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REPORT

Proposal for a European Parliament recommendation to the Council on the
European strategy on fighting drugs (2005-2012)
(2004/2221(INI))

Committee on Civil Liberties, Justice and Home Affairs

Rapporteur: Giusto Catania

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PROPOSAL FOR A EUROPEAN PARLIAMENT RECOMMENDATION TO THE COUNCIL

on the European strategy on fighting drugs (2005-2012) (2004/2221(INI))

The European Parliament,

- having regard to the proposal for a recommendation to the Council (which was submitted by Rosa Díez González on behalf of the PSE Group) concerning the European strategy on fighting drugs (2005-2012) (B6-0070/2004),
- having regard to Title V of the EU Treaty,
- having regard to Title VI of the EU Treaty and in particular Article 31(1)(e) and Article 34(2)(b) thereof,
- having regard to the EC Treaty and in particular Article 252 thereof,
- having regard to the Treaty establishing a Constitution for Europe and in particular its Articles I-16, I-17, I-40, II-94, II-95, III-271, III-278, III-305 and others,
- having regard to the international, European and national instruments for the protection of human rights and fundamental freedoms and, in particular, protection of the right to life and health,
- having regard to the incorporation of the Schengen *acquis* into the EU and EC Treaties respectively,
- having regard to the following UN Conventions: on Narcotic Drugs, of 30 March 1961, amended by the Geneva Protocol of 25 March 1972; on Psychotropic Substances, of 21 February 1971; and against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, of 19 December 1988,
- having regard to Council Regulation (EEC) No 302/93 of 8 February 1993 on the establishment of a European Monitoring Centre for Drugs and Drug Addiction¹,
- having regard to the Commission Communication to the Council and the European Parliament on the EU Action Plan to Combat Drugs (1995-1999) (COM(94)0234),
- having regard to the Political Declaration on Drugs and the resolutions adopted at the UN General Assembly Special Session (UNGASS) of 8 and 10 June 1998,
- having regard to European Parliament and Council Decision 102/97/EC of 16 December 1996 adopting a Community action programme on preventing drug dependence within the

¹ OJ L 36, 12.2.1993, p. 1.

framework of action in the field of public health¹,

- having regard to Council Joint Action 96/750/JAI of 17 December 1996, concerning the approximation of the laws and practices of the Member States to combat drug addiction and to prevent and combat illegal drug trafficking²,
- having regard to Council Joint Action 97/396/JAI 16 June 1997 concerning the information exchange, risk assessment and control of new synthetic drugs³,
- having regard to Council Regulation (EC) No 2046/97 of 13 October 1997 on North-South cooperation on fighting drugs and drug addiction⁴,
- having regard to the annual reports of the European Monitoring Centre for Drugs and Drug Addiction,
- having regard to the Council and Commission Action Plan on how best to apply the provisions of the Amsterdam Treaty on establishing an area of freedom, security and justice⁵ (which was adopted at the Vienna European Council in December 1998) and in particular points 13, 14, 44, 47 and 51 thereof,
- having regard to the conclusions of the Tampere European Council of 15 and 16 October 1999 and in particular points 43, 48, 50, 59, 60, 61 and 62 thereof,
- having regard to the Helsinki European Council of 10 and 11 December 1999 and in particular conclusion 51 thereof, in which the European Strategy against Drugs (2000-2004) was noted,
- having regard to the conclusions of the Santa María da Feira European Council of 19 and 20 June 2000 and in particular point 51 thereof, in which the EU Action Plan Against Drugs (2000-2004) was adopted,
- having regard to European Parliament and Council Directive 2001/97/EC of 4 December 2001 on prevention of the use of the financial system for the purpose of money laundering⁶,
- having regard to the Commission Communications to the Council and the European Parliament on the application of the EU Action Plan Against Drugs 2000-2004 (COM(2001)0301 and COM(2002)0599),
- having regard to the proposal for a Council Regulation amending Council Regulation (EEC) No 302/93 of 8 February 1993 on the establishment of a European Monitoring Centre for Drugs and Drug Addiction (COM(2003)0808 - 5085/04 CORDROGUE 7 SAN 3,

¹ OJ L 19, 22.1.1997, p. 25.

² OJ L 342, 31.12.1996, p. 6.

³ OJ L 167, 25.6.1997, p. 1.

⁴ OJ L 287, 21.10.1997, p. 1.

⁵ OJ C 19, 23.1.1999, p. 1.

⁶ OJ L 344, 28.12.2001, p. 76.

- having regard to European Parliament and Council Regulation (EC) No 273/2004 of 11 February 2004 on drug precursors¹,
 - having regard to the Council’s adoption of the framework decision on drug trafficking,
 - having regard to Rules 114(3) and 94(1) of its Rules of Procedure,
 - having regard to the report by the Committee on Civil Liberties, Justice and Home Affairs (A6-0067/2004),
- A. whereas drug consumption and drug peddling are reaching extremely high levels in all the Member States, and this problem cannot be resolved by each State on an individual basis, which means that it is essential that the EU adopt a genuine European policy on fighting drugs, and implement it in an integrated, global manner, using all necessary means to prevent and resolve the human health and social exclusion problems it causes, and repair the damage done to society by drugs-related organised crime,
- B. whereas, despite the policies carried out to date at international, European and national level, the production, consumption and sale of illicit substances listed in the three United Nations conventions have reached extremely high levels in all the Member States, and faced with this failure it is essential that the EU revise its general strategy on narcotic substances,
- C. whereas the JAI Council decided at its meeting of 8 June 2004 that a new EU Drugs Strategy needed to be implemented for 2005-2012, on the basis of two EU Action Plans on Drugs, each lasting three years (2005-2007 and 2009-2011) and each followed by a one-year evaluation period (2008 and 2012), and that this Strategy would be adopted at the European Council of December 2004,
- D. whereas on 6 July 2004, the Dutch Council Presidency presented the draft European Drugs Strategy (2005-2012) (CORDROGUE 53) to the Horizontal Drugs Group, taking account of the conclusions of the Dublin Conference on an EU Drugs Strategy (CORDROGUE 36), of 10 and 11 May 2004; whereas this draft was subsequently considered at the meetings of 7 and 8 September, 30 September, and 1 October 2004,
- E. whereas the European Monitoring Centre for Drugs and Drug Addiction (EMCD) and the Commission have not yet submitted their respective technical and political assessment reports, assessing to what extent the eleven general objectives and six principal objectives established in the EU Drugs Strategy (2000-2004) have been achieved,
- F. whereas the Council is negotiating within the Horizontal Drugs Group and the CAT (the committee referred to in Article 36 of the EU Treaty) on the contents of the draft EU Anti-Drug Strategy (2005-2012), without knowing the assessments of either the EU Anti-Drug Strategy (2000-2005) or the implementation of the EU Action Plan on Drugs (2000-2005) which are to be drawn up by the EMCD and the Commission, whose results are expected to be submitted in November 2004, and whereas the meetings of EU national co-ordinators should monitor whether progress is being made at the Horizontal Drugs Group,

¹ OJ L 47, 18.2.2004, p. 1.

- G. whereas the United Nations Commission on Drugs will be launching preparations for the UN special session on drugs in 2008 ten years after the 1998 drug summit,
- H. whereas it is necessary to develop precise, quantifiable, operational objectives, in order to be able to ascertain whether and to what extent the goals and measures formulated in the previous strategy have produced results,
- I. believing that to avoid an over-simplistic analysis of the wide range of drug-related problems, the risk represented by drugs should be analysed inter alia from a scientific, sociological and cultural point of view not only minutely examining objective and comparable data but also carefully assessing any other implications and damage to the development of society, and calling for these analyses and assessments to be published,
- J. whereas national drugs policy must be based on scientific knowledge concerning each type of drug, not on an emotional response, since each drug-related problem calls for a specific approach; whereas a generalised approach undermines the credibility of all aspects of the policy,
- K. whereas it is also vital, on the basis of these assessments and analyses, to begin revising drug policies to make them more effective and efficient in terms of the objectives to be achieved, particular attention being paid to alternative policies which are already producing better results in many Member States, for example, in reducing drug-related deaths and safeguarding the health and ensuring the social and economic reintegration of drug addicts,
1. Recommends to the European Council and to the Council, when defining the future European Drugs Strategy (2005-2012), and with general reference to EU policy on drugs, that they should:
- (a) redefine European cooperation on a drugs policy aimed at tackling cross-border and large-scale drug trafficking, which takes into account all the implications of the problem, and is based on a scientific approach, respect for civil and political rights and protection of the lives and health of individuals;
 - (b) set clear, precise, quantifiable goals and priorities which can be translated into operational indicators and measures in future Action Plans, very clearly establishing responsibilities and deadlines for implementation, and taking account of the subsidiarity principle. In order to facilitate implementation, a multidisciplinary approach should be taken at European level in relation to these clearly defined goals (coordination, information, assessment and international cooperation);
 - (c) take account of the fact that the assessments made to date of the six main objectives set by the EU Anti-Drug Strategy (2000-2004) show that none of them achieved favourable results and draw political and legislative lessons from this when devising the European Anti-Drug Strategy 2005-2012 and the related action plans;
 - (d) take into account the assessments of the achievement of the six main objectives set by the EU Anti-Drug Strategy;

- (e) base the new strategy more on scientific research and in-depth, structured consultation with those involved in this field in the Member States;
- (f) found the new EU Drugs Strategy on legal, institutional and financial bases which are derived from effective past action and the success of best practices;
- (g) increase social and scientific research on illegal substances for relevant medical and social purposes;
- (h) produce an alternative to the current financial fragmentation by creating a new budget line, closely meshed with all the measures which will need to be provided for in future Action Plans to be adopted by the Commission, since otherwise it will not be possible to achieve the objectives laid down in the Drugs Strategy;
- (i) create a specific budget line in order to facilitate an ongoing process of consultation with affected civil society organisations and independent professional experts about the impact of drug policies at the level of citizens;
- (j) carry out a detailed evaluation of the effectiveness of the implementation of the previous strategy, with particular regard to:
 - prevention of use and dependence,
 - a reduction in the supply of and the demand for illicit drugs,
 - the limitation of social damage (marginalisation),
 - the limitation of health damage,
 - reduction in drug-related petty crime and organised crime

and therefore not to adopt the new European Drugs Strategy (2005-2012) without knowing the real results achieved by the previous Strategy, as measured by the relevant technical, scientific, legislative and political assessments;

- (k) inform the European Parliament periodically in accordance with the principles of democratic legitimacy, transparency and cooperation between the institutions, of the progress of the negotiations within the Council on the European Strategy on Fighting Drugs (2005-2012);
- (l) consult the EP in good time before adopting the European Drugs Strategy (2005-2012), so that Parliament's opinion can be taken into account;
- (m) propose measures totally different from those currently selected to achieve the overall EU Drugs Strategy objective, giving priority to protecting the lives and health of users of illicit substances, improving their wellbeing and protection by means of a balanced and integrated approach to the problem, since the relevant proposals are inadequate;
- (n) step up European cooperation mechanisms as EU 25's borders are closer to the countries in which drugs originate, so as to curb the drug traffic entering the Union and clearly define and extend the new European coordination mechanism on drugs policy, inter alia through the European Monitoring Centre for Drugs and Drug Addiction, so as to achieve an integrated, multidisciplinary and balanced approach to

the problem of drugs, which is now more necessary than ever following the accession of ten new Member States;

- (o) establish minimum standards to improve the effectiveness of intervention and rehabilitation measures based on best practice in the Member States, with the goal of reducing the impact of drug use on society;
- (p) take adequate account of the new situation that has arisen following the accession of ten new Member States to the Union, which necessitates more intensive cooperation with the new border states;
- (q) increase the availability of harm-reduction programmes (especially to prevent the spread of HIV and other blood-borne diseases) among drug users;
- (r) set minimum standards for rehabilitation measures, based on best practice in the Member States, in place of too strong a focus on treatment with drug substitutes; to that end, particular efforts must be made to promote social rehabilitation;
- (s) lay much greater stress on harm reduction, information, prevention, care and attention to protecting the lives and health of people with problems caused by the use of illicit substances, and define measures to prevent them from being marginalised rather than implementing repressive strategies which verge on and had frequently led to violations of human rights;
- (t) set up rehabilitation programmes for offenders/users as alternatives to prison, since such programmes have been found to be effective in countries which have implemented them;
- (u) step up and provide appropriate funding for the information measures required to provide information on illicit substances and prevent drug use, particularly in schools, as provided for in the 2000-2004 action plan, and curb the negative repercussions of drug use and the associated risks;
- (v) place emphasis on stepping up information measures, which should be based on scientific knowledge, regarding the consequences of various types of drugs (above all synthetic drugs), so as to be able to warn everyone in clear, strong terms;
- (w) define and exponentially step up the involvement and participation of drug addicts and users of illicit substances, civil society, NGOs, the voluntary sector and the general public in resolving drug-related problems, in particular by involving organisations operating in this area more closely in the work of the Horizontal Drugs Group and by organising an annual European prevention initiative and by setting up, on an experimental basis, easily accessible informal centres pursuing an anti-prohibitionist harm-reduction strategy;
- (x) create a specific budget line in order to facilitate an ongoing process of consultation with relevant civil-society organisations and independent professional experts about the impact of drug policies at the level of citizens;

- (y) establish assessment measures which will allow shortcomings in - and more appropriate measures and resources to achieve - the goals set out in the EU Drugs Strategy to be detected correctly and rectified;
- (z) take appropriate steps to prevent the profits from illegal drug trafficking from being used to fund international terrorism and apply current legislation on confiscating goods and fighting money-laundering;
- (aa) include in all international agreements, and particularly new cooperation agreements with third countries, a specific anti-drug cooperation clause, with 'essential clause' status;
- (ab) significantly increase development aid to drug-producing countries, by means of programmes to fund sustainable alternative crops and the radical reduction of poverty, exploring also the possibility of promoting and safeguarding production for medical and scientific purposes, of opiates for example, and to take into consideration the possibility of launching pilot projects for the industrial manufacture of legal products derived from plants covered by the 1961 Convention, such as coca leaf and Indian hemp;
- (ac) provide and ensure access to substitution programmes, with particular reference to the prison environment, while encouraging alternatives to imprisonment for users of illicit substances or for related minor and non-violent offences;
- (ad) increase research into the use of plants that are currently illegal or in a grey zone, like hemp, opium or coca leaves, for medicinal applications, food security, sustainable agriculture, generation of alternative energy sources, substitution for tree- or oil-based products and other beneficial purposes;
- (ae) revise the framework decision on drug trafficking to take account of the views expressed by Parliament, with due regard for the principles of subsidiarity and proportionality enshrined in the Treaties;
- (af) carry out a scientific study into the costs and benefits of current policies for the control of narcotic substances, including, in particular: an analysis of cannabis and its various legal and illicit derivatives, inter alia to assess their effects, their therapeutic potential and the results of criminalisation policies and possible alternatives; an analysis of the effectiveness of programmes to distribute heroin under medical supervision for therapeutic purposes in terms of the objective of reducing drug-related deaths; an analysis of the economic, legal, social and environmental costs of prohibition policies in terms of the human and financial resources required to enforce the law; and an analysis of the impact on non-member countries of current policies under both the European Strategy and the global drug control system;
- (ag) urge governments and national parliaments to take effective measures to prevent drugs entering prisons;

2. Instructs its President to forward this recommendation to the Council and the European Council and, for information, to the Commission and the governments and parliaments of the Member States, the European Monitoring Centre for Drugs and Drug Addiction, the Council of Europe and the United Nations and its specialist agencies.

EXPLANATORY STATEMENT

The EU's anti-drugs strategy must be based not on ideology but on scientific assessments, which must be taken as a starting point for any serious policy designed to combat the spread of drugs and related illegal activities.

Narcotics consumption is on the increase within Europe and this constitutes the clearest evidence that the repressive, prohibitionist policies pursued by the EU Member States are powerless to combat the drugs trade, which continues to be one of the most important sources of income for organised crime and terrorist organisations.

According to a study involving 7600 young people (aged between 15 and 24) which was carried out in April/May 2004 by Eurobarometer on behalf of the Commission, obtaining drugs is very easy in all European countries and the main reasons for consuming such substances are curiosity and the thrill of breaking society's rules.

In particular, data contained in the Lisbon Monitoring Centre's 2003 annual report indicate that 'cannabis remains the most commonly used drug in the EU, with many countries reporting lifetime prevalence rates in excess of 20 % of the general population. A conservative estimate would suggest that at least one in every five adults in the EU has tried the drug. Indicators suggest that cannabis use has been increasing across the EU, although this increase appears to have stabilised in some countries, albeit at what can generally be considered to be historically high levels.'

Generalisations must therefore be avoided when drugs are classified, since not all narcotic substances have the same effects and - as scientific studies have shown - certain substances (in particular, so-called 'light drugs') are not addictive.

The other factor - in addition to the increase in the use of narcotics - which should be taken into account in the EU's strategy is the mortality relating to narcotics use: the number of AIDS-related deaths is falling, whilst the number of deaths caused by a drugs overdose is stable or is still increasing.

This is another statistic which illustrates the inescapable fact that the current strategy is failing to achieve the objectives of protecting individuals and improving the well-being of society.

The current anti-drugs strategy leaves criminal and terrorist mafias and organisations quite unperturbed; if anything, their annual turnover is increasing as they reap the profits of the drugs trade. According to Europol the overall statistics reveal that drugs seizures are concentrated in just a few countries, which account for approximately 75% of all seizures carried out in the world in respect of any type of illegal drug. According to the Europol report on organised crime, drugs production and trafficking continue to be the main activity pursued by criminal groups in the EU. No other field of organised crime is quite so profitable.

Drugs-related crime may be considered to include contravention of drugs legislation, offences committed under the influence of illegal drugs and offences committed by drug addicts in

order to finance their habit (mainly housebreaking and shoplifting), together with 'systemic' crimes committed in connection with the functioning of illegal markets ('turf wars', corruption of officials, and so on).

For these reasons a Community project should be launched for the purpose of introducing alternative forms of detention, so that drugs repression ceases to focus exclusively on imprisonment. The anti-drugs strategy should be regarded as a form of social intervention concentrating on the reasons for social unrest with a view to preventing drugs use by refining a strategy of repression which is currently targeted solely at drug users.

Hence the damage-reduction strategy must be given priority. Measures designed to minimise drugs-related damage to health, to reduce the number of deaths and to subdue any breach of the peace have become an integral part of many of the Member States' drugs strategies and a clear political priority in most countries. The implementation of initiatives designed to reduce damage is described in the Member States' literature on the subject as 'very important', 'highly significant', 'fundamental', 'priority' and 'a key aspect of our national drugs strategy'.

PROPOSAL FOR A RECOMMENDATION TO THE COUNCIL (B6-0070/2004)

pursuant to Rule 114(1) of the Rules of Procedure
by Rosa M. Díez González, on behalf of the PSE Group
on the draft EU drugs strategy (2005-2012)

The European Parliament,

- having regard to the meeting of the JHA Council of 2 and 3 December 2004, at which a draft EU drugs strategy for the period 2005-2012 is to be considered,
 - having regard to the European Council of 17 December 2004, at which the draft EU drugs strategy for the period 2005-2012 is to be adopted,
 - having regard to Rule 114(1) of its Rules of Procedure,
- A. whereas the framework and the priorities laid down in the new EU drugs strategy are to serve as a basis for two consecutive three-year EU action plans to combat drugs (2005-2007 and 2009-2011), each to be followed by a one-year period of evaluation (2008 and 2012),
- B. whereas an essential aspect of drugs policy within the EU consists in improving cooperation between EU institutions,
- C. whereas it is important to seize this opportunity to encourage and develop effective, comprehensive policies to combat drugs,
1. Addresses the following recommendations to the Council:
 - a) establish a genuine European policy to combat drugs, focused on reducing supply and demand, and on the provision of information and evaluation;
 - b) encourage and develop damage-reduction policies in the Member States, without preventing individual Member States from adopting measures or conducting pilot schemes in this area;
 - c) strictly verify compliance with the clause relating to combating drugs in international agreements and, to that effect, ask that 'essential clause' status be accorded;
 - d) see to it that the draft action plans to combat drugs (2005-2007 and 2009-2011) are drawn up by the Commission in cooperation with the European Parliament, the EMCDDA and Europol and in consultation with relevant civil society organisations;
 2. Instructs its President to forward this recommendation to the Council and, for information, to the European Council and the Commission.

PROCEDURE

Title	European strategy on fighting drugs (2005-2012)	
References	(2004/2221(INI))	
Legal basis	Article 114(3)	
Committee responsible Date of announcement of authorisation in plenary	LIBE 28.10.2004	
Committee(s) asked for opinion(s) Date announced in plenary	ENVI 8.10.2004	
Not delivering opinion(s) Date of decision	ENVI 20.9.2004	
Enhanced cooperation Date announced in plenary		
Motion for a resolution included in the report	B6-0070/2004	
Rapporteur Date appointed	Giusto Catania 13.09.2004	
Substitute rapporteurs		
Discussed in committee	22.09.2004	2.12.2004
Date adopted	2.02.2004	
Result of vote	for: 20 against: 19 abstentions: 0	
Members present	Alexander Nuno Alvaro, Edit Bauer, Johannes Blokland, Mario Borghezio, Mihael Brejc, Kathalijne Maria Buitenweg, Maria Carlshamre, Michael Cashman, Giusto Catania, Charlotte Cederschiöld, António Costa, Carlos Coelho, Rosa Díez González, Patrick Gaubert, Adeline Hazan, Timothy Kirkhope, Barbara Kudrycka, Stavros Lambrinidis, Henrik Lax, Edith Mastenbroek, Jaime Mayor Oreja, Claude Moraes, Bogdan Pęk, Martine Roure, Michele Santoro, Luciana Sbarbati, Inger Segelström, Ioannis Varvitsiotis, Tatjana Ždanoka	
Substitutes present	Frederika Brepoels, Panayiotis Demetriou, Cristina Gutiérrez-Cortines, Sophia in 't Veld, Sylvia-Yvonne Kaufmann, Javier Moreno Sánchez, Béatrice Patrie, Gitte Seeberg, Antonio Tajani, Rainer Wieland	
Rule 178(2) substitutes present		
Date tabled	7.12.2004	A6-0067/2004
Comments	...	