



Mid-Term Assessment of the EU Drugs Strategy 2013-2020 and Final Evaluation of the Action Plan on Drugs 2013-2016

Public consultation on the evaluation of the EU
Drugs Strategy: Report of results

EUROPEAN COMMISSION

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Mid-Term Assessment of the EU Drugs Strategy 2013-2020 and Final Evaluation of the Action Plan on Drugs 2013-2016

Public consultation on the evaluation of the EU Drugs
Strategy: Report of results

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Luxembourg: Publications Office of the European Union, 2016

ISBN 978-92-79-58826-6

doi: 10.2837/424182

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1. INTRODUCTION

1.1.Context of the public consultation

In accordance with the Better Regulation guidelines¹ a mandatory public consultation was conducted to inform the Mid-Term Assessment of the EU Drugs Strategy 2013-2020 and the final evaluation of the EU Action Plan on Drugs 2013-2016. The consultation was launched on 15 February 2016 on the European Commission website² and was open until 31 May 2016. The objective of the public consultation was to gather views from private individuals, non-profit/private organisations, industry and national/regional/local public administrations. The consultation covered all five objectives of the EU Drugs Strategy and corresponding actions of the Action Plan and all the key evaluation criteria: effectiveness, efficiency, relevance, coherence and EU value added. As such, the public consultation was intended to form part of the inputs for the evaluation of the EU Drugs Strategy and Action Plan.

The evaluation is being conducted by RAND Europe and Ernst & Young and has two principal aims:

1. To inform the assessment of the degree of implementation of the Drugs Strategy 2013-2020 as well as the Action Plan 2013-2016 in terms of outputs and their impacts. The evaluation should contribute to ensuring that the objectives of the EU Drugs Strategy are achieved by 2020 by highlighting the areas where progress has been achieved and those where progress is not sufficient.
2. To support the Commission's decision on whether to propose a new Action Plan to cover the period 2017-2020 and which changes would be needed compared to the current Action Plan.

The evaluation's results are expected to be used by the Commission, the European Parliament, the Council, and Member States in future decision-making regarding EU drug policy and allocation of resources in this area. Moreover, it is expected that members of civil society with an interest in drugs policy will be able to use the results of the evaluation for their future activities.

The evaluation covers the first four years of the EU Drugs Strategy 2013-2020 and the full period of the EU Action Plan 2013-2016.

1.2.Purpose of this report

In total, 121 contributions were received as part of the public consultation. This report summarises all responses and presents information on the profile of respondents along with the main results of the analysis of received contributions. The report is intended to contribute to the Commission's report on the consultation activities carried out as part of this evaluation, as foreseen in the Better Regulation Guidelines.

In addition, the results of the public consultation will be triangulated with other information collected through the activities conducted by the research team as part of the Evaluation and will be used to inform the formulation of the evaluation's findings and recommendations. In addition, the results of the consultation will also generate questions to be explored in other evaluation activities. For instance, through an analysis of EMCDDA data, it will be possible to explore how observed trends in variables such as age of first use of illicit drugs compare with respondents' perceptions of relevant policy measures.

¹ EC (n.d.) Better Regulation Guidelines. As of 30 June 2016: http://ec.europa.eu/smart-regulation/guidelines/index_en.htm.

² EC (2016) Public consultation for the 2016 evaluation of the EU Drugs Strategy and Action Plan on Drugs. As of 21 June 2016: http://ec.europa.eu/dgs/home-affairs/what-is-new/public-consultation/2016/consulting_0032_en.htm.

This report is structured as follows. Section 2 presents an overview of respondents' demographic profile. Section 3 summarises the main results of the consultation. Annex 1 includes additional statistical tables prepared as part of the analysis of the consultation with particular focus on disaggregation by respondent type. Annex 2 contains a brief description of the analytical approach used by the research team in analysing the responses to the consultation. Annex 3 includes a copy of the questionnaire used for the purposes of the consultation.

1.3. Presentation and interpretation of results

Every question in the consultation was mandatory; therefore the sample size (n) for all questions is 121. Multiple choice questions where only one option could be selected are reported as percentages in the analysis. Questions where multiple options could be selected are reported as response counts.

When interpreting the results of the consultation, responses received cannot be understood as representative of views of any particular population or group of stakeholders. The questionnaire was publicly available on the internet and no one was precluded from providing a response. Information on the demographic profile of respondents is based on self-reported values and the survey design did not allow for any verification of received data.

2. DEMOGRAPHIC PROFILE OF CONSULTATION RESPONDENTS

Overall, 121 responses were received to the consultation.

As Table 2-1 shows, nearly two thirds (66.1 per cent) of submissions came from respondents answering as private individuals. The next largest group of respondents were individuals answering on behalf of an organisation (e.g. non-governmental organisations etc.), accounting for approximately a quarter (26.4 per cent) of all received contributions. A small number of responses were also provided by representatives of national public authorities (4.1 per cent) and international, intergovernmental or regional organisations (3.3 per cent).

Table 2-1. Breakdown of respondent types

TYPE OF RESPONDENT	COUNT	PER CENT
a private individual	80	66.1%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	32	26.4%
a national public authority	5	4.1%
an international/intergovernmental/regional organisation	4	3.3%
Total	121	100%

The geographical distribution of responses is captured in Table 2-2. Respondents were asked to indicate which country (or the EU as a whole) their responses referred to. About a fifth (21.5 per cent) of respondents stated that their responses pertained to the EU while the remaining respondents indicated one of the Member States. Of these, Sweden, Italy and Finland were most frequently chosen. There were no responses referring to Bulgaria, Croatia, Denmark, Latvia, Luxembourg, Malta, Poland, Romania or Slovakia.

The generally low number of respondents per country does not allow for a meaningful disaggregation of responses by country. Still, in an attempt to provide additional texture to results presented in section 3, attention is paid to the groups with the highest numbers of respondents (EU, Finland, Italy and Sweden) and any notable divergences from the consultations overall results are reported accordingly.

Table 2-2. The answers you will provide are expected to refer to a specific Member State or to the EU as a whole. Please, select the option that best fits your case:

COUNTRY	COUNT	PER CENT
Austria	6	5.0%
Belgium	3	2.5%
Cyprus	2	1.7%
Czech Republic	1	0.8%
Estonia	1	0.8%
Finland	14	11.6%
France	1	0.8%
Germany	3	2.5%
Greece	1	0.8%
Hungary	2	1.7%
Ireland	1	0.8%
Italy	17	14.0%
Lithuania	1	0.8%
Netherlands	3	2.5%
Portugal	3	2.5%
Slovenia	1	0.8%
Spain	2	1.7%
Sweden	29	24.0%
the EU	26	21.5%
United Kingdom	4	3.3%

The majority of private individuals responding to the consultation (69 per cent) were interested in drug policy but did not actively work in the area. That is in contrast with respondents representing organisations and public authorities, the vast majority of whom were actively working in the field (Table 2-3). Among those actively involved in the field, NGO membership was the most common form of involvement (18 respondents), followed by healthcare professionals (11 respondents).

Table 2-3. Please specify your level of involvement in the area of drug policy

	I AM INTERESTED IN THE FIELD WITHOUT ACTIVELY WORKING IN IT	I AM ACTIVELY WORKING IN THE FIELD
Private individual (n=80)	69%	31%
Organisation (n=32)	6%	94%
National public authority (n=5)	0%	100%
International/intergovernmental/ regional organisation (n=4)	0%	100%

Asked about the focus of their interest/work (Table 2-4), the largest group of respondents indicated the area of information, research, monitoring and evaluation (75 respondents). The next most frequently indicated areas were drug demand reduction (47 respondents) and coordination of drug policies at national/regional level (43 respondents). By contrast, drug supply reduction was mentioned only by 17 respondents, all of them private individuals. Among respondents who indicated 'other,' drug legalisation or similar was mentioned in 11 instances and in five additional instances drug policy reform or advocacy was mentioned. The vast majority of remaining 'other' responses (17 instances) can be broadly characterised as linked to drug demand reduction as they referred to areas related to treatment, harm minimisation, and prevention.

Respondents also differed in the degree of their personal involvement in any activity related to drug policy. The majority of private individuals (66.3 per cent) did not take part in any activity, while the same was true for only a small proportion of respondents answering on behalf of organisations (12.2 per cent). Involvement in each of the four examined areas (definition, implementation, monitoring, and evaluation) was similarly frequent among respondents, ranging from 20-30 per cent of respondents.

Table 2-4. Which of the following areas of drug-related policies best describes your field of activity or interest?

	PRIVATE INDIVIDUAL	NATIONAL ORGANISATION	PUBLIC AUTHORITY	INTERNATIONAL ORGANISATION	TOTAL
Drug demand reduction	22	20	3	2	47
Drug supply reduction	11	5	1	0	17
Coordination of drug policies at international/EU level	12	8	2	1	23
Coordination of drug policies at regional/national level	29	11	3	0	43
Cooperation with non-EU countries and international organisations	18	9	1	1	29
Information, research, monitoring and evaluation activities	50	20	3	2	75
Other	24	12	1	2	39

3. RESULTS

This section presents the results of the consultation based on an analysis of received contributions. In its narrative this section follows the structure of the consultation questionnaire and addresses in turn questions on the following areas: drug demand reduction, drug supply reduction, other fields of drug policy, EU added value, and any other comments.

3.1. Drug demand reduction

Respondents were asked whether they believed measures aimed at various aspects of drug demand reduction had been implemented during the period 2013. Table 3-1 shows that the only type of measures the majority of respondents believed had been implemented were those aiming to reduce drug-related risk and harm. For measures aiming to delay the first use of drugs, raise awareness, and prevent drug use by people with situational, age, gender, cultural or social risk factors, more respondents indicated these had been implemented than those who did not. By contrast, a plurality of respondents believed that measures had not been implemented in the following areas: increasing the availability and accessibility of drug treatment and rehabilitation services, and introducing best practices in drug demand reduction.

A smaller proportion of respondents answering as private individuals indicated that a particular type of measure had been implemented, in comparison with respondents answering on behalf of organisations or public authorities.³ In particular, a high proportion of representatives of public authorities indicated that drug demand reduction measures had been implemented, although there were a small number of respondents in this category (n=5). This is perhaps not surprising, given public authorities' increased likelihood of having been involved in or being aware of the implementation of individual measures.

In comparison with overall results, a notably smaller proportion of respondents from Finland and Sweden indicated that measures had been implemented with the aim to increase the availability and accessibility of treatment and to reduce drug-related harm. Compared with the overall sample, a somewhat higher proportion of respondents referring to the EU as a whole indicated that measures had been implemented, with the exception of those aiming to delay the age of first use.

³ The only exception were measures preventing drug use by people with age, gender, cultural or social risk factors, where a lower proportion of representatives of international organisations believed they had been implemented, although there were very few respondents in this category (n=4).

Table 3-1. In your opinion, in the period 2013-2016 were measures implemented with the aim of:

	YES	NO	NO OPINION
Delaying the first use of drugs	47.9%	25.6%	26.4%
Preventing drug use by people with age, gender, cultural or social risk factors	47.1%	30.6%	22.3%
Preventing drug use by people with situational risk factors	43.8%	34.7%	21.5%
Preventing drug use by people with individual risk factors	38.0%	38.0%	24.0%
Raising awareness on the misuse of and dependence on medicines	42.1%	38.0%	19.8%
Increasing the availability of drug treatment and rehabilitation services	36.4%	40.5%	23.1%
Increasing the accessibility of drug treatment and rehabilitation services	34.7%	47.1%	18.2%
Introducing best practices and quality approaches in drug demand reduction	38.0%	44.6%	17.4%
Reducing drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)	58.7%	25.6%	15.7%

Respondents were subsequently asked their opinion about the effectiveness of the current drug demand reduction measures in comparison with the period 2005-2012. Overall, respondents most frequently thought either that the situation had remained the same or that it had got worse (Table 3-2). The only exception was in the area of reducing drug-related harm where a third of respondents (33.9 per cent) indicated that the effectiveness of measures had improved.

As with the previous question, a higher proportion of representatives of public authorities than that of other respondent groups responded positively and believed that the effectiveness of drug demand measures had improved. The only exception to this rule was the area of awareness raising. Similarly, compared with private individuals, a higher share of representatives of national organisations took a positive view, except in the areas of awareness raising, and accessibility and availability of treatment.

In comparison with the overall results, a notably higher proportion of responses referring to Finland and Sweden provided a negative answer to the question on the effectiveness of implemented measures in every area, with the exception of Finnish responses on risk and harm reduction. Responses pertaining to Italy bore much more resemblance to the overall results.

Table 3-2. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012?

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Delay of the first use of drugs	12.4%	33.1%	33.1%	21.5%
Prevention of drugs use by people with age, gender, cultural or social risk factors	15.7%	29.8%	30.6%	24.0%
Prevention of drugs use by people with situational risk factors	19.8%	27.3%	33.1%	19.8%
Prevention of drugs use by people with individual risk factors	14.0%	33.1%	30.6%	22.3%
Awareness on the misuse of and dependence on medicines	19.0%	37.2%	23.1%	20.7%
Availability and accessibility of treatment and rehabilitation services	19.8%	29.8%	28.9%	21.5%
Reduction of drug-related risk and harm	33.9%	26.4%	20.7%	19.0%

In terms of what steps could be taken to improve the effectiveness of existing drug demand reduction measures, respondents most frequently noted improvements in research and monitoring, greater involvement of civil society, and increased allocation of funding (Table 3-3). While allocation of funding was frequently noted by institutional representatives, monitoring and research, and civil society and scientific involvement were highlighted by large numbers of private individuals.

Among respondents who indicated 'other' steps should be pursued to improve the effectiveness of drug demand reduction measures, decriminalisation and/or legalisation was explicitly mentioned in 19 cases. Of these, 14 came from respondents whose contributions referred to only two Member States: Finland and Sweden.⁴ In addition, three other responses, e.g. suggesting drug demand reduction is not an appropriate goal (as opposed to harm reduction) or calling for an 'open discussion of all policy options,' may be interpreted as reflecting a similar belief. Overall, these responses to the question on 'other' steps that could be taken were similar to the content of final open-ended comments, which are discussed in section 3.5.

With respect to improvement in research and monitoring and civil society and scientific involvement, most respondents believed this should happen at the EU and national levels, with fewer responses indicating local level (Table 3-4). In regard to allocation of additional resources, respondents most frequently indicated the national level was the most appropriate (n=54), followed by the EU level (n=44) and the local level (n=38), respectively.

⁴ To some degree this may be a reflection of the relative frequency of responses referring to Sweden and Finland in the overall sample of responses received.

Table 3-3. In your opinion, what steps could be taken to improve the effectiveness of the drug demand reduction policies in the EU?

ACTION	COUNT
Adoption of more binding provisions and commitments at a national/regional level	43
Development of deeper synergies between the EU and national measures	47
Improvement of research, monitoring, collecting data and evaluation activity	73
Stronger civil society and scientific community involvement	85
Allocation of additional financial resources	62
Other	34

Table 3-4. Please specify the level of action for selected options:

	EU	NATIONAL	LOCAL
Improvement of research, monitoring, collecting data and evaluation activity	61	59	42
Stronger civil society and scientific community involvement	67	68	56
Allocation of additional financial resources	44	54	38

3.2. Drug supply reduction

As with drug demand reduction measures, respondents were asked what measures, in their opinion, had been implemented in the area of drug supply reduction (Table 3-5). Areas where more respondents believed measures had been implemented included (in descending order): countering the emergence of new substances, improvement of border security, increasing cross-border legislative and judicial cooperation, and prevention of diversion and illicit use of precursors. By contrast, the majority of respondents (54.5 per cent) did not feel measures had been implemented in the area of developing alternative sanctions for drug offenders and over a third of respondents (35.5 per cent) expressed the same opinion with respect to responding to new technologies in illicit drug activities.

With the exception of the area of improvements in border controls, a smaller share of private individuals indicated that drug supply reduction measures had been implemented in the areas suggested by the questionnaire, in comparison with other respondents.

For almost every type of measure, a notably higher proportion of responses referring to Finland and Sweden indicated that they had not been implemented than was the case for the entire consultation sample. In particular, over three quarters of responses referring to Finland (78.6 per cent) and Sweden (75.9 per cent) believed that no measures had been implemented with the aim of developing alternative sanctions. In the areas of new psychoactive substances and sanctions other than detention, a notably higher proportion of respondents referring to the EU as a whole indicated that measures had been implemented than was the case with the overall consultation sample.

Table 3-5. In your opinion, in the period 2013-2016 were measures implemented with the aim of:

	YES	NO	NO OPINION
Countering cross-border drug trafficking through the improvement of border security	39.7%	21.5%	38.8%
Increasing legislative and judicial cooperation against cross-border illicit drug activities	32.2%	19.0%	48.8%
Preventing the diversion and illicit use of drug precursors	25.6%	24.8%	49.6%
Countering the emergence, use and spread of new psychoactive substances	49.6%	28.1%	22.3%
Developing sanctions other than detention for drug-using offenders	28.1%	54.5%	17.4%
Responding to the use of new technologies in illicit drug activities	31.4%	35.5%	33.1%

Asked about how the effectiveness of the currently implemented measures compared with that in the period 2005-2012, only a relatively small proportion of respondents believed that the effectiveness had improved. However, it is important to keep in mind the number of respondents who offered an opinion in the first place was relatively small (Table 3-6). Of those who did offer an opinion, the largest group of respondents believed effectiveness of measures had remained the same in three areas – improvements in border security (25.6 per cent), legislative and judicial cooperation (26.4 per cent), and precursors (23.1 per cent). In the other three areas (new substances, alternative sanctions, and new technologies), the largest group of respondents who provided an opinion indicated that the effectiveness of implemented measures had got worse. In the areas of new psychoactive substances and sanctions other than detention, the proportion of respondents referring to the EU who gave a positive response was more than double that of the overall consultation sample.

Table 3-6. In your opinion, to what extent has the effectiveness* of these measures changed during the period 2013-2016 compared to 2005-2012?

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Countering cross-border drug trafficking through the improvement of border security	14.0%	25.6%	17.4%	43.0%
Increasing legislative and judicial cooperation against cross-border illicit drug activities	10.7%	26.4%	12.4%	50.4%
Preventing the diversion and illicit use of drug precursors	9.1%	23.1%	20.7%	47.1%
Countering the emergence, use and spread of new psychoactive substances	11.6%	22.3%	37.2%	28.9%
Developing sanctions other than detention for drug-using offenders	20.7%	25.6%	31.4%	22.3%
Responding to the use of new technologies in illicit drug activities	13.2%	21.5%	31.4%	33.9%

Thinking about steps that could be taken to improve the effectiveness of drug supply reduction efforts in the EU (Table 3-7), the two by far most frequently mentioned options were improvement of research and monitoring (n=71),⁵ and stronger civil society and scientific involvement (n=72).

As with demand reduction, an analysis of follow-up explanations provided by those who selected 'other' as an option revealed that a notable share of respondents believed decriminalisation and/or legalisation may be beneficial. Comments that either explicitly endorsed legalisation or decriminalisation or could be understood as such were provided by 29 respondents, of which 17 were expressed in contributions referring to two Member States, Finland and Sweden.⁶ Of these 29 respondents, 12 mentioned decriminalisation and/or legalisation under demand reduction as well. Another contribution called for 'studying and evaluating alternative policies based on legalization.' Again, this is consistent with the content of open-ended comments discussed in section 3.5.

Table 3-7. In your opinion, what steps could be taken to improve the effectiveness of drug supply reduction policies in the EU?

OPTION	COUNT
Adoption of more binding provisions and commitments at a national/regional level	28
Development of deeper synergies between the EU and national measures	48
Strengthening of the support to third countries in addressing drug-related organised crime	40
Improvement of research, monitoring, collecting data and evaluation activity in the drugs field	71
Stronger civil society and scientific community involvement	72
Stronger involvement of industry and economic operators in preventing diversion of drug precursors	19
Allocation of additional financial resources	38
Other	38

Respondents were also asked at what policy level some of these steps should take place (Table 3-8). With respect to research and monitoring, and civil society and scientific involvement, respondents suggested with very similar frequencies that these should take place primarily at the international, EU and national levels. Concerning the allocation of additional resources, the EU level was most frequently indicated by respondents (n=32), followed by third countries (n=30), and the national (n=26) and local levels (n=22), respectively.

⁵ This may be, to some extent, a reflection of the fact that Information, research, monitoring and evaluation was the most frequently mentioned area of personal interest and/or involvement by respondents.

⁶ As before, to some degree this may be a reflection of the relative frequency of responses referring to Sweden and Finland in the overall sample of responses received.

Table 3-8. Please specify the level of activity for selected options:

	INTERNATIONAL	EU	NATIONAL	LOCAL
Improvement of research, monitoring, collecting data and evaluation activity	57	55	51	34
Stronger civil society and scientific community involvement	54	51	55	44
Allocation of additional financial resources	30*	32	26	22

* This option was worded "for the benefit of third countries"

3.3. Other drug policy areas (coordination, cooperation, research)

Respondents also commented on whether measures were implemented in other fields of drug policy (Table 3-9). Areas where more respondents believed measures had been implemented than those who did not were cooperation with international organisations and information, research, and monitoring. The opposite was true for the remaining three options – coordination of policies at the national level, involvement of the civil society and scientific community, and cooperation with non-EU countries.

As with the previous questions, a greater proportion of private individuals provided a negative answer than that of representatives of organisations and public authorities. This was the case with every option offered for this question. In comparison with the entire consultation sample, a higher share of respondents referring to the EU indicated that measures had been implemented in every area covered by this question.

Table 3-9. In your opinion, in the period 2013-2016 were measures implemented with aim of:

	YES	NO	NO OPINION
Coordinating drug policies and responses at a national level	34.7%	36.4%	28.9%
Involving the civil society and the scientific community in the development and implementation of drug policy	27.3%	50.4%	22.3%
Cooperating with international organisations in the drug policies field	36.4%	34.7%	28.9%
Cooperating with non-EU countries in the drug policies field	28.9%	34.7%	36.4%
Information, research, monitoring and evaluation related to the drug phenomenon	47.9%	31.4%	20.7%

When asked to assess the effectiveness of implemented actions in comparison with the period 2005-2012, respondents most frequently indicated that it had remained the same (Table 3-10). The only exception was visibility of the EU approach at the international level. In this area the largest group of respondents who provided an opinion believed that it had become worse (25.6 per cent). Again, a larger share of private individuals offered a negative opinion compared to respondents answering on behalf of organisations and national authorities. In relation to the involvement of the civil society and the scientific community in the development and implementation of drug policies, respondents from international or regional organisations were

more likely to indicate that the situation had got worse than respondents in the rest of the sample.⁷

A notably larger proportion of responses referring to Sweden indicated that the effectiveness of measures implemented in these areas had worsened. The perspective expressed in responses referring to Finland and Italy resembled more closely the overall results. In every area, a larger proportion of respondents referring to the EU indicated that the effectiveness had improved, although the difference was not very large for the first two areas covered by the question - coordination at a national level and involvement of civil society and scientific community.

Asked about what steps may be taken to improve the effectiveness of the EU's international engagement in the field of drugs (Table 3-11), the largest number of respondents highlighted increasing EU funding for alternative development (n=70). The next group of options, which were selected with broadly the same frequency, included further integration of drug policy into EU's Common Foreign and Security Policy, enhanced dialogue with third countries and regional organisations, enhanced coordination of EU positions, and further exploration of links between drugs and other forms of international organised crime.

Table 3-10. In your opinion, to what extent has the effectiveness* of the following actions changed during the period 2013-2016 compared to 2005-2012?

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Coordination of drug policies and responses at a national level	10.7%	37.2%	27.3%	24.8%
Involvement of the civil society and the scientific community in the development and implementation of drug policies	17.4%	35.5%	27.3%	19.8%
Investments in research, data collection, monitoring, evaluation and information exchange	20.7%	33.1%	25.6%	20.7%
Dissemination of research, monitoring and evaluation results	19.0%	35.5%	21.5%	24.0%
Cooperation with international organisations in the drug policies field	15.7%	36.4%	17.4%	30.6%
Cooperation with third countries in the drug policies field	14.9%	29.8%	16.5%	38.8%
Visibility of the EU approach to drugs policy in the international arena	20.7%	23.1%	25.6%	30.6%

⁷ Again, however, it is important to note the small number of respondents in this category (n=4).

Table 3-11. In your opinion, what steps could be taken to improve the effectiveness of the EU international engagement in the drugs field?

OPTION	COUNT
Further integration of drug policies within the overall EU common and security foreign policy	56
Enhance dialogue with third countries and regional organisations on tackling drugs, including drug and drug precursors trafficking and drug demand reduction	54
Review the priority countries for EU engagement on drugs with third countries	35
Enhance coordination of EU positions on drug policy with selected countries at UN level	56
Increase financial assistance for drug related cooperation (drug demand reduction and drug supply reduction) programmes with third countries	36
Increase the synergy between policy dialogue and financial assistance on drug policies	46
Mainstream alternative development into EU development programmes with third countries	39
Further explore the links between drugs trafficking and other forms of international organised crime (e.g. terrorism, human trafficking, smuggling, ...)	55
Provide for increased EU funding to alternative development programmes	70

3.4. EU Added Value

Respondents were asked to identify areas in which there is added value of the EU Drugs Strategy by indicating their degree of agreement with a series of statements (Table 3-12).

Of the six possible answers, the largest proportion of respondents agreed that the Strategy adds value by helping raise important issues on drug policies on the international agenda. Two other possible answers also received scores above the mid-point in the scale (i.e. scores above 2.50 - indicating that respondents felt the Strategy had added value in these ways): the Strategy's support to a consistent approach to drugs at national levels (average score of 2.50) and its contribution to coherence between national/regional and European actions in the area of drugs (2.51).

Respondents felt that there was less added value in relation to helping to improve the involvement of civil society and scientific community in drug policies (average score of 2.41) and facilitating the allocation of a larger amount of national public resources to specific activities or initiatives in the drug field (average score of 2.10).

For the statement "The Strategy has no significant added value", the average score was 2.30, indicating that respondents tended to disagree more than agree with this statement.

Table 3-12. In your opinion, what is the EU Drugs Strategy's added value?

STATEMENT	1	2	3	4	AVERAGE SCORE
It supports the development of a dialogue and/or a consistent approach to drugs at national level	19.8%	26.4%	37.2%	16.5%	2.50
It helps to raise important debates on drug policies on the international agenda	16.5%	23.1%	36.4%	24.0%	2.68
It helps to improve coherence between national/regional and European drug-related actions	22.3%	23.1%	35.5%	19.0%	2.51
It facilitates the allocation of a larger amount of national public resources to specific activities or initiatives in the drug field	28.9%	40.5%	22.3%	8.3%	2.10
It helps to improve the involvement of civil society and scientific community in drug policies	22.3%	27.3%	37.2%	13.2%	2.41
The Strategy has no significant added value	38.0%	16.5%	23.1%	22.3%	2.30

Note: Rated on a scale from 1 to 4, where 1 means "I do not agree at all" and 4 means "I fully agree"

The most frequently indicated option for future areas of focus for the EU drugs policy (Table 3-13) was risk and harm reduction (n=75), followed by treatment and rehabilitation (n=66), research promotion (n=62), and the need to address cannabis policy (n=61). No respondent believed that there was no need for EU action in the area of illicit drugs.⁸

The areas identified as the future focal points for EU drugs policy may be a reflection of the demographic profile of the respondents. As outlined in section 2, research was the area of activity and/or interest for the largest group of respondents, followed by drug demand reduction.

With respect to cannabis policy, this again may be seen as a reflection of respondents' activities and interests (see Section 2). Also, among respondents who selected the 'other' option (n=18) in discussing future focus areas, half explicitly mentioned legalisation and/or decriminalisation of cannabis (and possibly other substances).

⁸ This contradicts somewhat the assessment offered by respondents in the previous question where almost a quarter of respondents fully agreed that the Strategy had no significant value.

Table 3-13. In the future, where do you see the focus of the EU's drugs policy?

FOCUS AREA	COUNT
Risk and harm reduction	75
Treatment and rehabilitation services	66
Promotion of scientific research on drugs	62
Address cannabis at EU level	61
Prevention	50
Monitoring, evaluation, data collection, information and best practices exchange	41
Coordination of drug policies at EU and national/regional/local levels	33
Finding synergies between drugs use and other addictions (e.g. alcohol, tobacco, gambling) and addressing them altogether	25
Fighting against drugs trafficking, drug precursors diversion and other kinds of organised crime	21
Stronger involvement of the EU in addressing world drug challenges	20
Other	18
Tackling online trade of drugs	17
Strengthen the promotion of EU values and approaches	16
Reinforcing the EU and international response to the spread of new psychoactive substances	15
Analysing the links between drug trafficking and other major and serious crimes	13
Strengthening cooperation with non-EU countries and international organisations on drug policies (on both drug demand and drug supply reduction)	7
I don't think there is a need for future EU action in this domain	0

3.5. Other comments

The final consultation question asked respondents to elaborate on their selection of future priority focus areas of the EU drugs policy. The majority of respondents used this opportunity to provide wider comments that can be understood as their concluding remarks. These comments are briefly summarised here.

The breadth of respondents' final comments reflected their stated interests and involvement in the field of illicit drugs, as discussed above, with legalisation/decriminalisation and drug demand reduction as the most frequently discussed topics.

The majority of respondents (n=63) made a comment in favour of a reassessment of EU and national drug policies. These comments took multiple forms. Some respondents (n=42)⁹ questioned the wisdom of drug prohibition and the so-called 'war on drugs' and recommended decriminalisation or legalisation of some or, in a few cases, all illicit substances. Most frequently, this comment was made in reference to cannabis and five respondents explicitly mentioned the possibility of addressing cannabis at the EU level. Another group of respondents (n=40)¹⁰ called for an end to what they perceived as a punitive approach to people with drug addictions and for recognition of addiction as a medical issue. Several contributions (n=17, all private individuals) opined that drug legalisation would have a positive impact in terms of addressing drug-related organised crime. From a national-level perspective, Sweden was explicitly criticised by seven respondents in its approach to drugs, although this perspective was not unanimously shared by all respondents.¹¹ One contribution explicitly questioned the desirability of cannabis legalisation and another called for a rigorous assessment of harm reduction interventions promoted as part of legalisation efforts.

In other topics mentioned in final comments, 22 responses highlighted the importance of prevention efforts and understanding the drivers of drug demand. On a related note, 17 contributions stressed the desirability of focusing on harm reduction programmes.

The role of the EU in coordinating drugs policies, both among Member States and at international fora was acknowledged by 15 respondents. Reasons for these opinions varied, where stated. For instance, one respondent believed that the EU can help prevent duplication of work and wasting of resources, another contribution suggested that the EU, acting as a coordinator, can offset the fact that harm reduction policies are not easy to implement in some Member States.

Ten respondents indicated that more research and evaluation is needed to improve the understanding of the drugs challenge and to inform drugs policies. Eight respondents highlighted the need to understand better and tackle drug-related crime and criminal networks, in particular drug trafficking. In other comments, two respondents mentioned the need to tackle the availability of drugs on the internet and one respondent noted that medications to manage pain effectively, particularly opioids, are not always available in Europe.

4. OTHER AD-HOC CONTRIBUTIONS

In addition to responses provided through the online questionnaire, the European Commission also received four documents directly from the Joint Committee on Health and Children of the Irish Parliament (Houses of the Oireachtas). The documents are briefly described below.

The first document was a report of a study on the use of synthetic cannabinoids in County Monaghan in Ireland. The study aimed to gain an understanding of the use of these types of products and to formulate recommendations pertaining to the areas of service provision, harm reduction and drug monitoring. The authors employed qualitative methods in the course of this research (interviews and a focus group). The study found that synthetic cannabinoids and their use are an emerging challenge, with interviewees reporting a range of negative consequences of use. While treatment services and community members appeared to be aware of the growing scale of the phenomenon, numerous gaps and suggestions for improvements in the response to the challenge were put forward. These included improving access to mental health treatment, providing residential detoxification in the region and further enhancing awareness with the aim to foster an integrated approach.

⁹ In this group, 25 respondents provided answers referring to Finland and Sweden. Almost all respondents (n=37) were private individuals.

¹⁰ In this group, 23 respondents provided answers referring to Finland and Sweden. Almost all respondents (n=33) were private individuals.

¹¹ However, this may be a reflection of the relative frequency of responses referring to Sweden among the received contributions.

The next two documents were minutes of meetings of the Joint Committee on Health and Children of the Irish Parliament (Houses of the Oireachtas). The first meeting took place on 26th March 2015 and the first part of the provided document included a discussion of drug addiction and recovery models. This discussion included testimonies of witnesses from Trinity College Dublin, the Health Service Executive, and Soilse, an addiction rehabilitation service. The discussion built on a report titled *Addiction Recovery: A Contagious Paradigm*, which came from Soilse and which made the case for Ireland to move in the direction of a recovery framework in delivering its addiction services. The second part of the document covered a discussion of the General Scheme of Public Health (Alcohol) Bill 2015.

The second meeting took place on 9th July 2015. The first part of the meeting consisted of a debate on legal highs, in particular on the topic of their potential ban, and included testimonies from representatives of Teach na Daoine, a family resource centre in Monaghan town and of the Cavan-Monaghan drug awareness project. The testimonies built on the report on the use of legal cannabinoids in County Monaghan discussed above. The second part of the meeting included a debate on the Irish national drugs strategy. The Minister of State at the Department of Health with responsibility for the national drugs strategy provided an update on the drugs situation in the country and outlined current and future legislative and other policy priorities.

The final ad hoc contribution was a November 2015 report by the Joint Committee on Justice, Defence and Equality of the Irish Parliament (Houses of the Oireachtas) on a harm and rehabilitative approach to possession of small amounts of illegal drugs.¹² The report is a product of the Committee's investigation of the option to adopt an approach to drug addiction that would be similar to that currently in place in Portugal. Members of the Committee undertook a visit to Portugal and consulted Irish civil society organisations and members of the general public on the issue. Based on these activities, the Committee concluded that the Portuguese model merited further exploration. This report laid out seven recommendations made by the Committee, including one calling for the introduction of a harm reducing and rehabilitative approach which would address the possession of small amounts of illegal drugs for personal use through civil or administrative responses, rather than via the criminal justice system.

¹² House of the Oireachtas (2015) Joint Committee on Justice, Defence and Equality: Report of the Committee on a Harm Reducing and Rehabilitative approach to possession of small amounts of illegal drugs. As of 9 August 2016: <http://www.oireachtas.ie/parliament/media/committees/justice/Final-Report---For-Publication.pdf>

ANNEX 1: ADDITIONAL TABLES**Demographic profile****Table 4-1. Please explain your involvement:**

	Private individual	National organisation	Public authority	International organisation	Total
NGO member	1	15	0	2	18
Healthcare professional (doctor, nurse, psychologist etc.)	8	2	0	1	11
Social worker	5	2	0	1	8
Official of public institutions active in the field (Ministry of Justice, Health and Social Affairs, Interior, etc.)	3	0	4	0	7
Researcher or academic	3	2	1	0	6
Journalist	0	1	0	0	1
Law enforcement representative	1	0	0	0	1
Policymaker	0	0	0	0	0
Other	4	8	0	0	12

Table 4-2. Did you take part in any activity related to the selected policy area(s) in the period 2013-2016?

	Private individual	National organisation	Public authority	International organisation	Total
No	66.3%	9.4%	0.0%	50.0%	47.9%
yes, in the definition of drug-related policies and/or legislation	15.0%	50.0%	80.0%	25.0%	27.3%
yes, in the implementation of drug-related policies and/or legislation	15.0%	40.6%	80.0%	50.0%	25.6%
yes, in the monitoring of drug-related policies and/or legislation	11.3%	40.6%	40.0%	25.0%	20.7%
yes, in the evaluation of drug-related policies and/or legislation factors	11.3%	46.9%	20.0%	25.0%	21.5%
N	80	32	5	4	121

Note: Columns do not add to 100 per cent because respondents were able to select more than one option.

Disaggregation of responses by respondent type

Drug demand reduction

Implementation of measures

Table 4-3. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Delaying the first use of drugs]

	YES	NO	NO OPINION
a private individual	43.8%	28.8%	27.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53.1%	21.9%	25.0%
a national public authority	80.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	47.9%	25.6%	26.4%

Table 4-4. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with age, gender, cultural or social risk factors (e.g. through initiatives for children and teenagers in the schools, pregnant women, Roma)]

	YES	NO	NO OPINION
a private individual	40.0%	33.8%	26.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	62.5%	25.0%	12.5%
a national public authority	80.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	50.0%
Total	47.1%	30.6%	22.3%

Table 4-5. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with situational risk factors (e.g. homelessness, working and driving under the influence of drugs, drugs use in nightlife)]

	YES	NO	NO OPINION
a private individual	30.0%	42.5%	27.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	65.6%	21.9%	12.5%
a national public authority	100.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	75.0%	25.0%	0.0%
Total	43.8%	34.7%	21.5%

Table 4-6. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with individual risk factors (e.g. multiple addictions, mental health problems, family circumstances)]

	YES	NO	NO OPINION
a private individual	27.5%	46.3%	26.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53.1%	28.1%	18.8%
a national public authority	100.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	0.0%	50.0%
Total	38.0%	38.0%	24.0%

Table 4-7. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Raising awareness on the misuse of and dependence on medicines]

	YES	NO	NO OPINION
a private individual	38.8%	40.0%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	46.9%	37.5%	15.6%
a national public authority	60.0%	20.0%	20.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	42.1%	38.0%	19.8%

Table 4-8. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the availability of drug treatment and rehabilitation services]

	YES	NO	NO OPINION
a private individual	32.5%	42.5%	25.0%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	34.4%	43.8%	21.9%
a national public authority	100.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	36.4%	40.5%	23.1%

Table 4-9. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the accessibility of drug treatment and rehabilitation services]

	YES	NO	NO OPINION
a private individual	30.0%	48.8%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	34.4%	53.1%	12.5%
a national public authority	100.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	34.7%	47.1%	18.2%

Table 4-10. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Introducing best practices and quality approaches in drug demand reduction]

	YES	NO	NO OPINION
a private individual	24%	56%	20%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	59%	25%	16%
a national public authority	100%	0%	0%
an international/intergovernmental/regional organisation	75%	25%	0%
Total	38%	45%	17%

Table 4-11. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Reducing drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

	YES	NO	NO OPINION
a private individual	49%	31%	20%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	75%	19%	6%
a national public authority	100%	0%	0%
an international/intergovernmental/regional organisation	75%	0%	25%
Total	59%	26%	16%

Effectiveness of implemented measures

Table 4-12. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Delay of the first use of drugs]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	10.0%	26.3%	42.5%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	12.5%	50.0%	15.6%	21.9%
a national public authority	60.0%	20.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	0.0%	50.0%	0.0%	50.0%
Total	12.4%	33.1%	33.1%	21.5%

Table 4-13. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with age, gender, cultural or social risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	11.3%	25.0%	38.8%	25.0%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	25.0%	40.6%	18.8%	15.6%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	0.0%	25.0%	0.0%	75.0%
Total	15.7%	29.8%	30.6%	24.0%

Table 4-14. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with situational risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	15.0%	23.8%	40.0%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	25.0%	31.3%	25.0%	18.8%
a national public authority	80.0%	20.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	0.0%	75.0%	0.0%	25.0%
Total	19.8%	27.3%	33.1%	19.8%

Table 4-15. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with individual risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	10.0%	30.0%	36.3%	23.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	18.8%	37.5%	25.0%	18.8%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	25.0%	50.0%	0.0%	25.0%
Total	14.0%	33.1%	30.6%	22.3%

Table 4-16. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Awareness on the misuse of and dependence on medicines]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	21.3%	32.5%	26.3%	20.0%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	9.4%	50.0%	18.8%	21.9%
a national public authority	20.0%	40.0%	20.0%	20.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	0.0%	25.0%
Total	19.0%	37.2%	23.1%	20.7%

Table 4-17. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Availability and accessibility of treatment and rehabilitation services]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	21.3%	27.5%	31.3%	20.0%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	12.5%	31.3%	28.1%	28.1%
a national public authority	40.0%	60.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	25.0%	25.0%
Total	19.8%	29.8%	28.9%	21.5%

Table 4-18. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Reduction of drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	27.5%	26.3%	23.8%	22.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	46.9%	25.0%	15.6%	12.5%
a national public authority	60.0%	40.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	25.0%	25.0%
Total	33.9%	26.4%	20.7%	19.0%

Table 4-19. In your opinion, what steps could be taken to improve the effectiveness of the drug demand reduction policies in the EU?

	Private individual	National organisation	Public authority	Intl/regionl organisation	Total
Adoption of more binding provisions and commitments at a national/regional level	16	22	3	2	43
Development of deeper synergies between the EU and national measures	19	23	3	2	47
Improvement of research, monitoring, collecting data and evaluation activity	48	20	3	2	73
Stronger civil society and scientific community involvement	50	28	4	3	85
Allocation of additional financial resources	25	29	4	4	62
Other	26	7	1	0	34

Table 4-20. If you answered "improvement of research, monitoring, collecting data and evaluation activity", please specify:

	EU level	National level	Local level
a national public authority	3	3	2
a private individual	43	35	24
an international/intergovernmental/regional organisation	1	2	2
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	14	19	14
Total	61	59	42

Table 4-21. If you answered "stronger civil society and scientific community involvement", please specify:

	EU level	National level	Local level
a national public authority	3	2	2
a private individual	41	40	32
an international/intergovernmental/regional organisation	2	3	2
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	21	23	20
Total	67	68	56

Table 4-22. If you answered "allocation of additional financial resources", please specify:

	EU level	National level	Local level
a national public authority	3	3	1
a private individual	17	21	15
an international/intergovernmental/regional organisation	4	3	2
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	20	27	20
Total	44	54	38

Table 4-23. [steps could be taken to improve the effectiveness of the drug demand reduction policies] in order to:

	Create prevention programmes	Promote best and quality approaches	Create treatment programmes	Improve access to treatment
a national public authority	4	4	3	2
a private individual	16	23	17	19
an international/intergovernmental/regional organisation	3	4	3	2
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	18	20	19	22
Total	41	51	42	45

Drug supply reduction*Implementation of measures***Table 4-24. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering cross-border drug trafficking through the improvement of border security]**

	YES	NO	NO OPINION
a private individual	40.0%	31.3%	28.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	34.4%	3.1%	62.5%
a national public authority	40.0%	0.0%	60.0%
an international/intergovernmental/regional organisation	75.0%	0.0%	25.0%
Total	41.0%	22.2%	40.2%

Table 4-25. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing legislative and judicial cooperation against cross-border illicit drug activities]

	YES	NO	NO OPINION
a private individual	27.5%	25.0%	47.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	37.5%	9.4%	53.1%
a national public authority	60.0%	0.0%	40.0%
an international/intergovernmental/regional organisation	50.0%	0.0%	50.0%
Total	32.2%	19.0%	48.8%

Table 4-26. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Prevention of the diversion and illicit use of drug precursors]

	YES	NO	NO OPINION
a private individual	18.8%	35.0%	46.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	37.5%	6.3%	56.3%
a national public authority	60.0%	0.0%	40.0%
an international/intergovernmental/regional organisation	25.0%	0.0%	75.0%
Total	25.6%	24.8%	49.6%

Table 4-27. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering the emergence, use and spread of new psychoactive substances]

	YES	NO	NO OPINION
a private individual	38.8%	37.5%	23.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	78.1%	6.3%	15.6%
a national public authority	40.0%	20.0%	40.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	49.6%	28.1%	22.3%

Table 4-28. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Development of sanctions other than detention for drug-using offenders]

	YES	NO	NO OPINION
a private individual	15.0%	63.8%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53.1%	37.5%	9.4%
a national public authority	40.0%	40.0%	20.0%
an international/intergovernmental/regional organisation	75.0%	25.0%	0.0%
Total	28.1%	54.5%	17.4%

Table 4-29. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Response to the use of new technologies in illicit drug activities]

	YES	NO	NO OPINION
a private individual	26.3%	41.3%	32.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	43.8%	21.9%	34.4%
a national public authority	40.0%	20.0%	40.0%
an international/intergovernmental/regional organisation	25.0%	50.0%	25.0%
Total	31.4%	35.5%	33.1%

*Effectiveness of implemented measures***Table 4-30. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Counter cross-border drug trafficking through the improvement of border security]**

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	13.8%	26.3%	22.5%	37.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	9.4%	25.0%	9.4%	56.3%
a national public authority	40.0%	0.0%	0.0%	60.0%
an international/intergovernmental/regional organisation	25.0%	50.0%	0.0%	25.0%
Total	14.0%	25.6%	17.4%	43.0%

Table 4-31. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Increase of legislative and judicial cooperation against cross-border illicit drug activities]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	8.8%	26.3%	18.8%	46.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	6.3%	31.3%	0.0%	62.5%
a national public authority	60.0%	0.0%	0.0%	40.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	0.0%	50.0%
Total	10.7%	26.4%	12.4%	50.4%

Table 4-32. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Prevention of the diversion and illicit use of drug precursors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	7.5%	25.0%	28.8%	38.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	12.5%	21.9%	3.1%	62.5%
a national public authority	20.0%	0.0%	20.0%	60.0%
an international/intergovernmental/regional organisation	0.0%	25.0%	0.0%	75.0%
Total	9.1%	23.1%	20.7%	47.1%

Table 4-33. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Contrast to the emergence, use and spread of new psychoactive substances]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	7.5%	22.5%	43.8%	26.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	18.8%	21.9%	25.0%	34.4%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	0.0%	0.0%	50.0%	50.0%
Total	11.6%	22.3%	37.2%	28.9%

Table 4-34. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Development of sanctions other than detention for drug-using offenders]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	11.3%	25.0%	40.0%	23.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	37.5%	25.0%	15.6%	21.9%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%	0.0%

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Total	20.7%	25.6%	31.4%	22.3%

Table 4-35. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Response to the use of new technologies in illicit drug activities]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	10.0%	23.8%	35.0%	31.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	15.6%	15.6%	25.0%	43.8%
a national public authority	60.0%	40.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	0.0%	0.0%	50.0%	50.0%
Total	13.2%	21.5%	31.4%	33.9%

Table 4-36. 12. In your opinion, what steps could be taken to improve the effectiveness of drug supply reduction policies in the EU?

	Private individual	National organisation	Public authority	Intl/regional organisation	Total
Adoption of more binding provisions and commitments at a national/regional level	9	16	2	1	28
Development of deeper synergies between the EU and national measures	22	21	3	2	48

	Private individual	National organisation	Public authority	Intl/regional organisation	Total
Strengthening of the support to third countries in addressing drug-related organised crime	24	14	2	0	40
Improvement of research, monitoring, collecting data and evaluation activity in the drugs field	44	21	3	3	71
Stronger civil society and scientific community involvement	40	23	5	4	72
Stronger involvement of industry and economic operators in preventing diversion of drug precursors	10	6	2	1	19
Allocation of additional financial resources	20	12	2	4	38
Other	28	10	0	0	38

Table 4-37. If you answered "improvement of research, monitoring, collecting data and evaluation activity", please specify:

	international level	EU level	national level	local level
a private individual	36	32	30	20
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	17	19	15	10
a national public authority	2	2	3	1
an international/intergovernmental/regional organisation	2	2	3	3
Total	57	55	51	34

Table 4-38. If you answered "stronger civil society and scientific community involvement", please specify:

	international level	EU level	national level	local level
a national public authority	4	2	3	3
a private individual	28	27	31	24
an international/intergovernmental/regional organisation	3	4	4	3
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	19	18	17	14
Total	54	51	55	44

Table 4-39. If you answered "allocation of additional financial resources", please specify:

	For the benefit of third countries	EU level	national level	local level
a national public authority	1	2	2	2
a private individual	16	18	13	10
an international/intergovernmental/regional organisation	4	2	3	2
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	9	10	8	8
Total	30	32	26	22

Table 4-40. [steps could be taken to improve the effectiveness of drug supply reduction] in order to:

	Identify emerging threats	Respond to threats	Enhance cooperation
a national public authority	2	2	1
a private individual	19	14	14
an international/intergovernmental/regional organisation	4	3	1
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	11	12	8
Total	36	31	24

Other drug policy areas

Implementation

Table 4-41. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Coordinating drug policies and responses at a national level]

	YES	NO	NO OPINION
a private individual	23.8%	40.0%	36.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53.1%	28.1%	18.8%
a national public authority	80.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	50.0%	0.0%
Total	35.9%	37.6%	29.9%

Table 4-42. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Involving the civil society and the scientific community in the development and implementation of drug policies]

	YES	NO	NO OPINION
a private individual	12.5%	61.3%	26.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	56.3%	28.1%	15.6%
a national public authority	60.0%	40.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	28.2%	52.1%	23.1%

Table 4-43. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with international organisations in the drug policies field]

	YES	NO	NO OPINION
a private individual	25.0%	42.5%	32.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53.1%	21.9%	25.0%
a national public authority	80.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	75.0%	0.0%	25.0%
Total	37.6%	35.9%	29.9%

Table 4-44. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with non-EU countries in the drug policies field]

	YES	NO	NO OPINION
a private individual	21.3%	42.5%	36.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	37.5%	18.8%	43.8%
a national public authority	80.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%
Total	29.9%	35.9%	37.6%

Table 4-45. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Information, research, monitoring and evaluation related to the drug phenomenon]

	YES	NO	NO OPINION
a private individual	37.5%	38.8%	23.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	65.6%	18.8%	15.6%
a national public authority	80.0%	20.0%	0.0%
an international/intergovernmental/regional organisation	75.0%	0.0%	25.0%
Total	49.6%	32.5%	21.4%

Effectiveness

Table 4-46. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Coordination of drug policies and responses at a national level]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	3.8%	36.3%	33.8%	26.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	15.6%	43.8%	15.6%	25.0%
a national public authority	80.0%	20.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	25.0%	25.0%
Total	10.7%	37.2%	27.3%	24.8%

Table 4-47. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Involvement of the civil society and the scientific community in the development and implementation of drug policies]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	12.5%	35.0%	31.3%	21.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	28.1%	34.4%	21.9%	15.6%
a national public authority	40.0%	40.0%	0.0%	20.0%

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
an international/intergovernmental/regional organisation	0.0%	50.0%	25.0%	25.0%
Total	17.4%	35.5%	27.3%	19.8%

Table 4-48. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Investments in research, data collection, monitoring, evaluation and information exchange]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	16.3%	32.5%	28.8%	22.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	25.0%	34.4%	21.9%	18.8%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	50.0%	25.0%	25.0%	0.0%
Total	20.7%	33.1%	25.6%	20.7%

Table 4-49. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Dissemination of research, monitoring and evaluation results]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	16.3%	30.0%	25.0%	28.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	21.9%	46.9%	18.8%	12.5%
a national public authority	40.0%	40.0%	0.0%	20.0%
an international/intergovernmental/regional organisation	25.0%	50.0%	0.0%	25.0%
Total	19.0%	35.5%	21.5%	24.0%

Table 4-50. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with international organisations in the drug policies field]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	11.3%	35.0%	22.5%	31.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	18.8%	37.5%	9.4%	34.4%
a national public authority	60.0%	40.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	50.0%	0.0%	25.0%
Total	15.7%	36.4%	17.4%	30.6%

Table 4-51. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with third countries in the drug policies field]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	10.0%	30.0%	23.8%	36.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	15.6%	31.3%	3.1%	50.0%
a national public authority	60.0%	40.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	50.0%	0.0%	0.0%	50.0%
Total	14.9%	29.8%	16.5%	38.8%

Table 4-52. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Visibility of the EU approach to drugs policy in the international arena]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
a private individual	10.0%	22.5%	30.0%	37.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	37.5%	25.0%	15.6%	21.9%
a national public authority	80.0%	20.0%	0.0%	0.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	50.0%	0.0%
Total	20.7%	23.1%	25.6%	30.6%

Table 4-53. In your opinion, what steps could be taken to improve the effectiveness of the EU international engagement in the drugs field?

	Private individual	National organisation	Public authority	Intl/regional organisation	Total
Further integration of drug policies within the overall EU common and security foreign policy	35	16	3	2	56
Enhance dialogue with third countries and regional organisations on tackling drugs, including drug and drug precursors trafficking and drug demand reduction	29	19	3	3	54
Review the priority countries for EU engagement on drugs with third countries	18	13	2	2	35
Enhance coordination of EU positions on drug policy with selected countries at UN level	30	21	3	2	56

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Increase financial assistance for drug related cooperation (drug demand reduction and drug supply reduction) programmes with third countries	14	16	3	3	36
Increase the synergy between policy dialogue and financial assistance on drug policies	28	16	1	1	46
Mainstream alternative development into EU development programmes with third countries	22	14	2	1	39
Further explore the links between drugs trafficking and other forms of international organised crime (e.g. terrorism, human trafficking, smuggling,...)	36	13	5	1	55
Provide for increased EU funding to alternative development programmes	42	22	3	3	70

EU Added Value**Table 4-54. In your opinion, what is the EU Drugs Strategy's added value? [It supports the development of a dialogue and/or a consistent approach to drugs at national level]**

	1	2	3	4
a private individual	26.3%	31.3%	30.0%	12.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	3.1%	18.8%	53.1%	25.0%
a national public authority	20.0%	0.0%	60.0%	20.0%
an international/intergovernmental/regional organisation	25.0%	25.0%	25.0%	25.0%
Total	19.8%	26.4%	37.2%	16.5%

Table 4-55. In your opinion, what is the EU Drugs Strategy's added value? [It helps to raise important debates on drug policies on the international agenda]

	1	2	3	4
a private individual	22.5%	28.8%	31.3%	17.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	6.3%	6.3%	43.8%	43.8%
a national public authority	0.0%	40.0%	40.0%	20.0%
an international/intergovernmental/regional organisation	0.0%	25.0%	75.0%	0.0%
Total	16.5%	23.1%	36.4%	24.0%

Table 4-56. In your opinion, what is the EU Drugs Strategy's added value? [It helps to improve coherence between national/regional and European drug-related actions]

	1	2	3	4
a private individual	32.5%	26.3%	23.8%	17.5%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	3.1%	18.8%	56.3%	21.9%
a national public authority	0.0%	20.0%	60.0%	20.0%
an international/intergovernmental/regional organisation	0.0%	0.0%	75.0%	25.0%
Total	22.3%	23.1%	35.5%	19.0%

Table 4-57. In your opinion, what is the EU Drugs Strategy's added value? [It facilitates the allocation of a larger amount of national public resources to specific activities or initiatives in the drug field]

	1	2	3	4
a private individual	32.5%	38.8%	22.5%	6.3%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	21.9%	50.0%	18.8%	9.4%
a national public authority	40.0%	20.0%	0.0%	40.0%
an international/intergovernmental/regional organisation	0.0%	25.0%	75.0%	0.0%
Total	28.9%	40.5%	22.3%	8.3%

Table 4-58. In your opinion, what is the EU Drugs Strategy's added value? [It helps to improve the involvement of civil society and scientific community in drug policies]

	1	2	3	4
a private individual	28.8%	33.8%	23.8%	13.8%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	9.4%	12.5%	65.6%	12.5%
a national public authority	20.0%	40.0%	20.0%	20.0%
an international/intergovernmental/regional organisation	0.0%	0.0%	100.0%	0.0%
Total	22.3%	27.3%	37.2%	13.2%

Table 4-59. In your opinion, what is the EU Drugs Strategy's added value? [The Strategy has no significant added value]

	1	2	3	4
a private individual	31%	13%	26%	30%
an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company	53%	28%	13%	6%
a national public authority	40%	0%	60%	0%
an international/intergovernmental/regional organisation	50%	25%	0%	25%
Total	38.0%	16.5%	23.1%	22.3%

Table 4-60. In the future, where do you see the focus of the EU's drugs policy?

	Private individual	National organisation	Public authority	Intl/regional organisation	Total
Prevention	25	17	4	4	50
Treatment and rehabilitation services	45	17	2	2	66
Risk and harm reduction	47	22	3	3	75
Finding synergies between drugs use and other addictions (e.g. alcohol, tobacco, gambling) and addressing them altogether	16	8	0	1	25
Fighting against drugs trafficking, drug precursors diversion and other kinds of organised crime	13	5	2	1	21
Analysing the links between drug trafficking and other major and serious crimes	9	2	2	0	13
Tackling online trade of drugs	10	6	1	0	17
Reinforcing the EU and international response to the spread of new psychoactive substances	9	6	0	0	15
Coordination of drug policies at EU and national/regional/local levels	15	14	2	2	33
Stronger involvement of the EU in addressing world drug challenges	10	8	1	1	20
Strengthening cooperation with non-EU countries and international organisations on drug policies (on both drug demand and drug supply reduction)	2	4	0	1	7
Strengthen the promotion of EU values and approaches	5	10	0	1	16
Promotion of scientific research on drugs	50	10	2	0	62

	Private individual	National organisation	Public authority	Intl/regional organisation	Total
Monitoring, evaluation, data collection, information and best practices exchange	26	11	2	2	41
Address cannabis at EU level	45	11	3	2	61
I don't think there is a need for future EU action in this domain	0	0	0	0	0
Other	14	4	0	0	18

Disaggregation of responses by country**Drug demand reduction***Implementation of measures***Table 4-61. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Delaying the first use of drugs]**

	YES	NO	NO OPINION
EU	42.3%	26.9%	30.8%
Finland	50.0%	21.4%	28.6%
Italy	41.2%	23.5%	35.3%
Sweden	55.2%	20.7%	24.1%
All respondents	47.9%	25.6%	26.4%

Table 4-62. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with age, gender, cultural or social risk factors (e.g. through initiatives for children and teenagers in the schools, pregnant women, Roma population)]

	YES	NO	NO OPINION
EU	50.0%	23.1%	26.9%
Finland	64.3%	14.3%	21.4%
Italy	47.1%	17.6%	35.3%
Sweden	41.4%	41.4%	17.2%
All respondents	47.1%	30.6%	22.3%

Table 4-63. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with situational risk factors (e.g. homelessness, working and driving under the influence of drugs, drugs use in nightlife)]

	YES	NO	NO OPINION
EU	53.8%	19.2%	26.9%
Finland	42.9%	35.7%	21.4%
Italy	41.2%	29.4%	29.4%
Sweden	34.5%	41.4%	24.1%
All respondents	43.8%	34.7%	21.5%

Table 4-64. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with individual risk factors (e.g. multiple addictions, mental health problems, family circumstances)]

	YES	NO	NO OPINION
EU	42.3%	19.2%	8.5%
Finland	35.7%	42.9%	21.4%
Italy	23.5%	35.3%	41.2%
Sweden	41.4%	44.8%	13.8%
All respondents	38.0%	38.0%	24.0%

Table 4-65. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Raising awareness on the misuse of and dependence on medicines]

	YES	NO	NO OPINION
EU	53.8%	19.2%	26.9%
Finland	35.7%	42.9%	21.4%
Italy	23.5%	35.3%	41.2%
Sweden	37.9%	51.7%	10.3%
All respondents	42.1%	38.0%	19.8%

Table 4-66. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the availability of drug treatment and rehabilitation services]

	YES	NO	NO OPINION
EU	46.2%	23.1%	30.8%
Finland	21.4%	57.1%	21.4%
Italy	41.2%	23.5%	35.3%
Sweden	24.1%	58.6%	17.2%
All respondents	36.4%	40.5%	23.1%

Table 4-67. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the accessibility of drug treatment and rehabilitation services]

	YES	NO	NO OPINION
EU	38.5%	30.8%	30.8%
Finland	21.4%	71.4%	7.1%
Italy	41.2%	35.3%	23.5%
Sweden	24.1%	62.1%	13.8%
All respondents	34.7%	47.1%	18.2%

Table 4-68. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Introducing best practices and quality approaches in drug demand reduction]

	YES	NO	NO OPINION
EU	61.5%	19.2%	19.2%
Finland	21.4%	64.3%	14.3%
Italy	47.1%	29.4%	23.5%
Sweden	17.2%	69.0%	13.8%
All respondents	38.0%	44.6%	17.4%

Table 4-69. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Reducing drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

	YES	NO	NO OPINION
EU	73.1%	3.8%	23.1%
Finland	42.9%	35.7%	21.4%
Italy	41.2%	35.3%	23.5%
Sweden	44.8%	44.8%	10.3%
All respondents	58.7%	25.6%	15.7%

Effectiveness of implemented measures

Table 4-70. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Delay of the first use of drugs]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	7.7%	38.5%	15.4%	38.5%
Finland	7.1%	28.6%	50.0%	14.3%
Italy	17.6%	29.4%	17.6%	35.3%
Sweden	6.9%	20.7%	55.2%	17.2%
All respondents	12.4%	33.1%	33.1%	21.5%

Table 4-71. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with age, gender, cultural or social risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	19.2%	30.8%	19.2%	30.8%
Finland	7.1%	35.7%	42.9%	14.3%
Italy	17.6%	41.2%	11.8%	29.4%
Sweden	6.9%	13.8%	51.7%	27.6%
All respondents	15.7%	29.8%	30.6%	24.0%

Table 4-72. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with situational risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	23.1%	23.1%	19.2%	34.6%
Finland	7.1%	35.7%	42.9%	14.3%
Italy	23.5%	17.6%	23.5%	35.3%
Sweden	10.3%	20.7%	51.7%	17.2%
All respondents	19.8%	27.3%	33.1%	19.8%

Table 4-73. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with individual risk factors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	15.4%	42.3%	11.5%	30.8%
Finland	7.1%	35.7%	42.9%	14.3%
Italy	5.9%	41.2%	11.8%	41.2%
Sweden	10.3%	20.7%	51.7%	17.2%
All respondents	14.0%	33.1%	30.6%	22.3%

Table 4-74. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Awareness on the misuse of and dependence on medicines]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	11.5%	53.8%	15.4%	19.2%
Finland	21.4%	28.6%	35.7%	14.3%
Italy	17.6%	17.6%	11.8%	52.9%
Sweden	6.9%	34.5%	41.4%	17.2%
All respondents	19.0%	37.2%	23.1%	20.7%

Table 4-75. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Availability and accessibility of treatment and rehabilitation services]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	23.1%	26.9%	30.8%	30.8%
Finland	21.4%	21.4%	35.7%	21.4%
Italy	17.6%	35.3%	17.6%	29.4%
Sweden	6.9%	34.5%	41.4%	17.2%
All respondents	19.8%	29.8%	28.9%	21.5%

Table 4-76. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Reduction of drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	46.2%	19.2%	11.5%	23.1%
Finland	28.6%	28.6%	14.3%	28.6%
Italy	11.8%	29.4%	29.4%	29.4%
Sweden	24.1%	20.7%	34.5%	20.7%
All respondents	33.9%	26.4%	20.7%	19.0%

Drug supply reduction*Implementation of measures***Table 4-77. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering cross-border drug trafficking through the improvement of border security]**

	YES	NO	NO OPINION
EU	38.5%	7.7%	53.8%
Finland	50.0%	21.4%	28.6%
Italy	52.9%	0.0%	47.1%
Sweden	31.0%	48.3%	20.7%
All respondents	39.7%	21.5%	38.8%

Table 4-78. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing legislative and judicial cooperation against cross-border illicit drug activities]

	YES	NO	NO OPINION
EU	30.8%	7.7%	61.5%
Finland	42.9%	35.7%	21.4%
Italy	35.3%	11.8%	52.9%
Sweden	13.8%	34.5%	51.7%
All respondents	32.2%	19.0%	48.8%

Table 4-79. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Prevention of the diversion and illicit use of drug precursors]

	YES	NO	NO OPINION
EU	30.8%	0.0%	69.2%
Finland	28.6%	42.9%	28.6%
Italy	35.3%	11.8%	52.9%
Sweden	10.3%	48.3%	41.4%
All respondents	25.6%	24.8%	49.6%

Table 4-80. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering the emergence, use and spread of new psychoactive substances]

	YES	NO	NO OPINION
EU	65.4%	7.7%	26.9%
Finland	28.6%	50.0%	21.4%
Italy	52.9%	11.8%	35.3%
Sweden	44.8%	44.8%	10.3%
All respondents	49.6%	28.1%	22.3%

Table 4-81. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Development of sanctions other than detention for drug-using offenders]

	YES	NO	NO OPINION
EU	57.7%	19.2%	23.1%
Finland	7.1%	78.6%	14.3%
Italy	23.5%	41.2%	35.3%
Sweden	13.8%	75.9%	10.3%
All respondents	28.1%	54.5%	17.4%

Table 4-82. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Response to the use of new technologies in illicit drug activities]

	YES	NO	NO OPINION
EU	38.5%	23.1%	38.5%
Finland	35.7%	42.9%	21.4%
Italy	35.3%	17.6%	47.1%
Sweden	24.1%	48.3%	27.6%
All respondents	31.4%	35.5%	33.1%

*Effectiveness of implemented measures***Table 4-83. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Counter cross-border drug trafficking through the improvement of border security]**

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	11.5%	23.1%	15.4%	50.0%
Finland	7.1%	21.4%	42.9%	28.6%
Italy	23.5%	17.6%	5.9%	52.9%
Sweden	3.4%	31.0%	31.0%	34.5%
All respondents	14.0%	25.6%	17.4%	43.0%

Table 4-84. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Increase of legislative and judicial cooperation against cross-border illicit drug activities]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	15.4%	23.1%	3.8%	57.7%
Finland	7.1%	21.4%	28.6%	42.9%
Italy	11.8%	23.5%	5.9%	58.8%
Sweden	0.0%	27.6%	27.6%	44.8%
All respondents	10.7%	26.4%	12.4%	50.4%

Table 4-85. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Prevention of the diversion and illicit use of drug precursors]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	15.4%	11.5%	11.5%	61.5%
Finland	0.0%	28.6%	28.6%	42.9%
Italy	0.0%	17.6%	17.6%	64.7%
Sweden	3.4%	27.6%	41.4%	27.6%
All respondents	9.1%	23.1%	20.7%	47.1%

Table 4-86. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Contrast to the emergence, use and spread of new psychoactive substances]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	23.1%	19.2%	19.2%	38.5%
Finland	0.0%	21.4%	50.0%	28.6%
Italy	5.9%	29.4%	23.5%	41.2%
Sweden	0.0%	24.1%	58.6%	17.2%
All respondents	11.6%	22.3%	37.2%	28.9%

Table 4-87. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Development of sanctions other than detention for drug-using offenders]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	42.3%	23.1%	3.8%	30.8%
Finland	7.1%	21.4%	50.0%	21.4%
Italy	23.5%	23.5%	17.6%	35.3%
Sweden	3.4%	20.7%	58.6%	17.2%
All respondents	20.7%	25.6%	31.4%	22.3%

Table 4-88. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Response to the use of new technologies in illicit drug activities]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	19.2%	23.1%	19.2%	38.5%
Finland	14.3%	14.3%	28.6%	42.9%
Italy	17.6%	5.9%	29.4%	47.1%
Sweden	3.4%	31.0%	44.8%	20.7%
All respondents	13.2%	21.5%	31.4%	33.9%

Other drug policy areas*Implementation***Table 4-89. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Coordinating drug policies and responses at a national level]**

	YES	NO	NO OPINION
EU	50.0%	15.4%	34.6%
Finland	28.6%	50.0%	21.4%
Italy	17.6%	52.9%	29.4%
Sweden	24.1%	37.9%	37.9%
All respondents	34.7%	36.4%	28.9%

Table 4-90. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Involving the civil society and the scientific community in the development and implementation of drug policies]

	YES	NO	NO OPINION
EU	42.3%	23.1%	34.6%
Finland	35.7%	50.0%	14.3%
Italy	23.5%	47.1%	29.4%
Sweden	6.9%	75.9%	17.2%
All respondents	27.3%	50.4%	22.3%

Table 4-91. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with international organisations in the drug policies field]

	YES	NO	NO OPINION
EU	57.7%	11.5%	30.8%
Finland	28.6%	35.7%	35.7%
Italy	35.3%	23.5%	41.2%
Sweden	20.7%	58.6%	20.7%
All respondents	36.4%	34.7%	28.9%

Table 4-92. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with non-EU countries in the drug policies field]

	YES	NO	NO OPINION
EU	50.0%	7.7%	42.3%
Finland	14.3%	50.0%	35.7%
Italy	29.4%	17.6%	52.9%
Sweden	10.3%	62.1%	27.6%
All respondents	28.9%	34.7%	36.4%

Table 4-93. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Information, research, monitoring and evaluation related to the drug phenomenon]

	YES	NO	NO OPINION
EU	65.4%	7.7%	26.9%
Finland	42.9%	42.9%	14.3%
Italy	41.2%	35.3%	23.5%
Sweden	31.0%	55.2%	13.8%
All respondents	47.9%	31.4%	20.7%

*Effectiveness***Table 4-94. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Coordination of drug policies and responses at a national level]**

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	15.4%	42.3%	11.5%	30.8%
Finland	7.1%	50.0%	14.3%	28.6%
Italy	11.8%	23.5%	23.5%	41.2%
Sweden	0.0%	31.0%	51.7%	17.2%
All respondents	10.7%	37.2%	27.3%	24.8%

Table 4-95. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Involvement of civil society and scientific community in the development and implementation of drug policies]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	19.2%	38.5%	19.2%	23.1%
Finland	28.6%	21.4%	28.6%	21.4%
Italy	17.6%	29.4%	17.6%	35.3%
Sweden	17.2%	31.0%	41.4%	10.3%
All respondents	17.4%	35.5%	27.3%	19.8%

Table 4-96. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Investments in research, data collection, monitoring, evaluation and information exchange]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	34.6%	42.3%	3.8%	15.4%
Finland	14.3%	28.6%	28.6%	28.6%
Italy	5.9%	17.6%	29.4%	47.1%
Sweden	13.8%	37.9%	34.5%	13.8%
All respondents	20.7%	33.1%	25.6%	20.7%

Table 4-97. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Dissemination of research, monitoring and evaluation results]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	38.5%	42.3%	3.8%	15.4%
Finland	14.3%	28.6%	21.4%	35.7%
Italy	5.9%	23.5%	23.5%	47.1%
Sweden	13.8%	27.6%	34.5%	24.1%
All respondents	19.0%	35.5%	21.5%	24.0%

Table 4-98. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with international organisations in the drug policies field]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	26.9%	38.5%	7.7%	26.9%
Finland	0.0%	42.9%	14.3%	42.9%
Italy	11.8%	23.5%	17.6%	47.1%
Sweden	6.9%	31.0%	37.9%	24.1%
All respondents	15.7%	36.4%	17.4%	30.6%

Table 4-99. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with third countries in the drug policies field]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	26.9%	34.6%	11.5%	26.9%
Finland	0.0%	35.7%	21.4%	42.9%
Italy	17.6%	5.9%	11.8%	64.7%
Sweden	3.4%	27.6%	34.5%	34.5%
All respondents	14.9%	29.8%	16.5%	38.8%

Table 4-100. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Visibility of the EU approach to drugs policy in the international arena]

	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
EU	42.3%	19.2%	15.4%	23.1%
Finland	14.3%	28.6%	21.4%	35.7%
Italy	5.9%	17.6%	35.3%	41.2%
Sweden	6.9%	20.7%	41.4%	31.0%
All respondents	20.7%	23.1%	25.6%	30.6%

Disaggregation of responses by area of interest/activity

Drug demand reduction

Implementation of measures

Table 4-101. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Delaying the first use of drugs]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	57.4%	23.4%	19.1%
Drug supply reduction	47.1%	29.4%	23.5%
Coordination of drug policies at international/EU level	52.2%	17.4%	30.4%
Coordination of drug policies at regional/national level	53.5%	23.3%	23.3%
Cooperation with non-EU countries and international organisations	51.7%	34.5%	13.8%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Information, research, monitoring and evaluation activities	48.0%	22.7%	29.3%
Other	43.6%	28.2%	28.2%

Table 4-102. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with age, gender, cultural or social risk factors (e.g. through initiatives for children and teenagers in the schools, pregnant women, Roma population)]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	59.6%	23.4%	17.0%
Drug supply reduction	47.1%	35.3%	17.6%
Coordination of drug policies at international/EU level	52.2%	30.4%	17.4%
Coordination of drug policies at regional/national level	48.8%	32.6%	18.6%
Cooperation with non-EU countries and international organisations	34.5%	41.4%	24.1%
Information, research, monitoring and evaluation activities	45.3%	29.3%	25.3%
Other	41.0%	33.3%	25.6%

Table 4-103. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with situational risk factors (e.g. homelessness, working and driving under the influence of drugs, drugs use in nightlife)]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	59.6%	27.7%	12.8%
Drug supply reduction	70.6%	17.6%	11.8%
Coordination of drug policies at international/EU level	56.5%	21.7%	21.7%
Coordination of drug policies at regional/national level	48.8%	30.2%	20.9%
Cooperation with non-EU countries and international organisations	34.5%	41.4%	24.1%
Information, research, monitoring and evaluation activities	40.0%	37.3%	22.7%
Other	38.5%	38.5%	23.1%

Table 4-104. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Preventing drug use by people with individual risk factors (e.g. multiple addictions, mental health problems, family circumstances)]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	51.1%	29.8%	19.1%
Drug supply reduction	52.9%	35.3%	11.8%
Coordination of drug policies at international/EU level	60.9%	17.4%	21.7%
Coordination of drug policies at regional/national level	44.2%	34.9%	20.9%
Cooperation with non-EU countries and international organisations	27.6%	41.4%	31.0%
Information, research, monitoring and evaluation activities	32.0%	41.3%	26.7%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Other	33.3%	38.5%	28.2%

Table 4-105. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Raising awareness on the misuse of and dependence on medicines]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	48.9%	34.0%	17.0%
Drug supply reduction	64.7%	23.5%	11.8%
Coordination of drug policies at international/EU level	60.9%	26.1%	13.0%
Coordination of drug policies at regional/national level	41.9%	41.9%	16.3%
Cooperation with non-EU countries and international organisations	51.7%	37.9%	10.3%
Information, research, monitoring and evaluation activities	41.3%	38.7%	20.0%
Other	51.3%	33.3%	15.4%

Table 4-106. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the availability of drug treatment and rehabilitation services]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	51.1%	29.8%	19.1%
Drug supply reduction	52.9%	29.4%	17.6%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Coordination of drug policies at international/EU level	47.8%	34.8%	17.4%
Coordination of drug policies at regional/national level	32.6%	41.9%	25.6%
Cooperation with non-EU countries and international organisations	41.4%	37.9%	20.7%
Information, research, monitoring and evaluation activities	32.0%	46.7%	21.3%
Other	38.5%	41.0%	20.5%

Table 4-107. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing the accessibility of drug treatment and rehabilitation services]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	48.9%	38.3%	12.8%
Drug supply reduction	58.8%	29.4%	11.8%
Coordination of drug policies at international/EU level	47.8%	39.1%	13.0%
Coordination of drug policies at regional/national level	32.6%	46.5%	20.9%
Cooperation with non-EU countries and international organisations	41.4%	44.8%	13.8%
Information, research, monitoring and evaluation activities	32.0%	50.7%	17.3%
Other	38.5%	41.0%	20.5%

Table 4-108. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Introducing best practices and quality approaches in drug demand reduction]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	59.6%	23.4%	17.0%
Drug supply reduction	70.6%	17.6%	11.8%
Coordination of drug policies at international/EU level	47.8%	34.8%	17.4%
Coordination of drug policies at regional/national level	34.9%	48.8%	16.3%
Cooperation with non-EU countries and international organisations	37.9%	51.7%	10.3%
Information, research, monitoring and evaluation activities	38.7%	44.0%	17.3%
Other	35.9%	43.6%	20.5%

Table 4-109. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Reducing drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	80.9%	10.6%	8.5%
Drug supply reduction	58.8%	29.4%	11.8%
Coordination of drug policies at international/EU level	69.6%	13.0%	17.4%
Coordination of drug policies at regional/national level	53.5%	27.9%	18.6%
Cooperation with non-EU countries and international organisations	62.1%	27.6%	10.3%
Information, research, monitoring and evaluation activities	53.3%	30.7%	16.0%

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	YES	NO	NO OPINION
Other	66.7%	17.9%	15.4%

Effectiveness of implemented measures

Table 4-110. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Delay of the first use of drugs]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	19.1%	38.3%	21.3%	21.3%
Drug supply reduction	11.8%	29.4%	35.3%	23.5%
Coordination of drug policies at international/EU level	17.4%	26.1%	26.1%	30.4%
Coordination of drug policies at regional/national level	16.3%	34.9%	30.2%	18.6%
Cooperation with non-EU countries and international organisations	6.9%	34.5%	41.4%	17.2%
Information, research, monitoring and evaluation activities	9.3%	32.0%	38.7%	20.0%
Other	15.4%	30.8%	28.2%	25.6%

Table 4-111. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with age, gender, cultural or social risk factors]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	27.7%	29.8%	23.4%	19.1%
Drug supply reduction	17.6%	41.2%	17.6%	23.5%
Coordination of drug policies at international/EU level	21.7%	26.1%	17.4%	34.8%
Coordination of drug policies at regional/national level	18.6%	30.2%	25.6%	25.6%
Cooperation with non-EU countries and international organisations	6.9%	37.9%	37.9%	17.2%
Information, research, monitoring and evaluation activities	13.3%	36.0%	30.7%	20.0%
Other	15.4%	25.6%	30.8%	28.2%

Table 4-112. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with situational risk factors]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	27.7%	27.7%	27.7%	17.0%
Drug supply reduction	23.5%	29.4%	23.5%	23.5%
Coordination of drug policies at international/EU level	21.7%	13.0%	26.1%	39.1%
Coordination of drug policies at regional/national level	27.9%	20.9%	32.6%	18.6%
Cooperation with non-EU countries and international organisations	3.4%	34.5%	44.8%	17.2%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Information, research, monitoring and evaluation activities	16.0%	30.7%	34.7%	18.7%
Other	15.4%	33.3%	28.2%	23.1%

Table 4-113. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Prevention of drugs use by people with individual risk factors]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	21.3%	34.0%	23.4%	21.3%
Drug supply reduction	17.6%	35.3%	17.6%	29.4%
Coordination of drug policies at international/EU level	30.4%	17.4%	21.7%	30.4%
Coordination of drug policies at regional/national level	16.3%	30.2%	30.2%	23.3%
Cooperation with non-EU countries and international organisations	6.9%	37.9%	34.5%	20.7%
Information, research, monitoring and evaluation activities	12.0%	34.7%	30.7%	22.7%
Other	10.3%	41.0%	25.6%	23.1%

Table 4-114. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Awareness on the misuse of and dependence on medicines]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	12.8%	48.9%	17.0%	21.3%
Drug supply reduction	17.6%	47.1%	17.6%	17.6%
Coordination of drug policies at international/EU level	21.7%	30.4%	21.7%	26.1%
Coordination of drug policies at regional/national level	20.9%	39.5%	18.6%	20.9%
Cooperation with non-EU countries and international organisations	10.3%	44.8%	31.0%	13.8%
Information, research, monitoring and evaluation activities	17.3%	37.3%	28.0%	17.3%
Other	25.6%	38.5%	15.4%	20.5%

Table 4-115. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Availability and accessibility of treatment and rehabilitation services]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	19.1%	36.2%	23.4%	21.3%
Drug supply reduction	29.4%	29.4%	29.4%	11.8%
Coordination of drug policies at international/EU level	21.7%	26.1%	21.7%	30.4%
Coordination of drug policies at regional/national level	18.6%	27.9%	25.6%	27.9%
Cooperation with non-EU countries and international organisations	24.1%	27.6%	27.6%	20.7%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Information, research, monitoring and evaluation activities	20.0%	28.0%	32.0%	20.0%
Other	28.2%	28.2%	23.1%	20.5%

Table 4-116. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to the period 2005-2012? [Reduction of drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	40.4%	29.8%	17.0%	12.8%
Drug supply reduction	35.3%	17.6%	29.4%	17.6%
Coordination of drug policies at international/EU level	39.1%	21.7%	17.4%	21.7%
Coordination of drug policies at regional/national level	39.5%	23.3%	14.0%	23.3%
Cooperation with non-EU countries and international organisations	31.0%	27.6%	27.6%	13.8%
Information, research, monitoring and evaluation activities	32.0%	25.3%	25.3%	17.3%
Other	33.3%	25.6%	17.9%	23.1%

Drug supply reduction*Implementation of measures***Table 4-117. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering cross-border drug trafficking through the improvement of border security]**

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	51.1%	12.8%	36.2%
Drug supply reduction	64.7%	23.5%	11.8%
Coordination of drug policies at international/EU level	26.1%	21.7%	52.2%
Coordination of drug policies at regional/national level	37.2%	20.9%	41.9%
Cooperation with non-EU countries and international organisations	41.4%	27.6%	31.0%
Information, research, monitoring and evaluation activities	36.0%	24.0%	40.0%
Other	25.6%	33.3%	41.0%

Table 4-118. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Increasing legislative and judicial cooperation against cross-border illicit drug activities]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	44.7%	10.6%	44.7%
Drug supply reduction	52.9%	23.5%	23.5%
Coordination of drug policies at international/EU level	21.7%	17.4%	60.9%
Coordination of drug policies at regional/national level	25.6%	14.0%	60.5%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Cooperation with non-EU countries and international organisations	27.6%	24.1%	48.3%
Information, research, monitoring and evaluation activities	29.3%	25.3%	45.3%
Other	38.5%	17.9%	43.6%

Table 4-119. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Prevention of the diversion and illicit use of drug precursors]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	38.3%	12.8%	48.9%
Drug supply reduction	47.1%	23.5%	29.4%
Coordination of drug policies at international/EU level	21.7%	17.4%	60.9%
Coordination of drug policies at regional/national level	20.9%	25.6%	53.5%
Cooperation with non-EU countries and international organisations	20.7%	27.6%	51.7%
Information, research, monitoring and evaluation activities	21.3%	22.7%	56.0%
Other	28.2%	25.6%	46.2%

Table 4-120. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Countering the emergence, use and spread of new psychoactive substances]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	55.3%	23.4%	21.3%
Drug supply reduction	41.2%	35.3%	23.5%
Coordination of drug policies at international/EU level	52.2%	21.7%	26.1%
Coordination of drug policies at regional/national level	48.8%	25.6%	25.6%
Cooperation with non-EU countries and international organisations	51.7%	34.5%	13.8%
Information, research, monitoring and evaluation activities	49.3%	25.3%	25.3%
Other	56.4%	25.6%	17.9%

Table 4-121. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Development of sanctions other than detention for drug-using offenders]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	38.3%	46.8%	14.9%
Drug supply reduction	35.3%	52.9%	11.8%
Coordination of drug policies at international/EU level	39.1%	39.1%	21.7%
Coordination of drug policies at regional/national level	18.6%	53.5%	27.9%
Cooperation with non-EU countries and international organisations	31.0%	58.6%	10.3%
Information, research, monitoring and evaluation activities	28.0%	56.0%	16.0%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Other	41.0%	43.6%	15.4%

Table 4-122. In your opinion, in the period 2013-2016 were measures implemented with the aim of: [Response to the use of new technologies in illicit drug activities]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	48.9%	25.5%	25.5%
Drug supply reduction	35.3%	41.2%	23.5%
Coordination of drug policies at international/EU level	26.1%	34.8%	39.1%
Coordination of drug policies at regional/national level	30.2%	32.6%	37.2%
Cooperation with non-EU countries and international organisations	31.0%	41.4%	27.6%
Information, research, monitoring and evaluation activities	29.3%	42.7%	28.0%
Other	38.5%	25.6%	35.9%

*Effectiveness of implemented measures***Table 4-123. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Counter cross-border drug trafficking through the improvement of border security]**

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	17.0%	25.5%	10.6%	46.8%
Drug supply reduction	35.3%	23.5%	17.6%	23.5%
Coordination of drug policies at international/EU level	8.7%	17.4%	21.7%	52.2%
Coordination of drug policies at regional/national level	14.0%	20.9%	20.9%	44.2%
Cooperation with non-EU countries and international organisations	10.3%	31.0%	27.6%	31.0%
Information, research, monitoring and evaluation activities	6.7%	26.7%	24.0%	42.7%
Other	12.8%	23.1%	20.5%	43.6%

Table 4-124. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Increase of legislative and judicial cooperation against cross-border illicit drug activities]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	14.9%	31.9%	2.1%	51.1%
Drug supply reduction	17.6%	41.2%	11.8%	29.4%
Coordination of drug policies at international/EU level	4.3%	17.4%	8.7%	69.6%
Coordination of drug policies at regional/national level	7.0%	32.6%	9.3%	51.2%
Cooperation with non-EU countries and international organisations	10.3%	34.5%	17.2%	37.9%

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Information, research, monitoring and evaluation activities	8.0%	28.0%	18.7%	45.3%
Other	10.3%	28.2%	7.7%	53.8%

Table 4-125. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Prevention of the diversion and illicit use of drug precursors]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	14.9%	19.1%	10.6%	55.3%
Drug supply reduction	11.8%	23.5%	29.4%	35.3%
Coordination of drug policies at international/EU level	0.0%	17.4%	21.7%	60.9%
Coordination of drug policies at regional/national level	11.6%	23.3%	16.3%	48.8%
Cooperation with non-EU countries and international organisations	6.9%	24.1%	24.1%	44.8%
Information, research, monitoring and evaluation activities	4.0%	20.0%	26.7%	49.3%
Other	10.3%	20.5%	20.5%	48.7%

Table 4-126. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Contrast to the emergence, use and spread of new psychoactive substances]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	23.4%	19.1%	25.5%	31.9%
Drug supply reduction	11.8%	11.8%	47.1%	29.4%
Coordination of drug policies at international/EU level	4.3%	26.1%	30.4%	39.1%
Coordination of drug policies at regional/national level	9.3%	25.6%	32.6%	32.6%
Cooperation with non-EU countries and international organisations	13.8%	17.2%	48.3%	20.7%
Information, research, monitoring and evaluation activities	8.0%	26.7%	40.0%	25.3%
Other	12.8%	15.4%	46.2%	25.6%

Table 4-127. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Development of sanctions other than detention for drug-using offenders]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	27.7%	23.4%	23.4%	25.5%
Drug supply reduction	23.5%	35.3%	23.5%	17.6%
Coordination of drug policies at international/EU level	21.7%	21.7%	21.7%	34.8%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Coordination of drug policies at regional/national level	16.3%	23.3%	30.2%	30.2%
Cooperation with non-EU countries and international organisations	17.2%	24.1%	41.4%	17.2%
Information, research, monitoring and evaluation activities	20.0%	25.3%	33.3%	21.3%
Other	25.6%	30.8%	25.6%	17.9%

Table 4-128. In your opinion, to what extent has the effectiveness of these measures changed during the period 2013-2016 compared to 2005-2012? [Response to the use of new technologies in illicit drug activities]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	23.4%	19.1%	25.5%	31.9%
Drug supply reduction	17.6%	23.5%	23.5%	35.3%
Coordination of drug policies at international/EU level	8.7%	21.7%	26.1%	43.5%
Coordination of drug policies at regional/national level	16.3%	18.6%	25.6%	39.5%
Cooperation with non-EU countries and international organisations	17.2%	13.8%	37.9%	31.0%
Information, research, monitoring and evaluation activities	12.0%	21.3%	34.7%	32.0%
Other	12.8%	20.5%	30.8%	35.9%

Other drug policy areas*Implementation***Table 4-129. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Coordinating drug policies and responses at a national level]**

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	53.2%	29.8%	17.0%
Drug supply reduction	47.1%	35.3%	17.6%
Coordination of drug policies at international/EU level	56.5%	13.0%	30.4%
Coordination of drug policies at regional/national level	37.2%	37.2%	25.6%
Cooperation with non-EU countries and international organisations	31.0%	44.8%	24.1%
Information, research, monitoring and evaluation activities	33.3%	38.7%	28.0%
Other	30.8%	33.3%	35.9%

Table 4-130. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Involving the civil society and the scientific community in the development and implementation of drug policies]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	40.4%	46.8%	12.8%
Drug supply reduction	35.3%	47.1%	17.6%
Coordination of drug policies at international/EU level	47.8%	26.1%	26.1%
Coordination of drug policies at regional/national level	27.9%	55.8%	16.3%
Cooperation with non-EU countries and international organisations	34.5%	48.3%	17.2%
Information, research, monitoring and evaluation activities	29.3%	50.7%	20.0%
Other	23.1%	53.8%	23.1%

Table 4-131. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with international organisations in the drug policies field]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	48.9%	29.8%	21.3%
Drug supply reduction	64.7%	17.6%	17.6%
Coordination of drug policies at international/EU level	52.2%	21.7%	26.1%
Coordination of drug policies at regional/national level	37.2%	37.2%	25.6%
Cooperation with non-EU countries and international organisations	51.7%	31.0%	17.2%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Information, research, monitoring and evaluation activities	40.0%	33.3%	26.7%
Other	41.0%	23.1%	35.9%

Table 4-132. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Cooperating with non-EU countries in the drug policies field]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	42.6%	29.8%	27.7%
Drug supply reduction	47.1%	35.3%	17.6%
Coordination of drug policies at international/EU level	34.8%	21.7%	43.5%
Coordination of drug policies at regional/national level	30.2%	39.5%	30.2%
Cooperation with non-EU countries and international organisations	37.9%	37.9%	24.1%
Information, research, monitoring and evaluation activities	28.0%	34.7%	37.3%
Other	35.9%	20.5%	43.6%

Table 4-133. In your opinion, in the period 2013-2016 were measures implemented with aim of: [Information, research, monitoring and evaluation related to the drug phenomenon]

RESPONDENT'S STATED AREA OF INTEREST /ACTIVITY	YES	NO	NO OPINION
Drug demand reduction	63.8%	21.3%	14.9%
Drug supply reduction	70.6%	23.5%	5.9%
Coordination of drug policies at international/EU level	60.9%	21.7%	17.4%
Coordination of drug policies at regional/national level	48.8%	30.2%	20.9%
Cooperation with non-EU countries and international organisations	55.2%	34.5%	10.3%
Information, research, monitoring and evaluation activities	49.3%	32.0%	18.7%
Other	53.8%	17.9%	28.2%

Effectiveness

Table 4-134. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Coordination of drug policies and responses at a national level]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	12.8%	38.3%	23.4%	25.5%
Drug supply reduction	23.5%	23.5%	29.4%	23.5%
Coordination of drug policies at international/EU level	17.4%	39.1%	13.0%	30.4%
Coordination of drug policies at regional/national level	14.0%	34.9%	30.2%	20.9%
Cooperation with non-EU countries and international organisations	6.9%	37.9%	41.4%	13.8%
Information, research, monitoring and evaluation activities	8.0%	38.7%	32.0%	21.3%
Other	12.8%	33.3%	30.8%	23.1%

Table 4-135. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Involvement of the civil society and the scientific community in the development and implementation of drug policies]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	23.4%	29.8%	25.5%	21.3%
Drug supply reduction	29.4%	29.4%	17.6%	23.5%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Coordination of drug policies at international/EU level	26.1%	30.4%	21.7%	21.7%
Coordination of drug policies at regional/national level	20.9%	32.6%	23.3%	23.3%
Cooperation with non-EU countries and international organisations	31.0%	27.6%	31.0%	10.3%
Information, research, monitoring and evaluation activities	21.3%	33.3%	28.0%	17.3%
Other	20.5%	30.8%	28.2%	20.5%

Table 4-136. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Investments in research, data collection, monitoring, evaluation and information exchange]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	27.7%	27.7%	25.5%	19.1%
Drug supply reduction	35.3%	17.6%	17.6%	29.4%
Coordination of drug policies at international/EU level	21.7%	34.8%	17.4%	26.1%
Coordination of drug policies at regional/national level	9.3%	37.2%	25.6%	27.9%
Cooperation with non-EU countries and international organisations	31.0%	31.0%	27.6%	10.3%
Information, research, monitoring and evaluation activities	21.3%	28.0%	30.7%	20.0%
Other	23.1%	30.8%	20.5%	25.6%

Table 4-137. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Dissemination of research, monitoring and evaluation results]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	19.1%	36.2%	25.5%	19.1%
Drug supply reduction	35.3%	23.5%	17.6%	23.5%
Coordination of drug policies at international/EU level	30.4%	34.8%	13.0%	21.7%
Coordination of drug policies at regional/national level	16.3%	32.6%	20.9%	30.2%
Cooperation with non-EU countries and international organisations	27.6%	37.9%	24.1%	10.3%
Information, research, monitoring and evaluation activities	22.7%	33.3%	25.3%	18.7%
Other	20.5%	33.3%	20.5%	25.6%

Table 4-138. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with international organisations in the drug policies field]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	14.9%	42.6%	10.6%	31.9%
Drug supply reduction	23.5%	35.3%	17.6%	23.5%
Coordination of drug policies at international/EU level	17.4%	34.8%	13.0%	34.8%
Coordination of drug policies at regional/national level	16.3%	34.9%	18.6%	30.2%

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Cooperation with non-EU countries and international organisations	17.2%	41.4%	27.6%	13.8%
Information, research, monitoring and evaluation activities	13.3%	40.0%	18.7%	28.0%
Other	20.5%	35.9%	7.7%	35.9%

Table 4-139. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Cooperation with third countries in the drug policies field]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	21.3%	38.3%	8.5%	31.9%
Drug supply reduction	23.5%	29.4%	17.6%	29.4%
Coordination of drug policies at international/EU level	21.7%	21.7%	13.0%	43.5%
Coordination of drug policies at regional/national level	14.0%	32.6%	18.6%	34.9%
Cooperation with non-EU countries and international organisations	17.2%	41.4%	27.6%	13.8%
Information, research, monitoring and evaluation activities	13.3%	33.3%	17.3%	36.0%
Other	17.9%	28.2%	7.7%	46.2%

Table 4-140. In your opinion, to what extent has the effectiveness of the following actions changed during the period 2013-2016 compared to 2005-2012? [Visibility of the EU approach to drugs policy in the international arena]

RESPONDENT'S STATED AREA OF INTEREST/ACTIVITY	IMPROVED	REMAINED THE SAME	GOT WORSE	NO OPINION
Drug demand reduction	25.5%	25.5%	23.4%	25.5%
Drug supply reduction	29.4%	29.4%	17.6%	23.5%
Coordination of drug policies at international/EU level	30.4%	21.7%	17.4%	30.4%
Coordination of drug policies at regional/national level	20.9%	23.3%	14.0%	41.9%
Cooperation with non-EU countries and international organisations	24.1%	20.7%	34.5%	20.7%
Information, research, monitoring and evaluation activities	20.0%	21.3%	32.0%	26.7%
Other	25.6%	20.5%	17.9%	35.9%

ANNEX 2: ANALYSIS FRAMEWORK FOR THE PUBLIC CONSULTATION

Below follows a brief overview of the analytical framework utilised by the research team in processing and analysing the data collected through the public consultation.

Analysis of respondents' profile

First, an overview of the respondents' profile was developed. The objective of this activity was to state clearly who the respondents to the public consultation were and what stakeholder groups they represented. By extension, this information also shed light on what stakeholder groups (if any) were missing or participated in the public consultation only to a limited extent.

The analysis of respondent profiles was based on descriptive data and yielded information on the following areas:

- The distribution of respondents by type, e.g. individual respondents vs. those representing organisations (Question 1);
- The geographical distribution of respondents across EU Member States (Question 3);
- Respondents' level and character of involvement in drug policy (Question 4);
- The distribution of respondents' field of activity or interest by policy area (Question 5); and
- Their participation in any related activities (Question 6).

Based on information collected on respondents' profile, we developed a categorisation of respondents to be applied in the next stage, i.e. the analysis of substantive responses. At this stage, we examined whether any particular group appears to be under- or overrepresented among respondents. In such a case, we explored the desirability of creating a special respondent category for this under/overrepresented group to be used in any disaggregation of results.

Quantitative analysis of substantive responses

Responses to closed substantive questions pertaining to the views and opinions of respondents (Questions 7-17) formed the basis for this analysis. For each question, cross-tabulations and other descriptive statistics were prepared to assess the frequency of responses and the prevalence of particular views. To the extent possible, we broke down the quantitative data by the categories developed in the first stage of the analysis. The objective of this disaggregation was to provide an overview of the relative frequency of responses, although the sample of responses obtained through the consultation is not representative.

Qualitative analysis of substantive responses

The consultation questionnaire contained one open-text question (Question 18). Responses to this question were summarized in a narrative form intended to complement the analysis of responses to Question 17, which was related to the final open-ended question. In the event respondents used this box to provide additional information beyond the scope of Question 18, this was noted in a separate narrative text. The same approach was taken for ad hoc responses received outside the formal consultation questionnaire.

When reviewing open text responses, our analysis paid attention to the distinction between data/facts and respondents' subjective opinions.

ANNEX 3: PUBLIC CONSULTATION QUESTIONNAIRE

Public consultation for the 2016 evaluation of the EU Drugs Strategy and Action Plan on Drugs

Fields marked with * are mandatory.

* Please choose from one of the following options on the use of your contribution:

- My contribution can be directly published, with my personal/organisation information (I consent to publication of all information in my contribution in whole or in part including my name/the name of my organisation, and I declare that nothing within my response is unlawful or would infringe the rights of any third party in a manner that would prevent publication)
- My contribution can be directly published, provided that this is done anonymously. (I consent to publication of any information in my contribution in whole or in part (which may include quotes or opinions I express, and I declare that nothing within my response is unlawful or would infringe the rights of any third party in a manner that would prevent publication)
- My contribution cannot be directly published but may be included within statistical data (I understand that my contribution will not be directly published, but that my anonymised responses may be included in published statistical data). Note that your answers may be subject to a request for public access to documents under Regulation (EC) No 1049/2001

* If required, can the Commission services contact you for further details on the information you have submitted?

- Yes No

* **1. Are you submitting your contribution as:**

Only one choice is possible

- a private individual
- a national public authority
- an international/intergovernmental/regional organisation
- an organisation (non-governmental, civil society organisation, academia, research, social partner, interest group, consultancy, think-tank...) or private company

* Is your organisation registered in the Transparency Register?

- Yes
- No. *If you would like to register now, please click [here](#). If you decide not to register, your answers will be listed separately as part of the individual contributions.*

* **2. Please, provide your name and/or your organisation's name and contact details:**

200 character(s) maximum

*** 3. The answers you will provide are expected to refer to a specific Member State or to the EU as a whole. Please, select the option that best fits your case:**

*** 4. Please specify your level of involvement in the area of drug policy:**

- I am actively working in the field
- I am interested in the field without actively working in it

* Please explain your involvement:

Only one choice is possible

- Official of public institutions active in the field (Ministry of Justice, Health and Social Affairs, Interior, etc.)
- Healthcare professional (doctor, nurse, psychologist etc.)
- Journalist
- Law enforcement representative
- NGO member
- Policy maker
- Researcher or academic
- Social worker
- Other

*** 5. Which of the following areas of drug-related policies best describes your field of activity or interest?**

Multiple answer options can be selected

- Drug demand reduction
- Drug supply reduction
- Coordination of drug policies at international/EU level
- Coordination of drug policies at regional/national level
- Cooperation with non-EU countries and international organisations
- Information, research, monitoring and evaluation activities
- Other

*** 6. Did you take part in any activity related to the selected policy area(s) in the period 2013-2016?**

Multiple answer options can be selected

- no
- yes, in the definition of drug-related policies and/or legislation

- yes, in the implementation of drug-related policies and/or legislation
- yes, in the monitoring of drug-related policies and/or legislation
- yes, in the evaluation of drug-related policies and/or legislation factors

7. In your opinion, in the period 2013-2016 were measures implemented with the aim of:

	YES	NO	NO OPINION
*Delaying the first use of drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Preventing drug use by people with age, gender, cultural or social risk factors (e.g. through initiatives for children and teenagers in the schools, pregnant women, Roma population)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Preventing drug use by people with situational risk factors (e.g. homelessness, working and driving under the influence of drugs, drugs use in nightlife)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Preventing drug use by people with individual risk factors (e.g. multiple addictions, mental health problems, family circumstances)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Raising awareness on the misuse of and dependence on medicines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Increasing the availability of drug treatment and rehabilitation services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Increasing the accessibility of drug treatment and rehabilitation services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Introducing best practices and quality approaches in drug demand reduction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Reducing drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. In your opinion, to what extent has the effectiveness* of these measures changed during the period 2013-2016 compared to the period 2005-2012?

* Effectiveness: to what extent EU/national actions have achieved the expected results or contributed to progress in certain areas.

	IT IMPROVED	IT REMAINED THE SAME	IT GOT WORSE	NO OPINION
*Delay of the first use of drugs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Prevention of drugs use by people with age, gender, cultural or social risk factors (e.g. through initiatives for children and teenagers in the schools, pregnant women, Roma population)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Prevention of drugs use by people with situational risk factors (e.g. homelessness, working and driving under the influence of drugs, drugs use in nightlife)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*Prevention of drugs use by people with individual risk factors (e.g. other addictions, mental health problems, family circumstances)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Awareness on the misuse of and dependence on medicines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Availability and accessibility of treatment and rehabilitation services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Reduction of drug-related risk and harm (e.g. prevention of infectious diseases such as HIV, hepatitis C)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 9. In your opinion, what steps could be taken to improve the effectiveness of the drug demand reduction policies in the EU?**

Multiple answer options can be selected

- Adoption of more binding provisions and commitments at a national/regional level
- Development of deeper synergies between the EU and national measures
- Improvement of research, monitoring, collecting data and evaluation activity
- Stronger civil society and scientific community involvement
- Allocation of additional financial resources
- Other

* If you answered "improvement of research, monitoring, collecting data and evaluation activity", please specify:

- at EU level
- at national level
- at local level

* If you answered "stronger civil society and scientific community involvement", please specify:

- at EU level
- at national level
- at local level

* If you answered "allocation of additional financial resources", please specify:

- at EU level
- at national level
- at local level

* In order to:

- create, improve and evaluate drug prevention programmes
- promote best practices and quality approaches to the drug phenomenon

- create, improve and evaluate targeted and diversified treatment programmes
- improve access to risk and harm reduction services

10. In your opinion, in the period 2013-2016 were measures implemented with the aim of:

	YES	NO	NO OPINION
*Countering cross-border drug trafficking through the improvement of border security (e.g. in the airports or seaports)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Increasing legislative and judicial cooperation against cross-border illicit drug activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Preventing the diversion and illicit use of drug precursors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Countering the emergence, use and spread of new psychoactive substances	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Developing sanctions other than detention for drug-using offenders (e.g. rehabilitation, social integration or education)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Responding to the use of new technologies in illicit drug activities (e.g. purchasing drugs online)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. In your opinion, to what extent has the effectiveness* of these measures changed during the period 2013-2016 compared to 2005-2012?

* Effectiveness: to what extent EU/national actions have achieved the expected results or contributed to progress in certain areas.

	IT IMPROVED	IT REMAINED THE SAME	IT GOT WORSE	NO OPINION
*Counter cross-border drug trafficking through the improvement of border security (e.g. in the airports or seaports)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Increase of legislative and judicial cooperation against cross-border illicit drug activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Prevention of the diversion and illicit use of drug precursors	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Contrast to the emergence, use and spread of new psychoactive substances	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Development of sanctions other than detention for drug-using offenders (e.g. rehabilitation, social integration or education)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Response to the use of new technologies in illicit drug activities (e.g. purchasing drugs online)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 12. In your opinion, what steps could be taken to improve the effectiveness of drug supply reduction policies in the EU?**

Multiple answer options can be selected

- Adoption of more binding provisions and commitments at a national/regional level
- Development of deeper synergies between the EU and national measures
- Strengthening of the support to third countries in addressing drug-related organised crime
- Improvement of research, monitoring, collecting data and evaluation activity in the drugs field
- Stronger civil society and scientific community involvement
- Stronger involvement of industry and economic operators in preventing diversion of drug precursors
- Allocation of additional financial resources
- Other

* If you answered "improvement of research, monitoring, collecting data and evaluation activity", please specify:

- at international level
- at EU level
- at national level
- at local level

* If you answered "stronger civil society and scientific community involvement", please specify:

- at international level
- at EU level
- at national level
- at local level

* If you answered "allocation of additional financial resources", please specify:

- for the benefit of third countries known as major drugs suppliers
- at EU level
- at national level
- at local level

* In order to:

- identify the emerging trends and threats associated with drug-related crime
- promptly respond to the emerging threats in illicit drug activities
- enhance law enforcement and judicial cooperation

13. In your opinion, in the period 2013-2016 were measures implemented with aim of:

	YES	NO	NO OPINION
*Coordinating drug policies and responses at a national level	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Involving the civil society and the scientific community in the development and implementation of drug policies	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Cooperating with international organisations in the drug policies field	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Cooperating with non-EU countries in the drug policies field	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Information, research, monitoring and evaluation related to the drug phenomenon	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. In your opinion, to what extent has the effectiveness* of the following actions changed during the period 2013-2016 compared to 2005-2012?

* Effectiveness: to what extent EU/national actions have achieved the expected results or contributed to progress in certain areas.

	IT IMPROVED	IT REMAINED THE SAME	IT GOT WORSE	NO OPINION
*Coordination of drug policies and responses at a national level	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Involvement of the civil society and the scientific community in the development and implementation of drug policies	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Investments in research, data collection, monitoring, evaluation and information exchange	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Dissemination of research, monitoring and evaluation results	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Cooperation with international organisations in the drug policies field	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Cooperation with third countries in the drug policies field	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*Visibility of the EU approach to drugs policy in the international arena	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 15. In your opinion, what steps could be taken to improve the effectiveness of the EU international engagement in the drugs field?**

Multiple answer options can be selected

- Further integration of drug policies within the overall EU common and security foreign policy
- Enhance dialogue with third countries and regional organisations on tackling drugs, including drug and drug precursors trafficking and drug demand reduction
- Review the priority countries for EU engagement on drugs with third countries

- Enhance coordination of EU positions on drug policy with selected countries at UN level
- Increase financial assistance for drug related cooperation (drug demand reduction and drug supply reduction) programmes with third countries
- Increase the synergy between policy dialogue and financial assistance on drug policies
- Mainstream alternative development into EU development programmes with third countries Further explore the links between drugs trafficking and other forms of international organized crime (e.g. terrorism, human trafficking, smuggling,...)
- Provide for increased EU funding to alternative development programmes

16. In your opinion, what is the EU Drugs Strategy's added value? Please indicate how much you agree with the following statements, on a scale from 1 to 4, where 1 means "I do not agree at all" and 4 means "I fully agree"

	1	2	3	4
*It supports the development of a dialogue and/or a consistent approach to drugs at national level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*It helps to raise important debates on drug policies on the international agenda	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*It helps to improve coherence between national/regional and European drug-related actions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*It facilitates the allocation of a larger amount of national public resources to specific activities or initiatives in the drug field	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*It helps to improve the involvement of civil society and scientific community in drug policies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
*The Strategy has no significant added value	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

*** 17. In the future, where do you see the focus of the EU's drugs policy?**

at most 5 choice(s)

- Prevention
- Treatment and rehabilitation services
- Risk and harm reduction
- Finding synergies between drugs use and other addictions (e.g. alcohol, tobacco, gambling) and addressing them altogether
- Fighting against drugs trafficking, drug precursors diversion and other kinds of organised crime
- Analysing the links between drug trafficking and other major and serious crimes
- Tackling online trade of drugs
- Reinforcing the EU and international response to the spread of new psychoactive substances
- Coordination of drug policies at EU and national/regional/local levels
- Stronger involvement of the EU in addressing world drug challenges
- Strengthening cooperation with non-EU countries and international organisations on drug policies (on both drug demand and drug supply reduction)
- Strengthen the promotion of EU values and approaches

- Promotion of scientific research on drugs
- Monitoring, evaluation, data collection, information and best practices exchange
- Address cannabis at EU level
- I don't think there is a need for future EU action in this domain
- Other

*** 18. Please explain your reasoning for your answer to question 17.**

600 character(s) maximum

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doi: 10.2837/424182