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The College of Europe is a unique and innovative post-graduate institute of European studies which was established in Bruges in 1949. It draws university graduates from a wide range of countries to study and live together. Since its creation, the College has offered courses which closely follow the progress of European integration, continuously adapting its programmes while maintaining the highest standards. The College is characterized by its independence, its bilingualism (English and French), the diversity of its distinguished teaching staff and the multicultural environment of student life.

Following the breakdown of the Berlin wall and the emergence of new democracies in Eastern Europe, it was normal therefore that the College in Bruges be complemented by a campus at Natolin, in Poland. The academic programme in Natolin is based on the fifty years old Bruges experience adopting, at the same time, it to special needs in view of enlargement of the European Union to Central and Eastern Europe. The students of the College of Europe at Natolin come half from EU members and half from Central and Eastern Europe. The College has attracted major public figures, serving as a centre of ideas, organising and hosting a number of conferences on the objectives, processes and institutions of European integration. One of these served as a basis for this publication.

The member States as well as the associated countries of the European Union are both facing phenomena of drug consumption and drug trafficking, which by their very nature know no boundaries and can be considered as an indicator of the problems of societies in transformation.

Candidate countries of Central and Eastern Europe (Poland, Hungary, Slovenia, Estonia, the Czech Republic, Slovakia, Lithuania, Latvia, Bulgaria and Romania) are being used more and more by international drugs smugglers as a transit route but also as target countries, even if the level of local consumption does not yet reach that of Western Europe.

The European Union is increasingly concerned by the issue of drug trafficking and drug consumption and is attaching great importance to the fight against drug and drug-addiction in the programmes of pre-accession assistance.

The conference “Pan-European Platform against drugs “and this publication wish to assess the main drug-related problems of the candidate countries and also to evaluate the instruments given to Central and Eastern European Countries for the fight against drugs at both the EU and the international level.

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I STATE OF THE DRUGS PROBLEMS IN CENTRAL AND EASTERN EUROPE

Growing drug consumption and alcohol consumption in Estonia

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Area (1994): 45,227 sq. km.

Population: 1,491,583 (1.01.1995)

Ethnic division (1.01.1995): Estonian 64,2%, Russian 28,7%, Ukrainian 2,7%,

Byelorussian 1,5%, Finnish 1,0%, other 1,9%

Religious denominations: Lutheran, Orthodox, Baptist

Languages: Estonian (official), Russian and others

Capital: Tallinn (population 434,763 (1.01.1995))

Introduction

Since 1990 Estonia has experienced rapid political, social and economic changes. The use of illicit drugs has increased during recent years. Alcohol related problems, such as mortality caused by alcohol poisoning, drink driving, homicides, suicides etc. have increased dramatically from 1990 to 1994. During the last three years these problems have shown a slight positive declining trend. The so called common narcological registering, treatment, rehabilitation and prevention network which existed previously, has collapsed after the financing and central leadership came to an end. The alternative democratic structure to combat these problems is not yet developed enough. The most reliable data on drug addiction are hospital data, police data of arrests and seizures and the data of population surveys. However on the basis of these data, only limited analysis of the prevalence of drug abuse and patterns of alcohol and drug related problems can be made. The more comprehensive analysis will be made when the new national registering systems for drug treatment demand and for drug related crime are introduced and when the representative population surveys are conducted on a regular basis.

Drug use situation

During the Soviet Period the drug problem disappeared from the public agenda. The borders to the West were closed and drug dealing was strictly controlled by the enforcement institutions. A few patients with opiate dependency were admitted to hospitals. Approximately 80% of

them were non-Estonians. The main illegal substances used were opiates of Ukrainian and Middle-Asian origin (home made liquid from poppy straw) and cannabis.

After 1990 all the so called narcological treatment, monitoring and prevention network, that previously existed, collapsed. It happened because of economic reasons (it was formerly centrally financed) and due to democratic processes (individual right for privacy etc.)

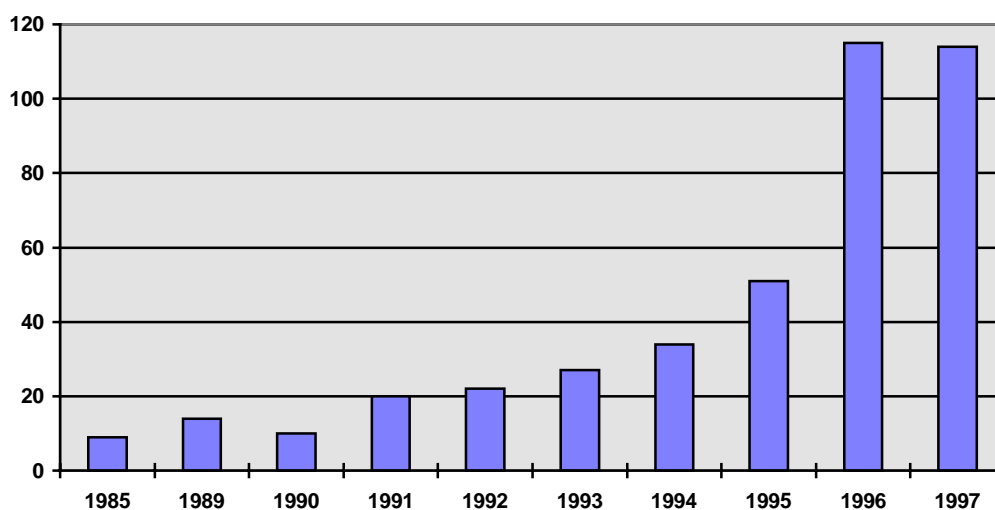
During the last few years the drug scene of Estonia has changed remarkably. However the illegal drug consumption and prevalence of drug addiction in Estonia is still lower than in many Western-European countries. But there is a rapid increase of drug-connected offences and demand for treatment. The cannabis consumption is increasing and it is continuously promoted by the youth culture. The increased demand for treatment and seizures during last year reflects growing cocaine consumption.

Drug- connected offences registered by the police.

| | | | | | | | | | |
|------|------|------|------|------|------|------|------|------|------|
| 1985 | 1989 | 1990 | 1991 | 1992 | 1993 | 1994 | 1995 | 1996 | 1997 |
| 9 | 14 | 10 | 20 | 22 | 27 | 34 | 51 | 115 | 114 |

Source: Statistical Office of Estonia

Drug-connected offences (No.)



T. Kariis 1997

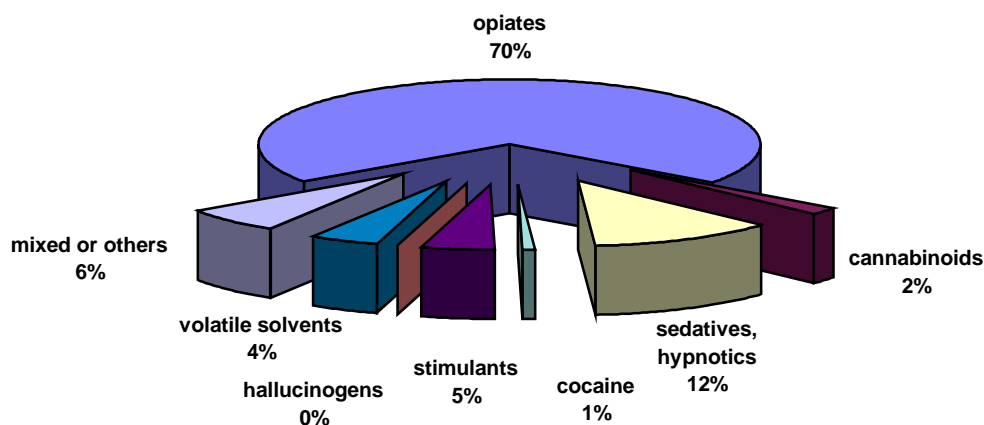
There is no central data collecting (monitoring) system on the total number and structure of drug users. The information about the earlier and current drug abuse situation is based primarily on treatment data and expert estimations. During the last 30 years the number of drug addicts treated per 100.000 inhabitants increased from 0,7 in 1970-ies to 65,6 in 1997. In total 959 drug addicts were treated in Estonian psychiatric hospitals in 1997. 70 % of them were injecting opiate addicts. The use of opiates is mostly spread among Russians (97% of the treated opiate dependants were Russian speaking young males) while Estonians mainly use cannabis and stimulants. Cocaine has emerged during last year. Compared with previous years a higher treatment demand by cocaine abusers was registered. In April 1998 the Finnish police

arrested at Helsinki airport an Estonian trafficker, possessing 2,6 kg cocaine. Two days later the police seized 2,5 kg of high purity cocaine at Tallinn Airport.

The structure of patients with psychiatric and behavioural disorders due to psychoactive substance use (ICD-10 F11-F19) treated during 1997 in Estonia, is reported as follows:

| | |
|----------------------|-----|
| opiates | 70% |
| cannabinoids | 2 % |
| sedatives, hypnotics | 12% |
| cocaine | 1% |
| stimulants | 5% |
| hallucinogens | 0% |
| volatile solvents | 4% |
| mixed or others | 6% |

* Preliminary data



The new cases of addiction constitute 47% of the number of clients. Most treated addicts are relatively young - 70% are under 40 years old.

Source: V. Jänes Tallinn Wismari Hospital

Psychiatrists estimate that almost all the main types of abused narcotic and psychotropic substances are available in the illegal market of Estonia.

Consumption of cannabis and stimulants seems to increase most rapidly among youth. There is already a reported increase in psychiatric treatment demanded by them.

For the first time, in 1997 the official statistics indicate 3 of cases death due to the drug overdose.

The first population survey using a direct questionnaire method was carried out in 1994 by the Statistical Office of Estonia. It shows that in the age group of 18-24 years 3,5% of males and

1,1% of females and in the age group of 25-34 years 5,5% of males and 0,5% of females have experienced narcotic drugs.

School survey “Student `95” based on the international ESPAD questionnaire estimates that 7% of 15-16 years old students have tried narcotics (5% girls, 11% boys). The most common illegal substance used was cannabis. 2% of Estonian girls and 5% of Estonian boys and 9% of non-Estonian girls and 21% of non-Estonian boys have once tried cannabis.

Source: A. Narusk IISS 1996

According to EMOR, a Gallup subsidiary operating in Estonia, in 1997 12 % of students of grades 10-12 have once tried illegal drugs.

Alcohol consumption and related problems.

Estonia has a long tradition of producing and drinking alcoholic beverages. Harmful use became real at the end of the eighteenth century regarding the increase in the distillation of liquors in the manors for trade. At the beginning of 20-th century the influence of the temperance movement to the peoples behaviour was quite strong and the harm to society due to alcohol consumption was relatively low. Alcohol related problems have been one of the major public health problems in Estonia for more than 30 years. The current alcohol policy is totally liberal compared to previous years. During the Soviet period alcohol production and sale was monopolised. There was only one state spirit distillery and one state alcohol industry in Estonia. Now there are more than ten producers of vodka in Estonia. The government issues licences for the production of alcoholic beverages, import, export and wholesale. The municipal governments are issuing licences for alcohol retail trade which cost 1500 kronas (approx. 100 \$) per year. In 1997 more than 6000 alcohol retail sale licences were issued. It makes one shop or bar per 250 inhabitant. The availability of alcohol has never been so easy as now. There are no limitations on the hours of sale. The alcohol consumer must be at least 18 years old. The response of the national government to alcohol since independence has been on the one hand to rely on taxes to fund the national and municipal budgets, and on the other hand to let the legal supply grow unfettered, hoping that it will eventually crowd out the illegal supply. Excise duties and sales tax revenues from alcohol make up approximately 10% of the national budget. In the 80-s the official registered consumption of absolute alcohol litres per capita was as follows:

| 1984 | 1987 | 1988 | 1989 | 1990 |
|------|------|------|------|------|
| 11,2 | 6,7 | 6,2 | 6,8 | 6,0 |

According to the official data (*Estonian Human Development Report 1997* <http://www.ciesin.ee/undp/nhdr97>) The alcohol consumption (litres per adult) was:

| 1992 | 1993 | 1994 | 1995 |
|------|------|------|------|
| 11 | 9,9 | 10,9 | 12,6 |

At the same time the violent death rate (mortality due to injuries, poisonings, drowning, traffic accidents and homicides and suicides) rose.

| year | total No. violent death | alcohol poisonings | homicides |
|------|-------------------------|--------------------|-----------|
| 1990 | 2054 | 164 | 173 |
| 1991 | 2212 | 206 | 169 |
| 1992 | 2355 | 255 | 302 |
| 1993 | 2758 | 306 | 391 |
| 1994 | 3497 | 429 | 423 |
| 1995 | 2950 | 342 | 329 |
| 1996 | 2323 | 262 | 292 |

In 1994 life expectancy of men (61,1 years) was 12 years less than the average of European Union member states (73,4 years) (*HFA, WHO European Region 1996*).

Deaths from chronic liver disease and cirrhosis in 1994 were twice as high as they were in 1990.

Standardised death rate per 100 000 population from alcohol poisoning 10,4 in 1990 rose to 28,6 in 1994. (*State Statistical Office 1995*)

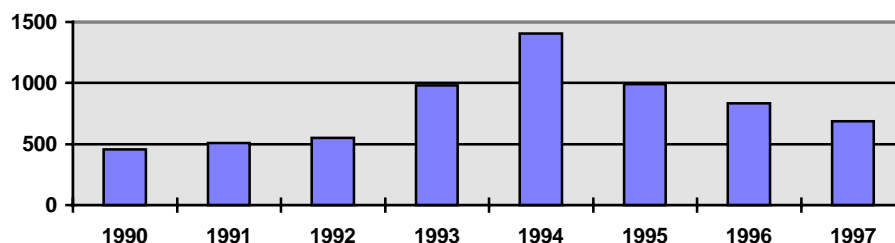
Juvenile drinking offences, motor vehicle crashes and total death and injuries caused by drunk drivers are also on the rise.

The year 1994 was probably the most violent and hardest year of the transition period.

Since 1995 the number of alcohol poisonings, suicides, homicides, drowning etc. is slightly declining.

The incidence of acute alcohol psychosis is following a similar trend:

No. of treated patients with alcohol psychoses



Conclusion

The reasons of described rapid changes in society should be properly studied and analysed in-depth. The public health professionals believe that the society is stabilising and health promotion and prevention activities have their impact on minimising alcohol-related problems in the future. Perhaps road crashes will remain one of the biggest causes of the high violent death rate. In the case of drug problems, probably the prevalence of addiction will increase in the coming years until it reaches the same level as it is in other European Countries.

Drug trafficking and urban criminality in Romania

Major Marian Dragan, Ministry of Interior, Romania

Since 1990 Romania, a former communist country, has come into line with other European countries, through deep political, economic and social changes, according to acknowledged democratic principles. Those changes are also found in the increase in criminality.

Romania is targeted by international networks specialized in drug trafficking, due both to its geographical position and its size of population, the number of inhabitants being approximately 23 million.

We have to notice that the criminals in Romania are becoming more and more specialized; Mafia-like structures have merged and typical cases of organized crime have increased in number.

With this background, one of the more serious crimes Romania faces, among others, is the illicit trafficking of narcotics and Psychotropic substances. Closely connected to this phenomenon is drug addiction.

Thus, efforts are being made to develop an effective drugs control policy, including necessary measures. This includes the strengthening of cooperation and the coordination of coherent activities according to the existing provisions of the European Agreements, in an attempt to counteract the continual escalation of the drugs problem in Europe.

Illegal drug trafficking at both international level and street level, in addition to drug addiction, began and developed in Romania as a result of a number of favorable internal & external factors and conditions:

- Romania's position on the route linking the Orient and the Occident for commercial transport and tourism;
- the war in ex-Yugoslavia which shifted the classical Balkan route northwards, mainly through Bulgaria - Romania - Hungary in the direction of Western European countries;
- Romania's geographical position, located next to countries and regions renowned for drugs production and consumption;
- the important networks' needs to create new routes for transporting drugs, as well as a market for drugs;
- the rights and liberties won by Romanian nationals following the 1989 Revolution; among these, the most important include free traffic and the opening of the borders. We also underline the legal or illegal arrival of a great number of foreigners in Romania;
- an additional factor is the lack of legislation in this particular field, the lack of the technical means needed to detect narcotics, the lack of specialists within the Police force, the Customs Administration and the Ministry for Health;
- the lack of state structures and persons within institutions who can find out, know about and fight against the phenomena of drug trafficking and drug addiction. People should be nominated to carry out the aforementioned tasks, in institutions such as the Church,

institutions for education and social protection and members or organizations of the civilian society.

- social and economic problems generated by deep changes in the society;
- group demonstrations among the youth: curiosity and overreaction;
- the gradual transformation of Romania's role - from its initial role of transit country to a deposit country;
- the establishment of connections between criminals in Romania and criminals abroad;
- the lack of knowledge amongst Romanian nationals concerning the dangers of drug abuse and existence of prevention programs in the field;
- corruption amongst members of State institutions whose task is to discover and fight against the phenomenon; they are pursuing their own interests instead of those of the institutions they represent.

Once Romania entered the global sphere, drugs trafficking gradually appeared and the phenomenon of street trafficking developed and also drug abuse.

Drug abuse and trafficking are defined in the following stages:

1. The current level of the phenomenon in Romania.

Firstly, the categories of persons involved in such activities vary taking into consideration that historically:

- until 1989 the persons involved were mostly foreigners or the following Romanian nationals: medical staff who could handle medicines with narcotic content, sick people who became addicted as a result of a treatment with such medicines for a long period of time, and alcohol addicts who were combining the alcohol effects to the effect of some medicines;

- after 1989 the persons involved in such activities are mainly represented by:

- a) foreigners who settled in Romania legally or illegally and who experienced such habits in their countries of origin;
 - b) tourists or businessmen from abroad;
 - c) Romanian criminals who got into contact with narcotics while abroad with the purpose of committing other crimes. They got connected to persons of the same category in the countries they went to;
 - d) ex-Romanian nationals who emigrated before 1989 and who came back as tourists or took back Romanian citizenship and were involved in drugs consumption and trafficking in the countries they come from;
 - e) foreigners who study in our country;
 - f) youth in schools, high schools or universities;
 - g) different categories of artists;
 - h) Romanian nationals (mostly women) married to foreigners or who have business relations with foreigners;
 - i) Romanian nationals working abroad
- * forming groups to consume and distribute drugs on ethnic grounds;
 - * setting distribution and consumption centers on zone criteria (neighborhood, streets);

- * concentrating such activities in the vicinity of University campuses, schools and high schools;
- * the appearing of leaders specialized in drugs distribution and the creation of their own networks;
- * recently, the involvement of Mafia-like groups composed of gypsies in the activities of distribution and consumption. They establish direct connections among their members and other criminal organizations from abroad;
- * focusing foreign drug traffickers' attention on our country and running activities meant to create, develop and conquer the Romanian market;
- * the increase in drug addiction amongst youth and adults from the age of 13 to 40;
- * the organization and functioning of the system of distribution and consumption either within a small group (ex.: a certain community) or a pyramidal structure;
- * variation of prices and variation of the existence of some drugs on the market led to polyaddiction although there is a trend to stick to one single drug;
- * considering the three forms of drugs consumption (occasional, recreational and drug addicts), the number of those who have already got into contact with drugs is extremely large if we also consider that it started only 4 years ago.

2. Characteristics of drug trafficking and abuse in Romania

2.1. Types of narcotic drugs trafficked and abused

Generally speaking, any type of known narcotic drugs may be trafficked and abused in our country;

- a difference in types of drugs being abused is seen in relation to various geographic regions of our country;
- there is a differentiation between types of drugs abused, in relation to different ethnic groups;
- youth prefer to use light drugs;
- the type of drugs trafficked varies according to the geographical areas in the world where production is known;
- among addicts, the most popular drugs are: heroin, opium, hashish, cannabis, medical drugs, cocaine, amphetamines, volatile substances.

The highest percentage of drugs on the market consist of drugs produced outside our country; yet, there is a trend of increasing production in our country of light drugs for personal use (cannabis) both by classical methods (natural growing), as well as by sophisticated methods (hydroponics growing).

Another phenomenon worth mentioning is the fact that, the decrease in purchasing power of abusers, leads some of them to abuse alcohol mixed with the use of medical drugs, in order to obtain a similar effect to the real narcotic drugs.

2.2. Methods of abuse, concealment and bringing in of drugs

- * drugs brought into our country are concealed in all possible ways known;
 - in luggage, on the body, swallowed, in cars, busses, TIR trucks, electric and electronic equipment, in food, etc...
- * drugs are shipped:
 - by plane;
 - by sea;
 - by railroad.
- * the methods of abuse are differentiated by the categories of existing drugs:

- for heroin, the most popular method of abuse is by inhaling, followed by injection and smoking. We are witnessing that the injecting of drugs as method of abuse is gaining field, thus encouraging the spread of certain diseases such as AIDS, hepatitis and others.

2.3. Categories of persons involved in the trafficking and abuse of drugs

- * ethnic groups;
- * groups distinguished by:
 - musical criteria (i.e. Rockers, Hardest, Metallists);
 - fashion criteria (i.e. Punks);
 - religions criteria (i.e. Satanists);
- * criminal elements, mostly from the ethnic gypsy group
- * students, pupils;
- * artists;
- * businessmen.

3. The connection between the trafficking of drugs and urban crime

In Romania, drugs trafficking and abuse activities are generally conducted in urban areas, due mainly to the following favorable conditions:

- great number of inhabitants and thus the possibility of easy recruitment of future potential clients;
- concentration in the urban areas of university campuses, schools and highschools;
- increased possibilities of hiding offenders and reduced chances of discovery.
- existence of numerous places and means favorable to the conduction of such criminal activities;
- concentration in the urban area of persons and places for depositing goods and valuables;
- concentration of firms, production and depositing facilities, banking units, etc;
- increased possibilities of association for committing crimes;
- easier to find hiding places for goods and valuables obtained from committing antisocial acts and trading them later on;
- easy mobility and diversity of means of communication.

As regards Romania, it may be stated that upon its appearance, the illicit drug trafficking and drug abuse phenomenon has developed, as have developed related crimes which in general have taken various forms, rapidly adapting to the new realities.

There are mainly three forms that connect the illicit drugs trafficking to other criminal activities:

- the committing of antisocial acts for the purpose of procuring drugs;
- the committing of antisocial acts as a following of drug abuse;
- the committing of antisocial acts during the trafficking of large quantities of drugs.

Generally speaking, drugs trafficking is combined with or supplemented by many other crimes that have influence both at a national as well as at an international level.

Drug trafficking is supplemented also by criminal acts that cross the borders of our country, such as the trafficking of stolen vehicles, white slavery and illegal immigration, weapons trafficking, money counterfeiting, money laundering, economic crimes, illegal border crossing, etc.

At the national level, for the purpose of procuring drugs or as a consequence of drugs abuse, crimes committed include thefts of vehicles, illegal possession of weapons, burglaries and thefts from shops and private houses, prostitution, robberies, pick pocketing and others.

A large part of these crimes are committed in the urban area, especially due to the existing favorable conditions mentioned above.

In Romania, transformations within society have led to profound changes in respect of the bio-psycho-social coordinates of the personality of citizens, a phenomenon manifesting itself more intensely in the urban area.

Elements such as family, school, place of work, organizing of free time, alcoholism, the economic factor and also civilization, legislation and punishments, have been profoundly affected and have determined or favored the criminal phenomenon, including illicit drug trafficking and abuse.

Persons involved in the drugs trafficking and abuse before 1989, have been mostly foreigners; yet lately we witness with concern a larger and larger involvement of Romanian citizens in such activities. Most of those Romanians are teenagers and young people, members of ethnic groups, mostly men but also women.

4. The organizational and legislative framework for carrying out the activities to combat illicit drug trafficking and abuse

For the knowledge, study and fight against this scourge, the police, through its authorized unit, the Antidrug Service of the Squad for Countering Organized Crime and Corruption, conducts specific activities in cooperation with other police units, with other institutions and authorized bodies, governmental or non governmental. It is in constant contact with police forces from all over the world and other international bodies.

The legislative framework of the activity is Article 312 of the Criminal Code, modified with new amendments, the punishments provided for illicit drug trafficking being life imprisonment or 3 to 25 years imprisonment, being intended to discourage this crime.

We can also mention that a special law regarding illicit drug trafficking and abuse has been drawn up and has been submitted to the Parliament for passing, and is soon to be approved. At the same time, the activities conducted are in full accordance with the provisions of the conventions of which our country is a signatory.

- The Single Convention on Drugs, 1961;
- The Convention on Psychotropic Substances, 1971;
- The Convention Against Illicit Drugs Trafficking and Psychotropic Substances of 1988.

II DRUG DEMAND REDUCTION STRATEGIES WITHIN AN INTEGRATED APPROACH

1) The importance of prevention

Drug Demand Reduction Policy at the European Union level

Alexandre Berlin Ph.D., European Commission, DG V

1. Introduction

We must never forget that the reason these drugs are illicit is because of their harmful effect on health.

The Maastricht Treaty in 1993 has clearly placed drug addiction among the major health scourges to be tackled at the European Community level. Article 129 of the Treaty on Public Health spells clearly the Community competence on health matters related to drugs.

The new Amsterdam Treaty provision in the new Article 152 on public states clearly that “the Community shall complement the Member states actions in reducing drug-related health damage” Furthermore, we must not forget the opening provision of article 152 that “a high level of human health protection shall be ensured in the definition and implementation of all community policies and activities. This clearly points out to the need for the other drug related policies to be supportive of the health aspects.

Actions in the area of “health and drugs” are clearly at the cross-road of the public health policies and the overall plan of the fight against drugs.

In this respect we are very pleased that the forthcoming special session of the UN devoted to drugs (UNGASS) in June 1998 is likely to formally acknowledge the key role of drug demand reduction policies in the fight against drugs, an area which had been developed in the past.

The Commission has always pursued a multidisciplinary approach towards the fight against drugs. This approach has been attacked by some as being vague and ineffective. They grossly underestimate the complexity of the problem. They are also misleading the public in pretending that there are simple solutions to the drug problem. For there are none and we should not pretend otherwise. Nor should we pretend that there are any quick short-term solutions. Progress has been and will continue to be slow.. Nonetheless, we need to be careful not to fall into the trap of believing that the problems are too big to overcome.

2. The Programme of Community Action on the Prevention of Drugs Dependence

Even before the entry into force of the Maastricht Treaty in 1993 actions related to prevention of drug abuse were carried out at EU level.

However the Maastricht Treaty gave the possibility to the Commission to propose to the Council and the European Parliament a Community action programme for the prevention of drug use. It was finally adopted in December 1996 and it runs until the year 2000, with a budget of 27 MECU for 5 years.

The key objectives of the programme are:

- encouraging co-operation between the member states,
- supporting their actions
- promoting co-ordination between their policies and programmes

The programme is based on the respect of the cultural and social diversity of the member states, and consequently also the drug prevention strategies and policies. It must be stressed that the Treaty excludes expressly any harmonisation of legislation in this matter.

The programme identifies 16 priority actions to be implemented progressively, under the two headings;

- data, research and evaluation
- information, health education and training

It should be also recalled that both the 4th and 5th R&D programmes include research on drug addiction among their areas of specific research.

Among the main achievements of the action programme to date has been in particular the setting up of European wide networks of NGK's on a large variety of topics.

Over a dozen such networks are active at present involving both organisations (several hundred) and individual members.

Its objectives are to:

- develop drug telephone Help lines in the member states
- improve quality of services, including the development of new tools
- exchange of good practices
- develop easier access to information

As far as the year 1998 is concerned the programme of work covers the following axes:

- Youth and synthetic drugs
- Drug prevention week
- Marginalised groups and health problems linked to tourism
- Improving practices

More specifically the drug prevention week will focus on the multidisciplinary approach and drug prevention. Awareness raising in society and partnership. Organisations in Central and Central Europe are welcomed to participate.

3. Opening of programmes to the participation of candidate countries.

This brings me to a delicate point as far as our friends in Central and Eastern Europe are concerned.

All the health promotion programmes (4 programmes: Cancer, AIDS, Drugs and Health promotion) are opened to the participation of the candidate countries, the interest and wish to join has been very minimal up to now (36%) as compared with programmes in other areas (68%).

Only three countries have asked to participate in the drugs programme. Why this lack of interest, is there no problem or is not recognised what can you do.
Let me now be more positive.

Ms. Vahout will speak this afternoon about the regional programme on drugs.

I should like to draw your attention to the possibilities offered by the LIEN programme to facilitate NGO co-operation.

New call for proposals have to be submitted by 31 May 1998.

The Commission and UNESCO have established PEDDDRO (Networking of Information in the field of drug abuse prevention through education) involving a large number of organisations. You are invited to join.

4. Concluding remarks

Let me conclude by stressing again the importance of giving adequate attention to drug demand reduction in any overall action plan to fight drugs and by drawing the attention of the candidate countries to the importance in participating in such programmes.

Co-operation with the Lisbon Drugs Observatory is essential. As member of the Management Board I can testify to the excellency of the work performed by the Observatory.

Overview over Drug Demand Reduction Strategies in the European Union

Margareta Nilsson
EMCDDA
Head of Demand Reduction Unit

What is Demand Reduction?

The term or the concept of “demand reduction“ is ambiguous. This is to some extent due to the fact that “demand reduction“ is an English-language term which has no direct equivalents in most other European languages. So, the understanding and use of “demand reduction“ is inconsistent in Europe which complicates an international communication in this field.

The EMCDDA has a pragmatic, operational concept for demand reduction that includes interventions which are aimed at decreasing the demand for drugs or the harmful consequences of drug use at an individual or at a collective level. The scope of demand reduction interventions is wide and consists of many facets. At one end of the continuum, preventive actions try to avoid the onset of any demand for drugs, with a wide range of diverse actions targeted at large groups (examples: school programmes, mass media programmes and community based programmes). At the other end are measures of a determined scope directed at individual drug users (for example outreach work, treatment, substitution programmes). Generally, each action leading to a drug user refraining from drug use at a certain point in time, or refraining from especially harmful practices involved in drug use is comprised by the operational concept of demand reduction.

National, regional and local level of drug policy implementation

Drug demand reduction and harm reduction work is differently organised in the EU countries. At national level the Ministries of Health, the Interior, Education, Justice, and sometimes Defence are the principal bodies responsible for organising, co-ordinating or carrying out measures to reduce drug demand. They devise framework guidelines and methods of demand reduction action, and may also provide training and continuing education of professionals working in the drug area.

The overwhelming majority of drug demand reduction work is locally based, and equally cross-sectoral: the health, education, social, and criminal justice systems all have their role in drug demand reduction. Depending on the country, activities and measures are undertaken by the staff of independent psycho-social and addiction counselling centres, by public administrations and/or by voluntary organisations. However, the co-ordination between the activities of different groups and different sectors is not always successfully solved.

Overall strategies

Throughout Europe there is an increasing consensus to give priority to prevention of substance use or the prevention of drug addiction. The overall objective is to prevent, postpone and reduce the use of drugs and to minimise the social and health consequences of substance abuse. The reduction efforts mainly concern substance abuse with a high risk of detrimental effects. As far as prevention is concerned, a health promotion approach is predominant, aiming at increasing personal and social life skills.

In most of the European countries drug addiction is understood as an illness and as a social problem. Since about the mid-eighties, in response to the AIDS epidemic, abstinence-oriented strategies have been complemented with risk-reducing approaches. This thinking has found its way into the treatment structures for addicts. Instead of being purely abstinence oriented, methods and approaches are multi-varied and multi-faceted like the drug users themselves. The previously accepted scheme of treatment altered when substitution with methadone or other substances from the opiate group was introduced. Whereas in some countries a major goal nowadays is harm reduction, in others it is still discussed.

Drug demand reduction can be analysed and characterised along different dimensions, e.g. basic strategy, objectives, target groups, types of drugs and settings. In this presentation I will cluster the description of demand reduction approaches in the European Union in the areas of prevention, early intervention and treatment.

Prevention

Early Childhood Interventions

Throughout Europe, it is commonly agreed that the family and later on the school are very important in cultivating different attitudes towards life in general and towards drugs in special. Therefore, both instances have a great influence in teaching children a life-style which promotes social, physical and emotional health. In spite of that, first childhood prevention is not a very well developed area in demand reduction strategies in different European countries.

But the attention drawn to this field has been growing in the last years and it is expected that new activities are going to emerge in the next future.

For example, for some years there have been some addiction prevention projects in nursery and primary schools in Germany and Austria. The idea behind the 'toy-free kindergarden' projects is the (temporary) 'banishing' of conventional toys from the kindergarden. Through their (temporary) absence the children and the staff are all forced to discover other forms of play and activity, thus encouraging the development of creativity and imagination and greater contact with other children. The avoidance of early object-fixations is seen as a favourable influence in the prevention of drug use. The staff generally need to be trained or shown how to run the project and parental involvement is also required.

School prevention programmes

School programmes are at the core of primary prevention measures in all countries of Europe: drug prevention is an educational priority to be integrated in different subjects. The overall objectives of the preventive action at school are to strengthening pupils in their personal development, raising their self-esteem and problem-solving skills for conflict situations and peer-pressure and aiming at the development of a critical attitude in order to promote their own health and that of others, as well as personal and social skills to prevent and control substance use.

In the EU countries, drug education is a mandatory component of the health education and health promotion curriculum in secondary schools by law; in some Member states drug education is also required or recommended in primary schools. School prevention programmes are provided in varying ways, from drug education without fixed guidelines concerning form, contents and scope provided 2-3 hours per term to comprehensive programmes with life-skills

training or different educational programmes for pupils, parents and teachers with dissemination of manuals, newspapers or use of videos.

In many countries guidelines and teaching materials on prevention and specific teacher training courses are provided centrally. Ministries of Education have decided on action programmes on addiction prevention designed to stimulate discussion and have developed teaching packs.

The first objective is to sensitise teachers to what drug prevention really is and to integrate it in the daily life of the classroom, the second is to give teachers instruments they can lean on. Even if prevention is most of all a question of attitude, teachers often want concrete material to support them in their work. Most prevention programmes are aimed at the latter years of primary education and the early years of secondary education, although the tendency is to begin at increasingly younger ages. Parents involvement is very important when addressing the prevention of substance abuse of children and schools in most encourage parents to participate in their preventive efforts.

Some comprehensive school programmes have been evaluated, with generally encouraging results.

Leisure time activities

A wide range of activities for youth outside the school setting are carried out in communities, church youth organisations, youth centres or sports clubs. In most EU member states, projects of active leisure organisations at the local level are predominant, such as rock concerts on addiction prevention, anti-drug discos, cultural events like performances and theatre, media involvement, seminars, discussion groups, ambulatory exhibitions and travel experiences. Often, this type of programmes is initiated by counselling centres of various voluntary organisations and associations, or by authorities with the aim to increase the attractiveness of staying clean and promote alternatives to drugs.

Dance settings

A specific type of prevention relates to ecstasy and other synthetic or dance drugs. Such prevention activities tend to fall into five major areas:

1. The provision of information and advice for the general public. Sometimes the approach at the same time alarmed the public and heightened the interest of many young people.
2. Material on ecstasy and synthetic drugs have been integrated into school teaching and other youth contexts, as a part of general drug prevention
3. Support, advice, information and counselling for young people who are experimenting with dance drugs or at risk, organised by drug services or youth workers at large rave events.
4. Leaflets, flyers, and “safer drug use” materials are distributed in clubs, record shops etc.
5. Self help initiatives, initiated by users. Groups exist who try to inform other ravers about the risks of use and to prevent harm and accidents. They may go to clubs regularly to inform, offer advice and suggest referral if necessary. They develop “safe use” material and use space in music magazines.

The majority of these prevention projects specific to synthetic drug use have a harm reduction approach, but no project explicitly encourages drug use. Instead, the idea is to encourage a moderate, less risky consumption.

Community programmes

Community activities can be classified into two groups: 1. Programmes with the specific aim of preventing addiction and 2. Comprehensive health promoting programmes with the aim of

encouraging a healthy lifestyle and environment, and thus striving towards (non-specific) beneficial effects, including the avoidance of drug use.

As community programmes are very demanding in terms of funding, motivation, acceptance, involvement and commitment of municipalities, schools, formal and informal groups, and different administrative bodies, they are implemented to a varying degree in the EU. In many countries they are mainly found in metropolitan areas (e.g. Lisbon in Portugal, Amsterdam in the Netherlands, Vienna in Austria or Paris in France) or they are spread all over the country as one aspect of a multi-faceted program of drug prevention.

Comprehensive community programmes are challenging because of the wide scope of activities to be done. As drug use is understood as a form of social behaviour, embedded in social norms and the social network of the community, positive changes in the community and the social environment have to be achieved in order to obtain positive effects for their population. Therefore, the greatest effects are not expected by single campaigns but by multi-factorial approaches targeting several groups, the effects of each reinforcing the other.

Mass media campaigns

Mass media are used for drug prevention to a different extent in the different European countries. While some of the Members don't run mass media campaigns because of pronounced scepticism regarding their value, believing that drug information should be provided in the form of dialogue, others run campaigns, either nation-wide or regionally.

The general aim of mass media campaigns is to draw public attention to and rise interest and awareness of the drug problem. Campaigns with radio and TV spots, ads in newspapers, and posters are often supplemented by activities such as workshops, seminars, information material as well as youth rallies and local projects. Evaluation shows that well made mass media campaigns can, indeed, be successful. For example, a German advertising campaign won the attention and interest of 3 million people, approximately.

Early intervention

Telephone help lines

Different types of telephone help-lines are available in the EU countries. Some are national telephone services, where counselling is anonymous, free of charge and gives a 24 hours service. The help-lines provide an open ear, support and counselling as well as information on substances, their effects and risks. They also refer to other services. The help-line are called up by drug users, their immediate entourage, the broad public and professionals. In some countries there are no nation-wide telephone help-lines but they are an integral part of counselling centres or treatment services. Here, too, the counselling is anonymous, free or with minor costs, generally available within working hours on weekdays and it is directed at abusers and their relatives.

An evaluation of the Italian national telephone help-line showed that the majority of the callers were family members of drug users (57 %), mainly mothers, the second largest group were drug users themselves (26 %). Questions about counselling and psychological support were most frequent (34 %), followed by request for information on treatment centres and other services (27 %). The same pattern is reported from other countries.

Outreach work

The amount and structure of outreach work is varying between EUROPEAN Member States, and as the profiles of the drug users change, new needs and demands appear. Whereas in the northern part of Europe is felt very important to address drug users actively and outreach services are well-structured and established, in the southern countries, with exception of Italy, outreach work is not very developed.

The street work is mainly carried out by low-threshold services or by youth and drug counselling centres, who are offering services and assistance that may include active contact to people experimenting with drugs and assistance to drug users, information about counselling and treatment possibilities, health care and HIV and hepatitis testing. Services generally guarantee anonymity.

Outreach work can be classified into different areas: a) outreach work that operates in streets, station concourses, pubs, b) outreach work focusing on organisations rather than on individuals (hostels, syringe exchange schemes, youth clubs, schools and prisons) and c) outreach work visiting the homes of the targeted population.

Generally, outreach work gains more and more importance, especially in metropolitan areas and cities with severe drugs problems. There is a growing tendency to have mobile drug units, and to give everyday practical help within the standard drug treatment centres.

Criminal justice system

Early intervention in the criminal justice system concerns how drug users are treated at the arrest and court stages.

At the arrest stage, almost all countries have demand reduction activities at the arrest stage. Giving drug information to arrestees is most common, and most drug information given to people arrested is provided by police officers. The information given varies although details of helping services is the type most frequently provided. Information is primarily given to arrestees known or thought to be drug users. The information is provided in a variety of forms, both written and spoken.

In addition to giving information, in many countries there are activities aimed at referring drug users to helping services. Police officers are the professional group most involved in putting drug users in contact with helping services, but other professional groups are involved, normally alongside police officers, in some countries. In the majority of countries these contacts with helping services are offered to drug users on a voluntary basis, but in some countries, contact may be reinforced by legal sanction.

In many countries information is given to drug users appearing before the courts. The information is predominantly about helping services and the legal penalties of drug use. Probation officers are the key professional group involved in providing this information. In all countries, legislation exists which extends the possibility of drug treatment as an alternative to a legal sanction. However, in many countries this legislation is rarely utilised. A reason for this is that in a number of countries such legislation is very recent and to date has had limited effect. In most countries, the approach is determined by a focus on offending that is drug-related rather than drug use per se. In these circumstances, the probation service plays the lead rôle and the primary concern of the intervention is to prevent re-offending.

Treatment

Outpatient treatment

All over Europe, outpatient centres carry out an extremely comprehensive and diverse range of measures oriented towards the individual person and towards more general aspects of psycho-social work. They often act as reference points for wider treatment networks. Some of these outpatient services are public services other are run by different charity organisations and others again by voluntary groups, who often are community based and offering care for drug users and their families in their social environment.

Outpatient treatment is usually offered by doctors, psychotherapists, psychologists and social workers depending on the primary goal of counselling or treatment. In some centres all of these different professions are joined together to provide an optimal treatment which is adopted to the heterogeneity of the patient groups and their needs. Individual work with patients consists of all kinds of measures: to contact users actively on an outreach basis, practical support services such as emergency beds, contact shops or crisis interventions, psycho-social counselling, diagnostic measures. Many outpatient centres provide abstinence-oriented therapy, or include methadone maintenance. Another emphasis of outpatient work can also be group-oriented approaches such as group therapy, leisure time activities or social activities.

However, after-care or rehabilitation is also carried out by outpatient facilities. Another important aspect of outpatient centres are the motivation and preparation of clients for treatment in other centres, particularly in inpatient centres. Different outpatient facilities are merging with each other and with inpatient services in treatment systems.

In-patient treatment

Specialised departments of psychiatric hospitals, general hospitals, special drug wards, and therapeutic communities offer inpatient treatment in the EU. Their approach range from pure detoxification to comprehensive addiction therapy programmes and may also include short-term services and services for special groups such as very young drug users or women. Due to co-morbidity problems, patients with additional psychiatric problems are usually treated in the psychiatric system.

Many treatment facilities in Europe practise a specific therapeutical model, such as the 12-step or Minnesota model, Therapeutic Community or Phoenix House model, "Italian model", the Daytop type of communal treatment or socio-educational treatment with efforts to structure everyday life in residential groups. Therapeutic communities are predominant in southern European countries. Most centres, however, follow a pragmatic-eclectic approach, with elements from different types of psychotherapeutic orientations. Usually the treatment model is also based on individual treatment, characterised by an individual treatment plan depending on the problem analysis of the patient, a confidential relationship between the client and staff members.

Substitution treatment

Substitution treatment exist in all EU countries, but the extent and scope of services vary widely across Europe. Oral methadone is the most widely available substitute drug in the treatment of drug dependence in Europe, other drugs used are codeine, SUBUTEX®, and LAAM®. Services range from slow, medication-supported withdrawal to long term maintenance, which in reality is most common. It is very difficult to get an overview of the

number of persons treated with methadone and other substitution drugs, as in many countries there is no central registration, but it is estimated that, in the EUROPEAN, around 200.000 persons were treated with substitution drugs in 1996, three times more than in 1993. A pilot project administrating heroin for maintenance is starting this year in the Netherlands, and heroin prescription is discussed in several other countries.

Treatment in prisons

In all EU-countries drug use in prisons has received considerable attention. It is generally recognised, that prisons have significant levels of drug availability and that individuals in detention are at increased risk of contracting HIV, hepatitis B and C as a result of increased high-risk behaviour. The number of imprisoned drug addicts is estimated to an average of one third of all prisoners with variations between countries. Many of these are HIV-positive, e.g. 60 % among the drug-dependent prison inmates in Spain. In each country attempts have been made to overcome the problem. Two issues are generally relevant in the prisons' drug policy of most countries. The first one is harm reduction, convincing inmates of safe sex and safe use principles. The second one is coercing imprisoned drug users to undergo treatment (treatment may substitute part of the sentence).

Many prisons set up "drug free units", where drug-free-zones with special privileges and less restrictions are established, in which prisoners can voluntarily give up using drugs (which is checked by urine tests), and which offer the inmates individual and group counselling with trained specialist staff and also occupational facilities. Departments of counselling and ambulatory care in prisons operate activities like detoxification at entry, treatment of psychopathological problems due to addiction and other treatment including substitution treatment in some countries.

Rehabilitation

Aftercare

Depending on the patients situation and status, different models for after-care are run in the Member States. After-care is usually oriented towards individual patients needs and are mainly psychosocial and psychotherapeutic, sometimes for several years after treatment. There are also temporary therapeutic homes and housing communities which offer assistance for integration in a drug-free environment. Specific services give aid concerning reintegration into the job market: They offer low threshold job opportunities with on-the-job-instruction and complementary psychosocial counselling.

After-care and rehabilitation are the last link of the integrated treatment chain in all European countries. They are provided by community services, the municipal social charity or health care services, outpatient services, special inpatient facilities, or counselling services and GPs. However, there are also specific after-care organisations. If there are specialised after-care or half-way houses, they usually co-operate with inpatient centres in order to allow a good transition from a completely secure and sheltered environment to a more normal every day life.

After-care and rehabilitation for released prisoners seems to be a problem all over Europe. Although in all countries, some support for released prisoners is provided, it does seem clear that there are relatively few demand reduction activities for drug users released from prison, especially given the high level of drug treatment provided within prisons.

Overview of Drug Demand Reduction strategies in Central and Eastern Europe

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This presentation is based on the contribution of the Phare Drugs PCU and Phare Drug Information Systems project to the EC for the Chapter 4 of the 1998 Annual Report of EMCDDA. It provides an overview of the drug demand reduction strategies in the 13 Phare partner-countries of central and eastern Europe: Albania, Bosnia and Herzegovina, Bulgaria, the Czech Republic, Estonia, the former yugoslav Republic of Macedonia, Hungary, Latvia, Lithuania, Poland, Romania, the Slovak Republic and Slovenia.

1. BACKGROUND

Most of the central and eastern European (CEE) countries now face increasing problems associated with the traffic and transit of illicit drugs as well as a rise in local drug consumption. Yet despite the shared experiences over the last few decades the region cannot be seen as homogeneous. Firstly, the geographical, historical and cultural differences between the countries are as great or even greater than those between the EU Member States. Secondly, in some countries, important changes began taking place as early as the late 1970s and 1980s, which might have influenced present extend and patterns of drug use (R. Hartnoll), and consequently the policies and strategies developed might have been influenced.

Similarly to these in EU Member States the development of national drug policies and strategies in the CEE countries since the late 1980s has two main roots: firstly, the nature of the drug phenomenon which affects broader segments of the society; and secondly, the multidisciplinary character of the these problems demanding a nationally co-ordinated multi-sectorial and multidisciplinary response (EMCDDA 1997). In the period of transition additional catalysis in this process are the actions of a number of international organisations: the European Commission (mainly the Phare Multi-beneficiary Programme for the Fight Against Drugs), UNDCP, Council of Europe, WHO, IHRD of the Lindesmith Centre.

Additionally, in the process of enlargement of the EU under the pre-accession strategy the candidate countries will need to reorient or adjust their drug control policies towards adoption of the EU acquis in the field of drugs.

This overview is based on national and international research, expert missions, as well as on national- and city-reports provided by the CEE countries for the European Commission (mainly for the Phare Drugs Programme) and international organisations. Although in recent years drug-related policy relevant information in the region has increased both in quality and quantity, only a few countries have developed a standardised methodology of monitoring it. The information flow within the countries relies to a large extent on the human network and personal contacts between individuals working in different sectors. Data collection and exchanges from regional to national levels is fairly organised within some sub-sectors (hospital data, police data, customs information, etc.), but is insufficient from national to regional and local levels. Very rarely do NGOs communicate data on a regular basis to the governmental structures.

2. DRUG SITUATION

MAIN TRENDS AND RECENT DEVELOPMENTS OF DRUG USE IN CEE COUNTRIES

- **HEROIN USE** IS STILL ON THE INCREASE IN MANY CEE COUNTRIES.
- USE OF ILLICIT DRUGS IS CONCENTRATED IN **BIG CITIES**, BUT THERE ARE SIGNS OF IT SPREADING INTO SMALLER TOWNS.
- **CHANGING PATTERNS** OF USE HAVE BEEN RECENTLY OBSERVED IN A NUMBER OF COUNTRIES - SMOKING AND CHASING.
- **INJECTING** REMAINS THE PREDOMINANT ROUTE OF ADMINISTRATION OF OPIATES (AND OF PERVITIN IN THE CZECH REPUBLIC).
- **HIV** PREVALENCE IN THE REGION AS A WHOLE REMAINS LOW AMONG THE DRUG USING POPULATION, INFORMATION ON THE PREVALENCE OF **HEPATITIS B AND C** AMONG INJECTING DRUG USERS IS SCARCE.
- **COCAINE** IS INCREASINGLY AVAILABLE ON DOMESTIC MARKETS BUT CONSUMPTION SEEMS LOW AND LIMITED TO SPECIFIC GROUPS.
- RECREATIONAL USE OF **CANNABIS** IS INCREASING.

- THE USE OF **AMPHETAMINE-TYPE** STIMULANTS SEEMS TO PLAY AN IMPORTANT ROLE IN THE NORTHERN PART OF THE REGION.
- THE USE OF **SYNTHETIC DRUGS**, IN THE CONTEXT OF A 'DANCE-CULTURE' IS A RECENT PHENOMENON THROUGHOUT THE REGION.
- THE AWARENESS OF DRUG USE AND OF THE NEEDS OF **SPECIFIC POPULATIONS** (WOMEN, PRISONERS, ETHNIC MINORITIES) IS RISING.

3. THE RESPONSE:

3.1 Legislation

A particular effort is being made by the candidate countries to adapt their legislation to meet EU standards in law all countries have adopted new legislation in the drug field (most laws dating from 1996 onwards), often influenced by and derived from international policies. This process vary in its intensity and approach throughout the region. From adopting a number of laws on different drug issues (e.g. Lithuania, Hungary) to the concept of one comprehensive drug law. For the last Poland being a sole example. On the other pole are countries like Albania limiting their activities to amendments in the Penal Code and Bosnia and Herzegovina with no new legislation on drugs.

In general, illicit drug consumption in itself is not an offence, although "drug pushers" are sanctioned. Drug production and trafficking is a crime with penal sanctions in all countries. In a small number of countries, treatment as an alternative to penal procedures exists.

All countries except Albania are signatories to all three *UN Conventions* on narcotic drugs, psychotropic substances and against illicit trafficking (1961, 1971 and 1988) and have ratified them (exceptions: Bosnia and Herzegovina is in the process of ratification). The Strasbourg Convention (the Council of Europe Convention on Laundering Search, Seizure and Confiscation of the Proceeds of Crime) of 1990 has been signed by Hungary, Poland, Slovenia, the Slovak Republic, Bulgaria, the Czech Republic and Lithuania; the latter three have already ratified the convention.

3.2 National co-ordinating structures

On top of the adoption of legislative instruments, the CEECs have been organising their actions in the field of drugs, and stimulated by international organisations, incl. international NGOs, have started with the creation of co-ordination structures at a high governmental level: *inter-ministerial co-ordination bodies*.

The functioning of sub-regional structures for dealing with the drugs issue like the Baltic Sea States Group or the Vysegrad Group, as well as specific drug related assistance programmes (for example the EU Phare Multi-beneficiary Programme for the Fight Against Drugs,

UNDCP, WHO and CE Pompidou Group activities), have further boosted the development of actions in a multi-disciplinary way, in order to deal with drug related problems.

All countries except Bosnia and Herzegovina and Romania (reportedly in a process of), have established an inter-ministerial body on drugs for planning and co-ordinating drug control efforts between the different ministries involved. Often, sub-committees or working groups are created, involving experts of the participating ministries, to deal with specific issues. At a more technical level, these groups have been charged with the preparation of new legislation, projects and reports, as well as of national programmes on drugs. As a result a comprehensive, multi-disciplinary national programmes on drugs have been adopted in several of the CEE countries. Only in very few of them, non-governmental organisations are routinely involved in inter-ministerial bodies and in policy-making (e.g. Slovenia, Latvia). A decentralisation of the approach, as well as the involvement of community concerns is only at a beginning point or non-existent in most countries.

In some countries, the inter-ministerial co-ordination group is a rather passive tool that exists only on paper (e.g. in Albania). In other like Hungary due to changes, the inter-ministerial committees are being reviewed and are undergoing changes. In Poland the committee is currently abolished and a new structure is under creation. This flexibility however, enables the creation of a structure that is best adapted to meet the specific needs of a changing society and the problems it is faced with at the time. The lead of the co-ordinating body is taken up by one of the participating ministries; in half of the countries the ministry of Health, Social Affairs or Welfare. In some countries, it falls directly under the Prime Minister's office (the Czech Republic) or lies with the Ministry of Interior (Latvia).

3.3 Drug demand reduction

In countries such as Poland, drug demand reduction has been implemented for more than two decades, while in others, systematic efforts have only been made over the last two to three years. Despite all efforts made in recent years, drug demand reduction is still a *low priority* in most countries, or in the cases of Albania and Bosnia and Herzegovina seems to be no priority at all. This is clearly reflected in the allocated budget. In most countries, the balance of the division of resources between law enforcement and the drug demand reduction sectors seems to come out largely in favour of supply reduction. Where formal drug demand reduction policies and strategies are adopted and the legal framework is up-to-date and supportive (e.g. the Czech Republic, Hungary, Poland, the Slovak Republic, Slovenia), drug demand reduction is much better positioned. *Resources* designated to demand reduction are difficult to compare but seem to vary greatly. Most structures are understaffed and there is a need for trained and equipped human resources. In the last few years, however, pools of well-trained experts have been created, mainly supported by bilateral and international assistance.

Speculation

Only four countries can afford to spend the equivalent of 1 ECU per capita or more annually directly on DDR. Apart from the limitation in budget provision, there are further constraints concerning its distribution: in countries with nascent DDR services. In some countries up to 80% of the entire (national) DDR budget seems to be spent on stationary and institutional treatment and development of medical manpower, another 10% on other health related expenditures and just 10% on all the remaining DDR sector activities.

Treatment in hospital settings still predominates, with psychiatrists and other health professionals in leading positions. In-patient treatment services, often limited to detoxification, are available in all countries, with the total number of beds varying between 10 (Bosnia and Herzegovina) and 1300 (Poland). Specialised outpatient and non-residential services are less developed with the notable exceptions of the Czech Republic, Poland, Hungary, the Slovak Republic and Slovenia. The actual relapse rates cannot be stated as treatment outcome has not been evaluated. Slovenia, the Slovak Republic, Hungary and the Czech Republic are developing regional treatment systems, but in most countries treatment services are scarce or absent outside the capital cities. Out-patient drug-free and long-term residential treatment are the modalities with the fastest development, with a number of new services having been set up over the last few years in almost all of the countries. Even as the current state of drug demand reduction in most CEE countries is characterised by a dominance of the treatment sector, only a few countries can offer a range of treatment and rehabilitation services. Poland should be separately mentioned, as it has developed a wide residential rehabilitation network since the end of the 1970s. Early intervention, alternatives to imprisonment, social re-integration, aftercare, self-help groups and other components of the care cycle are rarely offered or missing.

In some countries like Poland, Hungary and to some extent Bulgaria the preventive effort started earlier than in the rest of the region. **Prevention** is pointed out as a top priority in most national strategies and programmes, and a number of structured and consistent drug awareness and prevention programmes have been developed over the last few years. School based drug education and health promotion oriented programmes are increasingly available and popular. In some countries positive recent developments have been observed, such as the involvement of the media in supporting awareness and preventive efforts. The role of the community, in particular the family, is increasingly recognised in prevention, but efforts for their involvement are still to be made. In general more attention needs to be placed on evaluation of the preventive efforts in order to increase their effectiveness.

Within the last few years, **outreach and harm-reduction** services have been added to the demand reduction sector. The availability of substitution (methadone maintenance) programmes has increased throughout the region. They constitute one of the main treatment modalities in Slovenia and Lithuania, while in Bulgaria, the Czech Republic, Estonia, the former Yugoslav Republic of Macedonia, Latvia, and to some extent Poland they still function on a pilot basis or as a single treatment service. In Hungary, methadone is prescribed on an individual basis. Low-threshold services and syringe and needle exchange schemes are increasingly available with more non-governmental organisations focusing their activities on this field. Still, harm reduction options are offered only in a few locations and not even in all major cities.

The need for active involvement of **non-governmental organisations** in demand reduction is not fully recognised and they often remain under-utilised in most of the countries. NGOs as a rule are inexperienced and rely on a single source of funding, often from international organisations. For the majority of the countries, NGOs specialised in demand reduction are uncommon, in those where they exist, their involvement is primarily in prevention. A disadvantage that has become visible in the last few years is the lack of community orientation.

Only the Czech Republic, Hungary, Poland, the Slovak Republic and Slovenia regularly allocate funds from their drug demand reduction budget to NGOs. Some of these NGOs have relatively experienced staff with developed skills and competence. Poland for example has more than 100 NGOs active in demand reduction. The main needs in all the countries are strengthening capacity and performance, enlarging the funding basis, and building co-operation with governmental organisations.

As a positive general trend, it can be noted that drug *research* and *needs assessment* are increasingly attracting attention with *evaluation* of interventions and *qualitative studies* recently introduced. Several countries are planning or have recently completed studies of specific groups or treatment populations, often using qualitative methodologies. Many countries strive to involve more professions into demand reduction and to adopt a *multi-disciplinary* approach to drug problems.

4. CONCLUSION

The majority of countries concerned are capable of implementing *certain* recommendations regarding overall strategies and coordination as well as component-wise on their own and thus strengthen capacity of their respective DDR sector without outside assistance. *Other* measures would call for international cooperation and a few countries might need substantial international guidance and assistance. Short term measures include basic strategic adjustments for the least advanced countries, and more sophisticated modifications for the more advanced ones. At this crucial stage, vision rather than financial resources are required for the countries with a more advanced DDR sector, while those with a less developed DDR sector commonly also have much less absorption capacity. It can be recommended that international financial assistance is provided for strengthening the DDR sector, specifically for its non-health sub-components.

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2) The case for a more active involvement of civil society

Role & Development of NGO's in the field of Drugs in associated Countries

1. Development of NGO's in the Czech Republic

Martina Těminová, SANANIM, Czech Republic

In the forum of the *Pan-European Platform against Drugs* I wished to discuss about the status and role of non-governmental organisations in the associate countries and specifically, I would like to explore the situation in the Czech Republic.

Let me begin with a short story. Once upon a time there was a King and Queen who had beautiful daughter baby - Sleeping Beauty. But unfortunately an evil fairy laid a curse on the little Princess. On her eighteenth Birthday, Sleeping Beauty, as she wandered through the castle, pricked herself with a thorny rose and fell into a very deep sleep, together with the entire kingdom. One hundred years later, it so happened that a handsome Prince arrived in the kingdom and found the beautiful, sleeping Princess and kissed her. And with this kiss, the Sleeping Beauty and everybody in the kingdom awoke.

Indeed, the operation of non-governmental organisations in the Czech Republic has found itself in a similar situation. Before World War II there were a number of communities established here operating in each village or small town, - amateur drama groups, fire fighters and many other voluntary and charitable organisations. Unfortunately, their activities discontinued completely with the emergence of the communist regime and, like our fabulous Sleeping Beauty, it had to „sleep“ for almost fifty years. Immediately after the Velvet Revolution many non-governmental organisations of varying natures and levels were formed that had to find their *raison d'être* within a newly born society. In the beginning, they did not gain much favour with the public. The idea was that the policy of such organisations was to promote relief for the needy and to employ volunteers receiving no wages. The organisations were not expected to render professional services.

A significant contribution to the development of the non-profit sector in the Czech Republic was made by Ms. Olga Havlová, the first wife of the Czech president, Václav Havel, through her foundation “The Committee of Good Will”. But soon the non-governmental sector started to undertake relatively extensive activities in the field of drug related issues. It has proved that non-governmental organisations are really capable of providing very flexible responses to the in-the-field situations. At that time there were some middle and short-term therapeutic programs for addiction treatment and ambulatory treatment operated under the state authority, while the non-governmental organisations started to operate low-threshold centres, outreach programmes, therapeutic communities, day-care centres and after-care centres. The status of non-governmental organisations working with drug related issues changed in 1993, when Dr. Bém, who had previously gained experience with work in both state control and non-governmental sectors, was appointed to the post of Secretary General of

the National Drug Commission. This resulted in a complete change of approach toward non-governmental organisations. From that time, non-governmental organisations were no longer seen only as organisations providing additional services, but were also given the status of fully qualified participants in the system of drug-control policy.

The document *Conception* and the programme of drug-control policy between 1998-2000 period directly defines the role of non-governmental organisations and the proposal for the solution of issues related to non-governmental organisations. The *Conception* acknowledges the advantages that provide non-governmental organisations, such as their high flexibility, ability to respond rapidly to the needs of a particular field and lower administrative costs. It also takes into account the following problems:

1. Financing of non-governmental organisations:

- The non-governmental sector is financed in its overall majority, by the relevant ministries, based on applications for grants. Only recently have controls been designed, which can prevent duplication of the allocated funds.
- Other possible sources are foreign foundations and the PHARE programme.
- As for drug-related issues, there are no grants from potential sponsors who have not yet shown interest in area.
- A non-governmental organisation can get some funds from a health insurance company, provided that it has the status of a health centre.
- Grants are given for one particular year only, and there is no guarantee that an institution will be awarded the same grant on the following year.
- Non-governmental organisations are obliged to contribute to the total project cost with up to 30% of their own funds, which is, indeed absolutely unreal, unless such means are provided by foreign countries.
- Organisations may not use their grants for the salaries of managerial staff, which often results in incompetent management in the non-governmental sector, as many organisations can not afford the top-level management staff.

2. Effectiveness and quality of the services rendered

Until now, no licence or evidence of proficiency was required for the establishment of a programme or drug addiction centre. People with no professional qualifications often established the drug centres. Therefore, the assessment of these institutions varies from highly professional through charitable to unacceptable. Many organisations (including those under state control) do not monitor their efficiency. No drug educational system has been designed for the non-medical staff. Accordingly, the following dispositions were passed:

- A part of the non-governmental sector is to be organised within the framework of the Association of Non-Governmental Organisations, whose main purpose is to enhance the

professional level of the non-governmental organisations, defend their interest and lobby for them

- A proposal has been issued that includes requirements for minimal health care standards and guidelines for effective primary prevention.
- Each ministry shall grant its own licences and authorisations, subject to compliance with these minimal standards and no grants will be given without such licence or authorisation.
- The Ministry of Health and Ministry of Education are responsible for the implementation of the programme and for further education of staff members who deal with drug addiction.

The main internal problem of non-governmental organisations is the process of management development. Most directors of non-governmental institutions are professionals who are experienced in work with drug addiction, but not in management. They acquire the required skills in the course of operating an organisation, but this inevitably means that some mistakes are made unnecessarily. Thus, the requirement for development of managerial skills within the non-governmental organisations is of fundamental importance.

At the beginning of my address, I told you a story with a happy ending, as most fairy tales do. And I believe that the story about our Sleeping Beauty - the non-governmental organisations - will eventually end happily, as well. We can then congratulate our Sleeping Beauty upon her awakening and rejoice in her becoming a recognised and wise Queen, who will promote good relations with others, while her kingdom flourishes to the benefit of all.

2. The Complex Role of NGOs in the Field of Drug Use : the Polish case

Marek Zygodlo, MONAR, Krakow, Poland

Non Governmental Organisations have become increasingly popular in Poland. Usually, they are established around „leaders” or group of people who have the following features: These include, for example:

- a need to be active
- a need to assist and share their experiences
- integration skills
- are influential and have authority
- are giving and supporting

The process of establishment and development of NGOs is natural. It comes from increased self-awareness, acknowledgement of responsibility for others and from the fact that some people feel a need to create or change reality.

The creation of an NGO is a joint response to a newly recognised problem. It is a social phenomenon – the common will to find proper solution to a problem or influence the process of development. In a democratic and free environment, an NGO offers a chance for personal development of the active members.

Some might say that NGOs are a sort of Task Force for better response to social needs. Contrary to the national or local governmental organisations that usually are inert, NGOs have the following skills:

- mobility
- flexibility
- efficacy

Model solutions of the problems have been already developed by NGOs. These are „projects” with evaluation and monitoring systems that assure dynamism of the project and the possibility of flexible modification during its implementation.

The quality of NGOs vary depending on human resources, technical equipment, level of professionalism and inventiveness in finding solutions to problems and - on the other hand - vary depending on the level of sympathy of the potential provider of funds for the projects.

The following conditions:

- service quality
- friendly system of law
- access to funds
- quantity of independent organisations
- aim at increased influence
- leader’s level of consciousness

contributed to establishment of NEW QUALITY of NGOs that we could call UMBRELLA UNIONS.

These are formal and informal unions of associations, foundations and societies. The fastest integration process can be noticed among NGOs working in the field of social assistance. In Poland, this process is „in statu nascendi”.

Many organisations which have good relations with providers of funds, are not sympathetic to the idea of co-operation with other organisations. This is a result of incompetence and of the unjustified fear of losing sponsors.

However, those who have the real chance for development and success are the organisations which have a client’s needs and rights as a base of activity. The real power of NGOs and UMBRELLA UNIONS comes from the clients, their families and environment. These people are potential voters who have a right to control the authorities and social changes.

Despite the authorities’ resistance - the umbrella process has already started and will support the development of NGOs and democracy and social integration in general.

Some problems to be solved:

We can identify the following problems that require quick solutions:

- **equal access to funds** e.g. A public hospital is entitled to obtain public funds for so called investment: reconstruction, equipment, etc. NGOs which run long term projects can obtain the official title ‘Non-public Health Institutions’ (e.g. Rehab Centre) but do not have the chance to finance their investments from public funds.
- **equal right to services** NGOs cannot provide methadone maintenance programs. According to the legal act on Drug prevention, such programs can be run only by Public Health Care Institutions.
- **lack of rules and regulations related to voluntary service** - According to the Polish Labour Code, voluntary service does not exist at all. Everyone who

provides a voluntary service can be described in the court as an ordinary employee who should be paid for the work provided on the same basis as other employees. Additionally, a volunteer has no right to leave or to include duration of his/her service in a pension fund.

- **not clear VAT tax system** - very often NGOs receive grants from private sponsors or from abroad for the purchase of equipment. These kind of expenses should be automatically free of VAT, however Tax Officers are reluctant to allow NGOs avoiding taxes. To obtain this kind of agreement is definitely not easy, if possible at all.
- **lack of legal Act on non-profit Organisations** - which could clarify the legal situation of NGOs and their activities, such as technical assistance, investments and office space rent.

Moreover: support to all initiatives aimed at the development of NGOs shall be considered as indispensable. For Polish NGOs working in the field of Drug use, it is very important for example to change the approach from „rehab philosophy” to a philosophy of harm reduction.

Rehab Philosophy is part of Harm Reduction.

It is not easy to strengthen the services for Drug users in the country where Mr. Marek Kotański established 20 years ago the first therapy centre based on the idea of „therapeutically community”.

For the last 20 years, the following opinion has been common: the therapist knows better what is good for the client, and first prepares the client for detoxification treatment and then directs him or her to a special centre for long term therapy. For better efficacy, the above-mentioned way of dealing with Drug addicts has been supplemented by post-rehabilitation programs, e.g. Homes for Neophytes.

This is very important, however:

1. According to Police data, in the city of Krakow over 2,000 Drug addicts violated the law. In practice it means that if those people had decided to start the treatment, there would not have been enough room for them in the treatment centres in the entire country. What can be offered to others such as the over 4,000 addicts from Warsaw ?
2. For many reasons, a huge percentage of Drug users do not finish detoxification treatment. Only part of those who are able to accomplish Detox continue treatment in rehabilitation centres. We should not blame the patients. This is rather the effect of poor conditions for Drug users; a lack of services other than detoxification and long term therapy.
3. It is hard to determine the efficacy of treatment in rehabilitation centres. Even if efficacy is 50%, practically it means that half of the patients come back to Drug addiction.

Harm Reduction does not exclude or limit participation in stationary treatment. Therapeutic success takes the form of a person who totally stops using drugs and is the highest goal to aim at.

However, every single change of a client’s attitude and behaviour is also a success. If clients use drugs in a way that is safer, less destructive, and do not infect themselves or others, that is surely a success. If they use substances like methadone or buprenofine, which are legal,

instead of using illicit drugs, their addiction becomes safer for them and their environment. Undoubtedly, this is a real success of therapy.

The following are the most important aspects of harm reduction programmes:

- respect of client's rights - Drug addict is not a junkie. He/she is a human being who is ill;
- respect of client's needs - contract with patient made with accordance to patients possibilities. This can lead to a lower rate of not accomplished Detox and lower turnover of patients in treatment centres;
- maintain contact with patient - for example : as a result of several thousand contacts between therapists and clients through the needle exchange programme in Krakow, several people decided to initiate detoxification and some of them are continuing treatment in stationary centres. These are persons who have never before approached our organisation. That was outreach work that made them familiar with our organisation
- permanent project evaluation

Consider the following issues:

- clients do want harm reduction programmes;
- they want to use sterile injection equipment and want to exchange used equipment;
- they want to take part in substitution therapy (e.g. methadone maintenance);
- they do not want to be discriminated and marginalised because of illness

We, the people working in the field of Drug use, must not be indifferent to the fact that the whole of civilised Europe includes harm reduction programmes to approach the Drug use problem. Policy planners and policy makers should be aware of that.

All activities aimed at promotion of Harm Reduction are strongly needed. Thanks to the philosophy and practice of harm reduction, Drug use becomes a human disease, the process that can be changed by clients themselves.

Every positive change shall be considered as a success of therapy.

The role of the Churches in the fight against Drugs

1. Ladies and Gentlemen, Children of God,

Father Krzysztof Jarosz, Parish Priest, Catholic Multidisciplinary School „Dewajtis”, Warsaw, Poland

children of our Father in heaven who loves everyone. God loves all of His children, good and bad as He sends the rain on the just and the unjust. He especially loves His prodigal sons who are lost, lost in the land of drug addiction.

As we are to think about the role of the Churches, I have to show the way in which the Church is going (I say the Church because different Churches are parts of the only Church of Jesus Christ; which is Christianity). As John Paul II, the main teacher in the Church in our days states; „The human person is the primary and fundamental way for the Church” (encyclical: *Redemptor hominis*, 14). So when we approach the problem of drugs we want to focus on the individual, on the human person who has this problem. We want to look into the eyes of each of them.

„What is the deepest reason of reaching out for drugs?” It is a **lack of hope**. If you have no real hope, if the world around you is dark and empty, if you notice no sense in your existence, you have to look for *something else*. Hope is born of **love**. When one has no experience of being loved, that person will have no hope. So the lack of love in our society, in our homes and families, and in our hearts is the fundamental cause of the drug problem. Thus the main role of Christianity here is **to bring hope**. I would like to focus here on this spiritual dimension of the Church mission. I think that everyone concerned with the problem of drugs knows what different Christian organizations like Karan, the sisters of Mother Therese from Calcutta, Camilian Fathers and others are doing in this area.

So christianity brings hope by a deeper life of **faith**. The real faith gives the experience of being loved in the very depth of your heart. The lack of real faith seems to be the root of our problem. If we do not believe in God who is our loving Father, if we reject Him and the rules He gives to lead us, we will not find the solution to our problems. But here comes the dramatic question:

DOES EUROPE BELIEVE IN GOD?

Does Europe still believe in God?... Does Europe trust Him?

The answer is sad but clear: **NO**. We can see it in its laws and in its life. Europe has forgotten its Redeemer; and we – the Christians—have to admit that it is *also* our fault. The superficial faith in not changing the life of believers cannot convince others. If the faith is not resulting in inner conversion, in love towards everyone, especially towards enemies, it is not giving the so expected testimony which can open the eyes of the people. So each of us should say „through my fault” when the question of the lack of faith is being asked.

The deepest role of the Churches is to bring these fundamental truths to everyone:

You are being loved by your Creator.

You are being saved by your Redeemer. Here comes the mystery of Christianity: you are loved in your sin and in your misery. The redeeming love of God has no limits. But here occurs another difficulty of our days. The issue of SIN is rejected. You are not allowed to mention it at all. The world rejects the truth and pretends that everything is all right. Later we are astonished that various areas of our life collapse...

We should not be afraid to talk about sin. The consciousness of sin is something else than the feeling of guilt which can destroy the person. If you believe in the forgiving love of God, you will find contrition and forgiveness. How often people escape into drugs because in their sin they have not discovered this way of salvation.

Coming back to the way of hope I would like to offer you an explanation of the name of the HIV-virus which I am not sure to be correct in English, but it means a lot to me. HIV I would say, means: Hope Is Vain. When you get to know that you have it you lose hope. You lose your human hope but the space for the Christian, supernatural hope is opened. St. Paul writes about Abraham, „In hope he believed against hope (Letter to the Romans 4,18). At this point we are touching the supernatural, divine dimension of Christian faith. When there is no solution in human terms one can open himself to God's way in his life. If the task is to discover God's presence and unite with him, not just build a happy temporary life, then even in the illness there can be the place of deep conversion and finding a new sense of time left. This might be a profound invitation of the One, whose ways are different than ours, but are always the ways of waiting love.

Do we show this invitation to those, who are touched by the Hope-Is-Vain-Virus?

To conclude: the role of Christians is to share with the lost people of today *the real faith, real hope, and real love*. It is to share faith in love bearing hope.

But could we share something that we do not have inside?

2. CUM MAGNA CUR

[With Great Concern]

Reverend Anthony De Angello, Pastoral Associate, St John Bosco Mission, United States

In this brief exposition I wish to focus our attention on the quasi-development of the theme "The Role of The Churches in The Fight Against The Use of Drugs". As I stated in the title above, that it is with great concern that we, all of us, face the results of the pandemic that now engulfs our youth. The youth of our countries, our very households, members of our families. What makes it all the more insidious and attractively seductive is that drugs, in any form, capture the searching curiosity of today's youngsters.

At the outset innocuous and pleasing, eventually having a firm hold on the life of the youngster in terms of a strong addiction, rendering the will feeble and weak. In this I include alcoholic beverages such as beer or wine, the use of tobacco products. These may lead to what we call "addictive personalities" in our youngsters. In our present-day society alcoholic

beverages and/or use of tobacco products are an acceptable norm, but we know that even moderate use of such items can be both addictive and destructive to the human body. That is one of the anachronism we live with in our daily lives. When we speak of drugs, our attention is focused on those which we deem to be illegal throughout the world.

It laments the Holy Father to know that in any given country of the world there are, even as of this writing, a large number of youths that are experimenting with illegal drugs, even to a point of addiction. Pope John Paul II enlists the youth, wherever he may be to keep away from drugs that both destroy mind and body. The youth of today are much too precious in his eyes and ours, to be subjected to a cruel world of drug use, to the detriment of their very being.

In this, the churches have a significant role to play in the "Preventive Sector". The youth of today must be directed with diligence, be fully informed of the hazards of drug use, in a way that is very clear, understandable, and informative. These young minds have to be shaped, with the help of the Lord, along the lines of right reason and moral behavior. The glamour of drug use must be seen for what it is, a life of degradation and slavery to drugs. Addiction precludes the use of our free will, God's gift to humankind. We cannot, we must not, allow it to happen to our youth. Hence to the continuing role of the Churches to teach, to inform, to educate and shape the lives of the youth entrusted to it by the Lord. When does all this educative and formative process begin? THE SOONER THE BETTER.

The children of today are exposed to all forms of information from their earliest days, some information is good, other leaves much to be desired, still other is very confusing. The process of prevention is long, intense and very demanding on either the part of the persons doing this work and the child receiving the instruction. This must be done to literally protect the child from itself, that's how fragile these young minds are. The Churches have the moral responsibility to form and shape the moral fiber, to explore the minds and hearts of today's youth, and help them in the search of self. If we fail to do this for whatever reason, they will in time identify themselves with present aspects of this world which can be and are destructive.

The Churches must, and here I emphasize must, collaborate with all of the social agencies that are working hard in this process of reeducation of our youth. No one agency has all of the answers but working together and pooling all of our concerted efforts some good can be done for our youth of today. In its effort of collaboration, the family structure must be reinforced and supported. The focal point of all this work of the educative process is meaningless unless it done within the context of the family, hence all this centers around the family. There is no agency, no institution that will ever supplant the family as the fundamental locus where the learning process has its genesis of ongoing formation of the child, in an ambiance of family love and Faith and trust in the Lord. In our working together we enhance the formative process of the family, and they indeed need our assistance and expertise. All this eventuates a process of self determination of each child along the lines of right reason and a strong moral behavior in their lives.

The Churches like a loving Mother has the care and concern of its youth at heart, and at great sacrifice to itself slowly guides and directs its youth, always working alongside others in this labor of love and concern. To offset this progressive process of positive formation of our youth is the specter of misinformation, peer pressure, all adding to confusion, doubt and

bewilderment. It is during this period of bewilderment that the most damage is done, We must be there for them, all of us, in a concerted effort to dispel the doubts that beset them. They will turn to us when confused or have questions to ask. To whom can they turn to if not us ??? Hence we must offer them every opportunity to clear their minds, answer their questions honestly, no matter how simplistic they may sound to us, and above all be ever so caring and responsive to their every need.

At the out set I voiced grave concern about the use and problems of illicit drug use among the youth of today. I cannot give a rationale or causality for that,. I leave it to those who have a greater range of expertise than I.

We are in accord that this pandemic of illicit drug use ravages the lives of our youth everywhere, hence the dire need of working together as one force to stem the tide. Let no one deceive themselves that they can do it alone. To do so is both self serving and utterly useless. In this I'm sure that we are of one heart and purpose of intent to do what in essence is best for our youth, this can be accomplished if we will to do so.

III. EUROPEAN UNION : TOWARD ENLARGEMENT

The importance of drugs in the development of the Third Pillar

Gert Vermeulen¹

INTRODUCTION

The pre-Maastricht intergovernmental cooperation between the Member States on drug related topics as well as the creation of the third pillar have been sufficiently studied and abundantly discussed in literature. A historical approach of the question to what extent the drugs issue has influenced the drafting of Title VI of the TEU therefore seems less interesting. More absorbing is the question to what extent the Member States' determination to combat drugs and drug trafficking has actually influenced the third pillar activities, from the entry into force of the TEU until now. Answering this question requires some empirical research of the realizations and present negotiations on third pillar issues. The key questions are to ascertain the adoption or drafting of which provisions or which instruments we owe to the existence of the drug problem, and to identify for the adoption or drafting of which provisions or instruments the fight against illicit drug trafficking has acted as a catalyst.

At least four of the matters of common interest, listed in Article K.1 of the TEU, relate to the drug problem. This is the case for the Articles K.1(4)² (on combating drug addiction in so far as this is not covered by (7) to (9)), K.1(7) (on judicial cooperation in criminal matters), K.1(8) (on customs cooperation) and K.1(9) (on police cooperation).³ The TEU clearly confirmed the intergovernmental character of judicial, customs and police cooperation; as far as the fight against illicit drug trafficking is concerned.⁴

For all four domains of common interest, associated to the fight against drugs, it is hereafter assessed if and to what extent the fight against drugs or drug trafficking has directly lead to or has inspired the adoption or drafting of certain provisions or instruments.

COMBATING DRUG ADDICTION

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² For an analysis of the possibilities offered by Article K.1(4) of the Union Treaty, see: De Ruyver, B., Van Daele, L., Vermeulen, G., Vander Beken, T., Soenens, A. and Serlippens, A., *Drug Policy in the European Union*, Brussels, European Commission, 1995, 136 p.

³ See *inter alia*: Bruggeman, W., 'Europol and the Europol Drugs Unit: Their Problems and Potential for Development', in *Justice and Home Affairs in the European Union*, Bieber, R. and Monar, J. (ed.), Brussels, European Interuniversity Press, 1995, 219; Decourrière, A., *Les drogues dans l'Union européenne. Le Droit en question*, Brussels, Bruylant, 1996, 182.

⁴ See *inter alia*: Decourrière, A., *Les drogues dans l'Union européenne. Le Droit en question*, Brussels, Bruylant, 1996, 111.

According to Article K.1(4) of the TEU, the development of close cooperation on Justice and Home Affairs is a prime objective of the European Union and combating drug addiction and cooperation for the purposes of preventing and combating unlawful drug trafficking are matters of common interest to the Member States. As a matter of course, the instruments drawn up on the basis of Article K.1(4) of the TEU are directly related to the fight against drug addiction.

The specific K.1(4) output, however, is impressive (5 resolutions and 4 joint actions), and therefore worth paying attention to.

On 15-16 December 1995, at the end of the Spanish Presidency, the European Council approved the provisions of the EU's comprehensive action plan to combat drugs (1995-1999) and called upon the Council and the Commission to consider the extent to which a harmonization (or better: approximation) of the laws (and practices of the police, customs services and judicial authorities) of the Member States could contribute to a reduction in the consumption of drugs and the illicit trafficking in drugs.

One year later, at the end of 1996, the JHA Council adopted a number of third pillar instruments to meet that wish.

On 29 November 1996, two resolutions and a joint action were adopted. One resolution concerned measures to address the drug tourism problem within the Union;⁵ the other related to the drawing up of agreements between police and customs in the fight against drugs,⁶ taking as a starting point that a high level of cooperation within the respective Member States between police and customs and, the case being, also other law enforcement agencies would contribute to make the fight against illicit drug trafficking at the EU level more efficient, and that it was important therefore that the respective roles and functions of the law enforcement agencies involved in this fight, be defined and clarified, in order to avoid overlap between their respective efforts. The joint action adopted on 29 November 1996 was to urge the customs authorities of the Member States to cooperate with business organizations in combating drug trafficking.⁷ Starting point was the fact that the structures and services of business organizations in the legal economy might be improperly used by illicit drug traffickers.

On 16 December 1996, a resolution was adopted on measures to combat and dismantle the illicit cultivation and production of drugs within the Union.⁸

On 17 December 1996, a - much discussed - joint action was adopted concerning the approximation of the laws and practices of the Member States of the EU to combat drug addiction and to prevent and combat illegal drug trafficking.⁹ According to the joint action, the Member States would - among other things - undertake to cooperate fully in the fight against drug addiction and endeavour to approximate their laws to make them mutually compatible to the extent necessary to prevent and combat illegal drug trafficking in the Union.¹⁰

⁵ *Official Journal of the European Communities*, 96/C 375/02, 12 December 1996.

⁶ *Official Journal of the European Communities*, 96/C 375/01, 12 December 1996.

⁷ *Official Journal of the European Communities*, 96/698/JHA, L 322, 12 December 1996.

⁸ *Official Journal of the European Communities*, 96/C 389/01, 23 December 1996.

⁹ *Official Journal of the European Communities*, 96/750/JHA, L 342, 31 December 1996.

¹⁰ Meanwhile, a first follow-up report has been made available. See: *Mise en oeuvre de l'action commune relative*

Notwithstanding the express mention in the joint action of 17 December that the Member States ensured that under their legal systems the penalties imposed for serious drug trafficking would be among the most severe penalties available for crimes of comparable gravity, yet the Council adopted - on 20 December 1996 - a specific resolution on sentencing for serious illicit drug trafficking.¹¹ It confirms that, in order to more effectively coordinate and improve the EU's strategy for combating illicit drug trafficking and in particular to improve cooperation in criminal matters within this area, the Member States must ensure that their national laws provide for the possibility of custodial sentences for serious illicit trafficking in drugs which are within the range of the most severe custodial penalties imposed by their respective criminal law for crimes of comparable gravity.

On 9 June 1997, a resolution was adopted concerning a handbook for joint customs surveillance operations,¹² takes as a starting point the importance of improving the efficiency in combating illicit trafficking in sensitive goods and illicit drug trafficking in particular.

Following the joint action of 17 December 1996, in which the Member States were also urged to promote the establishment of a rapid information system to enable synthetic drugs to be identified as substances liable to be prohibited as soon as they would appear anywhere in a Member State (Article 5), the Council adopted on 16 June 1997 a joint action concerning the information exchange, risk assessment and the control of new synthetic drugs.¹³

Meanwhile, the High-Level Group on Organized Crime (HLG), established after the Dublin II Summit in December 1996, had drawn up its action plan to combat organized crime,¹⁴ which was approved by the JHA Council on 28 April 1997 and endorsed by the Amsterdam European Council on 16-17 June 1997. Later, in accordance with recommendation No 22 of the HLG Action Plan, a Multidisciplinary Group on Organized Crime (MDG) was established within the third pillar structures, consisting of competent high level authorities, for the purpose of developing policy orientations to coordinate the fight against organized crime or even actually acting as a working party, drafting new instruments.

During the last months, this MDG and the horizontal group 'Drugs' have been drafting a joint action concerning arrangements for the cooperation between the Member States on the search, seizure, freezing and confiscation of the proceeds from

au rapprochement des législations et des pratiques des services de police et des douanes ainsi que des autorités judiciaires dans la lutte contre la toxicomanie et le trafic de drogue, Council of the European Union, 11736/1/97 REV 1 CORDROGUE 71, Brussels, 1 December 1997, 98 p. On 11 November 1997, also the European Parliament Committee on Civil Liberties and Internal Affairs issued a set of recommendations and an accompanying report containing a proposal on the harmonization of the Member States' on drugs, emphasizing the need to experiment more with non-repressive measures. See: European Parliament, Committee on Civil Liberties and Internal Affairs, *Report Containing a Proposal for a European Parliament Recommendation to the Council on the Harmonization of the Member States' Laws on Drugs*, 11 November 1997, A4-0359/97 Doc_EN\RR\339\339867 PE 222.712/fin., cited in: 'European Parliament Committee Recommends Harmonization of Drug Laws', *International Enforcement Law Reporter*, March 1998, 96-99.

¹¹ *Official Journal of the European Communities*, 97/C 10/02, 11 January 1997.

¹² *Official Journal of the European Communities*, 97/C 193/03, 24 June 1997.

¹³ *Official Journal of the European Communities*, 97/396/JHA, 25 June 1997.

¹⁴ *Official Journal of the European Communities*, 97/C 251/01, 15 August 1997.

crime - any form of (organized) crime.¹⁵ The initiative for the joint action was taken by the British Presidency, which had initially proposed, following the endeavour of the Member States - in the Joint Action of 17 December - to make the practices of their police, customs services and judicial authorities more compatible with each other, to adopt a specific joint action on the matter for the proceeds of drug trafficking only. The reasoning of the British Presidency was that - at least for a number of Member States - it would be easier to agree with a joint action relating to the fight against drug trafficking only than with a more general joint action, meant to promote the seizure or confiscation of the proceeds of any form of (organized) crime. Whereas all Member States ratified the 1988 UN Convention against illicit traffic in narcotic drugs and psychotropic substances, some of them did not (yet) ratify the 1990 Council of Europe Laundering Convention.¹⁶ Therefore it was deemed more likely that a joint action could be adopted at short notice, if limited to the fight against drugs.¹⁷ So, although eventually, the scope of the draft has been widened to all forms of (organized) crime, it is fair to say that the determination to combat drugs has acted as a catalyst.

POLICE COOPERATION: EDU AND EUROPOL

Already in its first meeting after the entry into force of the TEU, at the end of November 1993, the JHA Council drew up a detailed action plan regarding several aspects of JHA cooperation. As for customs and police cooperation and the fight against drugs in particular, the Council stressed that the priorities were the establishment of the Europol Drugs Unit, the elaboration of the Europol Convention and the fight against organized crime, drug trafficking and money laundering (related to those activities).¹⁸

According to the Ministerial Agreement of June 1993, the Europol Drugs Unit, which started its activities on 1 January 1994, was initially meant only to act as a non-operational team for the exchange and analysis of information and intelligence in relation to illicit drug trafficking, the criminal organizations involved and associated money laundering activities affecting two or more Member States.¹⁹ Later, following the Essen Summit, the Unit's mandate was extended (*via* the joint actions of 10 March 1995 and 16 December 1996), to all crime fields listed in Article 2, paragraph 2 of the Europol Convention. The unit however owes its creation to the existence of the drug problem.

Two more joint actions, both adopted on 29 November 1996, confirm the primary role of EDU as a Unit to facilitate the fight against illicit drug trafficking. A first joint action concerns the exchange of information on the chemical profiling of drugs to facilitate improved cooperation between Member States in combating illicit

¹⁵ See e.g.: Council of the European Union, 6490/98 EXT 1 CRIMORG 14 CORDROGUE 32, Brussels, 3 March 1998.

¹⁶ Germany, Greece, Luxembourg, Portugal and Spain have not ratified the Convention until now. See: Council of Europe, European Treaties, Chart of signatures and ratifications of 2 March 1998, No. 141.

¹⁷ See e.g.: Council of the European Union, 5516/98 CORDROGUE 9 CRIMORG 9, Brussels, 29 January 1998, 2.

¹⁸ See *inter alia*: Decourrière, A., *Les drogues dans l'Union européenne. Le Droit en question*, Brussels, Bruylant, 1996, 183.

¹⁹ See: Bruggeman, W., 'Europol and the Europol Drugs Unit: Their Problems and Potential for Development', in *Justice and Home Affairs in the European Union*, Bieber, R. and Monar, J. (ed.), Brussels, European Interuniversity Press, 1995, 221.

drug trafficking,²⁰ and aims at setting up an efficient mechanism for the exchange between the Member States - through the medium of EDU - of information about the chemical profiling of primarily cocaine, heroin, LSD, amphetamines and XTC-like derivatives thereof.

The other joint action of 29 November 1996 relates to the creation and the maintenance of a directory of specialized competences, skills and expertise in the fight against organized crime, in order to facilitate law enforcement cooperation between the Member States of the EU.²¹ In order to respond to the various threats with which Member States are confronted, their national law enforcement authorities fighting organized crime have developed areas of specialized competences, skills and expertise, which should in principle be made available to appropriate authorities in all other Member States, on request, according to their needs and at the appropriate time. Through the joint action, EDU is given the task of establishing, maintaining and disseminating a directory of these specialized competences, skills and expertise, which are within its competence (pursuant to the joint Actions of 10 March 1995 and 16 December 1996). According to the preamble of the joint action however, EDU would, as a first step, have to establish the said directory only covering the areas of illicit drug trafficking and trafficking in human beings. Once again, the fight against illicit drug trafficking proves to have been the main rationale for adopting the joint action.

Europol itself shall, according to Article 2, paragraph 2 of the Europol Convention, in order to achieve its objective, initially act to prevent and combat unlawful drug trafficking (ranked first) next to trafficking in nuclear and radioactive substances, illegal immigrant smuggling, trade in human beings and motor vehicle crime.

According to the Amsterdam Treaty of 2 October 1997, Title VI of the new TEU will only contain provisions on police and judicial cooperation in criminal matters, and thus be restricted to the matters of common interest defined in Article K.1.7 and Article K.1.9 of the Maastricht Treaty.²² To a certain extent however, the new provisions also concern customs matters. In general - according to Article 29 of the consolidated version of the TEU²³ - the Union's objective shall be to provide citizens with a high level of safety within an area of freedom, security and justice, by preventing and combating crime, organized or otherwise, in particular terrorism, trafficking in persons and offences against children, illicit drug trafficking, illicit arms trafficking, corruption and fraud. So, even after the entry to force of the Amsterdam Treaty, combating illicit drug trafficking will remain one of Europol's main objectives. There is no doubt also that Europol's future new competences²⁴ (as described in Article 30, paragraph 2, under (a) and (b) of the consolidated version of the TEU), namely to facilitate and support the preparation, and to encourage the coordination and carrying out of specific investigative actions by the competent authorities of the Member States, including operational actions of joint teams

²⁰ *Official Journal of the European Communities*, 96/699/JHA, L 322, 12 December 1996.

²¹ *Official Journal of the European Communities*, 96/747/JHA, L 342, 31 December 1996.

²² The first three points of Article K.1 are relocated in a new Title IV of the consolidated version of the Treaty establishing the European Community, entitled 'Visas, sylum, immigration and other policies related to the free movement of persons'.

²³ *Official Journal of the European Communities*, 97/C 340/02, 10 November 1997.

²⁴ In recommendation No 25 of its Action Plan, the HLG had suggested to further develop the mandate and tasks of Europol.

comprising representatives of Europol in a support capacity, or to ask the competent authorities of the Member States to conduct and coordinate their investigations in specific cases and to develop specific expertise which may be put at the disposal of Member States to assist them in investigating cases of organized crime, will be of particular importance for the fight against illicit drugs and illicit drug trafficking.

In conclusion, one could say that, although EDU's mandate has been extended to other forms of organized crime than illicit drug trafficking only and Europol's mandate may in future even further be extended, the main push-factor remains the fight against drugs, even when - following the Amsterdam Treaty - Europol will (to a certain extent) be given operative powers.

CUSTOMS COOPERATION

Undoubtedly, one of the most important realizations in the field of customs cooperation is the drawing up of the Naples II Convention²⁵ (on mutual assistance and cooperation between customs administrations). Title IV of the new convention introduces the possibility for customs administrations to autonomously employ special forms of cross-border cooperation (cross-border hot pursuit, cross-border surveillance, the use of joint special investigation teams and controlled delivery and covert (undercover) investigation) in relation to infringements concerning *inter alia* illicit traffic in drugs and certain other prohibited goods and trade in precursor substances. The insertion of these provisions represent one of the most significant developments between the Naples II Convention and the 1967 Naples Convention (Naples I), which did not explicitly provide for the possibility of cross-border investigations.

According to Article 22 of the new convention, controlled deliveries may be permitted in relation to criminal investigations into extraditable offences of any kind,²⁶ meaning also offences not related to drug trafficking. As such, the Naples II arrangement differs from the arrangements in Article 11 of the 1988 UN Convention against illicit traffic in narcotic drugs and psychotropic substances and Article 73 of the Schengen Implementing Convention (SIC). A technique that until now has only been used for combating illicit drug trafficking, is being introduced in a new third pillar instrument for broader purposes. Clearly, the fight against illicit drug trafficking has - once again - acted as a catalyst.

The same applies for the possibility to continue covert investigations²⁷ (undercover operations) in the territory of another Member State, as provided for in Article 23 of the Naples II Convention. Traditionally, the use of infiltration or undercover

²⁵ See e.g.: Council of the European Union, 5932/1/98 REV 1 ENFOCUSTOM 9, Brussels, 11 March 1998, 14-20; Council of the European Union, 9505/1/97 REV 1 ENFOCUSTOM 42, Brussels, 12 September 1997, 17-29. See also: Ravillard, P., 'The Functioning of Customs Cooperation under Title VI of the Treaty on European Union: A First Evaluation', in *Justice and Home Affairs in the European Union*, Bieber, R. and Monar, J. (ed.), Brussels, European Interuniversity Press, 1995, 237.

²⁶ The decision to allow controlled deliveries shall be taken by the competent authorities of the requested Member State with due regard for national law.

²⁷ Covert investigation means an officer of the customs administration of one Member State (or an officer acting on behalf of such administration) being authorized to operate in the territory of another Member State under the cover of a false identity. Requests may only be made where it would otherwise be extremely difficult to elucidate the facts.

investigation techniques has largely been limited to the fight against illicit drug trafficking. Again, it is this fight that has paved the way for the possible application of the technique against other forms of serious or organized crime.

JUDICIAL COOPERATION IN CRIMINAL MATTERS

Extradition

According to Article 3, paragraph 1, of the new Convention of 27 September 1996 relating to extradition between the Member States of the EU, double criminality will in principle no longer be required where the offence for which extradition is requested, is classified by the law of the requesting Member State as a conspiracy or an association to commit offences, provided the conspiracy or the association is to commit an offence referred to in Articles 1-2 of the European Convention on the Suppression of Terrorism or any other offence punishable by deprivation of liberty or a detention order of a maximum of at least 12 months in the field of *drug trafficking* and other forms of organized crime or other acts of violence or acts creating a collective danger to persons. In other words, combating illicit drug trafficking is considered a sufficient justification for waiving the traditional double criminality requirement.

Mutual assistance

Recommendation No 16(b) of the HLG Action Plan urged the working party on mutual assistance in criminal matters to examine how a legal basis could be created in the new EU convention on mutual assistance in criminal matters for the trans-boundary application of certain modern investigative methods, such as controlled delivery, deployment of undercover agents and the interception of various forms of telecommunication.

Meanwhile, the concerned working party has continued its drafting work, and the draft convention on mutual assistance is expected still to be signed by the JHA Council under British Presidency. Following the appeal of the HLG, provisions allowing for the trans-boundary application of all three methods have been inserted in the draft.²⁸ It be recalled that until now, controlled delivery has only been allowed for in drug related matters, and that, in practice, also the deployment of undercover agents and the interception of telecommunications have largely been limited to the fight against illicit drug trafficking. It is fair to say therefore, that the fight against drugs has been the main push-factor for the creation in the new EU convention on mutual judicial assistance of a solid legal basis for the international, Union-wide application

²⁸ For a first commentary on the draft convention and its importance for the fight against international drug trafficking and organized crime in general, see: Vermeulen, G., 'Een verhoogde slagkracht voor de kleine rechtshulp? Over nieuwe middelen in de strijd tegen de internationale drughandel en de georganiseerde criminaliteit', in *Het drugbeleid in België: actuele ontwikkelingen. La politique en matière de drogues en Belgique: développements actuels*, De Ruyver, B., De Somere, P., Vermeulen, G., Noirfalise, A. and Figiel, Ch. (ed.), Antwerp-Apeldoorn, Maklu, Brussels, Bruylant, 1998, 119-121. The same issues are also at stake within the Council of Europe. Provisions concerning cross-border observation, controlled delivery and (the continuation of) undercover operations would be inserted in a Second Additional Protocol to the European Convention on mutual assistance in criminal matters, at present being negotiated within the PC-OC. See e.g. the respective Articles 14, 15 and 16 of the draft, in: Council of Europe, PC-OC (98)6, as reproduced in: Council of the European Union, 5764/98 JUSTPEN 14, Brussels, 4 February 1998, 16 and 35-37; Council of Europe, PC-OC (98)6, Strasbourg, 19 February 1998, 13-14.

of the concerned investigative methods.

The Articles 6-7 of the Draft Convention regulate the possibilities regarding interception of various forms of telecommunication (fixed or mobile, cellular or satellite) and the continuation of an ongoing interception on the territory of another Member State than the one where the interception is technically being effectuated.²⁹

According to Article 10 of the draft, the Member States undertake to ensure that, at the request of another Member State, controlled deliveries may be permitted on their territory in the framework of criminal investigations into extraditable offences.³⁰ Unlike in the 1988 UN Convention or the SIC, an international legal basis for making arrangements on the carrying out of controlled deliveries, has been created in the framework of judicial cooperation in criminal matters, the new convention however allowing for cooperation between judicial authorities in one Member State and police or customs authorities in another Member State, if in that Member State police or customs are the competent authorities as regards the use of special investigative methods.

Article 15a of the draft allows for the authorization, on request, of (the continuation of) covert investigations (undercover operations) on the territory of the requesting or the requested Member State.³¹

Enforcement of sentences

In Article 31 of the consolidated version of the TEU, it is stated that common action on judicial cooperation in criminal matters shall include facilitating and accelerating cooperation between competent ministries and judicial or equivalent authorities of the Member States in relation to [...] the enforcement of decisions. Most probably, this provision particularly envisages a more efficient and intense cooperation concerning the enforcement of decisions implying the confiscation of the proceeds from crime (confiscation orders), as provided for in the 1988 UN Convention against illicit traffic in narcotic drugs and psychotropic substances and later also the 1990 Council of Europe Laundering Convention. The last convention not having been ratified by all Member States and allowing the ratifying parties to limit the scope of the convention to specific crime areas, such as e.g. consensual drug crimes, even reinforces the role of the fight against drugs as a push factor for adopting provisions concerning the enforcement of confiscation orders.

In connection with the enforcement of confiscation orders, two topics being discussed at the moment at the level of the MDG, seem relevant.

In rem confiscations

Already in the priority working programme for 1994, adopted by the JHA Council of 29-30 November 1993, it was acknowledged that the possibilities should be examined of enforcing confiscation orders issued in another Member State and that the

²⁹ Council of the European Union, 5764/98 JUSTPEN 14, Brussels, 4 February 1998, 13-15.

³⁰ Council of the European Union, 5764/98 JUSTPEN 14, Brussels, 4 February 1998, 16.

³¹ Council of the European Union, 6253/98 JUSTPEN 25, 23 February 1998, 13; Council of the European Union, 6414/98 JUSTPEN 27, 3 March 1998, 22.

possibility should be studied of confiscating proceeds from offences regardless whether their perpetrator is convicted.³²

More recently, recommendation No 26(c) of the HLG Action Plan (referring to political guideline No 11) called again upon the Member States to adopt provisions allowing for confiscation, irrespective of the presence of the person having committed the offence, such as when he/she has died or moved away or is simply unknown to the authorities.³³ The MDG has started to discuss the subject and has the intention to draft a joint action or another instrument on the matter, dependent on the specific needs in the respective Member States.³⁴

Asset sharing

Further, recommendation No 26(d) of the HLG Action Plan (also referring to political guideline No 11) urged the Member States to study the possibility to mutually share assets, confiscated following international cooperation. Again, the MDG has started to discuss the subject.

A system of sharing of assets in larger cases of international cooperation regarding organized crime is likely to provide an incentive for international cooperation in that it would emphasize the cooperative effort of several agencies in different Member States.³⁵ In fact it seems only fair to have important police or judicial assistance at least partly remunerated financially. It would even be imaginable that eventually, the Member States agree on a multilateral mechanism for sharing forfeited or confiscated assets. In this respect, the creation of a central European Union fund, e.g. at Europol level, could even be considered.³⁶

The 1988 UN Convention against illicit traffic in narcotic drugs and psychotropic substances has - in a more explicit way than the 1990 Laundering Convention - paved the way for the adoption of third pillar provisions or instruments on the matter.

According to Article 5, paragraph 5, under (a) of the 1988 Convention, the proceeds or property confiscated by a party shall be disposed of by that party according to its domestic law and administrative procedures. According to Article 5, paragraph 5, under (b), (ii) of the Convention however, a party may, when requested by another party to confiscate proceeds or property, give special attention to concluding agreements on sharing with other parties, on a regular or case-by-case basis, such proceeds or property, or funds derived from the sale of such proceeds, in accordance with bilateral or multilateral agreements entered into for this purpose.

³² See: Bonn, M., 'Judicial Cooperation under Title VI TEU: A First Assessment in the Light of Practical Experiences', in *Justice and Home Affairs in the European Union*, Bieber, R. and Monar, J. (ed.), Brussels, European Interuniversity Press, 1995, 212-213.

³³ In five Member States, the legislation does not allow for the confiscation of proceeds or profits from crime, when the offender has died before a confiscation order has been given by the court. In six Member States, confiscation is not allowed when the offender moved away and no (further) action could be taken against him or her. According to the law of four Member States, confiscation is impossible when the offender is unknown to the authorities. See: Council of the European Union, 5947/98 CRIMORG 20, Brussels, 27 February 1998, 3.

³⁴ Council, Council, 12940/97 CRIMORG 31, Brussels, 8 December 1997, 8.

³⁵ See in this sense: Council, 11174/97 CRIMORG 10, Brussels, 14 October 1997; Council, 12940/97 CRIMORG 31, Brussels, 8 December 1997, 8-9.

³⁶ As e.g. suggested in: De Ruyver, B. and Vermeulen, G., *Obtaining access to home and foreign banking information for the purpose of official investigations into allegations of serious crime - a Belgian perspective*, 13th International Symposium on Economic Crime, Jesus College, Cambridge, 10-16 September 1995.

Article 15 of the 1990 Laundering Convention also provides for the disposal of property by the requested Party in accordance with its domestic law, but at the same time allows parties to agree otherwise. As such, asset sharing is allowed for, but not explicitly promoted, unlike in the 1988 Convention.³⁷

ORGANIZED CRIME IN GENERAL

A number of instruments, drawn up or being drafted under the third pillar umbrella, cannot be regarded as having a legal basis in only one of the above discussed matters of common interest. They have a more general scope, aiming at combating organized crime in general, in which illicit drug trafficking takes a prominent place.

This is the case for the Council resolutions of 23 November 1995 and 20 December 1996 on - respectively - the protection of witnesses in the fight against international organized crime³⁸ and individuals who cooperate with the judicial process,³⁹ in which the Member States are urged to adopt appropriate measures to effectively ensure the safety of witnesses in practice, to encourage individuals who participate or have participated in an association of criminals or other criminal organization of any kind, or in organized crime offences, to cooperate with the judicial process, to assess the possibility of granting benefits to individuals who break away from a criminal organization, and to provide appropriate protection measures for such individuals and, where necessary, their family, who are or are likely to be exposed to serious and immediate danger.

Next to these resolutions, and in line with recommendation No 17 of the HLG Action Plan, a joint action has been drafted by the MDG on making it a criminal offence⁴⁰ to participate in a criminal organization in the Member States of the Union.⁴¹ According to the draft, each Member State will have to ensure that participation in a criminal organization⁴² is punishable by effective, proportionate and dissuasive criminal penalties. In the text itself⁴³ of the draft, no direct link to certain types of crime has been provided for. None the less, it is clear that the rationale of the draft joint action is the strengthening of cooperation between the Member States as regards a number of

³⁷ In the explanatory report to the Convention however, it is stated that parties were also encouraged to enter into agreements whereby the confiscated property would be shared among the cooperating parties in such a manner as to generally reflect their participation in the case. Such international sharing should be designed to further the cooperative spirit embodied in the Convention. See *inter alia*: Council of the European Union, 11174/97 CRIMORG 10, Brussels, 14 October 1997, 1-2.

³⁸ *Official Journal of the European Communities*, 95/C 327/04, 7 December 1995.

³⁹ *Official Journal of the European Communities*, 97/C 10/01, 11 January 1997.

⁴⁰ The tendency to adopt minimum rules relating to (the constituent elements of) criminal acts and to penalties will most probably be reinforced by Article 31 of the consolidated version of the TEU, according to which adopting such minimum rules in the fields of organized crime, terrorism or illicit drug trafficking, will be part of the common action on judicial cooperation in criminal matters.

⁴¹ Council of the EU, 13174/2/97 REV 2 CRIMORG 32, Brussels, 10 March 1998, 2-4.

⁴² The notion 'criminal organization' is being defined as 'a lasting, structured association of more than two persons, acting in concert with a view to committing crimes or other offences which are punishable by deprivation of liberty or a detention order of a maximum of at least four years, or a higher penalty, whether such crimes are an end in themselves or a means of obtaining material benefits and, if necessary, of improperly influencing the operation of public authorities'.

⁴³ In Article 1, paragraph 2 of the draft itself, it is stated that the crimes and offences, with a view to the commission of which a criminal organization would be set up, at least include those mentioned in Article 2 of the Europol Convention and in the Annex thereto. No doubt that among the offences mentioned in Article 2 of the Europol Convention, unlawful drug trafficking takes a very prominent place.

particular forms of organized crime, that have been listed in the preamble of the draft. The offence on top of the list, is drug trafficking.

CONCLUSION: AN EXTENSIVE *ACQUIS*

A first, hasty screening of the third pillar outcome leaves no doubt that the Member States' determination to combat drugs and drug trafficking has strongly influenced the third pillar activities. A considerable part of the provisions and instruments that have been drawn up or are still being drafted at the moment, either directly relate to drugs or have - at least partly - been modeled after treaty provisions or practices that are (or have traditionally been) of particular relevance for the fight against drugs. It is safe to say that, so far, the importance of drugs for the development of the third pillar has been very considerable.

Consequently, the pre-accession *acquis* in the field of drugs is also extensive. In the first place, it consists of the formal *acquis* of agreed third pillar instruments,⁴⁴ presented above. In addition, the *acquis* probably also comprises the UN and Council of Europe⁴⁵ instruments which are deemed essential in the fight against organized crime within the Union, as listed in recommendation No 13 of the HLG Action Plan, namely the 1988 UN Convention against illicit traffic in narcotic drugs and psychotropic substances and the Council of Europe 1990 Laundering Convention and 1995 Agreement on illicit traffic by sea, implementing Article 17 of the 1988 UN Convention. Finally, also the Schengen *acquis* - including Chapter VI of Title III of the SIC, dealing with drug related issues and *inter alia* creating a basis in international law for the carrying out of controlled deliveries - is to be regarded as an *acquis* which must be accepted in full by all states candidate for admission into the European Union.⁴⁶

⁴⁴ See in this sense: Langdon, A., *Justice and Home Affairs Cooperation with Associated Countries*, s.l., Phare Programme, October 1995, 2 ('[...] there is a formal *acquis* of agreed instruments containing requirements that a state joining the Union would have to undertake on accession') and 10 ('Article K.3 provides for the Council, in the areas specified in Article K.1, to adopt joint positions and joint actions, and to draw up Conventions to be recommended to the Member States for adoption. [Consequently] there is a clearly definable *acquis* of texts to which an acceding state would be expected to subscribe').

⁴⁵ See the explicit mention in recommendation No 3 of the HLG Action Plan (referring to political guideline No 5) that, in common with the candidate countries of Central and Eastern Europe, including the Baltics States, there should be defined a 'Pre-accession Pact on cooperation against crime, which may include [...] undertakings for the rapid ratification and full implementation of the *Council of Europe* Instruments which are essential to the fight against organized crime'. See also in this sense: Langdon, A., *Justice and Home Affairs Cooperation with Associated Countries*, s.l., Phare Programme, October 1995, 3 and 10: 'In the judicial cooperation area of the Third Pillar it is accepted that there are also a number of Conventions that were negotiated [at other levels than the EU level], but which are regarded as being so close to the concerns of the EU that they can be regarded as part of the formal accession requirements. They include [...] the main criminal Conventions of the Council of Europe'.

⁴⁶ See: Article 8 of the Amsterdam Protocol integrating the Schengen *acquis* into the framework of the European Union (*Official Journal of the European Communities*, 97/C 340/01, 10 November 1997, 96).

Preaccession phase in Hungary in the field of fight against Drugs

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The Hungarian Government places a lot of emphasis on pre-accession in order to prepare the legal, administrative and institutional framework, as well as the professionals for the forthcoming phase of accession to the European Union.

During the political and economic transitional period, the Hungarian legislation went under a basic change to form a democratic society and a free-market economy. In that period attention was paid not only to existing needs, but also to the harmonisation with EC legislation, and this process is now reinforced. To promote this, several multidisciplinary and sectorial expert groups were set up, for "chewing" the acquis, and to prepare proposals for the necessary legal modifications and amendments, as well, as to the changes in the institutional framework. These proposals are to be submitted to the political level for approval.

As regards the institutional system, it is always the outcome of a longer historical development, and its change needs a careful adjustment to the present needs of society, as well as to the forthcoming changes when joining the common space. Here the reconstruction also started in the early nineties, however at that time the drugs field was not at all priority.

Analysis of the drug abuse situation

New trends appeared in the field of drug abuse and criminality in the nineties in Hungary, and a lot of in-depth changes took place. The situation of Hungary is still relatively moderate regarding drug crime and consumption, however compared to several other European countries the structure of the criminality and drug abuse is changing very rapidly.

Geopolitics of the supply

The quantities of seizures increased from 7 kilo in 1990 to 2379 kg in 1997, that is multiplied by 340 during 7 years, and the rate of heroin is worryingly high.

The geopolitics of supply changed twice in the nineties. The big heroin seizures at the beginning of the decade were due to the Yugoslavian war. The heroin from the Golden Half Moon region arrives through Turkey and via the Balkan route to Western Europe. After the Yugoslavian war broke out, the main route went through Hungary. In the previous 2 years, heroin smugglers have changed tactics in Europe and transfer smaller amounts, to prevent discovery. Therefore despite the excellent work of the police and the customs authorities the quantities of heroin seized decreased (comparing to the 814 kg. in 1994 it was only 206 kg. in 1997). However, at the beginning of this month 186 kilo was found by a customs officer in a Turkish truck, hidden in the dashboard.

The new trend is smuggling big quantities of marihuana from Northern Africa via the Balkan-route. The Hungarian customs officers seized last year a 2 tons marihuana shipment and in the first quarter of this year 1 ton. The effect of the increasing supply could be the significant increase in the number of cannabis users, and at the same time the camp of those who fight for legalising marihuana will get more media publicity.

To prevent the misuse of amphetamines, 11 new derivatives were drawn under control by the law in September 97, including ketamin.. As far as concerns the precursors, the CATF guidelines were introduced into the legislation, by modifying the former legislation of 1990 on controlled substances to a separate precursors legislation. The customs, police and the licensing division of the Ministry of Industry formed a co-operation, in order to discover suspicious cases and prevent diversion. However, the customs need to be equipped with laboratory test kits, and the role of the police drug administration division should be reinforced in order to enable them to prevent illegal activities. As far as legislation is concerned, the withdrawal effect of the penalisation might be better defined.

As concerns the role of the drug law enforcement agencies, their role is regulated by the 34th Law on the Police of 1994 and by the Penal Procedure as well as by the 100th Law on the Customs. The Police and Special Division of the Customs cooperate well and share information on drug and precursors shipments and crime, however the investigation role of the Customs in the field of drugs is not clarified well enough by the law.

The prevention of money laundering can be one of the most effective ways of the fight against crime organisations. The Hungarian Government was first in the Central European area to recognise this: the Inter-ministerial Drug Committee set up its money laundering preparatory workgroup in 1991. The laundering of money, deriving from drug crime, organised crime and terrorism was qualified to be a crime in a harmony with the FATF guidelines. The following year a Finance investigation division was set up at the National Police Headquarters, which became part of the Service against Organised Crime.

Drug crime and offenders

In the eighties the criminal statistics reflected minor drug crimes as forging medical prescriptions, or illegal drug consumption, or stealing narcotics from pharmacies. The same, or higher statistical figures in the nineties reflect more serious cases, as drug smuggling, illegal trafficking, offences committed in organised form, as well as street level distribution, or illegal cultivation of drug plants.

The first amendment of the Penal Code in the field of drugs was brought into effect in 1993. A distinction is made between acquiring or possessing small amounts of illegal drugs for personal use, and significant amounts, which can serve for illegal trafficking. The offences are more serious if committed in organised, or armed form. The penalisation of the said offences varies between 0-2, 2-5 and 5-15 years. If we look into the average duration of imprisonment, we can see that the law implementation practices are taking into consideration the more serious crimes. In case of relapse, a modification is under consideration at present: it maybe qualified as other serious offences. At present the re-definition of the small and significant quantities are under consideration.

Because the illegal cannabis plantations appeared in a bigger size, and the high opiates content industrial poppy fields were also abused, it became necessary to

introduce a new legislation addressing drug plant cultivation. In 1997 the Governmental decree on the control and licensing of industrial plantations of cannabis and poppy, harmonised the legislation with the EU regulation on production and control of fibre cannabis, as well as reinforcing the relevant measures on opiate production of the Single Convention of Narcotic Drugs.

Demand reduction

Multidisciplinary prevention activities were initiated by the former drug committee in 1991, and as a result of this several school prevention programs have been started and now reach about 60-70 % of the students. The community-based prevention has been started throughout the country. The prevention activities are granted by the Mental Hygiene Program and by the Prevention Program of the Ministry of Welfare and by the National Crime Prevention Program. The drug hotline and the help-lines throughout the country play an important role in crisis prevention and advising.

The treatment is performed in 65% on an outpatient basis, and the detoxification and the treatment of double diagnosis occurs in hospitals. The 7 long-term residential centres have a limited number of beds, and their professional guidelines are under elaboration only after several years of functioning. Based on the order of the Minister of Welfare they are financed now by the National Health Insurance Fund, instead of the former social funding. The treatment effectiveness needs further improvement and more attention should be paid to social reintegration and work/rehabilitation.

A new, higher level Drug Co-ordination Committee set up by the Government by 1st of April this year expresses the intention to have a more effective drug policy, reacting to the present situation and needs. The committee - which involves the same ministries and national agencies as the former one, but with a higher level representation, will be the organic connection between drug experts, professionals and the Government. The new Committee will decide on a drug strategy for the period of 1998-2000, harmonising its efforts with neighbouring countries as well as with the fight against drugs strategy of the European Union.

Policing in Europe: a new wave ?

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1. INTRODUCTION

To have the luxury of addressing you on policing in Europe at the present time is both opportune and problematic. Opportune in the sense that we appear to have entered a distinct period where European governments see real benefits in striving towards enhanced practical police co-operation, both as a response to perceived threats to order and security and of a means of compensating for removal of border controls. Problematic, since it can be argued at a European level we are on shifting sands - with highly flexible strategic and tactical alliances and/or conflicts between supranational bodies, individual European Member States, police organisations and their constituencies.

Nevertheless it was expected that international police co-operation in Western Europe would undergo a lot of changes. 47

Therefore subject of my intervention concerns policing in Europe (not policing Europe, or the EU).

Police is the label and policing the means used by the state when asserting its exclusive title to the use or threat or force against dangers emanating from within its boundaries. This is one of the central questions underpinning the discussions over the forms of police co-operation appropriate to Europe in the 1990's, namely the nature of the relationships between Europeanisation initiatives in the police sector, and integrations within the EU.

Police on itself has to be analysed at national level. It must be mentioned that police organisations (centralisation, decentralisation, unification, reorganisation), police legislation, penal law and criminal procedures mostly differ from one country to another, are often reformed recently and/or in discussion.

47 Fijnaut, C., *The internationalisation of Police cooperation in Western Europe*, Arnhem, Gouda Quint, 1993, 161 (9)

One of the key public rationales for intensified police co-operation as part of policing has been the prospect of abolition of border controls between Member States of the Union, which it is argued will undermine the traditional filter functions of frontiers, and remove a major impediment to cross-border criminality. Another identifiable factor has been the emphasis on the dangers of a controllable grow in illegal immigration. It is obvious, given the concern about drug smugglers, immigrants, terrorists and the securing of internal order, that the objective of Euro-policing is in discussion in most of the EU Member states and different concepts are discussed.

The European policing field is criss-crossed with plurality of initiatives and fora and there is too little empirical data to permit assessment of relative performance being difficult in itself. Until there is an appropriate supranational EU/EC police function, any evaluation of effectiveness will be confounded by an interaction effect of cross-national with national (domestic) factors. 48 Therefore it is useful to speculate on how effective alternative configurations of the European policing arrangements may be. While the Treaty of the EU has now assumed a kind of hegemony there are still other contenders, which will be analysed later on in this article.

Before doing so it is interesting to analyse the most recent initiative being the creation of Europol, now a reality in the form, for the time being, of the Europol Drugs Unit, having emerged as a new plant in the international law enforcement garden after a long and difficult germination period. This illustrates with Schengen the intergovernmental approach which is the most specific characteristic of actual police co-operation.

After the initial hopeful and sometimes frustrating experiences, the key question is now the Europol Convention is signed, confirming all the expectations and plans and whether the Member States - because that is what it is all about - are prepared to believe in this organisation and invest in it. Expectations are high, and the experience acquired during the first year of the embryonic Europol Drugs Unit should be put to use to flash out and/or modify these expectations.

Everything will hinge upon whether the will is there to make a go of it together (Europol and the Member States): the will to persevere or the willingness to accept what has been achieved is what will decide the future. It is therefore a suitable moment at which to look back and evaluate what has been achieved, to formulate clearly the expectations I have and to assess their feasibility, the key question being whether my profound belief, right from the beginning, in the great potential of this organisation can withstand the reader's criticism as well.

It will probably come as no surprise to you to hear that I am not a pessimist. The dynamism that is now gradually being built up within the Europol Drugs Unit is so forceful that even the failure to ratify the Europol Convention within the initial promised timescale could not dent it, despite the disappointment and the negative noises made about it in the press. To demonstrate the reason for this unflagging optimism, at least partly, I would like to examine a number of historical, political and

48 den Boer, M. And Walker, K., European policing after 1992, *Journal of Common Market Studies*, 1993, 31,1, 3-28

practical elements, which, in combination with the growing number of tactical and strategic Europol activities in The Hague, should lead to an acceptable decision.

The question then arises whether or not Schengen, the Maastricht Treaty in general and the Europol Convention are the start for a new wave?

2. RECENT EUROPEAN POLICE CO-OPERATION DEVELOPMENTS

Avoiding the highlighting of examples of co-operation between nation states, this article is principally concerned with recent forms of police co-operation in Europe in general and in the EU in particular. From the perspective of the 90's, European police co-operation is an opaque and complex patchwork of institutions (official or not), agreements and structures which aim to promote different forms of promotion.

In looking back over the 70's and early 80's, from the perspective of 1993 and the Maastricht Treaty, police co-operation appears as a series of ad hoc developments. There is no doubt that the most significant structures for Europe are Interpol, WCO, Schengen, the European Unions intergovernmental Trevi-derived network being the third pillar in general and Europol in particular. The Leicester centre for the study of public order presents police co-operation as operating at three interrelated levels:

- a macro level, concerned with constitutional and international legal agreements and harmonisation of national laws and regulations.
- a meso level, concerned with police operational structures, practices, procedures and technology;
- a micro level concerned with the prevention and detection of specific offences and crime problems.

A general study shows the complexity being a reflection of the organisational reality, in the best way characterised as a "crowded police space".⁴⁹ European police co-operation can profitably be viewed as such a space, with different countries and interest groups responsible for laying emphasis on particular areas of co-operation. In fact almost all the European countries are member countries of Interpol, WCO and UN. Only some of them are Benelux and Schengen countries and 15 are actually EU member states. With this in mind Europe can be considered in policing terms as made up of a series of concentric and overlapping circles. The "map" shows overlapping institutional sources, territorial remits, functional specialism and strategic emphasis.

This overlapping situation and the risk for duplication and redundancy is not only a matter of information storage, but mainly a problem of task differentiation and authority. The EU authorities are nowadays strongly looking for an EU/Schengen framework keeping police co-operation under full "political" control. On a theoretical basis different possibilities are: contacts - liaison - co-ordination - joint action - parallel laws - harmonisation of penal laws and/or criminal procedures - common law - communautarisation (1st pillar).

⁴⁹ Heberton, B. And Thomas, T.: Policing Europe, New York, St. Martins' Press, 1995, 231 (40)

It has to be stressed that also in the Interpol concept a regional (European) approach became visible at the moment new EC developments were initiated. Due to the fact there was an Interpol (no convention, interpolice organisation, no intergovernmental authority) representative explaining these developments, I will limit my intervention to the EC context. Before doing so it is important to mention that Schengen was created as a precursor system for Europol and the Schengen Convention should be read and analysed in that context. Unfortunately not all the EC Member States joined the Schengen Convention so that the Maastricht logic became partly less ambitious than the Schengen approach, certainly as far as the cross-border operational co-operation is concerned.

In the EC context, for many purposes, including policing, member states continue to view the European level as a legitimate arena for action and decision. However, while this function requirement is dated I should also argue that the member states are engaged in a process of bargaining within the framework of medium terms strategic goals, from which both the scope of co-operation as well as the institutional form of co-operation will emerge. Since November 1993 and the coming into force of the Maastricht Treaty the EU's Council of Interior and Justice ministers now co-ordinates a number of once distinct EC fora including the Trevi forum, the Customs Mutual Assistance Group (MAG), the Comité Européen de la Lutte Anti-drogue (CELAD), the horizontal group and the ad hoc group immigration.

This edifice has its basis in the title VI, article K1, K2 and K4 of the Maastricht Treaty. While at one level it can be argued that the Treaty presents a qualitative shift in at least the politics of police co-operation, with a general agreement on the need to pursue co-operation in justice and home affairs, it may be a mistake to view the shift as unproblematic.

One of the problems is that it was never made politically clear what is its specific role and specific added value of for example Europol and Interpol. The same can be said of different European Union institutions. Especially where the Community has developed its own "policing capacity" against fraud through the establishment of UCLAF (Unité de la Co-ordination de la lutte anti-fraude) the non-determining nature (example civil enforcement) of current arrangements in the field of control and law enforcement in comparison with the future role of Europol illustrates this situation. Also the Schengen agreement of 1985 presents a direct challenge, certainly by the end of 1992 when most of the EU countries were in Schengen too.

Beyond the EU the other highly significant institution has been and is the Council of Europe of which all EU states are members. Although founded in 1949, and since 1989 it has been revitalised, the question remains whether or not the EC or the EU may join as a member. Over the last 35 years this council has been responsible for a number of measures, covering extradition, mutual legal assistance and more recently measures to encourage suppression of terrorism and confiscation of proceeds of crime.

This situation illustrates also the fact that most of those regulations are not recent decisions and not always adopted to the specific EU political situation. The same can be said for three relevant international conventions on confiscation : the UN Convention against illicit traffic in narcotic drugs and psychotropic substances

(Vienna Convention) of 1988, the G-7 report of the Financial Action Task Force on money laundering of 1990, and the Council of Europe's own 1990 convention on laundering, search, seizure and confiscation of the proceeds of crime. While for the most part national laws have and sometimes still have to be brought in line with these international agreements, it is not always clear how this would be given effective practice especially within the EU member states.

Last but not least it has to be mentioned that the patchwork existing pattern of all types of other and often overlapping official and less official European initiatives (Cross Channel Conference, Dublin Group, STAR, amongst others) are continued and never rationalised which is a EU problem in itself illustrating the urgent need to implement a more integrated and harmonised approach.

3. THE HISTORY OF EUROPOL IN TERMS OF TREATY LAW

Strictly speaking, the idea of a European drugs unit was first raised long before Maastricht in the TREVI meetings. However, I would like to begin straightaway with article K1.9 of the Treaty of Maastricht. This article is part of the so-called third pillar, i.e. intergovernmental co-operation in the fields of justice and home affairs.

The authors of the Treaty of Maastricht, which came into effect on 1 November 1993, made a distinction between the first pillar (Community: EC and EMU, art. J), the second pillar (intergovernmental: common foreign and security policy, art. G) and the third pillar (intergovernmental: justice and home affairs, title VI, art. K).

Defining the areas of co-operation between the Member States, article K1 identifies nine areas as "matters of common interest":

1. asylum policy;
2. the crossing by persons of the external borders of the Member States and the exercise of controls thereon;
3. immigration policy and policy regarding nationals of third countries;
4. combating drug addiction;
5. combating fraud on an international scale;
6. judicial co-operation in civil matters;
7. judicial co-operation in criminal matters;
8. customs co-operation;
9. police co-operation for the purposes of preventing and combating terrorism, unlawful drug trafficking and other serious forms of international crime, including, if necessary, certain aspects of customs co-operation, in connection with the organisation of a Union-wide system for exchanging information within a European Police Office (Europol).

This list is obviously a response to the criticisms concerning the loose nature of TREVI, seeking to give it a more permanent form and bind it more closely to the EC institutions, however limited its input may be (see below). It also incorporates numerous elements from the Palma Document, resulting - oddly enough for the non-Schengen countries - in many instances in a two-track policy because of the fact that internal border controls have yet to be abolished in these countries.

There is now increasing discussion as to whether the pre-Maastricht *acquis communautaire* regarding, in this case, law enforcement should be preserved or wholly or partly transferred to the third pillar. I share the view of J. Vervaele on this matter, who makes a distinction between administrative law enforcement, which can be implemented by the Commission where it has been expressly authorised to do so (e.g. regarding EC fraud) and third-pillar criminal law enforcement.⁵⁰ The Member States are divided over whether countries can be compelled by Community law to make particular activities an offence and to introduce penalties, and this debate has not been made any easier by the introduction of the third pillar: the question is whether the third pillar now has a monopoly over law enforcement and to what extent the first pillar can continue operating in this field.

Supporters of the *acquis communautaire* base their claims, rightly so, on article C of the Maastricht Treaty.⁵¹ Personally, I think - and this may sound strange to some people - that the principle of subsidiarity needs to work in both directions here, with express priority being giving to the third pillar as regards criminal law enforcement.

This is also an appropriate juncture at which to ask ourselves what concrete results have been achieved after two years of the third pillar⁵². Interestingly enough, it was Belgium that held the presidency when this new framework came into effect. D. Flore has already discussed the new situation at length, highlighting its innovative aspects but also the unwieldiness of the apparatus in practice.⁵³

The results to date can be summed up as follows:

- a convention (the first of its kind) on simplified extradition procedures (decision of 9 March 1995);
- a convention on Europol (decision of 26/27 June 1995);
- a convention concerning the use of information technology for customs purposes (CIS, decision of 26/27 June 1995);
- the establishment of criteria for identifying organised crime and a more recent acceptance of a common definition;
- the adoption of an action plan to combat drugs (first and third pillars);
- the expansion of the mandate of the Europol Drugs Unit (joint action), although it needs to be reiterated that the Europol Convention itself is still being discussed.

Additionally the multiagency group is working on the already mentioned action plan comprising 30 specific recommendations, with timescales for the implementation of those recommendations. In brief, the recommendations deal also with :

- Co-ordination, at a national level, of the fight against organised crime
- Collection and analysis of data on organised crime activity
- Study on high technology crime

⁵⁰ Vervaele, J., *Criminal law in the European Community: about myths and taboos*, Agon, January 1995, pp. 3-5.

⁵¹ *Ibid.*

⁵² Vermeulen, G., Van der Beken, T., Zanders, P., De Ruyver, B., *Internationale samenwerking in strafzaken en rechtsbescherming (International cooperation on criminal matters and legal protection)*, Brussels, Politeia, 1995, p. 316.

⁵³ Flore, D. and Troosters, R., *Maastricht in beweging (Maastricht in action)*, Panopticon, 1995, pp. 301-332.

- Multi-annual programme to combat organised crime
- Central national contact points to facilitate information exchange + Intellex
- European network for judicial co-operation
- Measures against money laundering
- Study of existing legislation for tracing and seizing criminal proceeds

The scope and scale of these recommendations addresses the full range of organised criminal activity in the EU and provides a concerted response to the threat it poses. The challenge the EU now faces is to translate the recommendations into concrete and effective action.

The multidisciplinary Working Party which was set up for the implementation of the initiatives of the High Level Group is regarded as an important step and will facilitate a new co-ordinated action in combating organised crime in the EU. Together with the implementation of the new orientation presented in the Amsterdam Treaty, this will lead to a more effective anti organised crime strategy.

In relation to the Amsterdam Treaty, two specific measures have to be mentioned :

- the step by step integration of the Schengen acquis, within the EU, to be achieved within a period of 5 years;
- the additional future Europol activities as mentioned in art. K2.

Numerous other topics are currently being discussed, and many interim decisions have already been taken (e.g. on money laundering, time-bars, special investigation methods, protection of witnesses, European visas, external borders, Eurodac, etc.). I have confined myself, however, to those initiatives which have actually come into effect. It should be pointed out, nonetheless, that the influence of each presidency is considerable and is itself influenced by national circumstances. The presidential elections in France are a very clear example of this.

Putting the third pillar in place is therefore proving to be a slow and painstaking task. There are a number of possible explanations for this (example: principle of sovereignty, national often different penal laws, provisions for international co-operation originated mainly during the 50ties), but it is still too early to form a proper opinion. It has had an undeniable effect on the dynamism of Europol, a subject I shall return to later.

I would nonetheless like to observe at this point that where intergovernmental co-operation is called for, this does not necessarily have to take the form of conventions. Other constructions are also provided for (joint positions, joint action). This does, however, necessitate adequate democratic control over the decisions taken and some way of enforcing compliance or imposing penalties if a Member State fails to cooperate, which is formally lacking at present.

Public and political interest is currently greatest in the field of police and judicial co-operation, which is directed essentially at the growth in organised crime and the huge and acute problem of immigration. Decision-making in these areas tends to be based on conventions, which is a long-drawn-out process, given the need for unanimity.

Intergovernmental attitudes dominate the Community approach and hinder a more spontaneous harmonisation of criminal law and procedure. Many people believe that active Community responsibilities must be rooted in administrative law enforcement. It is regrettable, however, that police co-operation has not been supplemented with a judicial component (a European network of public prosecutors).

The far more extensive treaty provisions of the past (letters rogatory, legal assistance, the transfer of sentenced persons, extradition) are being overtaken, initially by interpolice co-operation and now by intergovernmental police co-operation (Schengen, Maastricht). As a direct consequence of this, a two-speed system is emerging, giving rise to feelings of surprise, frustration (e.g. when criminal proceedings are not instituted following police co-operation), legal uncertainty and powerlessness.

What is more, there is no overall logic to intergovernmental law enforcement or to intergovernmental action by administrative law enforcement agencies. There are problems in particular, and this is typical, in the field of proactive police intelligence, due chiefly to differences in police regulations and police practice. The dangers of unlawful and inadmissible evidence are often all too close for comfort, especially when two or more countries are working closely together. The only ones who benefit from this are the criminals.

Let me return now to article K1.9 of the Maastricht Treaty which provides for the establishment of Europol, the first organisation to be set up within the third pillar, in which the police and, if necessary, customs can co-operate for the purposes of preventing and combating crime in such fields as terrorism, drug trafficking and other serious forms of international crime, chiefly through the central exchange and analysis of information and intelligence.

This certainly does not extend to executive powers by a long shot, although the supplementary declaration appended to the Treaty does refer to support, analysis of national prevention programmes, training and research and development. What this actually entails in practical terms is now defined by the Europol Convention. It is this convention which defines in concrete terms the powers of Europol and also set its limits.

The text describes Europol's tasks as follows (articles 3 and 5):

- the exchange of information;
- analysis;
- facilitating the co-ordination of ongoing investigations;
- increasing expertise;
- training.

These tasks will be performed by Europol officials and analysts on the one hand and on the other by liaison officers from the various Member States. Data will be stored centrally in the Europol data bank. Discussion is now taking place about whether all these persons should have access to all information, hard and soft alike, or whether there should be restrictions based on the "need to know" and "right to use" principles and/or other criteria. The liaison officers will also provide co-operation support and co-ordinate activities (article 5).

Every country is obliged to set up a national intelligence service (Europol National Unit). While this may not pose any problems for the United Kingdom and the Netherlands, which already have a National Criminal Intelligence Division, it will create difficulties for other countries.

A great deal of thought was also given to defining Europol's mandate (the main points of discussion being terrorism, what comprises serious crime and the speed of implementation), data protection, political accountability (to the ministers via the management board), democratic control, budget control and judicial control (European Court or national courts?). As you can see, there were quite enough points of discussion and disagreement which delayed the long-awaited signing of the Convention for some time until a clear line or a compromise was adopted.

The Cannes European Council (26 and 27 June 1995) reached agreement on the Convention establishing Europol and recommended Member States to do their utmost to ensure that this Convention can be formally adopted and applied as soon as possible after ratification by the national parliaments. It agreed to settle the question of the possible jurisdiction to be attributed to the Court of Justice of the European Communities at its meeting in June 1996.

Now the Convention is signed, and has to be ratified by all the national parliaments (only two ratifications are missing). Already now data protection, intelligence standards and regulations and analytical regulations (for the first time to be standardised at international level) are in preparation.

4. THE EUROPOL DRUGS UNIT

Let us therefore turn our attention back to the present, to the Europol Drugs Unit (EDU) which has been operating since 1 January 1994. This unit was set up by Ministerial Agreement of 2 June 1993 as a forerunner to Europol, i.e. under the same intergovernmental philosophy. This is important because it means that every activity of the Europol Drugs Unit can and indeed must be initiated by and for the Member States.

Compared to its future successor Europol, this unit is handicapped in two respects. First, it has a limited mandate and, secondly, personal data cannot be stored in a central data bank. Admittedly, its mandate has now been extended (by the Joint Action of the justice and interior ministers of 10 March 1995) from drugs-related crime only to illicit trafficking in radioactive and nuclear substances, illicit vehicle trafficking, clandestine immigration networks and all associated money-laundering activities as well.

Just now the mandate will be extended to Trafficking of Human Beings.

This limited mandate - even now it has been extended - is not an ideal starting point since many criminal groups do not slot neatly into these categories. Moreover, contacts between those involved in illegal immigration do not always feature in the mandates of the Europol national units (e.g. the CRI) in the EU Member States.

What is more, since 1 January 1995 the European Union has consisted of fifteen countries. It is most regrettable in my view that the sixteenth - Norway - is missing. My chief reason for thinking this is that the Scandinavian countries as a group would have brought a breath of fresh air to the European Union in the sphere of criminal justice and the police because they already have sound, far-reaching and flexible co-operative links with each other, which provide some extremely valuable pointers for the EU. This is all the more true given that the nine EU countries that are party to the Schengen Agreement, often regarded as an experimental laboratory for the up-and-coming co-operation under the Maastricht Treaty, are set to remain a separate entity as long as the United Kingdom and Ireland, among others, are not members of Schengen.

The Europol Drugs Unit, headed by Mr J. Storbeck, comprises a network of liaison officers, analysts, an information technology department, the host state support group, a small staff unit, a development team and a security service.

My optimism - and this is where we get to the heart of the matter - is, however, based on the obvious desire among the Member States to make something of this European drugs unit. The 42 liaison officers from the various EU countries are really fifteen national teams comprising police representatives and the occasional customs officer, who exchange data under the control of their national authorities. Each team works interactively with other teams within Europol and has a direct, secure link to their home country, both for the exchange of data and for requesting national criminal intelligence.

The advantages of this are that these liaison officers communicate with the units in their home countries in their own language, that they can be regarded as experts (knowledge of legislation, methods and conditions and practical experience) and that they guarantee round-the-clock availability (pagers and mobile phones). Cases are never transferred to other bodies, inside or outside Europe; the liaison officers handle each case from beginning to end. This has been proceeding very smoothly, as expected, and even sensitive intelligence is increasingly being passed on to other countries.

What is more, we have found in practice that this horizontal platform of liaison officers is being used more and more frequently to support ongoing international investigations and help co-ordinate special actions (controlled deliveries). A handbook (one for each country) setting out the working arrangements and conditions and/or an integrated scenario for special operations is prepared for each initiative. For the sake of clarity, it should probably be added that EDU does not take charge of cases but provides assistance and support. Each team of liaison officers remains under the exclusive control of their national authorities and the management of EDU co-ordinates the team, not the cases.

This has to work - that much is clear - and this provisional model will probably be one of the cornerstones of the future Europol: nothing else is possible given that the Member States' criminal justice and law enforcement systems are based entirely on the principle of sovereignty.

Leaving aside the IT department, the second component of EDU comprises the six analysts, who have set up the tools necessary for strategic and operational analysis and are now developing them further. The fact that no personal data can be stored centrally is a handicap, but there is still sufficient scope to undertake very worthwhile initiatives.

1997 was the fourth year of existence of the Europol Drugs Unit. Day to day exchanges of operational intelligence between Member States continued to increase both in terms of quantity and quality: the Unit dealt with 2600 incoming requests for information, compared with 595 in 1994. Political developments included the extension of the mandate in March and the signing of the Europol Convention in July. The EDU's strategic role in relation to the EU's drugs problem received strong endorsement through its contribution to the document *Cordroque 69*, agreed by the Madrid European Council in December 1995.

In the field of drug trafficking there were some notable successes, with information exchanges leading directly to seizures and arrests. This applied both to ongoing investigations and to live operations, such as controlled deliveries. In respect of the three new fields of criminality, there were a significant number of exchanges of information and intelligence relating to stolen vehicles and organised clandestine illegal immigration, but few relating to the illicit trafficking of radioactive substances.

Law enforcement agencies appear to be recognising the unique benefit of having their representatives permanently based at the EDU, each operating under the direction of his or her national unit, resulting in added confidence, especially in relation to sensitive information.

Analysts supported a number of operational enquiries, working very closely with individual ELOs (under authority of the individual Europol Nation Units), not only within EDU but also on the request of Member States.

Looking at the actual EDU activities my feeling is one of optimism. You may say I have no other choice, given my present position. I would like to put this in perspective because I believe I have had sufficient experience of innovation within the police world to take a realistic view and, if necessary, to ask critical questions of myself and, of course, about the new organisation. What impresses me most, however, is the willingness to do something together about the threat of crime within Europe on an intergovernmental basis (i.e. the third pillar) and in the spirit of Maastricht. Even with the limited instruments available to EDU under the Ministerial Agreement, the will to co-operation is sufficiently strong.

There are still some doubts and friction, admittedly. This is due in part to the fact that not all countries share the same philosophy with regard to co-operation between the police and customs. Another factor is the lack of clarity about the respective roles of the drugs liaison officers (DLOs posted to the embassies on a bilateral basis) and the EDU liaison officers (ELOs). Leaving aside the obvious need for bilateral liaison officers outside the European Union, the DLOs and ELOs within the EU can and should work alongside one another at national level in a complementary fashion.

This entails the practical implementation of the principles of subsidiarity (bilateral level takes precedence over European level, except where more than two countries are involved) and complementarity (DLOs have more operational contacts with the police services in the country they are posted to). Moreover, it is high time the Convention was ratified, not only on account of extending EDU's mandate and the storage of personal data, but also to give Europol the legal status it needs in order to make agreements and cooperation with other organisations (World Customs Organisation, Interpol, United Nations etc.). Interpol has little to fear, because Europol's role is supplementary to its own with one proviso, that each sticks to their own field. The dialogue with so-called third countries is more delicate, of course, because it is up to the EU Member States to determine to what extent Europol can be internationally active and with what mandate.

It should also be pointed out that the relationship between each Europol national unit and the regional police and customs services also needs clarification. The Netherlands will be the first country to make more direct contact with EDU possible (i.e. from the base). The situation differs, of course, depending on whether the police services are organised vertically (various national services) or horizontally (Netherlands, UK).

The differences between - or lack of - CID regulations is another limiting factor, and it is feared that too strict a set of regulations may restrict the flexibility of the whole. This is chiefly due to the fact that the distinction between proactive intelligence and information for use as evidence is not always clearly applied, a problem which cannot simply be resolved with the often misused phrase "for police use only"; when subsequent enquiries have to be made, this information then requires official confirmation via other channels.

Efforts are now being made by opting for project work instead of ad hoc exchange of information to work together by common consensus. This, I feel, is where the future of EDU - and Europol - lies. Work is now under way, for instance, to set up maritime, aviation intelligence and illegal assets projects in an effort to establish a common programme-oriented consensus.

5. SUGGESTIONS

On the basis of experience to date, a number of suggestions can be made regarding both Maastricht in general (due to be reviewed this year) and Europol in particular. Criminal law and criminal procedure will remain an intergovernmental matter within the EU, and so they should. The "European legal area" can only be developed gradually, in the long term and topic by topic and in respect of the principles of sovereignty and subsidiarity. The means of intergovernmental co-operation, however, need to be extended, democratised (nationally and at European level) and made more enforceable.

In the case of conventions, the unanimity rule guarantees the preservation of sovereignty. As far as other forms of co-operation are concerned, the possibility of reaching decisions by a qualified majority should be extended. The jumble of Community, Schengen and intergovernmental approaches should be untangled, and any overlap of powers or ambiguity should be eliminated.

Nonetheless, some concrete steps can be taken in the short term to improve the coherence of intergovernmental co-operation. Account needs to be taken of the fact that where cross-border and international crime are concerned, several parties are involved - victims, witnesses, suspects and offenders, police and the authorities responsible for maintaining public order - each of which needs to be given due consideration.

Conventions and efforts at harmonisation are therefore the exception; the future depends, above all, on developing a global intra-EU system. The four concrete proposals below show what can be done in the short term to improve the third pillar:

A. the continual assessment of international police co-operation, especially in the pre-judicial stage, in the light of the norms for legitimate conduct and admissible evidence. This role can only be assigned to the public prosecutors. A clear distinction needs to be made here between assessment and the steering of police actions. Steering is only possible with regard to the application of criminal procedure and police legislation; the question arises here of whether the application of special police techniques (e.g. international observation) should be steered in this way. A European network of public prosecutors could play an essential role here, in addition to their traditional role;

B. the formulation of coherent, internal rules within the criminal justice system concerning the place (i.e. country) in which legal action is to be taken. This problem arises in the early intelligence stage of international police co-operation (e.g. a big fraud case with suspects in two countries and victims in several countries). In the past it has often been the place where police action was first taken that has determined where proceedings are instituted. There are no criteria at EU level for deciding in which country proceedings should be brought, whereas provision is, of course, made in various conventions for the final stages of the judicial process (transfer of criminal proceedings and sentenced persons, extradition).

If the police and customs authorities were to use a similar instrument from the beginning, many complex transfer procedures could be avoided at the end of the day, provided, of course, that the public prosecutors have sufficient knowledge and are sufficiently flexible thanks to existing conventions.

The general principles that could be imposed by treaty on all the partners concerned (including and, above all, the police) include:

- the guarantee that a case will be investigated and that proceedings will be brought, if judicially feasible;
- statutory provision from the beginning for imposing penalties and enforcing sentences;
- consideration for the interests of the victim (e.g. distance, privacy);
- consideration for the interests of the offender (see, for example, article 8 of the European Convention on the Transfer of Proceedings in Criminal Matters, Strasbourg, 15 May 1972, and article 5 of the European Convention on the International Validity of Criminal Judgements, The Hague, 28 May 1970);
- criteria relevant to particular types of crime (e.g. revenue for the national treasury after criminal proceedings with financial implications).

The police, in particular, must learn to accept that co-operation is now an intergovernmental matter, which is not always the case outside the EU (e.g. Interpol). This can give rise to problems, especially for those who do not entirely agree with the “every-man-to-his-trade” principle. The police must be able to operate, of course, and the intergovernmental approach must enhance police effectiveness as well as increase legal certainty. Schengen is an example of a positive form of cross-border police action, which deserves to be copied within the EU. One concrete and innovative measure which could be taken is to create an EU fund (e.g. administered by Europol) to compensate police forces which make a substantial contribution to a criminal case (deployment of officers, e.g. for observation purposes, or at external borders, or in financial terms, e.g. payments to informers) without any direct outcome (arrests, convictions) in their own country (e.g. in the case of controlled deliveries of drugs);

C. the vertically and horizontally integrated steering of international legal action, both at national and EU level. Vertically, this involves the police, police support services, the public prosecutions department and the criminal justice authorities. Horizontally, it involves - at national level - the foreign, interior and justice ministries, the prosecutor general and possibly other ministries, where special enforcement agencies are involved.

It should be clear to everyone that such consultation and co-operation, based on sound criteria and procedures, and without loss of autonomy, will result in greater co-operation, co-ordination and mutual support. The integration of certain technical aspects may even be considered. Operational agreements, procedural integration and mutual support (legal advice, financial assistance, translation, following up cases) are possible candidates for direct action. It would be best to split this up into a technical (administrative support) and an operational (international co-operation) component.

The same concept can be applied at EU level, where, following the example of Europol, the network of public prosecutors referred to above could play a very important role, on condition, of course, that each country is prepared to appoint a public prosecutor, which I think they would be.

The Scandinavian model would give far greater flexibility to police and judicial co-operation, and there is certainly a need for vertical and horizontal co-ordination and, perhaps, integration. Direct operational contacts and a flexible attitude towards the transfer of investigations at every level of police and judicial work, within an extensive and flexible co-operative structure, are the key to success. Co-operation should, in any event, be intensified and extended, with the emphasis on compensating for the effect of the dismantling of internal EU border controls.

D. Intelligence and analytical (secrecy, confidentiality, reliability) legal standards have to be developed at EU level, not only for the police but also for other law enforcement agencies.

Last but not least, there is the problem of democratic control, for which there is, in my view, only one solution, namely national control over intergovernmental activities and the acceptance of European control over Community activities.

As you can see, I firmly believe in the third pillar, but its development to date has been a long and painstaking process. It can be made more dynamic by simplifying and rationalising the existing arrangements and by giving priority to simple but useful measures, of the kind suggested above. I am enough of a realist, however, to realise that this is far easier said than done.

Nonetheless, it is also necessary for the national authorities to think now about the role of Europol vis-à-vis Interpol and the extent to which the roles of the liaison officers at embassies within the EU needs to be revised.

In addition, more should be done (by EDU/Europol and the Member States) to promote a project-based approach, structuring and filling in the picture project by project and taking special care to make a clear distinction between insight into criminal networks and providing lawful evidence. Special agreements and structures will have to be worked out for each module.

As far as evidence is concerned, especially if Europol becomes more active in the support sphere (e.g. controlled deliveries), co-operation via Europol will have to set the tone for the whole case and also have an impact on the intelligence that is now still being exchanged via Interpol (letters rogatory). Otherwise the intergovernmental system will be overtaken by the interpolice system.

6. CONCLUSIONS

Police co-operation has been and is progressing on numerous fronts away from the main fora of Schengen, Trevi and Interpol. This new situation is an open invitation for political decisions about possible ways for rationalisation of former concepts and forms of co-operation not within a contact model but trying to implement specialism and complementarity. Once Europol is functioning on the basis of a ratified convention the time will come to organise and regulate its coexistence with world-wide organisations like Interpol and the WCO.

Europol has to function within the third pillar logic but there is a need to improve the judicial framework for intra EU co-operation. At least the basic conditions for active exchange of intelligence and mutual support have to be developed by a new and sophisticated EU agreement or convention.

There is a lot to be done therefore. First, I agree with D. van der Landen that a certain “Europeanisation” of criminal law is inevitable given the abolition of internal borders within the Union⁵⁴, but the intergovernmental approach will first have to establish itself more firmly within Maastricht. Only then will it become clear how great the subsidiary need for European regulation is. The future of the third pillar is therefore rooted in intergovernmental co-operation. The principle of subsidiarity gives priority to bilateral co-operation where this is possible, while Schengen is already a reality within the European Union. Co-operation is the key, and it has to begin from this starting point.

⁵⁴ Van der Landen, D., *Naar een geUNIEficeerd strafrecht? (Towards unified criminal law?)*, *Delikt en delinkwent*, 1994, pp. 921-938.

Europol will certainly not be an empty organisation. The growth and development of EDU is reassuring and offers a great deal of potential, so that we can look forward with high hopes to the years ahead. The business planning now being prepared with the national authorities and especially the related action plan for 1998 put a strong emphasis on operational co-operation and the added value that EDU can already offer - in terms of speed, the availability of all European languages, expertise, analytical support, general support, the combination of police and customs, back-up from national umbrella intelligence services and retention of autonomy and sovereignty - provides a strong enough basis for pressing ahead at full speed. Now the Convention is signed as soon and from the moment that it will be ratified Europol, once it is up to strength, can support the law enforcement effort in the EU Member States in an effective way.

Add to this a network of public prosecutors covering every EU country, and you have an almost ideal construction. The creation of a common police and prosecuting agencies with investigative competencies via democratic systems is not yet realistic. Then Europol must be controlled by the European Parliament, a high standard data protection has to be guaranteed and last but not least the principle of sovereignty adopted.

Indeed, the construction outlined above is more realistic and so logical that other regions of the world are starting to create similar instruments of their own. Asiapol is not far off, and similar initiatives point to an imminent and far-reaching regionalisation of the law enforcement global order, which is likely to be a welcome addition to the valuable work done by world-wide organisations like the United Nations and Interpol. Europol is certain, therefore, to become a big organisation. But before the dream can become reality there is a lot to be done and much will depend on the willingness of the partners themselves (Europol and the police and customs services) to develop this new and important instrument within the EU.

**Information systems on the drugs phenomenon:
enhancing cooperation with the associated countries
of Central and Eastern Europe**

by Georges ESTIEVENART
Director of the EMCDDA, Lisbon

1. The participation of the Central and Eastern Europe countries in Community programmes and agencies : a point of high priority in the EU political agenda.

The participation of the applicant countries of Central and Eastern Europe in Community agencies has been defined by the Luxembourg European Council as a 'key method' of familiarising these countries with the *acquis communautaire*.

In a Communication to the Commission of 30 September 1998 on 'Participation of applicant countries in Community programmes and mechanisms for implementing the Acquis' (SEC(1998)1613/2), the President of the Commission and Commissioner Mr van den Broek have reminded that :

"The Luxembourg European Council made participation in programmes and Community agencies into an instrument of the enhanced pre-accession strategy, concluding that applicant States "should be allowed to take part, as observers and for the points which concern them, in the management committees".

The same document recommends that "maximum participation should be arranged as soon as possible" in 4 EU Agencies: EEA, EMC on Racism & Xenophobia, EMCDDA and European Training Agency. "*For the first three agencies (including EMCDDA), it is in the Union's interest to increase its information basis, involving the 11 applicant countries⁵⁵ and Turkey in the agencies' boards.*" The document also foresees the need to amend, where necessary, the basic legal instruments.

In the case of the EMCDDA, the Commission is considering the legal framework to permit to the candidate countries of CEE to participate as observers in technical meetings as well as in the Scientific Committee of the EMCDDA and REITOX meetings.

The Council of Ministers of the EU also made important steps in the cooperation with candidate countries in the field of drugs. On its September 23 meeting, the working group on drugs of the Council, the so-called "Horizontal Drugs Group" has invited the partner candidate countries for the first time to a joint CODRO/HDG meeting at expert level. The EMCDDA was invited to participate in this exchange of views, in which a direct cooperation with the Centre was asked by several applicant countries.

⁵⁵ The 11 applicant countries are currently (Nov.98): Estonia, Latvia, Lithuania, Poland, The Czech Republic, Slovakia, Hungary, Slovenia, Bulgaria, Rumania and Cyprus.

And the European Parliament, adopting the conclusions and recommendations of Ms Shaffner's Report on the EMCDDA, asked for a stronger cooperation between the Lisbon centre and the CEECs.

2. The PHARE Programme and the EMCDDA (background)

In the framework of the PHARE Multi-Beneficiary Drugs Programme, the 'Drug Information Systems' Project ('DIS-Phare Project') was launched in 1993. The immediate objectives of the project were:

- a technical assistance to the CEECs in the development of information and communication structures for collecting, processing and disseminating information on the drugs global phenomenon;
- to prepare the CEECs to future participation in EU drug information systems and networks related programmes.

Since the first years, 'DIS-Phare' activities have been systematically synchronised, wherever possible, with those of the EMCDDA and its REITOX network of National Focal Points. Since 1st December 1997, the DIS-Phare Project entered in its Final Phase, to be ended on 1st March 1999.

As a next step, and within the perspective of enhancing the pre-accession strategy, the Commission is currently preparing a project aiming at direct and full cooperation between the Phare countries and the EMCDDA. The purpose of this project is to involve actively the partner countries, particularly the candidate countries, in the activities of the EMCDDA and to establish structural links with the REITOX network in order to facilitate the harmonisation of methodologies and standards in the field of data collection and analysis..

A preparatory phase was launched on 25 April 1998. Its main output has been a draft proposal of a 'Memorandum of Understanding' between the Commission and the EMCDDA. An expert's Report has already been preliminarily drafted, synthesizing the possible guidelines for a strategy, with a workplan and the corresponding budget.

3. Present stage of the EMCDDA/CEECs cooperation

As stressed in the expert Report commissioned by DG 1A, the DIS-Phare project may have successfully settled electronic and human links between Local Contact Persons and promoted in several CEECs the creation of DIS Focal Points. The 'Information Map' exercise, as realized in 1998 in the framework of the DIS-Phare project, has shown the large range of drug information sources existing in most CEECs. But the sketch of the situation shows also that this network is still fragile, lacking political support, and that the Contact persons or even 'Focal Points' are not generally in position to improve further their capacity for a long-term network able to collect, process and disseminate a useful set of core comparable data and harmonized indicators, allowing an effective monitoring of the drug problem at regional level. The Report insists **on institution building** as a necessary strong component of a

comprehensive strategy, placing it in the framework of the Adoption of the Community Acquis.

The Report recommends that the implementation of a progressive and comprehensive CEEC/EMCDDA work programme for 1999-2000 should be launched following two complementary tracks :

- a set of training activities and transfer of know-how, mainly during the first year, 1999, including a series of joint Commission/EMCDDA high-level missions to prepare the Terms of Reference of a long-term participation in Reitox and EMCDDA's activities in each partner country;
- a joint Phare/EMCDDA work programme to organize, mainly during the 2nd year, 2000, the progressive involvement of the CEECs future Focal Points in the Reitox core tasks, respecting a case-by-case approach.

An important role is given in the Report to the involvement of the Reitox NFPs, of which a number are already involved in 'clusters' and 'twinning' in the framework of the DIS-Phare Project final phase.

To facilitate and speed up the integration of these countries in EMCDDA, the Commission is considering the possibility to commission to the EMCDDA the administration and financial management of the Programme.

4. Conclusion.

These perspectives of cooperation may open a new era in this domain, not only for the European agencies like the EMCDDA, but also for the European Union, in the difficult but necessary challenge of given the correct responses afforded by the Union to the needs expressed by associated countries. Information is a pre-requisite for action, but also information is at the very crosspoint between the political decision and the general public appreciation on the outputs of policy making in the daily life. Launching and developing the experiment in a 'negative' domain such as drugs and drug dependence is perhaps a very ambitious choice. Nevertheless, real progresses in building democracy had never been obtained with facility.

Strengthening of the State and its institutions- **A key direction of a drug control strategy**

Jorn Kristensen, UNDCP

Many countries in transition (CITs) have something in common – namely, unique vulnerabilities in relation to crime.

Criminal organizations tend to develop and flourish especially amidst the conditions that accompany the transition to democracy and the free market. The political transition in South Africa, for example, has been accompanied by the development of indigenous criminal organizations and the influx of groups from outside the country, as well as an increase in the problems of drug abuse and drug trafficking and an upsurge of the violence associated with both these phenomena.

Similarly, a dramatic increase in drug abuse and drug trafficking as well as in organized crime are being observed in many of Central and Eastern European CITs characterized by a dual transition to both democracy and a free market economy.

Drug trafficking flourished where the state capacity to enforce law and order is weakened – and the traffickers have a vested interest in ensuring that the state remains weak. One of the tools used to prolong this period of weakness is corruption. It undermines the public trust in government and the market economy, especially at the early stages of the transition period.

Another method used to keep the state weak is through support to ultranationalist and separatist political groupings. Drug traffickers try to support instability rooted in ethnic tensions and, through their illicitly acquired profits attempt to fuel separatist ambitions and armed conflicts where they deem it advantageous to do so.

A. The weakness of the state during the transition

The collapse of the state, which occurred in many CITs, was a major factor in the upsurge of organized crime, providing unprecedented opportunities for criminal organizations and drug trafficking groups. Several distinct aspects of weakness are particularly relevant to the rise of drug trafficking and criminal organizations and require elucidation.

The first one is linked to the lack of capacity to impose the same degree of order on the population as that achieved by the old regime. In periods of upheaval many of the normal constraints on the behavior of citizens disappear or, at the very least, are severely weakened. One element of transition is the need to rebuild and make function the legislative framework for the management of society. In the case of many CITs, a plethora of laws, decrees and proclamations has been created. Many of which have been at cross-purposes, many of which were poorly drafted, and many of which were ignored by those charged with their implementation. The careful balance to be struck between respect for human rights on the one side and the capacity for the

effective action against criminals and drug trafficking organizations on the other has proved elusive.

This has been an important factor in explaining the continued success of these groups, allowing them to flourish in an environment where they were certainly not immune from punishment, but where the legal instruments for their arrest, trial and detention, were not fully developed.

Another important manifestation of a state weakness has been the incapacity to put in place an appropriate regulatory framework for business. The crucial gap was created by the absence of a system for debt collection and effective peaceful arbitration of business disputes. In these circumstances criminal organizations were quick to see the market niche and offer their services. Individual debt collection operations rapidly consolidated into a system. Crime has become a surrogate of the state by absorbing one of its functions. Criminal organizations have gained access into the business world, creating a seamless web between licit and illicit business ventures.

A third dimension of weakness concerns the tax laws. There is a problem both with the laws and with their implementation. Taxation laws, as they currently stand in many CITS, are inappropriate to the new to the new economy and society. They provide perverse incentives for tax evasion and criminal behavior. Business evades taxes; criminal organizations discover this and are then in a strong position from which to engage in extortion. And for the business, it is cheaper to pay a criminal tax than the government tax.. Not surprisingly, therefore, the state authorities have found it difficult to develop an adequate tax base that provides a foundation for expanded provision for government services in a variety of sectors including law enforcement. As it stands, the effort to counter organized crime and the problems of drug trafficking and drug abuse are seriously hampered by the lack of adequate resources.

Another form of weakness, which in spite of its importance in relation to the growth of criminal organizations, is often overlooked – occurs when the state is incapable of continuing to provide the citizens a possibility of making a decent living. This type of weakness creates pressures and incentives for citizens to engage in criminal activities. Amidst conditions of economic hardship and hyperinflation, illicit sources of income offer opportunities that are simply not available in the licit economy. In many Chits, institutions that were once among the best rewarded for their service to the state have been relegated to the sidelines, with the military in particular having had to contend with poor conditions, low status, and late pay. Not surprisingly, therefore, in various Chits members of the armed services at different ranks have engaged in their own entrepreneurial activities that include the use of military medical establishments to produce and sell drugs, and the use of military transportation assets to transport them.

B. The threat to security

There is a growing realization in most states that the Cold War encouraged conceptions of security which focused almost entirely on external military threats and were, therefore, both narrow and incomplete. In the post Cold War world there has been a gradual realization that although external military threats cannot be ignored, the conception of security needs to be broadened significantly beyond such

contingencies. Indeed, there are several levels at which drug trafficking groups and other criminal organizations can pose threats to the transitional state.

As suggested above, drug trafficking and organized crime more generally tend to flourish when the state is weak. A state that is unable to take decisive action to prevent or control organized criminal activities provides a highly congenial environment for criminal groups, including drug trafficking organizations, allowing them to operate with a high degree of impunity. Not surprisingly, therefore, they try to perpetuate this weakness. This can be accomplished through the use of corruption. When considering corruption as an instrument of criminal and drug trafficking organizations there are two distinct levels to be considered – the operational and the systemic.

Operational corruption is designed to ensure the success of specific activities such as the transshipment of a particular consignment of drugs. While this undermines the efficacy of law enforcement in specific instances it is less serious than systemic corruption which is aimed at both the institutions of law enforcement and at the political elite and is designed to forestall the formulation and implementation of more stringent laws against organized crime and drug trafficking. This is not to suggest that all instances of corruption are linked to drug trafficking and organized crime: in many cases, corruption results from individual trying to exploit their official positions for personal gain and has no broader link.

The temptation to engage in such behavior is especially strong in an economy in which inflation is rampant and official salaries are both modest and fixed. Yet, an environment in which there are minimal safeguards against such behavior is also one that is ripe for exploitation by criminal elements attempting to target their activities for maximum impact. In these circumstances, the task of establishing a state apparatus which is not only fair and just but widely seen to be such – thereby accruing greater legitimacy – becomes an even more formidable task.

What makes this all the more serious is that if the transition to democracy in many CITs is ultimately to be successful then the state has to establish a high degree of legitimacy and effectiveness. Corruption undermines the prospects for both of these. Legitimacy is far less likely when there is a widespread perception that the servants of the state are benefiting either from their own criminal activities or from tacitly condoning the activities of criminal and trafficking organizations. Similarly, for the state to be seen as effective it has to be seen as imposing a higher degree of law and order than has hitherto been the case. Without this, obtaining a high degree of legitimacy will prove even more elusive.

In sum, criminal and drug trafficking organizations can be regarded as the AIDS virus of the modern state. Just as the AIDS virus breaks down the body's immune system, powerful criminal organizations can break down the defense mechanism of the state. In some cases criminal organizations are able to extend their networks into law enforcement institutions thereby neutralizing and undermining these institutions. The capacity of criminal organizations to spread corruption can also distort the purposes that the state is supposed to serve. At worst, the state becomes the servant of the criminal organization placing whims and desires of the criminal leaders above the needs of the citizens.

C. Corner-stones of UNDCP Policy

The policy of the United Nations International Drug Control Programme (UNDCP) is based on its mandate, contained in three main drug control Conventions, the Comprehensive Multidisciplinary Outline of Future Activities in Drug Abuse Control (CMO), the Global Programme of Action (GPA) and General Assembly resolutions, particularly resolution 45/179 of 21 December 1990 on establishing UNDCP. In pursuing this policy, UNDCP assists governments to implement a balanced approach to drug control – targeting both illicit supply and demand – to attain the over-arching goal of reducing drug abuse and trafficking until they no longer pose significant threats. UNDCP supports movement towards this goal through the provision of technical advice and assistance to Member States and co-ordination to drug control activities within the United Nations system.

Based on the above mandate as well as decisions of the United Nations Commission on Narcotic Drugs (CND) which is the main inter-governmental policy-making body of the Economic and Social Council (ECOSOC) on drug control, the policy of UNDCP is targeted towards:

- Coordination and promotion of international drug control to ensure greater unity of purpose and coherence of action by the international community, to establish cooperative arrangements in selected sub-regions, to improve national capacities in coordinating drug control activities and in developing and implementing comprehensive drug control policies, and to increase awareness among decision-makers and opinion makers, as well as the general public, of the drug problem and its consequences.
- International drug control monitoring and policy-making to improve the quality of support to the CND, its subsidiary bodies and INBC, and to establish and strengthen national controls over narcotic drugs, psychotropic substances and their precursors.
- Prevention and reduction of drug abuse, elimination of illicit crops and suppression of illicit drug trafficking. To achieve this, UNDCP aims to ensure availability to governments of reliable data on drug abuse and illicit demand for drugs, on cultivation of illicit crops, and on patterns and trends in illicit drug trafficking, including laundering of illicit proceeds from the drug trade. The provision of such information is designed to enable governments to formulate more effective counter-measures and strategies.

D. UNDCP Efforts to support Democracy and Governance

We do believe that UNDCP-coordinated international assistance can contribute to the strengthening of institutional structures in many CITs.

For example, legal assistance provided by UNDCP in 1992-1997 directly contributed to accession of 7 European CITs to international drug control convention, adoption of the general framework laws on drug control in 3, and enactment of laws creating national administrative frameworks for interministerial coordination of drug control

activities – in further 9. In addition, Penal Codes including provisions from UNDCP model legislation have been adopted or are ready in the last draft in 11 CITs.

UNDCP has trained over 1200 drug enforcement officers and provided close to US\$ 10 million worth of various operational equipment. But in comparison with the real requirements dictated by the scope of the drug control problem, the above resources represent a drop in the ocean. UNDCP efforts are not intended to supplement the involvement of the state. UNDCP can and does help to identify major stumbling blocks on the way to efficient drug control strategies. UNDCP can and does provide seed money to start the progress towards the jointly identified goals. But it is up to the individual states, acting together and in concert, to reach these goals.

It is quite heartening to observe how the attitude of individual states towards drug control cooperation has matured in the past few years. In particular, the division into donor and beneficiary countries is gradually transforming itself into an equal partnership. Drug control objectives are moving up the roster of national priorities and states are dedicating more and more resources towards their achievement.

Post-European Conference perspectives

Jonathan Duke-Evans
Head of Action against Drugs Unit
Home Office, United Kingdom

Mr Duke-Evans was representing the United Kingdom, which by the accident of rotation held the Presidency of the European Union in April 1998

INTRODUCTION

My own role as Head of the UK Home Office Drugs Unit means I am closely involved in the Justice and Home Affairs issues of the UK Presidency of the EU. During this six months I have had the interesting experience of acting as Co-Chairman of the European Union's Co-ordinating group on action to combat drug misuse. Having had the chance to listen to a little of the debate on measures to combat illicit drugs and organised crime, what strikes me more than ever is the extent to which we agree on the practical action required to combat this trade. European history has not always been harmonious and there remain particular regions of conflict on our Continent. Organised crime, of course, feeds on division and discord. It looks to exploit national boundaries and differences in legislation and procedure. The victims, whether they be of the trade in illicit drugs, of trafficking of human beings, or terrorism, look to us to establish the government mechanisms and inter country and inter-agency co-operation required to act together in the most effective way. None of this will be new to you, but I think you might find it helpful to hear the latest developments in what the European Union is doing about it. And what we want to encourage in the countries which will be joining with us in the next few years..

UK PRESIDENCY DRUGS WORK PROGRAMME

The European Union has a distinguished record in promoting co-operation among its Member States against the trafficking and misuse of drugs. It has a comprehensive programme of action against drugs on all fronts, and, inheriting a very active programme from previous Presidencies, the UK Presidency has taken up the challenge of driving it forward.

(i) SYNTHETIC DRUGS EARLY WARNING SYSTEM

One of the EU's priorities has been the implementation of an early warning system for the rapid reporting of new types of synthetic drug to the European Monitoring Centre for Drugs and Drugs Addiction in Lisbon and the Europol Drugs Unit in The Hague, as soon as they appear anywhere in the Union. The ensuing risk assessment process, under the aegis of the Scientific Committee of the EMCDDA will consider both health and social risks caused by the use of, and the traffic in, the substances and the

possible consequences of their prohibition. The early warning system will enable Member States to anticipate trends and to make speedy decisions on controlling specific new drugs, as soon as, rather than after, they emerge as problems.

(ii) APPROXIMATION OF LAWS AND PRACTICES

We are also considering the scope for further approximation of the laws and practices of Member States wherever this will help in the reduction of drug trafficking and misuse. As part of this programme, the Presidency has proposed a joint action which will make it easier for the enforcement and judicial authorities of Member States to cooperate at a practical, working level in the tracing, freezing and seizure of the proceeds from serious crime.

(iii) EUROPOL

One of the recommendations of the wide ranging Action Plan on Organised Crime the EU put in place last June is to get Europol up and running by the middle of this year. The future Europol will play a key role in developing our response to organised crime. The UK and its fellow Member States strongly support the work that he and the EDU are already doing and look forward to implementation of the Europol Convention as soon as possible. All but two Member States have now completed their domestic ratification procedures. We are therefore nearly there.

One important part of Europol's future work will lie in its engagement with countries and organisations outside the Union. This can only happen once the Convention is in force. But Europol will then have a legal basis for concluding formal agreements, including arrangements for the exchange of intelligence and practical co-operation. I know that many of the countries represented at *the Pan-European Platform against Drugs* of the College of Europe have already paid visits to the EDU in The Hague and have begun to develop informal contacts. But we need to move on to more formal relations as soon as we can.

(iv) PRE-ACCESSION PACT ON ORGANISED CRIME

Another recommendation of the Action Plan on Organised Crime is the agreement of a Pre-Accession Pact on Organised Crime between the EU and the candidate countries of Central and Eastern Europe, including the Baltic States, and Cyprus.

The need to foster practical co-operation and develop more formal relationships in the longer term clearly underpins this process, and this is an issue that the UK Presidency has tried to push hard. We hope very much that it will be possible to finalise the Pact so that it can be agreed in the margins of the Justice and Home Affairs Council meeting at the end of next month.

We should also recognise that - while it is clearly helpful and important to make a high level political commitment of this sort - it is not breaking completely new ground. There is of course a range of encouraging practical co-operation already taking place between our countries, on a bilateral and a multilateral basis. I would mention in particular the specific investigations of transnational organised crime, through both law enforcement and judicial co-operation, and the work that is being

done to develop training programmes for the countries of Central and Eastern Europe. Of course we can do more - and we will try to do so. But we are not starting to write on an empty page.

ENLARGEMENT

Negotiations on membership, of course, were formally opened on 30 March with the six first wave countries identified at the Luxembourg European Council: Cyprus, the Czech Republic, Estonia, Hungary, Poland and Slovenia. At the same time, the accession process was opened with five other countries: Bulgaria, Latvia, Lithuania, Romania, and Slovakia.

The efficient management of enlargement is one of the main priorities of the UK Presidency of the EU. The UK has long maintained that the justice and home affairs aspects are among the most vital: strong frontier controls, efficient means for fighting organised crime, and institutional arrangements which respect the rule of law are all central to the functioning of a strong European Union.

The Accession Partnerships, which set out the Justice and Home Affairs 'acquis', are a key feature of the enhanced pre-accession strategy for the candidate countries. They provide single frameworks within which all forms of assistance to the candidate countries can be mobilised in support of their accession programmes. They cover, for each candidate country, the priorities to be observed in adopting the acquis and the financial resources available for the purpose. Their objectives include strengthening democracy and the rule of law, protection of minorities, economic reform, reinforcing institutional and administrative capacity, and preparing for the single market.

Only a few minor points remain to be finalised and we expect that this work will be completed and the results forwarded to the applicant states very soon. The list of the acquis needs to be up-dated from time to time, since it is constantly evolving and it will develop between its initial presentation to the candidate countries and the date of accession to the Union.

But the task for the candidate countries is not simply one of enacting the Third Pillar acquis. The bigger challenge is its satisfactory *implementation*, as well as acceptance and ratification of instruments.

IMPLICATIONS OF TREATY OF AMSTERDAM AND SCHENGEN INCORPORATION

No debate on the European Union's fight against drug trafficking can be complete without recognition of the importance of the fundamental changes which the Treaty of Amsterdam will lead to.

At the heart of our present discussion are the provisions for removal of controls on persons at internal frontiers. Both the Free Movement Chapter of the Amsterdam Treaty, and the incorporation of Schengen into the EU structures, will consolidate a frontier-free European mainland. Only the UK and Ireland have opted to retain their right to operate frontier controls at their own ports of entry. Two Working groups are considering the technical and legal issues involved in bringing Schengen into the

structure of the European Union. Good progress is being made towards achieving the goal of incorporation at the same time as the ratification of the Treaty of Amsterdam.

The provisions of the Free Movement Chapter and the incorporation of Schengen seek to encourage free movement in the European Union. But, an inevitable consequence of lifting barriers to movement is the risk of facilitating the spread of organised crime. More than ever before, Member States must cooperate at all levels to ensure that organised crime is not allowed to take advantage of the removal of internal frontiers. It will not be sufficient to tackle one aspect of crime in isolation; drug trafficking, illegal immigration and other serious criminal offences are all being perpetrated by the same well organised gangs, who use techniques and contacts developed in one context - for example drugs smuggling - in an increasing range of crimes.

The contribution of the candidate countries in the fight against organised crime will be very important. Close co-operation and effective communication between existing Member States and the partner countries - at both an EU level and on a bilateral basis - are recognised as crucial and are developing. Unless we have effective external border management regimes and immigration controls we shall see a rapid spread of organised crime.

(i) EUROPEAN CONFERENCE

The European Conference, whose inaugural meeting took place on 12 March, agreed that the UK Presidency would convene a Working Group of experts from countries forming the European Conference to “quickly consider the problems associated with organised crime and trafficking of drugs”. The recommendations of this Group were to be submitted to the Conference within 12 months. The UK Presidency has been considering with other Member States how best to give practical effect to this remit, given the clear risk of duplication with other initiatives in the organised crime field. Ideas will shortly be put to the applicant countries in a letter from our Prime Minister.

Of course, I cannot tell you today precisely what the proposals will be. But we do intend to ensure that any working group has a distinctive remit, and does not duplicate or undermine work being carried forward by other groups, in particular the Pre-Accession Pact on Organised Crime.

In addition, the European Commission agreed at the European Conference to undertake a stocktake of work among Conference participants to combat the drugs trade, in particular in the area of drugs demand reduction. We look forward to seeing the results of this stocktake, which will provide a very useful basis for considering follow-up action. We welcome the increasing focus on demand reduction as a key component of any national drugs policy or strategy, both globally - with the Declaration on Guiding Principles of Demand Reduction for the Special Session on Drugs in June - and regionally, as in the EU's Community Action Programme on prevention of drug dependency.

(ii) ASSISTANCE UNDER EC PHARE PROGRAMME

The EU can help the accession countries prepare for membership in many ways, both practical and financial. As you know, the Phare Programme is the EU's main channel of financial support to assist the applicant states in their preparation for membership, and it provided 6.7 billion ECU over the period 1995-1996. There have been expert missions identifying priority needs and activities in the field of Justice and Home Affairs conducted by the Commission to Romania, Hungary, Slovakia and the Czech Republic in 1996/7. Further missions have been concluded in Slovenia in January 1998 and Romania in April 1998, with missions to Bulgaria, Estonia, Latvia, Lithuania and Poland planned for the next few months.

It is important that future missions should continue to focus on priority needs and areas. We have been pleased to see the recognition of the important role which Member States can play in those process, through the expert missions and by virtue of their expert knowledge, to ensure that funds are properly directed and take account of the often extensive bilateral assistance already being provided.

In the drugs field, there has of course long been a Phare Multi-country drugs programme, which has carried out some valuable work, for example in developing legislation and administrative structures and in training both enforcement and regulatory personnel in all aspects of precursor control. Much progress has been made in this field of precursor chemicals, which is of the highest importance. Awareness has been raised throughout the region and legislation is either in place or near to completion in 10 countries.

(iii) DEVELOPING A POST 1999 STRATEGY

In recent years, drugs has become an increasing priority for co-ordinated and cooperative action within and between the Community and its Member States. The current 5-year EU Action Plan to Combat Drugs ends next year. The United Kingdom Presidency has started off the consideration within the EU of possible key elements for inclusion in a new EU Drugs Strategy for the years 2000 to 2004. The EU will endeavour to ensure that the new strategy both underpins and provides added value to Member States' efforts in tackling drug misuse and drug trafficking. Of particular importance will be promoting more effective co-operation between police, customs and judicial agencies, by removing barriers to practical co-operation at working level through for example exchanges of personnel and good practice. It will also be aimed at ensuring an effective exchange of knowledge, information and experiences between Member States (and between the EU and partner countries) on drugs related issues, in particular in the field of demand reduction, drugs prevention and treatment services.

There is much to be done in developing the details of the new strategy over the coming months, under the next Presidencies, but we hope that the Cardiff European Council will endorse the **key elements** of that strategy.

CONCLUSION

The actions I have tackled in this paper are significant undertakings, but the measures candidate countries take to strengthen their institutions, their legislation and their external borders will be crucial. The EU welcomes the steps you have already taken. The future must be founded on the principles of partnership and mutual respect. Taking forward the enlargement process is the major priority for the EU - and the drugs and crime component of that process is of real importance. We must all maintain the present momentum to achieve change, so that the dream of an enlarged EU which adequately protects its citizens against illicit drugs becomes reality.

CONCLUSIONS⁵⁶

1. I have been given the difficult task of summing up an enriching debate with nearly 30 interventions by highly qualified speakers and several hours of fruitful and clarifying discussions.
2. Several of the interventions were not only exhaustive, but also original and enlightening. In this context I would in particular like to point to the interventions by Mr. Esmeijer⁵⁷ - who took an economist's perspective on money laundering - and Father Jarosz's intervention who gave the perspective of a Catholic Priest who gives hope through practical action "sur le terrain".
3. In the student dormitory at the College of Europe, there is a small sign on the wall saying:

"What is small, dark and knocks on the door?
- the future."
4. This sign illustrates in a few words where we seem to be in the area of drugs policy today: We are looking towards the future but we do not seem to know really what we left behind us, nor where we are at present.
5. It illustrates also the frustration that practitioners and policy makers have when they deal with the drugs problem, probably because there are no solutions, or at least there are no simple solutions. Perhaps we should even stop referring to it as a "problem", thus implying that there might be a solution. In fact, the phenomenon of drugs is so complex, so challenging, so intermingled in legal, political and moral issues that it is hardly impossible for one single human being to grasp the whole issue - let alone to tackle the phenomenon and solve it.
6. This sense of frustration was well captured by one of the participants who said: "We all know everything; there are plenty of questions and plenty of answers - but why is nothing happening?"
7. Other participants stressed however the need to continue to analyze the phenomenon and to set up further strategies in this eternal fight. What was important to them was not to give up but to work with the motto of Schumann: "do it step by step".

⁵⁶ by Professor Hans G Nilsson, College of Europe. Mr Nilsson is Head of Division, Justice and Home Affairs, Council of the European Union. The views expressed are not necessarily those of any of these institutions.

⁵⁷ Oral contribution to the *Pan-European Platform against Drugs*. Not put up in the publication.

8. It seems that the European Union has no magic solution to this phenomenon either. The call from one of the participants for "a clear message" must remain unheard for the time being. And the truth is that the European Union as such or the 15 Member States collectively, cannot give a single clear message.
9. However, as was demonstrated amply by a number of interventions, one cannot go as far as to say that there is no message. On the contrary, the European Union has made substantive progress - in particular since the famous letter of President Mitterand in 1989 - in achieving a large convergence of views among the Member States and the Community and has worked out and implemented a number of strategies.
10. Such strategies can be found in several important documents, such as:
 - * The EU Action Plan to Combat Drugs 1995-1999,
 - * The Madrid drugs strategy,
 - * The Community Programme on the Prevention of Drugs Dependency,
 - * The 3-year strategy of the EMCDDA,
 - * A number of Conventions, Joint Actions, Resolutions and Recommendations, adopted under Article K of the Treaty.
11. And one can easily monitor and assess progress in the implementation of these strategies, by studying for instance the annual drugs report to the European Council - last in December 1997 to the Luxembourg European Council - the annual reports by the EMCDDA or the various reports drawn up by the European Commission.
12. When I organized in 1991 what was then probably the first Pan-European Conference on drugs policy after the falling down of the Berlin Wall (within the framework of the Pompidou Group of the Council of Europe), the drugs problem was "officially unknown" (as the Vice-Rector of the College of Europe put it in his opening statement⁵⁸ to the Platform). Since then, as was pointed out by a number of speakers, the profound changes from a command economy to a transition economy, considerable changes in the society and legal order, combined with an increased mobility of persons and goods, have led also to profound changes in the drugs scene.
13. Since that time, it has become clear that the Countries of Central and Eastern Europe have imported serious drugs problems (apart from alcohol problems, which they had already) and that they are not only transit countries but also producers as well as consumers. The Vice-Prime Minister of Poland mentioned in his opening statement⁵⁹ that the Republic of Poland now has 30-40.000 drug addicts and that about 8.000 committed offences are drug related.
14. At the same time, it is important to remember that the picture is not the same in all CCEE's. In Estonia, for example, there was yet no reason for alarm as the figures were comparably low, but, on the other hand, several of the key indicators were rising.

58 Not put up in the publication.

59 Not put up in the publication.

15. The Conference showed the importance of reliable data and up-to-date statistics. If one can compare data and analyze the phenomenon, it will only then be possible to take effective measures. Key words in this context are "situation, trends, causes and consequences", as one participant expressed it. After that we should add the key word "Action".
16. In this context should be mentioned the very valuable work of the EMCDDA and its Annual Report, compiled via the REITOX network and carefully edited into a useful and informative report. The report, now only in its third year of existence, has already become a very important tool for policy makers and a source of information and an inspiration to the public in general, and it is to be welcomed that this report also - within short, we can hope - will be extended to the applicant countries of Central and Eastern Europe.
17. Although differences in policy, local circumstances and traditions were highlighted during the Platform, also a good measure of similarity in the analysis was found. There were, for instance, converging views on the following:
 - supply of drugs is rising, although variations at local level exists,
 - drug-related crime is rising,
 - the position of harm reduction is important,
 - legalisation of possession for personal use of cannabis is a non-issue in the CCEE's whereas the issue is under continued debate in the EU, as the recent example of Belgium shows,
 - the role of the public opinion is very important, and if public opinion is affected, so is prevention measures,
 - the authorities, NGO's and all involved need more resources (also human) for actions both on the demand and the supply side. In this context, the crucial role of the PHARE programme was stressed.
18. During the two days, it became clear that there was not one single answer to be given, nor a single strategy or a single recipe. But many interesting and worthwhile suggestions were made by several participants, and the rapporteur would like to highlight a few of them as particularly important and interesting.
19. Several participants stressed the role of the NGO's and their practical work on the ground. This work should be encouraged by governments. In particular, it was mentioned that in the Czech Republic, the NGO's had not been permitted to exist and work in practice, but had - like a Sleeping Beauty it was said - revived in all its glory.
20. A similar message was given by the two Priests attending the Platform, although they expressed it differently. They gave hope through practical work and faith and their theory was a form of "Need reduction through hope creation".
21. The Deputy Prime Minister advocated a long-term strategy and said that only international cooperation can come to grips with the phenomenon. Like several of the representatives of the European Commission, he pruned a

multidisciplinary approach, although he expressed it in simple terms: "Everybody has to be involved".

22. The representative of the Council of Europe, together with several participants, had a similar message⁶⁰ and stressed the need to involve politicians, policy makers and the general public. Other participants highlighted the important role of the mass media.
23. A number of participants placed the emphasis on the need to get better data. When the data had become better and more comparable we could move forward with a pragmatic approach based on better information. These participants advocated a move from a "purely moral based strategy to an evidence based strategy".
24. One of the representatives of a country of Central and Eastern Europe called in strong terms for a more active role of the European Union in this field. He said that the CCEE's expected guidance from the EU. Could the Commission perhaps develop some common "Maastricht criteria" for a successful demand and supply reduction policy? What are the criteria for a successful policy and which one works better?
25. The participants of the Platform were also informed of the situation in terms of legislation which - although perhaps varying in quality - may be said in general to be very modern. In the opinion of the rapporteur, there may be some countries of the EU which have something to learn in terms of legislation from the applicant countries which have made great legislative efforts recently. In particular the repressive legislation have very often been modernized and may give rise to envy with law enforcement in the West. However, as all legislation, there is a need for implementation on the ground and there is still much to do.
26. Another feature, clear from the presentations, was the efforts by the Countries of Central and Eastern Europe to set up interministerial, coordinating bodies at high level to coordinate the response to the drugs phenomenon and several representatives of such bodies were present at the Platform. Also in this respect probably, the EU Member States could learn from applicant countries.

27. In conclusion, the Platform proved the value of bringing together high level experts and policy makers, as well as representatives from the civil society in order to continue the search for the ultimate drugs policy - perhaps like the search for the Holy Graal? Nevertheless, two participants from Central and Eastern Europe probably gave each a good summary - albeit at different levels of policy - of what is needed for this search. One of the experts said that what is needed is:

- prevention,
- repression,
- rehabilitation, and
- resocialisation

⁶⁰ Oral contribution to the *Pan-European Platform against drugs*. Not put up in the publication.

i.e. a multidisciplinary approach, and the other added these elements:

- political support,
- real coordinating bodies, and
- tools for implementation, i.a. money.

- 28 The Consequences of the Eastern Enlargement of the European Union in the field of Drugs should also be envisaged in the global perspective. As the Vice-Rector underlined in his address, the European Union will appear as an anchor of security and welfare improvement for the whole European Continent at the special assembly of the United Nations in June 1998. The Head of section for Europe and the Middle East from UNDCP reminded the participants that the Drug control regime was based on three UN Conventions. A representative from the Phare Programme Co-ordination Unit welcomed the fact that all candidate countries have ratified those conventions. The significant assistance of UNDCP to the pre-accession process in institution-building was also mentioned by some participants.
29. In his concluding intervention, the representative of the Presidency of the Council of the EU gave some further hope to the participants, when he informed them of the efforts of the Presidency to draw together elements for a post-1999 strategy against drugs. One can wish that the Member States of the EU and the Commission rapidly can agree on this strategy, and that the Countries of Central and Eastern Europe will form an integral part of it.

Annex : list of participants to the *Pan-European Platform against Drugs*

College of Europe-Natolin, 24-25 April 1998

| Name | Surname | Function | Institution | Origin |
|--------------|----------------|---------------------------------------------------------|----------------------------------------------------------------------|-----------------|
| 1. Danilo | Ballotta | Expert, Information resources Department | European Monitoring Center for Drugs and Drug- Addiction | Lisbon |
| 2. Romualda | Baranauskiene | Deputy Minister of Health | | Lithuania |
| 3. Pavel | Bem | Executive Secretary | National Drug Commission | Czech Republic |
| 4. Alexandre | Berlin | Advisor to the Director | DG V, European Commission | |
| 5. Nicolas | Blais | Permanent Representative | Fondation "France- Pologne" | Warsaw |
| 6. Louis | Blondiau | Programme Manager | Phare Multy- Country Drug Programme Coordination Unit | Riga |
| 7. Ken | Bluestone | Catholic Institute for International Relations | European NGO Council for Drugs and Development | London |
| 8. Nathalie | Bolgert | Journalist | Courrier de Varsovie | Warsaw |
| 9. Almut | Brunkhorst | Student | College of Europe | |
| 10. Willy | Bruggeman, | Assistant Co- ordinator | Europol | The Netherlands |
| 11. Janis | Caunitis | Head of Department | Drug abuse prevention and treatment centre | Latvia |
| 12. Miroslav | Cerbak | First Deputy Minister | Ministry of Health | Czech Republic |

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|----------------|-------------------|-----------------------|----------------------------------------------------------|-----------------|
| 13. Gorges | Concalves Cabacco | Student | College of Europe | |
| 14. Anthony | De Angello | Pastoral Associate | St John Bosco Mission | United States |
| 15. Pedro | de Oliveira | Student | College of Europe | |
| 16. Louis | de Souza, | Research Fellow | European Institute | Florence |
| 17. Ralitza | Dimitrova | Student | College of Europe | |
| 18. Roshan | Di Puppò | Student | College of Europe | |
| 19. Marian | Dragan | Major | Ministry of Interior | Romania |
| 20. Maria | Dunin-Wasowicz | Communication officer | College of Europe | |
| 21. Eric | Esmeijer, | Expert | MSDP, Phare Programme | The Netherlands |
| 22. Georges | Estievenart | Director | European Monitoring Center for Drugs and Drug-Addiction, | Lisbon |
| 23. Marek | Evison | Academic assistant | College of Europe | |
| 24. Emiko | Fujita | Student | College of Europe | |
| 25. Ariane | Galland | Trade Representative | Walloon Region of Belgium | Warsaw |
| 26. Christophe | Hillion | Academic Assistant | College of Europe | |
| 27. Dr Judith | Honti | Co-ordinator | Central Eastern European Harm Reduction Network | Szeged, Hungary |
| 28. Marilena | Hritcu | Student | College of Europe | |
| 29. Leszek | Jesien | Research Fellow | College of Europe | |
| 30. Krzystof | Jarosz | Parish Priest | Secondary School "Dewajtis" | Warsaw |

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|----------------|--------------------|-------------------------------------------------------|------------------------------------------------|----------|
| 31. Ania | Jarosz | Academic Assistant | College of Europe | |
| 32. Mathew | Kahane | Head of UN Mission, UNDCP representative | | Warsaw |
| 33. Tarmo | Kariis | Senior Expert | Ministry of Health | Estonia |
| 34. Elemer | Kiss | State Secretary | Prime Minister Office | Hungary |
| 35. Drago | Kos | Deputy Director of Criminal Investigation Directorate | Ministry of Interior | Slovenia |
| 36. Jorn | Kristensen, | Chief of the section for Europe and the Middle East | UNDCP, | Vienna |
| 37. Piotr | Kuliczewicz | Deputy Legal Advisor | Delegation of the European Commission | Warsaw |
| 38. Juris | Labis | General, deputy State Secretary | Ministry of Interior | Latvia |
| 39. Philip | Lazarov | National Focal Point for Drug Information System, | Ministry of Health | Bulgaria |
| 40. Christophe | Luckett | Secretary-General | Pompidou Group Council of Europe | |
| 41. Elzbieta | Lyczewska | | Catholic movement "Karan" | Warsaw |
| 42. Olaf | Mejer-Zahorowski | Expert | Ministry of Health | Poland |
| 43. Orla | Mc Breen | Academic Assistant | College of Europe | |
| 44. Saskia | Mülder | Lecturer | University of Limburg, Maastricht | |
| 45. Nicolas | Nève de Mévergnies | Academic Assistant | College of Europe | |
| 46. Nicolae | Neagu | Brigade General | Ministry of Interior | Romania |
| 47. Margareth | Nilsson | Head of Demand Reduction Department | European Monitoring Center for Drugs and Drug- | Lisbon |

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|----------------|---------------------|-----------------------------------------------------------------|----------------------------------------------------------|----------------|
| | | | Addiction, | |
| 48. Hans | Nilsson, | Head of the Division for Judicial Co-operation | DG H, Council of the European Union/ Secretariat General | |
| 49. Konrad | Olszewski, | Expert | UN AIDS Programme, | Warsaw |
| 50. Maria | Ostoja Ostaczewska, | Project manager | UN Umbrella Programme, | Warsaw |
| 51. Ryszard | Ostrihanski | Drug Demand Reduction expert | | Poland |
| 52. Marek | Pienkowski | Parish Priest | Dominican Congregation | Warsaw |
| 53. Iwona | Piorko | Student | College of Europe | |
| 54. Gilles | Lepesant | Research Fellow | College of Europe | |
| 55. Miklos | Ritecz | Desk Officer for European integration | Hungarian Embassy | Warsaw |
| 56. Marzena | Rogalska | | Ministry of Finances | Warsaw |
| 57. Jacek | Saryusz-Wolski | Vice-Rector | College of Europe | Warsaw |
| 58. Roumen | Sedevov | Drug Demand Reduction Co-ordinator | Phare Multy-Country Drug Programme Coordination Unit | Riga |
| 59. Ghuislaine | Stevens, | Project manager, | Birks Sinclair & Associated Ltd | United Kingdom |
| 60. Emilis | Subata | Head of Vilnius Narcological Centre | | Lithuania |
| 61. Maciej | Swidewski | Chairman | Fondation "Pro-Europe" | Warsaw |
| 62. Katalin | Szomor | Drug National Co-ordinator | Ministry of Welfare | Hungary |
| 63. Martina | Terminova | Director | Sananim | Czech republic |
| 64. Janusz | Tomaszewski | Deputy Prime Minister and Minister of Interior & Administration | | Poland |
| 65. Eric | Tonon | | Bank "Caisse des Depôts" | France |
| 66. Rafal | Trzaskowski | Research Fellow | College of Europe | |

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|----------------|--------------|---------------------------------------------|-----------------------------------------------------------------|----------------|
| 67. Ann | Vanhout | Task Manager Title VI | DGIA, EuropeanCommis sion | |
| 68. Gert | Veurmeulen | Lecturer | University of Gent | Belgium |
| 69. Martin | Vrancic | Senior expert | Ministry of Interior | Slovenia |
| 70. Vladimir | Vyskoc | Director at the National Drug Service | Ministry of Interior | Slovakia |
| 71. Elisabeth | Vyslonzil | Research Fellow | Austrian Institute for Est and South-East Europe (OSI) | Vienna |
| 72. Kalina | Waltenberger | conference co- ordinator | College of Europe | |
| 73. Arthur | Widera | Research Fellow | University of Sussex | United Kingdom |
| 74. Jagoda | Wladon | | Movement “Solidarni Plus” | Warsaw |
| 75. Wlodimierz | Ziamba | National Drug Co-ordinator | Ministry of Interior | Poland |
| 76. Marek | Zygadlo | | MONAR | Krakow |