1990 with the adoption by the Rome European Council of the first European Plan to Combat Drugs, followed in December 1992 by the adoption of a revised and updated version by the Edinburgh European Council. CELAD's work also led to the adoption by the Council of the proposal for a Regulation for the creation of the European Monitoring Centre for Drugs and Drug Addiction. These political and institutional developments are described more fully in Annex 1 which also reviews the achievements of the Community and its Member States in translating the European Plans into measures for practical cooperation.

## The Treaty on European Union

- 4 The Union's commitment, as evidenced by these developments, to a policy of structured and enhanced cooperation in the fight against drugs, has also found concrete expression in the Treaty on European Union, which has created significant new opportunities for implementing effective integrated strategies. The fight against drugs and drug addiction is specifically mentioned in the Treaty's new provisions concerning public health (Title II, Article 129) and cooperation in the fields of justice and home affairs (Title VI). Moreover, the fight against drug

trafficking has already been identified by the European Council as a potential priority area for action under the common foreign and security policy (Title V). These new provisions fill an important gap, because despite the Member States' firm political commitment to developing greater cooperation in the area of drug control, neither the Treaty of Rome nor the Single European Act contained any explicit reference to drugs. Annex 2 sets out the new legal framework created by the Treaty on European Union.

- 5 The fact that the global drugs problem and its dangerous emanations in Europe have continued to threaten society as a whole in increasingly disturbing ways means that the Union has no choice but to employ these new instruments, and to do so as effectively and as actively as possible. In the Declaration which it adopted at its meeting of 29 October 1993 to mark the entry into force of the TEU, the European Council explicitly recognised that the new framework provided by the Treaty offered the potential for greater effectiveness in the fight against drugs. At its meeting in Brussels on 10-11 December 1993 the European Council subsequently reiterated its commitment, by calling for the establishment of an integrated strategy for tackling illicit trafficking in drugs, demand reduction, and action targeted at the producer and transit non-Community countries.
- 6 The Commission has also reflected on the implications of the TEU for the fight against drugs. Accordingly, and in the context of its preparatory work for the creation of the European Monitoring Centre for Drugs and Drug Addiction, it organised a European Scientific Seminar on Drug Control Policies and Strategies, which took place at the European University Institute in Florence between 9 and 11 December 1993. The seminar brought together a wide range of experts, as well as representatives of the Member States, the European Parliament and the Commission. The conclusions underlined the importance of an integrated approach to the drugs problem and identified ways and means of exploiting all the opportunities created by the TEU to ensure such an approach.

#### **A new integrated plan for the Union (1995-1999)**

- 7 The present communication takes these developments as its starting point. It reviews the results already achieved at Community level and examines how actions of the type identified in the European Plans can be extended and pursued more effectively in the new framework provided by the TEU.
- 8 The new integrated Action Plan (1995-1999) will involve a series of initiatives which have only now become possible within the new context of the Union and will:
  - consolidate Community achievements on the basis of the existing or future Community instruments;
  - exploit the new opportunities created by the TEU to put the fight against drugs on a more integrated footing, by adopting measures at different levels of action (the Union, the Member States, cities and multi-city networks), while respecting the principle of subsidiarity enshrined in the Treaty.

## Basic elements of the new Action Plan

- 9 Article 129 of the TEU provides a new framework for action as regards the health aspects of the drugs problem. Since the field covered by the Article is one for which the Community has competence, the initiative for instigating action lies with the Commission. In a communication being submitted separately to the European Parliament and the Council, the Commission will detail the main lines of action which the Commission considers should be followed pursuant to this Article; these ideas will be accompanied by a detailed programme proposal and the legislative text needed for its implementation.
- 10 Community instruments to help suppress trafficking have already been put in place and mobilised, notably as regards preventing the diversion of precursor chemicals and money-laundering. In addition Title VI of the Treaty creates new possibilities at two levels. Firstly, it requires the Member States of the Union to cooperate on questions of common interest in judicial, customs and police matters (Article K.1.7), 8) and 9); in this context the creation of the future EUROPOL is particularly important, its main role, at least initially, being the fight against drug trafficking. Secondly, Article K.1.4) of Title VI introduces a new field of cooperation and joint actions concerning the combating of drug addiction, in so far as this is not covered by the above-mentioned cooperation provisions (judicial cooperation, customs cooperation, police cooperation) or by Community instruments, including in particular Article 129.
- 11 As regards international cooperation, the Community has for several years now endeavoured to introduce the drugs dimension into its trade and development cooperation relations with third countries, by including drugs clauses and money-laundering clauses in its bilateral and/or regional cooperation agreements. It is proposed that the Community should continue and intensify this approach, while adapting the instruments used to the particular characteristics and needs of the individual countries concerned. In this sphere, since traditional Community instruments are involved, the initiative for action lies with the Commission. Common foreign and security policy offers a new dimension, allowing the full weight of the Union's political and diplomatic relations to be added to the commercial and development cooperation mechanisms already in place. In this sphere the right of initiative is shared between the Commission and the Member States, and a coherent, coordinated approach will be needed in order to avoid any duplication or contradiction of effort. The Commission's ideas in this regard are set out in the communication.
- 12 Finally, the communication examines certain horizontal themes (information, studies and research, training and exchanges of professionals) common to the various sectorial chapters and suggests how their treatment at Union level might be better integrated and coordinated.

## II. THE EUROPEAN UNION INTEGRATED ACTION PLAN (1995-99)

### An integrated drugs approach

- 13 The integrated approach to the drugs phenomenon, as promoted by the United Nations since 1987 and adopted and pursued at European level by CELAD and the European Council since 1990 continues to provide the inspiration for the framework within which the Union's new Action Plan has been developed. Practical implementation of that approach will not be without difficulty. The Treaty on European Union, which provides a legal basis for action in this field, offers new opportunities which, without compromising either the principle of "globality" (i.e. the integrated approach) or the principle of subsidiarity, can ensure that drug initiatives achieve a maximum impact at every stage of the "drugs chain".
- 14 The fact that the drugs phenomenon is now recognised as multifaceted does not mean that everyone must fight on all fronts and at all levels at the same time. The multidisciplinary and transnational nature of the problem and the multiplication and interaction of players and approaches demand that the existing resources be used as effectively as possible. Each action must be planned by reference to the overall context and be implemented by the most appropriate player at the most appropriate level. Close attention must therefore be paid to the interfaces and to coordination of actions.
- 15 In preparing the new Action Plan, the Commission was conscious of the principle of subsidiarity, enshrined in Article 3b of the TEU, which provides that, in areas which do not fall within its exclusive competence, the Community shall take action only if and in so far as the objective of the proposed action cannot be sufficiently achieved by the Member States and can therefore, by reason of the scale or effects of the proposed action, be better achieved by the Community. The general emphasis is therefore on activities which Member States cannot implement by themselves, activities which would obviously gain from being carried out jointly, activities complementing those carried out nationally, and activities leading to the adoption of the best practices possible. Work conducted by means of networks, featuring mutually advantageous exchanges of information or experience between actors operating at the same level, whether centralised (national administrations or anti-drug coordination agencies, research institutions, etc.) or decentralised (networks of cities or local initiatives, NGOs, etc.) is another example of an operating formula based on the principle of subsidiarity. The European Drug Monitoring Centre is based both conceptually and institutionally on this formula - a formula which generates added value and reduces duplication of effort.
- 16 The new Action Plan is also intended to respond to the European Council's express request for the development of a comprehensive drugs strategy capable of harnessing the new possibilities offered by the Treaty on European Union. That has meant taking a fresh look at the measures identified in the first European

Plans to Combat Drugs, and deciding to what extent and in what way they can be put into practice under the Treaty on European Union, and what new types of measures and cooperation will be needed to utilise fully the new opportunities offered by the Treaty, taking into account the existing or potential field of application of the Community competence in these areas.

17 The structure of the proposed Action Plan therefore draws very largely on the first two European plans. The aspects relating to the three key elements of the drugs issue - demand reduction, action against drug-trafficking, and international action - are therefore addressed in turn as is the issue of coordination. The structure followed therefore is :

- A. Action on demand reduction
- B. Action on reduction of illicit trafficking in narcotic drugs and psychotropic substances
- C. Action at international level
- D. Coordination
- E. Budgetary implications

A. **ACTION ON DEMAND REDUCTION**

1) **General considerations**

18 In its communication of 24 November 1993<sup>1</sup> on the framework for action in the field of public health, the Commission identified drug dependence as a priority area for Community public health action. It is within this context that the Commission is submitting to the Council and the European Parliament a specific and separate communication on Community action in the field of drug dependence, together with a proposal for a decision concerning the adoption and implementation of a multi-annual action programme, under Article 129 of the TEU.

19 The proposal will fit into the general framework of the proposed new integrated Union Action Plan, given that the prevention of drug dependence by way of public health measures constitutes one of the elements of the demand reduction drive. The proposed measures are a follow-up to the efforts which have been made by the Community and its Member States since the early 1980s, and take account in particular of the European Parliament resolutions, the resolutions and conclusions of the Council and the Health Ministers, and the "demand reduction" aspect of the European Plan adopted by the European Council in Rome in 1990 and subsequently consolidated by the Edinburgh Council in 1992.

20 The extent of this multi-faceted problem, with its links to major social scourges such as social exclusion and unemployment, and the difficulties encountered by Member States in combating its severe effects on health, has led to a series of initiatives being taken at Community level over the past few years. The wide range of initiatives adopted by the Council and the European Parliament demonstrates the great importance that they attach to this problem and their view

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<sup>1</sup> COM (93) 559 final, 24.11.1993

that action to tackle it is needed at Community level. The Community is in a position to build on this work, basing its action on Article 129, which singles out drugs for special mention as a major scourge.

- 21 Articles (3)(o) and 129 of the TEU give the Community explicit powers in the field of public health, stressing the need to achieve a high level of human health protection, and focusing on the prevention of diseases, particularly the major health scourges. Drug dependence therefore requires Community action in particular by the promotion of research into the causes and transmission of diseases, as well as health information and education. In defining and implementing its action on the prevention of drug dependence, the Community must, in accordance with Article 129, bear in mind its other work in the field of public health (e.g. AIDS and health education work) or health protection aspects of the Community's other policies.
- 22 In accordance with Article 129, the exercise of the Community's powers in relation to drug dependence prevention will focus on promoting cooperation between the Member States, giving them the necessary support and, in close conjunction with the Member States, promoting the coordination of their policies and programmes. Having regard to the subsidiarity principle, the exercise of the Community's powers should help to establish dynamic practices in a field - prevention - which is gradually emerging as a top priority in an integrated approach to drugs control, at the level of both national policies and international strategies.
- 23 As regards these international strategies, it is important to note that this new form of Community action is intended to "foster cooperation with third countries and the competent international organisations" in the sphere of drug dependence. In other words, the World Health Organisation (WHO), the United Nations International Drug Control Programme (UNDCP) and the Council of Europe's Pompidou Group are major partners, among others, for the European Union in implementing its action programme.
- 24 As regards the ways in which the Community's powers should be exercised, Article 129 (4) provides for:
- incentive measures, excluding any harmonisation of the laws and regulations of the Member States. Such measures are adopted in accordance with the co-decision procedure (Article 189b of the TEU) on a proposal from the Commission to the European Parliament and the Council, following consultation of the Economic and Social Committee and the Committee of the Regions;
  - recommendations adopted by a qualified majority in the Council on a proposal from the Commission.
- 25 The multi-annual programme to be proposed by the Commission in the field of public health seeks to determine the objectives for Community action and to define the priority measures with a view to preventing drug dependence and the ensuing problems, and the appropriate evaluation mechanisms. The objectives underlying this proposal are based on an analysis of earlier initiatives: prevention

of the consumption of drugs, up to and including the ultimate objective of total cessation of drug consumption, intermediate objectives such as lower mortality rates, limits on the risk of infection by the AIDS virus or other infectious agents, reduced marginalisation. Pursuing these objectives will involve, at each stage of the prevention process, helping to develop the appropriate competences, facilitating cooperation between the various players and coordinating the various initiatives.

**2) Action programme on drug dependence**

26 The proposed lines of action under this programme will be directed towards actions:

- i) to encourage and facilitate activities targeted at high risk groups in specific settings;
- ii) to promote the identification, development, testing and use of best practices for disseminating information and providing advice to target groups;
- iii) to promote initiatives in the field of education and training in order to develop drug prevention strategies;
- iv) to support work on early detection and counselling of drug users;
- v) to promote the rehabilitation and the social reintegration of drug addicts.

- 27 The programme will take account of the relevant aspects of work to be undertaken by the European Monitoring Centre, more particularly in terms of information, studies, surveys and research. It also pledges active cooperation with the countries of Central and Eastern Europe, the WHO, the Pompidou Group, UNESCO, the ILO and the UNDCP<sup>2</sup>.
- 28 It also proposes consultation and participation mechanisms, including the institution of an advisory committee made up of representatives of the Member States and chaired by the Commission. Information on the implementation of the programme could take the form of reports to the European Parliament, the Council, the Economic and Social Committee and the Committee of the Regions. An independent evaluation is likewise provided for.

**B. ACTION ON REDUCTION OF ILLICIT TRAFFICKING IN NARCOTIC DRUGS AND PSYCHOTROPIC SUBSTANCES**

**1) General considerations**

- 29 The European Union's future work on reducing illicit trafficking in narcotic drugs and psychotropic substances will need to be structured by reference to what has already been achieved in the Community and intergovernmental frameworks. It must equally seek to build on the new possibilities created by the TEU. This new Action Programme therefore proposes :

- the consolidation and development of the *acquis communautaire*;
- the implementation of Title VI of the T.E.U., building on the previous work of the TREVI, MAG and CELAD groups.

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<sup>2</sup> WHO : World Health Organisation  
ILO : International Labour Organisation.

2) Consolidation of the *acquis communautaire*

a) Completion of the Single Market

- 30 The "Schumacher" ruling (amongst others the judgement of 7 March 1988, case 215/87) of the European Court of Justice, on the basis of Article 30 of the EC Treaty, confirmed the right of Community citizens to obtain pharmaceutical products for personal use which they needed from pharmacies situated in Member States other than those they were resident in.

It will be necessary to examine the consequences of that decision in the context of the completion of the Single Market. The European Plan to Combat Drugs adopted by the Edinburgh European Council on 11-12 December 1992, underlined the necessity of elaborating measures designed to resolve the problem of people who are in legal possession of narcotics and/or psychotropic substances, having been prescribed them for medical treatment, and who wish to travel within the Community without being exposed to sanctions in other Member States. Appropriate operational mechanisms will therefore need to be examined.

b) Diversion of precursors and psychotropic substances

- 31 Directive 92/109/EEC of 14 December 1992 on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances, creates the legislative framework necessary for the purpose of intra-Community surveillance. Member States were required to transpose that Directive by 1 July 1993, but not all the Member States have yet done so. It should be transposed into national law as soon as possible if disturbance of licit trade patterns is to be avoided, and the Commission will ensure its full implementation.

The legislative aspects necessary for the purpose of surveillance of international trade have been largely dealt with by the adoption of Community provisions between 1990 and 1993<sup>3</sup>. These are described in detail in Annex 1. The emphasis in the future will be on implementation, evaluation and, where appropriate, reorientation.

- 32 Implementation : Follow-up work will concentrate on the implementation of these measures. Action to be taken in that regard will include :

- the development of the existing electronic mail networks (SCENT/CIS), with a view to speeding up the exchange of information in this field, and

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<sup>3</sup> Council Regulation (EEC) No 3677/90 laying down measures to be taken to discourage the diversion of certain substance to the illicit manufacture of narcotic drugs and psychotropic substances, as amended by Council Regulation (EEC) No 900/92, and implemented by Commission Regulation No 3769/92 of 21 December 1992, amended by Commission Regulation No 2959/93 of 27 October 1993.

the provision by the regulatory authorities of specific data banks, such as PREXCO (Precursors export control);

- training for individuals and departments with a view to the correct implementation of the legislation and in order to meet the demands formulated at international level (United Nations, Council of Europe, USA-DEA, OAS, etc.)<sup>4</sup>, given that Community legislation is regarded as a model. This will involve organising seminars, as under the Matthaeus programme, and producing teaching resources in the form of videos, manuals, training modules, etc.;
- closer cooperative links with associations representing the trade in chemical products and the chemicals industry with a view to making them more aware of the problem and securing their active participation in detecting cases of precursor chemicals diversion;
- elimination of obstacles to inspections (e.g. in the context of commercial and statistical confidentiality), by seeking arrangements whereby the competent authorities can gain access to the original unprocessed information;
- strengthening administrative cooperation at Community level (Regulation No 1468/81), taking in the aspects relating to third countries, and taking account of the varied nature of the authorities concerned (e.g. health, trade, customs, police). The emphasis here will be on the standardised exchange of information on fraud via the SCENT/CIS<sup>5</sup> network, and on the more general exchange of data within the REITOX network set up by the Monitoring Centre under its constitutive regulation.;
- provision of appropriate information and statistical data to the European Monitoring Centre for Drugs and Drug Addiction in accordance with Council Regulation (EEC) n° 302/93 of 8 February 1993.

It should then be possible to carry out a first reliable assessment exercise during the period 1995-96, based on the following elements:

- information gathered by the authorities responsible for control and enforcement;
- information supplied by the countries of destination;
- evaluation procedures under the auspices of the International Narcotics Control Board (INCB), in conjunction with other major exporters of chemical products (where appropriate under the auspices of the Dublin Group).

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<sup>4</sup> DEA : Drug Enforcement Administration of the United Nations.  
OAS : Organisation of American States.

<sup>5</sup> SCENT : System of Customs Enforcement Network  
CIS : Customs Information System  
REITOX : Réseau Européen d'Information sur les Drogues et les Toxicomanies.

Depending on the results of the above evaluation procedures, there might be a subsequent reorientation of the approach to the way control is conducted, with a view to the possible introduction of any changes (e.g. legislative amendments, wider scope of chemical substances covered, redeployment of administrative resources).

- 33 Action by the European Union at international level : The diversion of precursor chemicals is a global phenomenon, feeding off the complexity of trading patterns and commercial procedures. As a result, cooperation with the industrialised countries and with the countries of destination in the Third World will continue to be a priority matter at both bilateral and multilateral level.

At bilateral level the main efforts will continue to be geared to completing the "sensitive country approach" based on export controls on substances destined for countries where there is thought to be a risk of diversion. Arrangements have been concluded with 24 such countries, and agreements with 11 others are in the pipeline. The negotiation of specific agreements on precursors, covering commercial checks, administrative assistance and technical cooperation, is regarded as the most effective means of addressing the problem, particularly where such agreements are of a regional nature. In addition to the negotiations currently in progress with the ASEAN countries, comparable action should enable the negotiations in 1994 of a similar agreement with the countries of Latin America (the OAS and the Rio Group), with provision being made for electronic mail links. Other countries or regions might be the subject of a similar approach depending on how diversion practices develop in the future. Contacts and exchanges of information with the USA will continue with a view to setting up a notification mechanism on suspect exports. Here again, this might include an electronic mail link.

One important project running under the regional PHARE programme on drugs concerns the development of legislation and administrative structures in six countries in Central and Eastern Europe (Bulgaria, Hungary, Poland, Romania, Slovakia and the Czech Republic); this will continue in 1994 and 1995. From 1994 on, five other countries will be covered by an extension to the programme (Albania, the three Baltic States and Slovenia). Similar measures might be taken under the TACIS programme, given the growing importance of the Commonwealth of Independent States as a focal point of precursor diversion activities.

For the purpose of awareness-enhancement, joint activities, in the form of workshops, seminars and the like, should be organised with third countries and international organisations (e.g. USA-DEA, UNDCP/INCB, the Pompidou Group, the Customs Cooperation Council, ICPO-Interpol)<sup>6</sup>.

At multilateral and global level, the Community should continue to participate in international initiatives such as the CATF<sup>7</sup> and projects supported by the INCB and the UNDCP as a matter of priority, with special reference to examining the

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<sup>6</sup> ICPO : International Criminal Police Organisation.

<sup>7</sup> CATF : Chemical Action Task Force, under the auspices of G7.

implementation of CATF recommendations, the formulation of a joint approach to countries and/or regions which are not participating in the control system and the creation of an international databank network. The coordination mechanism on precursors which was successfully set up in 1993 with the other exporting countries (INCB/UNDCP, Pompidou Group, USA) should be extended and, if appropriate, formalised, with a view to avoiding any duplication of effort.

c) Money laundering

34 The work developed at Community level in this matter is based on the Directive on prevention of the use of the financial system for the purpose of money laundering adopted on 10 June 1991<sup>8</sup>. The consolidation work should proceed as follows:

- Ensure the full implementation of the Directive on money laundering by all the Member States and by the member countries of EFTA which belong to the European Economic Area (EEA). The Directive should have been transposed by 1 January 1993, and while most Member States have already adopted the necessary legislation, others are in the process of doing so. The Commission is applying infraction procedures to these latter countries. The EFTA countries signatories of the EEA Treaty are also obliged to introduce the Directive into their national laws, under the control of the EFTA Monitoring Authority.
- Ensure that all the Member States of the European Union and the member countries of EFTA belonging to the EEA ratify and implement the Vienna and Strasbourg Conventions, as provided for in the Intergovernmental Declaration appended to the Directive on money laundering. This will make it possible to supplement the penal aspect of the anti-laundering mechanism by specific measures on the seizure and confiscation of the proceeds of criminal activities, and by cooperation between the States at the level of judiciary and police departments, these being the crucial elements in combating the laundering phenomenon.
- Make full use of all the opportunities offered in Title VI of the Treaty on European Union regarding cooperation in justice and home affairs, with special reference to judicial and police cooperation, including the use of Europol where appropriate, in accordance with the "Justice and Home Affairs" Action Plan adopted by the European Council on 10-11 December 1993.
- Develop action at international level with a view to extending the application of comparable measures to those adopted by the European Union and other relevant international bodies to other countries of the world, particularly affected by the problem and presenting a particular interest for the Union, such as Switzerland and the countries of Central and Eastern Europe. It is important here to continue to give technical

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<sup>8</sup> O.J. No. L166 of 28.6.1991, p. 77.

assistance to these countries, in conjunction with FATF<sup>9</sup> and other international organisations like the Council of Europe and the United Nations (UNDCP).

- The provision of appropriate information and data to the European Monitoring Centre for Drugs and Drug Addiction in accordance with Council Regulation (EEC) No 302/93 of 8 February 1993.

3) **Implementation of Title VI of the T.E.U.**

a) Judicial, customs and police cooperation (Article K.1.7), 8) and 9)

35 Despite the contribution which the full exploitation of Community instruments can make to the Union's efforts against drugs trafficking, as outlined in paragraphs 29-34 above, there is no doubt that the most directly operational aspects of this chapter of the drugs problem are covered by Title VI of the T.E.U. It is to the police, to customs administrations and to the relevant specialised agencies, particularly intelligence and security services, that the general public look to confront and defeat the powerful and well-equipped criminal organisations which control and exploit the lucrative trade in illegal narcotics drugs. Title VI incorporates a Treaty-based commitment by Member States governments to cooperate fully in these efforts, building on the substantive work already accomplished over the years in the framework of TREVI. In its article K.1.7) to 9), Title VI also makes clear that responsibility for taking the necessary initiatives lies with Member States rather than with the Community. These articles cover the relevant aspects of judicial cooperation (including, in particular, extradition aspects), customs cooperation and police cooperation.

36 Implementation of these provisions of Title VI needs to take account of the objectives set out in the European Plan, as approved by the Rome European Council (1990) and updated by the Edinburgh European Council (1992). It highlights in very specific language what Heads of State and Government expect, in the form of six identified priorities :

- strengthening drugs controls at the external frontiers,
- cooperation and surveillance within the Community frontiers and technical infrastructure;
- combating the illicit manufacture of drugs by measures designed to prevent the diversion, for the purposes of illicit production, of precursors and other essential chemical products;
- measures to combat the laundering of the proceeds from illicit drug trafficking;
- strengthening the legal and judicial systems;
- statistical information.

37 The "Action Plan on Drugs, EUROPOL and Money Laundering" and the "Priority Work Programme for 1994" adopted by the Justice and Home Affairs Council

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<sup>9</sup> FATF : Financial Action Task Force, under the auspices of G7.

meeting for the first time on 29-30 November 1993 reflects these priorities. In approving this plan and this programme the following month, the European Council made clear the importance it attaches to full use being made of the new commitment to cooperation contained in the T.E.U. The Commission recalls that its immediate priorities identified in this most recent programme are :

- implementation by EUROPOL's Drugs Unit of the tasks assigned to it by the Ministerial Agreement of 1-2 June 1993;
- speeding up of work with a view to the conclusion, in October 1994, of the EUROPOL Convention;
- establishment of a strategy for combating the illicit trafficking in drugs, including tighter controls at the Community's external frontiers and measures against drugs "tourism", with special reference to :
  - \* implementation of the report on customs strategy at the Community's external frontiers;
  - \* finalisation of the Convention on the customs information system;
  - \* tightening-up of maritime inspections and maritime cooperation;
  - \* enhanced complementarity of action on the part of the police and customs services;
  - \* development of close cooperation with the customs and police services in the Union's neighbouring States;
- implementation of measures designed to promote police cooperation, more particularly in the field of money laundering, by exchanges of information and training measures;
- establishment of a centralised system for collecting scientific data based on a technical analysis of drug seizures in Europe.

38 Further aspects of work under Title VI of the T.E.U. will strengthen the Union's capacity for tackling the problem of drug-trafficking. Relevant priority measures in the Action Plan in this regard are the implementation of the recommendations made by the Ad Hoc Working Party on International Organised Crime, finalisation of the Convention on the European Information System, and work on extradition and judicial cooperation. Beyond these immediate priorities attention will also need to be given to other measures to give practical expression to the priorities identified by the European Council for this end. It will also be necessary to make the fullest possible use of the opportunities created by the existing police and customs networks, and by the creation of new organisations such as EUROPOL and the European Drugs Monitoring Centre which should establish close links of cooperation.

39 The Commission will contribute where it can to pursuing these priority objectives, for example, through the interface with the Community's customs activities and with Community legislative instruments such as those concerning precursor chemicals and money laundering. The major responsibility lies, however, with Member States.

- b) Combating drug addiction (Article K.1.4)
- 40 Article K.1.4) also offers new possibilities for cooperation against drug addiction which, although not very specifically defined in the language of the article itself, deserve to be explored to examine whether important gaps remain in the Union's efforts against drugs in addition to the Community instruments and to the other new provisions provided by the T.E.U. The Commission suggests that this examination should be conducted through an informed exchange of ideas according to the procedures set out in Title VI, to which the Commission and all Member States should contribute, taking account also of the views of the European Parliament.
- 41 It must be admitted that it is not easy to identify precisely what activities article K.1.4) might cover. It is easier to say what is not covered :
- (i) since the opening paragraph of Article K.1 contains the words "without prejudice to the powers of the European Community", Article K.1.4) cannot be seen as the legal base for actions which might be pursued on the basis of European Community Treaty articles. This concerns primarily Article 129, but also those articles on which relevant existing or future legislation is or might be based for example, Article 113 in the case of international trade on precursor chemicals, Article 100A in the case of intra-Community movement of such products, and Article 57(2) and 100A in the case of the money laundering directive;
  - (ii) nor can it be used for matters more properly covered by Article K.1.7) to 9) which are specifically excluded by K.1.4) itself. Moreover, within Title VI itself, Article K.1.6 (judicial cooperation in the civil field) and Article K.5 (defense of common positions in international fora) arguably provide more appropriate legal bases for certain actions, even when specifically directed to drugs issues, than Article K.1.4) itself;
  - (iii) the actions must, however, given their place in Title VI, meet the general criteria that they fall under the definition of "cooperation in the fields of Justice and Home Affairs".
- 42 Against the background of these real constraints, a possible way of looking at Article K.1.4) would be to regard it as offering a basis for measures, in areas covered by Justice and Home Affairs Ministers, designed to promote the approximation of existing, sometimes apparently divergent, national practices in combatting drug addiction, consolidating them into common legislation where possible or at least making them more consistent and dynamic. In particular, article K.1.4) could be used, while respecting competences, for the purpose of overcoming the fragmentation between socio-medical approaches and law

enforcement in the Member States. The Commission suggests to consider the following possible action lines :

- interdisciplinary exchanges on the drugs problem between the bodies and professional organisations responsible for reducing drugs demand and drugs supply;
- creation of a European multicity exchange and cooperation network on the basis of a pilot programme, which would give practical support to efforts at city level in Europe to improve their local integrated strategies to combat drugs and crime;
- cooperation on the links between drug-taking and crime;
- convergence of criteria and indicators for collecting data on drugs and drug addicts, approximation of classifications, definitions and addict registration systems, in so far as these issues are not matters of Community competence;
- setting up of a convergence and coordination mechanism on general populations and at risk groups surveys.

43 Better exchanges between the various bodies and organisations involved in combating drugs are essential if the measures introduced to fight this complex problem on every front are to be effective. The policies and action of one body can have a positive or negative effect on the work of another. A genuinely multidisciplinary and concerted approach to the drugs problem is therefore needed. Interdisciplinary exchanges on the drug problem between the bodies and professional organisations responsible for reducing drugs demand and drugs supply, in the context of joint measures taken under Article K.1.4), could promote exchanges between the different actors involved (e.g. local and municipal authorities, magistrates, lawyers, social workers, customs officials, police officers, non-governmental organisations, and drug addicts' associations. On the basis of the experiences gained during these exchanges, joint measures could be taken in particular to promote specific cooperation modalities between bodies responsible for enforcing the law and those responsible for reducing demand.

44 The Action Programme adopted by the Justice and Home Affairs Council refers to the need for consideration by law enforcement agencies, in conjunction with social and medical experts, of the link between small-scale urban crime and the consumption of drugs. The Florence seminar on drug policies and strategies also highlighted the intention of a large number of cities in Europe to set up networks for exchanges and co-operation with a view to improving local integrated strategies to combat drugs and crime. The creation of a European Forum for exchanges and multi-city co-operation would provide a focus point for these initiatives building on support already given by the Commission for measures in this area<sup>10</sup> and recommendations contained in the European Parliament's report on

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<sup>10</sup> In the framework of preparatory work proceeding the establishment of the Monitoring Centre

small scale crime in urban areas and its links with organised crime<sup>11</sup>. The Commission would be prepared for the duration of the Action Plan to undertake a structured pilot programme of work on this question. 1994 will in any case see the continuation and evaluation of the first experimental measures under this banner.

45 Cooperation on the links between drug-taking and crime might also focus on criminological research into the drugs/crime link at each stage of the drugs chain, including financial criminality. Finally, cooperation should focus on developing multidisciplinary initiatives on all these questions.

46 The need for more reliable and comparable data on the various aspects of the drugs problem has been underlined on many occasions in recent years. Global level programmes have consistently stressed the importance of setting up reliable systems at local, national, regional and international levels for collecting and evaluating data on the global drugs problem. The Pompidou Group at the Council of Europe has been carrying out a major project on epidemiology and statistics since 1982 with the aim of developing common indicators and setting up a network linking a number of cities. The Commission, as part of the preparatory work for the European Monitoring Centre for Drugs and Drug Addiction, the Commission financed a study by an expert from the Pompidou Group to determine possible areas for cooperation between the Pompidou Group and the Centre in the field of epidemiology. On the basis of the work of the Centre and the Pompidou Group on collecting comparable data, and without prejudice to initiatives in the Community field based for example, on Article 129 of the T.E.U., Article K.1.4) could enable joint positions, joint action or conventions to be adopted for the purpose of aligning :

- the criteria and indicators used for collecting information on drugs and drug addiction;
- classifications of controlled substances;
- definitions and registration systems of drug addicts in areas other than those relevant to Article 129.

47 There is also a need to have a full picture of the populations affected by the drugs phenomenon and of the trends in drug consumption in the Community. Convergence mechanisms could be developed on the basis of work carried out by the Pompidou Group and the work to be carried out by the Monitoring Centre, to allow coordinated surveys to be conducted among the general public and groups at risk. The reliability and usefulness of such surveys depend to a very large extent on their being repeated at regular intervals, and on the use of reliable and constant indicators and measurement methods. Joint measures could involve :

- a first Union-wide European survey on drug addiction among the general population (1996);
- the coordination of national surveys in schools and prisons in cooperation with the Pompidou Group; and

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<sup>11</sup> The Salisch Report (December 1993)

- The setting up in the Union of a "clearing" and coordination system for the national surveys, for which the Monitoring Centre might be made responsible.

## C. ACTION AT INTERNATIONAL LEVEL

### 1) **General considerations**

- 48 The European Union needs to back up its internal plan of action against drugs with external action, since the effectiveness of its campaign against the abuse and illicit trafficking of drugs and psychotropic substances depends on measures being taken to curb supply and demand in the producer regions. Also, illicit drug abuse and the criminality which goes with it hold back the development of the Union's third country partners.

The Treaty on European Union offers scope for stronger overall external action against drugs through the common foreign and security policy (CFSP), which provides for the use of joint action in particular areas in which Member States have important interests in common, and for the establishment of systematic cooperation between Member States in areas of general interest. Such cooperation includes in particular the defining of common positions and the upholding of these positions in international forums.

### 2) **External Action Programme of the European Union**

#### a) Consolidation of the *acquis communautaire*

- 49 At the multilateral level, the European Community will need to be actively involved with the UNDCP on the chemical precursors front. As regards the fight against money laundering, the European Community will continue to work alongside the Member States in cooperation activities in the various regions of the world. In order to strengthen the complementarity between the Pompidou Group and the European Union, the existing cooperation on precursors could be extended to, for example, money laundering and psychotropic substances. Particular attention will need to be paid to cooperation with the European Monitoring Centre for Drugs and Drug Addiction, which is now being set up in Lisbon.

- 50 At the bilateral level, action will have to be taken in the following areas :

- Cooperation and trade (GSP)<sup>12</sup>

The Union must target individual countries or groups of countries on the basis of the risks they present, their proximity to the Union and the priorities established by the European Council (the countries in the arc formed by the Mediterranean, the Middle East and Central Europe). These targeted, coordinated actions must form part of a programme at Union level which, among other things, should be

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<sup>12</sup> GSP : Generalised System of Preferences

linked to national and regional drug control strategies. These programmes and strategies must be multi-sectorial, in accordance with the Global Programme of Action adopted by the UN General Assembly in February 1990. The sectors include:

- (1) the establishment or strengthening of systems for providing information on the global phenomenon of drugs, its causes and consequences;
- (2) the establishment of institutional, legal and administrative structures for the prevention and suppression of production and/or illicit trafficking, the diversion of precursors and the laundering of drug proceeds, and for the control of licit drug-related activities;
- (3) the prevention and/or reduction of drug abuse;
- (4) the reduction of production through policies designed to promote the development of durable and productive alternative economic activities in the zones of illicit production and in the pockets of poverty, marginalisation and high unemployment which underpin demand.

In addition, the Commission is proposing in the context of GSP that the special arrangements aimed at the fight against drugs should be continued, provided the countries concerned for their part continue their efforts to combat drugs and some results are achieved. Progress should be monitored by evaluation and dialogue, via a suitable procedure to be established between the countries concerned and the Commission. Pursuant to the European Council recommendation, the special arrangements currently applying to the Andean Pact and Central American countries are to be renewed in order to secure the full benefits, and the Commission also advocates a limited extension of the scheme to other countries in a similar situation.

- Anti-drug clauses

Clauses on the "fight against drugs" and on the "fight against money laundering" must be included as a matter of routine in the EC's external agreements, not only to provide a basis for the cooperation but also to develop the political dialogue. An immediate objective in this respect would be to encourage third countries to ratify the three UN Conventions designed to outlaw the production, exportation, importation, distribution and possession of narcotic drugs and psychotropic substances except for medical and scientific purposes and to promote international coordination against illicit trafficking.

- Financing

The political dialogue, the international commitments entered into by third countries on drugs questions, and the amounts of aid available, must be exploited so as to make third countries accept the fight against drugs as a priority aspect of the Union's cooperation activity.

As regards the ACP States, the possibilities offered by the Lomé IV Convention (Art. 154 (3) and Art. 159 K) for financing drug control measures have not yet been exploited by the authorities in those countries. It is vital, therefore, to conduct a dialogue with the most seriously affected countries in order to make them see the extent of the problem and the impact it is having on their development, and to encourage them to become more active in the fight against

drugs. If the Convention amendments proposed by the Commission and the Council are accepted by our partners a system of "political" dialogue will be established, thus enhancing the means for pursuing such a dialogue. The dialogue must seek in particular to ensure that drug control projects are included in the next Lomé IV programme.

Moreover, as regards the Central and Eastern European Countries, there will be a need to examine the possibilities of expanding action and cooperation means in the framework of the PHARE and TACIS programmes.

The specific budget heading B7-5080, "North-South cooperation schemes in the context of the fight against drug abuse" provides for commitment appropriations totalling ECU 10 million in 1994. Bearing in mind the proposals made above concerning the extension of the Union development cooperation, this heading can be maintained at its present level provided it is used primarily to facilitate the integration of drug control measures into the Community's bilateral cooperation programmes. More precisely, it must be used for:

- (1) making the political authorities of the countries targeted by the Union more aware of the problem, through the establishment of drug "profiles" for those countries;
- (2) providing technical assistance to help those countries devise integrated national or regional drug control strategies. Key partners here will be the UNDCP and the European Monitoring Centre for Drugs and Drug Addiction;
- (3) implementing pilot projects and establishing "pre-projects" (the extension of the latter, and the actual project phase, would then be financed under the development cooperation budget).

It should also be noted that this budget heading, according to the "Remarks" alongside it, is also meant to cover a contribution to the activities of the UNDCP. Given that it is the wish of the Union, and of other important donors, to see the UNDCP play a larger role in coordinating international anti-drug efforts, and given the UNDCP's widely acknowledged expertise and its status as a key interlocutor with third countries, the European Community should aim to set aside a significant amount for financing actions under the UNDCP's two-yearly programme.

b) Common Foreign and Security Policy

- 51 To reinforce its approach the Community needs to consolidate its traditional external action with new action under the umbrella of the CFSP. The Lisbon European Council of June 1992 identified the fight against trafficking in illicit drugs as an area lending itself to joint action by the Union and identified the Maghreb and the Middle East as priority regions for application of the CFSP in the fight against drugs. The Brussels European Council of December 1993 confirmed these conclusions.

An initial example of joint CFSP action would be systematically to include the "drugs" question in the political dialogue conducted by the Union with third

countries, based on the experience already acquired in the fields of democratisation and human rights, with a view to enhancing awareness of the drugs phenomenon at the highest political levels. And if the dialogue partner were to maintain a resolutely negative attitude the Union might choose to review or even suspend the envisaged or existing cooperation. Moreover, Member States could, as part of the joint action, support the Community's efforts through their own appropriate diplomatic measures.

With this in mind, the establishment of a series of common positions should be envisaged, allowing the Union to strengthen and pursue more effectively its drug control objectives within the competent international forums (UNDCP, Council of Europe, etc). It will be up to the CFSP Drugs Group to examine and define the content of each of these positions.

In the framework of the European Council's conclusions on the fight against trafficking in illicit drugs, joint actions could be envisaged to improve the capacity and willingness of certain countries or certain regions to commit themselves fully in the fight against drugs. Finally, Community's initiatives can be backed up by joint actions in particular where they can provide an appropriate political framework to help ensure the successful and effective implementation of the initiatives.

#### **D. COORDINATION**

##### **1) General considerations**

52 The effective implementation of a comprehensive and integrated response to the drugs phenomenon at the level of the Union will call for action at different levels -local, national, Union - and, insofar as it involves the Union, across the three pillars which go to make it up. Equally it involves a wide range of actors both governmental and non-governmental. A new Union Action Plan can provide a framework for that work but its implementation will also require an ongoing effort to ensure the machinery for effective co-ordination of the actions to be pursued and coherence between the different actors involved.

53 Any failure to achieve such coordination would run the risk of waste of energy and resources on implementing objectives lacking the necessary consistency. The result would be poorly defined priorities, leading in turn to unnecessary duplication of effort and lack of clarity of the programmes, both for the policy-makers and for the public at large.

54 It will be essential, therefore, to maintain and even enhance coordination at Member State and Union level. This part of the document investigates how existing mechanisms might be a help in this process and in making the Action Plan operational.

##### **2) Coordination within and between the Member States**

55 As was mentioned earlier, the first two European plans emphasised the importance and the role of national coordination as a key element in any integrated strategy to combat drugs. The second plan acknowledged that it was up to the individual

Member States to determine what type of mechanism was best suited to their national requirements, but felt that the Member States could usefully engage in an exchange of experience on the effectiveness of their respective mechanisms.

- 56 In addition, the European Council opted to extend the comprehensive approach to drug-related problems following the entry into force of the T.E.U. and to give COREPER the task of ensuring the consistency of work on drugs under the three "pillars". The European Council also noted with approval a report from CELAD recommending that COREPER consider convening meetings of national coordinators on drugs issues, with a view to coordinating the position of the Twelve and of the Community ahead of major events and international meetings. That report also recommended that, where necessary, and after making the appropriate consultations, COREPER consider calling meetings of the national drugs coordinators to examine specific questions relating to the different "pillars", for which their specialist knowledge would be of great use, with a view to drawing on their advice on drugs matters<sup>13</sup>.
- 57 The entry into force of the Treaty on European Union has also clarified this situation by creating or adjusting, within the Council, in addition to existing groups competent for certain Community matters, the vertical structures corresponding to the three key components of any effective action against drugs: Public Health (Health Council), Justice and Home Affairs (Justice and Home Affairs Council) and International Action (General Affairs Council). Specialist groups in the Council are competent to deal with the corresponding subject areas: Health Group, K.4 Committee, CSFP - Drugs.
- 58 Co-ordination will remain important for a variety of purposes. These would include :
- Closer and more systematic coordination of the positions of the Community and its Member States in the run-up to major international events dealing with the global drugs issue: the United Nations General Assembly and Commission on Narcotic Drugs, the ministerial conferences and meetings of the Permanent correspondents of the Council of Europe's Pompidou Group, meetings of the Dublin Group, etc.
  - Examining the "inter-pillar" aspects of action taken by the European Union against drugs (initiatives and follow-up), including the relevant aspects of the Drugs Monitoring Centre's work programmes (for which the Council's opinion is required) and, in the near future, the Centre's first three-year programme of work.
  - Undertaking work, jointly between the national coordinators and the Monitoring Centre, with a view to an exchange of experience on the effectiveness of (national coordination) mechanisms, as provided for in the second European plan<sup>14</sup>.

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<sup>13</sup> Doc. CELAD 124, 3 December 1992, as "noted with approval" by the Edinburgh European Council.

<sup>14</sup> Bearing in mind (a) the Centre's general terms of reference and (b) its second priority concerning

59 It will be for COREPER to decide on the appropriate co-ordination mechanisms at the level of the Council. The important thing, in the interests of an integrated approach to the drugs phenomenon, is to ensure that the new institutional structures contribute to strengthening coordination at the level of Member States and of the Union.

### 3) The European Monitoring Centre for Drugs and Drug Addiction

60 Information and analysis are both crucial elements in gaining an understanding of the complex phenomenon of drugs, in terms both of rationalising and optimising the political decision-making process at Member State level, and in the Union as a whole. This is why, in adopting the Regulation on the establishment of a European Monitoring Centre for Drugs and Drug Addiction<sup>15</sup>, the Community opted for an ambitious structure, i.e. an agency under Community law, with an initial budget of approximately ECU 5 million in the form of a Community subsidy, and based on an interactive network of national drugs information centres, known as Reitox, with a view not only to disseminating existing information, but also (and above all) to improving the comparability of national data and, wherever necessary, harmonising the methods and criteria for collecting such data.

61 The Centre's remit for the purpose is comprehensive. Its five priority areas are, in order:

- demand, and reduction of the demand, for drugs;
- national and Community strategies and policies;
- international cooperation and geopolitics of supply;
- control of trade in narcotic drugs, psychotropic substances and precursors;
- implications of the drugs phenomenon for producer, consumer and transit countries (including money laundering).

62 The Centre's management board will have to draw up and adopt the first three-year work programme after consulting the Commission and the Council. "Special attention" is to be given initially to demand and demand reduction, and the Centre will thus have a key role to play in this area. However, it will also have to make sure, if it is to comply with its mandate under the Regulation, that it helps give the Community and the Member States an overall view of the drugs phenomenon, in accordance with their specific needs. The Commission and the Member States are required to do everything in their power to support the Centre and ensure that it accomplishes all the tasks expected of it, particularly through their representatives on the management board<sup>16</sup>.

63 The Monitoring Centre and its network of national centres (Reitox) thus constitute the Community's structure for the collection and dissemination of information on drugs and drug addiction. Its powers, however, extend only to making recommendations; it has no normative or legislative powers, which remain in the

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policies and strategies.

<sup>15</sup> Council Regulation (EEC) No 302/93, 8 February 1993, OJ L36, 12.2.1993.

<sup>16</sup> One per Member State, two for the Commission and two for the European Parliament

hands of the Community and the Member States, although the exercise of such powers should be facilitated by the work of the Centre. Set up to facilitate the political decision-making process, the contribution it can make has clearly been enhanced by the entry into force of the TEU and the new structure it provides.

- 64 The Centre's most important task will be to supply the Member States and the European Union institutions with the raw material they need to enable them to exercise to the full their respective responsibilities on drugs, and more particularly, to achieve the objectives and measures laid down in the integrated Action Plan. In particular, the Centre will provide an opportunity to stimulate and structure research and training on drugs, drug addiction, their causes and consequences, within the framework of its constituting mandate and on the basis of the priorities set up in its work programmes, whether the focus being on political, socio-economic, biomedical or even criminological domains. Inventories of research and training already conducted by the Member States in these fields have already been produced in the course of preparatory work leading up to the establishment of the Centre<sup>17</sup>.
- 65 Other preparatory work undertaken by the Commission prior to the establishment of the Centre should also be useful in drawing up the Centre's first 3-year work programme. The 35 technical reports which were drawn up between 1992 and 1994, most of which were examined by the Member States in the second half of 1993, provide a sound technical basis for the Centre's initial work.
- 66 The Centre should also have access rapidly to a large volume of information on all aspects of the drug problem from the Member States, the Commission, the international organisations with which it is required to cooperate (UNDCP, WHO, the Pompidou Group, the CCC, Interpol and Europol)<sup>18</sup>, the associated NGOs and non-member countries taking part in its information activities. For this reason alone, it will be well placed to provide information on the implementation of this new integrated Action Plan.
- 67 In this context, and using the abovementioned resources, the Centre should be in a position to supply the institutions and the Member States, with effect from 1995, with an "Annual report on the Drugs Phenomenon and Policies for Combating Drugs in Europe".

#### 4) Multi-disciplinary aspects

- 68 Co-ordination will also be of importance in relation to a number of identifiable subjects and activities which are multi-disciplinary by nature. These include activities common to more than one of the three elements of the Action Plan and/or activities in which the Community is already engaged in sponsoring a

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<sup>17</sup> Hilde van Lindt: "Drug research in the EC Member States and cross-border networks of researchers: Instruments of anti-drug strategy?"

Alexis Goosdeel: "Drug-related training programmes in Europe: an overview"

<sup>18</sup> WHO : World Health Organisation  
CCC : Customs Cooperation Council

multi-disciplinary approach. Co-ordination in these areas is of particular importance if duplication of effort or gaps are to be avoided.

69 Priority subjects in this regard are :

Information

Studies and research

Training and exchanges of professionals

70 It will be necessary to ensure that action arising from the various programmes is consistent on these points. The Commission will seek to guarantee the necessary consistency in whatever initiatives it will be taking. Within the Council, this will be the responsibility of COREPER, which will also be able to call on the help of the national coordinators. Over and above these institutional possibilities, there are other ways of promoting the necessary multisectoral and multidisciplinary action so as to make for the greatest possible coherence in the approach to the drugs problem. The broad lines of action for creating this essential coherence are explored below.

#### Information

Since the European Monitoring Centre for Drugs and Drug Addiction was set up precisely with an information remit, it - and the Reitox network of national centres - offers the optimum structure for horizontal coordination in this particular field, bearing in mind its comprehensive remit set out in the regulation. The Centre should therefore automatically become the focal point for synthesis, coordination and cooperation work at Union level in terms of information on the drugs phenomenon and on anti-drugs policies, programmes, instruments and measures. For a more detailed analysis, the reader is referred to paragraphs 60-67. The information and statistical aspects of the Action Plan should not duplicate Community socio-economic and health statistics. Close cooperation will therefore need to be established between the European Monitoring Centre for Drugs and Drug Addiction and EUROSTAT concerning content and methodology.

#### Studies and research

The Florence seminar on policies and strategies clearly identified research as a key element in any European anti-drugs strategy but also brought out the relative weakness and isolation of European research on these matters, compared, say, with the equivalent policy pursued by the United States. The USA has also been active in seeking an effective form of scientific partnership with the European Union on these matters.

It is thus imperative, both for the Union's own needs and for the effective operation of the Monitoring Centre in this essential field, to strengthen research on drugs in Europe, give it a flexible coordination structure and accord a high level of priority to drug-related subjects in existing research programmes, particularly at Community level. Article 129 of the T.E.U. explicitly foresees that, in the area of Public Health Community action must promote research into the causes and transmission of drug addiction and that health protection

requirements form a constituent part of the Community's other policies including research. Health research in drug addiction should therefore bear special attention in the framework of the proposed action.

To this end, it is proposed to coordinate integrated research action on drugs and drug addiction within the context of the fourth framework programme for Community research and technological development (1994-98)<sup>19</sup>. This would enhance the coherence of relevant measures under a range of more specific programmes. It would cover the following elements:

- 1) Comparative studies and research on comprehensive policies (health, social, enforcement, etc.) and strategies against drugs in Europe, in conjunction with the Commission, the European University Institute in Florence, the European Monitoring Centre, the COST Programme (A6)<sup>20</sup>, and the Community's principal European and international partners.
- 2) Studies and research into common-interest technological and telematics applications, in close collaboration between the Commission, the European Monitoring Centre and its Reitox network of national centres, and within the context of the planned trans-European networks.
- 3) Environmental and space technology studies and research of interest to drugs workers, more especially regarding earth observation and space technologies, in close cooperation between the Commission (and the JRC) and the European Monitoring Centre.
- 4) Studies and research in the life sciences and technologies, more particularly biotechnology, biomedical and health research and agro-industrial research, in close cooperation between the Commission, the Monitoring Centre and the WHO.
- 5) Socio-economic studies and research focusing on the causes and consequences of drug dependence particularly in relation with social exclusion and the underground economy including money laundering, in close cooperation between the Commission, the Monitoring Centre, the Council of Europe's Pompidou Group, and the European Parliament's action on issues related to urban safety.
- 6) Research and development into a wide range of joint research activities concerning all drug-related subjects with certain developing countries, the countries of Central and Eastern Europe, and certain of the developed countries, in conjunction with the Community framework programme's STD programme.

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<sup>19</sup> Doc. COM (93) 459 final, 6 October 1993.

<sup>20</sup> COST Programme (A6) on "assessment of actions to reduce drug addiction" and associated networks on "evaluation of policies, policy changes and social responses", "evaluation of primary prevention", "treatment evaluation", "development of research instruments" and "drug related crime".

In all these research-related activities, special attention will focus on establishing and/or strengthening collaborative links with the leading international research organisations and centres.

This should make it possible to:

- stimulate and encourage research in the Member States and at Union level;
- facilitate methodological exchanges and networked multi-annual research activities;
- encourage training for researchers on the general problem of drugs in Europe;
- multiply the existing range of training opportunities and facilitate the integration of European researchers in existing national centres;
- organise seminars and conferences leading to suggestions for action and decisions which the Commission and the Member States should take on board, on the basis of the dissemination of the research findings by the European Monitoring Centre (thus ensuring a better complementarity between research and a taking of practical policy decision).

To this end, thought should be given to ways of according priority, for the life of the integrated Action Plan, to an integrated research effort on drugs as part of the existing framework research programme; this would cost something like ECU 10 to 15 million per year, and would not require any new budgetary resources.

#### **Training and exchanges of professionals**

Along with information and research, training is one of the priority targets for European Union action against drugs. There is a very real need here felt by all professionals in the field, and as such it is an automatic candidate for a multidisciplinary approach. If it is to be truly effective, while also ensuring the development of the powers and capacity for action appropriate to each profession in response to specific or local needs, the aim must be to extend our general analysis of the phenomenon to take in the specialities and constraints of other professional interests, and to develop multidisciplinary ways of working.

The important point is to collect and organise all existing resources in a form which can be placed at the disposal of the Member States and partner countries of the European Union. It will also be necessary to create the right conditions for exchanges and for critical analysis on the part of training programme organisers, based on their own experience.

To meet these significant training needs both within the Union and in its partner countries consideration might be given to three priority measures:

- Supplementing and updating the inventory of training programmes on drugs in Europe, and of the initiatives supported by the Commission in this field under the various budget headings (e.g. Erasmus, Horizon, DG V programmes, DG I,

Tempus, etc.). What is needed more especially is a full dossier on training programmes and potential partners with a view to setting up an interactive databank. This priority work will be carried out in close collaboration with international organisations which run similar programmes (e.g. WHO, UNO, UNESCO, Pompidou Group).

- Providing logistical backup for the creation of a European Training Network on Drugs, with a view to furnishing the necessary support for exchanges and discussions on training programmes, their content, methodologies and evaluation. The important thing here is to make optimum use of resources by mobilising and bringing together the wide range of human resources identified in the existing inventory.

- Facilitating training measures which have been selected for their potential multiplier effect, and which are likely to be of use both within the Union and outside.

In this regard, there are six aspects of training which should be given special attention in terms of development and coordination:

1) High-level training on the integrated aspects and integrated strategies to combat drugs.

Target: policy-makers, high-ranking officials, top officials responsible for sectoral policies, administrators, politicians, etc.

2) Training for trainers in the field of demand reduction.

Joint action programme with the Pompidou Group, the aim being to train operators in the Community, in the countries of Central and Eastern Europe, and in certain other non-member countries, according to a common curriculum.

3) Training for trainers in the field of multidisciplinary field strategies, taking in existing knowledge and methods of combating drugs (i.e. prevention, treatment, reintegration, law enforcement).

4) Training for trainers in the field of international cooperation and the geopolitics of supply, specifically targeted at cooperation workers in non-member countries, and more especially at NGOs operating in the field of demand reduction and alternative development, but also nationals of the countries themselves.

5) Training for management staff in the field of precursor control, with special reference to preventing the diversion of precursors, both within the Community and outside, pursuant to the CATF's recommendations.

6) Training for administrative and financial managers in the field of money laundering, both within the Community and outside, pursuant to the relevant EEC Council Directive (91/308) and to the FATF recommendations.

E. BUDGETARY IMPLICATIONS

71 The Community's first drugs-related budgets date from 1986-87, at which time a budget heading was created to cover measures designed to combat drug dependence in the Community, together with a second heading covering the Community's work in the producer and transit developing countries. Developments over the period 1989-93 led to the emergence of new needs, and consequently new budget structures, more particularly in the field of precursors, money laundering, and the preparatory work leading up to the European Monitoring Centre (for which a special budget item was created in 1993). Provision under the main budget lines of relevance to the fight against drugs has steadily increased from 5,5 Mecus in 1987 to 22,6 Mecus in 1994. The budget lines in question for the purposes of the 1994 budget, and the Commission proposals (APB) for 1995 are set out in Annex 3.

72 The fact that the plan set out in this communication spreads across all three "pillars" of the Treaty of European Union, each with its own budgetary mechanisms and sources of finance, make the presentation of its budgetary aspects unusually complex. As far as those aspects which fall squarely under the European Community's sphere of responsibility are concerned, special mention might be made regarding the Commission's proposals for a programme on drug demand reduction, and the European Monitoring Centre for Drugs and Drug Addiction whose budget of 4.8 mecu for 1994 represents a concrete commitment to the Union's determination to tackle the drugs problem. As far as the Community's external programme is concerned, the proposal is to pursue the actions conducted since 1987 in favour of developing countries, which in 1994 involves provision for expenditure of 10 mecu. In addition provision was made for the first time in 1993 within the PHARE programme for assistance to the countries of Central and Eastern Europe on drugs.

That programme is being extended and reinforced in 1994/1995. Actions to be taken in the name of the Common Foreign and Security Policies are, however more difficult to budget for, since they can be expected to consist primarily of diplomatic and political activity supported where appropriate by calibrated use of the Union's agreements with the key third countries involved. Apart from these budgetary lines dedicated to drugs, the Action Plan will involve greater priority being given to drug related issues in the context of other existing Community programmes (e.g. research and training).

Cooperation in the fields of justice and home affairs also requires a willingness to provide the necessary financial support. The most concrete example is the budget needed for the recently created Europol Drugs Unit and its successor organisation EUROPOL (which will give a continuing high priority to drugs). This particular budget has been drawn up on the basis of national contributions and therefore does not involve the Community budget. Other possible action under Title VI will, if approved, imply a need for finance. The Treaty rules for expenditure under this Title provide that, unless decided otherwise by unanimity in the Council, such expenditure falls to Member States to finance through

national contributions. Nevertheless, the Commission has proposed for 1995 a 5 mecu budget line which could finance, among other things, the beginnings of the sort of actions proposed in paragraphs 40-47 above.

- 73 The sums mentioned for the most part represent continuing expenditure on the basis of existing budget lines, supplemented by provision for a new programme in the field of demand reduction. To this must also be added the financing of the two new drugs-related bodies created especially to contribute to the fight against drugs : the Europol Drugs Unit and the European Monitoring Centre for Drugs and Drug Addiction.

### III. CONCLUSIONS

- 74 The Commission believes that it is important for the European Union to follow up the work already done by the Community and its Member States on the drugs front by implementing and/or building on the results achieved by the Community and in the context of intergovernmental cooperation (e.g. within the TREVI, MAG and CELAD groups in particular). The new opportunities available under the Treaty on European Union (Article 129, Title V and Title VI) should be utilised to maximum effect by the Union with a view to consolidating and developing the measures already taken, both by the Community and by the Twelve in the intergovernmental framework.
- 75 The proposed European Union Action Plan (1995-99) offers therefore a framework within which priorities can be implemented, in accordance with the Treaty, in the following fields:
- i) Multi-annual Community action programme to prevent drug dependence and the ensuing problems (Article 129), on the one hand, and measures designed to consolidate earlier Community work on completion of the internal market, precursors and money laundering, on the other.
  - ii) Cooperation in Justice and Home Affairs through implementation of Title VI of the T.E.U. and development of the possibilities offered by Article K.1.4) in the area of "combatting drug addiction", including the creation of a European forum for exchanges and multi-city cooperation.
  - iii) Action in the international field, combining the traditional instruments of Community external action and those now available within the context of Common Foreign and Security Policy (CFSP).
  - iv) Horizontal action programmes comprised of the following priorities :
    - maintenance and reinforcement of the role of national coordinators;
    - setting up and making full use of the global information assignment given to the European Monitoring Centre;
    - establishment of multisectoral coordination in information, research and training.

These measures will require the coordinated and consistent application of the various instruments and means of action available under the TEU, taking full account of the respective powers of the Community and its Member States, and having regard to the subsidiarity principle.

The Commission will review the implementation of this Action Plan and submit a report to the Council in the second half of 1996 with recommendations for any necessary adjustments. The Commission will also submit, no later than 1 January 1999, assisted where necessary by the national coordinators and the European Monitoring Centre, a final report on the implementation of the Action Plan, and could come up with appropriate proposals for the five-year period 2000-2004.

## ANNEXES

**Annex 1:** The achievements of the Community and the Member States

**Annex 2:** The Treaty on European Union and its consequences as regards drugs strategy

**Annex 3:** The Drugs Budgets

**Annex 4:** Basic statistics

## **THE ACHIEVEMENTS OF THE COMMUNITY AND THE MEMBER STATES**

### **A. Political and institutional developments (1989 - 1993).**

The Member States have been cooperating on a purely inter-governmental basis within the TREVI group since the mid-1980s on combating drug trafficking. Meanwhile and in parallel the Health Ministers meeting within the Council had since 1984 been engaged in jointly defining an approach by the Twelve to the serious problem of drug addiction.

The first occasion on which the Community as such participated on work in the drugs field was in June 1987, at the International Conference on Drug Abuse and Illicit Trafficking organised in Vienna by the United Nations Secretary General. In the wake of the Vienna Conference, and with an eye to the adoption by the international community of a new international Convention on the fight against the abuse of illicit drugs, the Council, acting on a proposal from the Commission, adopted on 26 January 1987 an initial decision paving the way for the Community to adopt a structured and integrated approach to the drugs problem in its cooperation relations with producer or transit third countries. This decision was complemented in 1988 by a mandate to the Commission allowing the Community to participate as such in the final phase of negotiation of the new international Convention, on the basis of its competence in the field of "chemical and pharmaceutical precursors", which were the subject of a specific Article in the draft Convention. The Community therefore participated in these negotiations in 1988. The Community became party to the Convention on 22 October 1990 following the adoption of the Convention in Vienna on 19 December 1988. The Community was thus recognised from 1988 onwards, albeit on a basis of limited competence, as a partner as of right in the international fight against drugs.

Another significant development, against the background of the creation of the Single Market, was President Mitterrand's initiative, on 3 October 1989, when addressing the Heads of State and Government and the President of the Commission, he advocated an integrated approach by the Twelve to the drugs phenomenon. He suggested, among other things, two operational measures to help achieve this approach, namely the creation of a mechanism for coordinating national policies and the creation of an "observatory" to measure the drugs phenomenon at European level.

Set up on 1 December 1989, and with its coordination mandate confirmed by the Strasbourg European Council of 8 and 9 December 1989, the European Committee to Combat Drugs (CELAD) immediately began drafting the first European Plan to Combat Drugs. The significance of this first European Plan, which was adopted in 1990, was that it was conceived as an integrated plan. It focussed on five aspects, designed henceforth to act as points of reference for the Community and its Member States:

- 1) coordination at Member State level;
- 2) a European observatory to monitor the drugs phenomenon;
- 3) action to reduce drug demand;
- 4) action to combat illicit trafficking;
- 5) action at international level.

This approach was formally adopted by the Rome European Council of 13 and 14 December 1990. The first European Plan thus became the conceptual and operational framework for action by the Member States and the Community.

The major points of the first Plan can be summarised as follows:

a) horizontal aspects.

- Introduction of effective coordination mechanisms on drugs in the Member States; creation of a European Drugs Monitoring Centre, to cover not just the social and health aspects but also the other aspects of the drugs problem, including trafficking and repression;

b) demand reduction.

- Action recommended to the Member States within the following priority areas: prevention by way of information and education; social and health treatment; social and occupational integration of drug addicts; addiction and AIDS; statistics and epidemiology; training of qualified personnel; non-governmental organisations;

- Community action: implementation of the conclusions and resolutions adopted by the Council and the Ministers for Health; information and health education (particularly in schools); statistics and epidemiology; medical prescriptions and dispensing of drugs for therapeutic purposes;

c) repression of trafficking.

- Priority measures: reinforcement of drug checks at external frontiers; cooperation and surveillance within the Community's internal borders; measures to combat the diversion of precursor chemicals and other essential chemical products; measures to prevent the recycling of revenue from illicit trafficking; strengthening of judicial and legal systems; statistics;

d) international action.

- Priority measures: implementation of the UN conventions and the UN world action programme; cooperation with the main producer and transit countries; cooperation with the other developed consumer countries.

This European Plan was to provide the framework for the development of a genuine Community effort on drug matters, despite the lack of any clear Community competence under the Treaty of Rome, as amended by the Single European Act.

The revised version of the European Plan, approved by the Edinburgh European Council of 11 and 12 December 1992, reiterated and updated its priorities, at the same time taking into account the results obtained, such as the political agreement reached in June 1992 on the draft Council Regulation setting up a European Monitoring Centre for Drugs and Drug Addiction, and the organisation of the first

European Drug Prevention Week, which took place from 16 to 22 November 1992. The revised Plan also noted the Commission's 1992 report on national policies and Community action to reduce drug demand.

The integrated approach as set out in the revised Plan looks to the future, insofar as it states that "the proposals for the future Plan should endeavour to achieve a satisfactory balance between demand reduction, law enforcement and international actions, and consideration will need to be given to the budgetary provisions which will need to be allocated". (Document CELAD 126 of 3 December 1992, p. 8).

**B. Instruments adopted, and the implementation of the first two European Plans (1989-1993).**

1989-1993 saw the adoption and implementation of a series of instruments, and Community instruments in particular, covering the priority issues identified in the European Plans to Combat Drugs, instruments which provide important safeguards for the future at a time when the Union must define its medium-term strategy on this scourge of modern society. They are described in brief below, following the same structure as adopted in the Plans themselves :

**1) Horizontal aspects**

**i) Coordination within and between Member States**

The Comprehensive Multidisciplinary Outline adopted by the International Conference on Drug Abuse and Illicit Trafficking in Vienna, in June 1987, stressed the need to set up a drug control coordination structure in all States, bringing together the public players, the private players and the associations involved in the fight against drug addiction.

The Member States of the European Community have set up such coordination structures. These vary from country to country in their composition, their organisation, and their mandates. Through CELAD (the European Committee to Combat Drugs), which was set up in December 1989, these national structures have been brought together and have been able to establish fruitful cooperation.

**ii) The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)**

A common diagnosis of drug addiction in Europe, leading eventually to the setting up of a monitoring centre<sup>21</sup> was also among the measures suggested in President Mitterrand's October 1989 initiative.

In 1990, at CELAD's request, the Commission conducted an initial feasibility study concerning the idea of a monitoring centre. The first European Plan, adopted by the Rome European Council in December 1990, noted this study with

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<sup>21</sup> The need for a mechanism of this type had already been stressed in Mrs Scrivener's European Parliament Report on the Fight Against Drugs (EP document I-11079/81 of 5 March 1982) as well as the Stewart-Clark report on the drugs problem in Community member states (EC Publications Office, Luxembourg, 1987).

satisfaction, adding that the monitoring centre's brief should cover not only the social and health aspects of drugs but also other aspects, including trafficking and enforcement. On the basis of a more detailed feasibility study by the Commission, confirmed by CELAD, the Luxembourg European Council of 28 and 29 June 1991 decided to approve the setting up of a European Monitoring Centre with a general information mandate concerning drugs.

CELAD having concluded that the Monitoring Centre should be an "agency under Community law", the Commission presented to the Council on 27 January 1992 a "proposal for a Council regulation on the establishment of a European Monitoring Centre for Drugs and Drug Addiction". After lengthy negotiations the Regulation, which is based on Article 235 of the EEC Treaty, was adopted by the Council on 8 February 1993.<sup>22</sup> It came into force on 30 October 1993, after the European Council had decided that the Monitoring Centre's seat should be in Lisbon.

The Regulation states that "the Centre should be entrusted with the task of furnishing overall information which will help to provide the Community and its Member States with an overall view of the drug and drug addiction phenomenon; this task should not prejudice the allocation of powers between the Community and its Member States with regard to the legislative provisions concerning drug supply and demand". The Monitoring Centre will be supported by a network of national information centres on drugs and drug addiction, known as REITOX. While the Monitoring Centre is required to give "special attention" to demand reduction during its first three years, it should be in a position from the start fully to play its part as a European "compass" to chart the drug phenomenon, and should thus help the Member States and the institutions of the Union when they need to take policy decisions in this field.

## 2) Demand reduction

Both of the European Plans state that reducing the demand for drugs in Europe should be a high priority within any integrated drug control strategy.<sup>23</sup> Similarly, demand reduction is cited as crucial in important reports adopted by the European Parliament.<sup>24</sup>

Since 1986 the Ministers for Health meeting within the Council have sought to put this political will into practice. From 1989 onwards, they adopted a series of resolutions and conclusions requiring the Commission to support the actions of the

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<sup>22</sup> Council Regulation (EEC) No 302/93 of 8 February 1993, OJ No L 36 of 12.2.1993.

<sup>23</sup> \*European Programme to Combat Drugs. CELAD report to the Rome European Council of 13 and 14 December 1990, Doc. CELAD 126, pp. 3-9 and 25-28.

\*CELAD report to the Edinburgh European Council of 11 and 12 December 1992, pp. 10-16.

<sup>24</sup> \*Report on education for health and drugs misuse in the Member States of the European Community and the Council of Europe. Sir J. Stewart-Clark.

\*Report on the drugs problem in the Member States of the Community. Sir J. Stewart-Clark, pp. 61-83.

\*Report on the development in the Community countries of drug-trafficking related organised crime. Mr Cooney (April 1992)

Member States by taking initiatives or carrying out work in particular fields, for example:

- creation of a European network of health data on drug abuse (Council Resolution of 16 May 1989),
- prevention of AIDS in intravenous drug users (Conclusions of 16 May 1989),
- reliability of analysis of body fluids to detect the use of illicit drugs (Conclusions of 16 May 1989),
- implementation of coordinated measures for preventing drug addiction and coping with drug addicts (Conclusions of 13 November 1989),
- drug data and improvement of their qualitative and quantitative comparability (Resolution of 4 June 1991),
- treatment and rehabilitation of drug addicts subject to penal measures (Resolution of 11 November 1991),
- creation of a framework for cooperation and Community action in the field of public health (Resolution of 27 May 1993).

These various initiatives by the Health Ministers over the years have permitted the examination of priority questions and the launching of important joint initiatives, thus encouraging the emergence of a Community-wide health approach to drug addiction.

Worthy of particular mention in this context are the two Commission reports on demand reduction in the Member States and the Community (1990 and 1992)<sup>25</sup>, the first European Drug Prevention Week (16-22 November 1992), the Seminar in Athens from 3-5 March 1994 on the management of drug addicts in prison and the support to the carrying out of coordinated preventive actions by, for example, supporting the setting up and the management of networks such as the European Foundation of "help" lines (FESAT). In addition, the adoption of the Regulation establishing the Monitoring Centre responds to the Member States' requirements for better information on demand reduction and epidemiology, the Centre's main priorities. These measures, in addition to having been approved by the European Council and encouraged by public opinion, provide appropriate inspiration, by virtue of their content, their objectives and their impact, for the proposals which the Commission is now formulating on the basis of Article 129 of the TEU.

### 3) Reducing and preventing trafficking

The first two European Plans identified six priority areas for joint action by Member States to combat drug trafficking:

- 1) reinforcement of drug controls at external borders;
- 2) cooperation and surveillance within Community borders;
- 3) combating the illicit manufacture of drugs by measures to prevent the diversion of precursor and other chemicals essential for such purposes;
- 4) measures against the laundering of proceeds from illicit drug trafficking;

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<sup>25</sup> Doc. Com(90) 527 Final and SEC (92) 725 Final

- 5) strengthening of legal and judicial systems;
- 6) statistical information.

Up until 1993 most of these activities were carried on within inter-governmental groups (The TREVI Group and the MAG 92 Group for activities 1 and 2; the specialist G7 Task Forces (CATF and FATF) for activities 3 and 4; and the United Nations for activity 5). However, the inter-governmental approach has now been augmented by Community measures in some of these areas, particularly 3 (the precursors regulation and directive), 4 (the money-laundering directive) and 6 (establishment of the Drugs Monitoring Centre). The main measures taken in these areas are outlined below.

a) **Completion of the Internal Market**

**Intra-Community monitoring of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances ("drug precursors")**

Council Directive 92/109/EEC of 14 December 1992 on the manufacture and the placing on the market of certain substances used in the illicit manufacture of narcotic drugs and psychotropic substances<sup>26</sup> is chiefly designed to establish intra-Community monitoring of certain substances frequently used for the illicit manufacture of narcotic drugs and psychotropic substances, with a view to preventing such substances being diverted from licit trade. This Directive was adopted on the basis of Article 100A of the EEC Treaty, in anticipation of the completion of the Internal Market, and complements Regulation (EEC) No 3677/90 on the control of international trade in precursor products.

**Classification for the supply of medicinal products for human use**

Council Directive 92/26/EEC of 31 March 1992 concerning the classification for the supply of medicinal products for human use<sup>27</sup> stipulates that the competent authorities must specify the classification of medicinal products into:

- medicinal products subject to medical prescription,
- medicinal products not subject to medical prescription.

The Council also adopted two other directives on 31 March 1992, one concerning the advertising of medicinal products for human use and the other concerning the wholesale distribution of medicinal products for human use.

b) **Control of international trade in precursors**

The 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances includes an article on precursor control (Article 12). The Council subsequently adopted a Community regulation which introduced a Community system of surveillance of exports of these products to third countries

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<sup>26</sup> OJ L 370 of 19.12.1992, p. 76. The Annexes to this Directive were modified by Commission Directive 93/46/EEC of 22.6.1993.

<sup>27</sup> OJ No L 113 of 30.4.1992, p. 5

(Council Regulation (EEC) No 3677/90 of 13 December 1990). This lays down measures to be taken to discourage the diversion of certain substances to the illicit manufacture of narcotic drugs and psychotropic substances<sup>28</sup> (Regulation based on Article 113 of the EEC Treaty). This Regulation was amended in March 1992<sup>29</sup> to incorporate the recommendations produced at international level by the Chemical Action Task Force (CATF) created by the Group of Seven most industrialised countries (G7), and was subsequently augmented by Council Directive 92/109/EEC of 14 December 1992, which dealt with the manufacture and placing on the market of precursors within the Community itself.

**c) Prevention of money laundering**

On 10 June 1991 the Council adopted the Directive on prevention of the use of the financial system for the purpose of money laundering<sup>30</sup>, with the aim of preventing and prohibiting money laundering as well as providing for penalties. This directive incorporates the main recommendations of the G7 FATF concerning the financial aspect of money laundering.

**d) The work of the TREVI Group**

The TREVI Group was created (as was CELAD later) by a European Council decision, namely the Rome European Council of December 1975. It was organised in the form of an inter-governmental satellite in the European context, its initial mandate being anti-terrorist cooperation. The Commission was only fully admitted in 1992.

TREVI extended its activities in the mid-1980, at the instigation of Italy, to cover large-scale crime, including drug trafficking. This development was accompanied by the creation of the TREVI III Group, which was set up for this purpose and began with the drug trafficking problem. A second extension led to the creation of the TREVI 92 Group, which was charged with examining issues surrounding the implementation of the Single Act, including drug-related crime. The work on the setting up of EUROPOL and its drugs unit (EDU) represented another extension of the work of TREVI. This work carried out initially under the auspices of TREVI III, was subsequently pursued in the ad hoc EUROPOL group before being inserted in the institutional mechanisms of Title VI of the TEU at the end of 1993. The TREVI Group's work was also incorporated into the two European Plans to Combat Drugs.

At the end of the 1980s, therefore, the TREVI Group was giving priority to combating drug trafficking, organised crime and money laundering. The importance of that work was also reflected by the TREVI Ministers' Declaration of 15 November 1989 and the Dublin Action Programme adopted in June 1990. The following lines of action are a direct result of the TREVI Group's work on drugs:

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<sup>28</sup> OJ No L 357 of 20.12.1990, p. 1

<sup>29</sup> OJ No L 96 of 10.4.1992, p. 1

<sup>30</sup> OJ No L 166 of 28.6.1991

- establishment of national drug information units;
- ministerial agreement on the creation of the EUROPOL Drug Unit (Copenhagen, 2 June 1993);
- appointment of drug liaison officers to countries outside the EEC;
- cooperation in the field of training;
- a common policy on controlled deliveries of drugs;
- a common policy on money laundering;
- creation of a network of permanent correspondents on policing techniques, to assist producer and transit countries;
- institution of coordinated assistance to the countries of eastern Europe to help them rebuild their police services.

#### 4) Action at international level

##### Community acquis

Having participated, on the basis of the Council Decision of 26 January 1987, in the United Nations Conference on Drug Abuse and Illicit Trafficking, held in Vienna in June 1987, and then in the negotiation and adoption of the Third International Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (19 December 1988), the Community became party to this Convention on 22 October 1990 in the area of the Convention covered by Community competence (precursors). The Convention contains specific articles on precursors chemicals and money laundering.

The European Community has also participated actively in the drafting and implementation of international drug control strategies and in the work of the two Task Forces created by the Group of Seven major industrial countries (G7) on the monitoring of chemical precursors (the CATF) and on money laundering (the FATF).

The Council Decision of 26 January 1987 also paved the way for the Community to acquire specific instruments to provide active assistance to producer and/or transit countries. For example, it paved the way for the implementation of an important North-South cooperation programme to support the drug control efforts being made by developing countries through preventive measures, the granting of financial assistance for alternative development and, since 1990, through special preferential trade arrangements for certain countries of Andean and Central America. More recently, the Community introduced a new diversified action programme for Morocco, to support the efforts being made by that country to reduce cannabis cultivation, to combat drug trafficking and to develop the northern regions (where cannabis is at present cultivated).

The Community has also participated in the development of a Europe-wide drug control strategy, based on the regional dimension of the drug phenomenon in Europe, and drawn up at the first Pan-European Ministerial Conference organised under the aegis of the Council of Europe's Pompidou Group (Oslo, 1991). This was updated at the second Pan-European Ministerial Conference held in Strasbourg on 3 and 4 February 1994 under

the auspices of the Council of Europe. Based on the guidelines set out in the 1987 Decision, the European Community has progressively introduced drugs clauses and money laundering clauses into its association agreements with the countries of Central and Eastern Europe. Similar clauses will also be introduced into future agreements with the countries of the Commonwealth of Independent States. The Commission is also developing on this basis an active policy of operational cooperation with the countries of Central and Eastern Europe and the Baltic States, notably through the PHARE programme. In November 1992, the Community approved a pilot regional drugs programme within the PHARE framework covering five Central and Eastern European countries. This pilot programme was reinforced in December 1993 by an additional programme covering a total of eleven countries. The Commission is looking at the possibility of similar actions within the TACIS framework.

In the light of the importance of the diversion of precursors for the purpose of the illicit manufacture of drugs, the Community has concluded agreements with a number of countries considered to be sensitive. These countries (24 to date) have agreed to be placed on a list of countries of destination to which the exportation of precursors from the Community is subject to control. A formal agreement at regional level covering trade control, administrative assistance and technical cooperation is being negotiated with the ASEAN countries; discussion on a similar agreement will soon be held with the countries of Latin America.

Finally, the Lomé IV Convention, the framework for cooperation between the European Community and the ACP (African-Caribbean-Pacific) countries, also provides institutional and financial resources to further the fight against drug abuse and drug trafficking. The Commission has now identified the needs of the countries most affected. This will enable a more in-depth dialogue with the countries concerned with a view to adopting an operational approach in the framework of the European Development Fund (EDF).

#### Political Cooperation

These actions, which form a traditional part of the European Community's relations with its principal external partners, have been accompanied by intense joint diplomatic activity by the Member States and the Commission in recent years vis-à-vis the main producer and transit countries, within the framework of:

- European political cooperation (EPC), and
- the Dublin Group (an informal group providing a platform for consultations between CELAD - i.e. the EC Member States and the Commission -, the United States, Sweden, Japan, Canada, Australia, Norway and the UNDCP).

## THE TREATY ON EUROPEAN UNION AND ITS CONSEQUENCES AS REGARDS DRUGS STRATEGY

The TEU offers an opportunity to strengthen an integrated approach to the drugs problem bringing together as it does in a single institutional framework Community areas (including Public Health in accordance with Article 129), Cooperation in the fields of Justice and Home Affairs (Title VI) and the Common Foreign and Security Policy (Title V). The entry into force of the TEU therefore represents a significant step forward in the fight against drugs, extending the Community's scope for action as well as the scope for cooperation between Member States within the European Union.

The particular fields and the ways in which the new powers conferred by the TEU are exercised differ depending on the aspect involved, and on whether it falls under public health, the common foreign and security policy, or cooperation in the fields of justice and home affairs.

a) Drugs, a "Public Health" priority (Title II, Article 129 of the Treaty)

Article 129 of the TEU makes the prevention of drug dependence a priority subject for Community action in the field of public health, with particular emphasis on research into its causes and consequences and on health information and education. Article 129(1), third paragraph, states that the requirements of drug dependence prevention must be taken into account in other Community policies. In addition, Article 129(3) stipulates that the Community and the Member States shall foster cooperation with third countries and the competent international organizations in the sphere of public health. In November 1993 the Commission forwarded to the Council and the European Parliament a communication concerning the framework for action in the field of public health, including the prevention of drug addiction.

b) Drugs, a priority of "Cooperation in the fields of Justice and Home Affairs" (Title VI)

Article K.1 of the TEU identifies certain "matters of common interest" covered by Title VI, the following of which, without prejudice to the competence of the European Community, relate to drugs:

"

4) combating drug addiction in so far as this is not covered by 7) to 9);

....

7) judicial cooperation in criminal matters;

8) customs cooperation;

9) police cooperation for the purposes of preventing and combating ... unlawful drug trafficking and other serious forms of international crime, including if necessary certain aspects of customs cooperation, in connection with the

organisation of a Union-wide system for exchanging information within a European Police Office (EUROPOL)."

On all of the points in Article K.1, including therefore those related to the fight against drugs, the Council may adopt "joint positions", "joint action" or "conventions". The power of initiative is shared between the Member States and the Commission, with the exception of points 7) to 9) where it lies exclusively with the Member States .

At its first meeting, in Brussels on 29 and 30 November 1993, the Justice and Home Affairs Council adopted an Action Plan on Drugs, EUROPOL and money laundering. This plan takes up and extends the main achievements of inter-governmental cooperation (the TREVI and MAG 92 Groups) and the main elements of the Community action put forward in the first two European Plans.

c) **Drugs, a priority of "the Common Foreign and Security Policy" (Title V)**

Article J.1, paragraph 2 of the TEU lays down the major objectives of the common foreign and security policy, which are, among others:

- "to safeguard the common values, fundamental interests and independence of the Union;
- to strengthen the security of the Union and its Member States in all ways;
- to promote international cooperation."

Article J.1, paragraph 3, provides that the Union will pursue these objectives by establishing "systematic cooperation between Member States" and by implementing "joint action in the areas in which the Member States have important interests in common". The questions to be dealt with by joint action are decided by the Council, on the basis of the general guidelines adopted by the European Council.

The Treaty does not actually identify drugs as a priority area of the common foreign and security policy. The Lisbon European Council of 26 and 27 June 1992 (the first summit after Maastricht), however, conducted an initial examination to identify objectives for the future CFSP. It identified six possible specific priority objectives, one of which was the fight against the traffic in illicit drugs. It also identified the Maghreb and the Middle East as priority regions for application of the CFSP in the fight against drugs trafficking.

## DRUGS BUDGETS 1987 - 1993 (ECU)

	1987	1988	1989	1990	1991	1992	1993	TOTAL
Measures to combat drugs Budget heading 6472, B3 4302; B3 440	-	1,125.000	1,125.000	3,900.000	(1)5,418.000	5,973.000	3,300.000	20,841.000
European Monitoring Centre for Drugs and Drug Addiction B3 441	-	-	-	-	-	p.m.	4,800.000	4,800.000
North-South cooperation schemes in the context of the campaign against drug abuse B7 5045, B7 5080, 949	5,500.000	5,500.000	5,500.000	9,800.000	9,450.000	10,100.000	13,000.000	59,150.000
PHARE programme (countries of Central and Eastern Europe)	-	-	-	-	-	-	2,000.000	2,000.000
<b>TOTAL</b>	5,500.000	6,625.000	6,925.000	13,700.000	14,868.000	16,073.000	23,100.000	86,791.000

(1) including ECU 1 000 000 under heading B3-1006: Information for young people in preventing the use of drugs

**DRUGS BUDGET (mecu)**

INTERNAL CHAPTER

<u>Demand Reduction</u>	<u>1994</u>	<u>APB 95</u>	<u>Line</u>
Public Health	3.3	3.5	B3-440 "Measures to combat drug abuse"
<u>Supply Reduction</u>	<u>1994</u>	<u>APB 95</u>	<u>Line</u>
Precursors	0.83	0.875	B3-440 "Measures to combat drug abuse"
Money laundering	p.m.	p.m.	
Title VI measures	p.m.	[ 5 ]	B5-800 "Cooperation in the field of Justice and Home Affairs"
<u>Horizontal aspects</u>	<u>1994</u>	<u>APB 95</u>	<u>Line</u>
EMCDDA	4.8	5.0	B3-441 "European Monitoring Centre for Drugs and Drug Addiction"
Multi-city networks	1	p.m.	B3-4103 "Measures to combat poverty" (for 1994 credits) New line to be created for 1996
Research studies	0.67	p.m.	B6-622 "Indirect action projects Framework Programme 1994 to 1998" Drugs framework research programme to be set up
Training	p.m.	p.m.	Measures to be implemented and coordinated under the vertical programme

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<sup>1</sup> Total amount : no breakdown yet available for the drugs envelope

EXTERNAL CHAPTER

	<u>1994</u>	<u>APB 95</u>	<u>Line</u>
North/South cooperation	10	10	B7-5080 "North-South cooperation schemes in the context of the campaign against drug abuse"
Phare regional drug programme	2	5	B7-600 "Aid for economic restructuring of the countries of Central and Eastern Europe

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48 TOTAL DRUGS BUDGET : 22.6 24.375

NUMBER OF DRUG ADDICTS

Member States	O + S 1989-1993	CEC - 2nd report Demand reduction 1992	CEC - 1st report Demand reduction 1990	L'Express (7 Oct. 1993) 1990	W.H.O. 1985-1990	NLAD 1990-1991
Belgium	15,000 - 20,000	?	10,000 - 20,000	20,000	?	15,000 - 20,000
Denmark	10,000	10,000	10,000	20,000	10,000	10,000
France	150,000	150,000	100,000	120,000	120,000-150,000	150,000
Germany	80,000 - 100,000	80,000	60,000 - 80,000	100,000	90,000 - 140,000	100,000 - 250,000
Greece	?	?	9,000 - 13,000	30,000	40,000 - 50,000	10,000 - 20,000
Ireland	2,000	?	?	20,000	3,515	2,000
Italy	150,000 - 200,000	150,000	?	150,000	100,000 - 200,000	150,000 - 200,000
Luxembourg	1,000 - 1,500	?	1,800	2,000	1,200 - 1,500	1,000 - 1,500
Netherlands	15,000 - 20,000	21,000	20,000	30,000	22,000 - 24,000	22,000
Portugal	?	?	40,000 - 50,000	50,000	40,000 - 50,000	40,000 - 50,000
Spain	120,000	?	?	100,000	?	120,000
United Kingdom	150,000 - 200,000	35,000 - 90,000	?	100,000	?	150,000 - 200,000
Total	693,000 - 823,500	446,000 - 501,000	250,800 - 294,800	742,000	426,700 - 629,000	770,000 - 1,045,500

DRUG SEIZURES (in kgs)

	HEROIN					COCAINE					CANNABIS				
	Multi-cities study Pompidou Group		Interpol	CCC	MAG	Multi-cities study Pompidou Group		Interpol	CCC	MAG	Multi-cities study Pompidou Group		Interpol	CCC	MAG
	1991	1992	1992	1992	1992	1991	1992	1992	1992	1992	1991	1992	1992	1992	1992
Benelux															
Belgium		183	80	80	7	1,140	1,261	1,261	1,261	7		12,018	1,868	1,868	
Denmark	30	33	18	18	747	20	14	14	14	976		2,035	1,670	1,670	
France	561	262	153	156	831	1,322	1,205	1,278	1,278	21,050		38,011	30,258	30,759	
Germany	1,394	1,399	1,143	1,143	963	1,041	754	1,025	1,025	12,313		3,057	8,137	3,512	
Greece	?	141	123	123	7	4	2.6	2.6	2.6	7		2,986	2,810	2,810	
Ireland	0.2	0.215	0.25	0.25	0	6	2.3	2.3	2.3	1,174		633	380	380	
Italy	1,041	998	174	592	750	1,221	300	551	551	6,070		17,792	34	7,147	
Luxembourg	?	6	6.2	6.3	7	10	11	11	11	7		?	30	31	
Netherlands	406	266	36	36	2,288	2,129	721	721	721	81,292		1,516	24,082	21,083	
Portugal	62	31	3	3	1,094	1,028	115	115	115	7,754		1,657	306	4	
Spain	711	674	198	195	7,574	3,115	2,434	2,432	2,432	195,700		99,252	26,111	26,065	
United Kingdom	450	511	449	449	1,078	2,538	2,250	2,250	2,250	26,000		47,691	44,551	44,551	
Total	4,885.7	4,458	2,383	2,802	14,578	14,374	9,070	9,663	9,663	355,359		221,758	193,667	186,010	

## HEROIN

(SOURCE: Interpol)

	1987	1988	1989	1990	1991	1992
USA	501 kg*	740 kg*	876 kg*	768 kg	1 428 kg	1 245 kg
Germany	319 kg	537 kg	727 kg	844 kg	1 594 kg	1 426 kg
Belgium	140 kg	113 kg	80 kg	288 kg	185 kg	184 kg
Denmark	13 kg	25 kg	34 kg	26 kg	34 kg	33 kg
Spain	412 kg	479 kg	713 kg	887 kg	741 kg	670 kg
France	106 kg	221 kg	302 kg	320 kg	476 kg	323 kg
Greece	73 kg	72 kg	42 kg	35 kg	272 kg	165 kg
Ireland	0 kg 051	0 kg 443	0 kg 398	0 kg 162	-	0 kg 162
Italy	323 kg	576 kg	685 kg	900 kg	1 041 kg	1 330 kg
Luxembourg	0 kg 317	14 kg	0 kg 5	0 kg 1	9 kg	7 kg
Netherlands	517 kg	441 kg	481 kg	532 kg	406 kg	543 kg
Portugal	29 kg	33 kg	60 kg	19 kg	61 kg	54 kg
United Kingdom	31 kg	247 kg	348 kg	608 kg	450 kg	510 kg
Total EC (approx.)	1 963 kg	2 758 kg	4 472 kg	4 459 kg	5 269 kg	5 245 kg

\* Federal totals

**COCAINE (powder)**  
(SOURCE: Interpol)

	1987	1988	1989	1990	1991	1992
USA	43 254 kg	58 640 kg	80 894 kg	74 301 kg	101 802 kg	68 827 kg
Germany	295 kg	496 kg	1 405 kg	2 473 kg	963 kg	1 331 kg
Belgium	269 kg	403 kg	89 kg	538 kg	756 kg	1 221 kg
Denmark	25 kg	9 kg	54 kg	28 kg	39 kg	21 kg
Spain	1 133 kg	3 461 kg	1 838 kg	5 252 kg	7 561 kg	4 414 kg
France	749 kg	584 kg	926 kg	1 840 kg	831 kg	1 025 kg
Greece	26 kg	6 kg	2 kg	33 kg	13 kg	9 kg
Ireland	0 kg 030	0 kg 044	3 kg	1 kg	0 kg 031	10 kg
Italy	326 kg	619 kg	667 kg	801 kg	1 298 kg	1 377 kg
Luxembourg	22 kg	4 kg	21 kg	23 kg	14 kg	11 kg
Netherlands	405 kg	517 kg	1 393 kg	4 288 kg	2 492 kg	3 433 kg
Portugal	222 kg	301 kg	793 kg	360 kg	1 096 kg	1 893 kg
United Kingdom	54 kg	308 kg	537 kg	470 kg (?)	1 086 kg	2 266 kg
Total EC (approx.)	3 526 kg	6 708 kg	7 728 kg	16 107 kg	16 149 kg	17 011 kg