2002

PROJECT FICHE

1. BASIC INFORMATION
1.1 Désirée Number:

1.2 Title: Establishment of a National Drugs Monitoring Centre (Reitox Focal Point) and Development and Implementation of a National Drugs Strategy

1.3 Sector: Justice and Home Affairs/ Employment and Social Affairs

1.4 Location: Antidrugs Council, Ministry of Health, Cyprus

2. OBJECTIVES

2.1 Overall Objective(s):
To promote further alignment with the EU Acquis in the fight against drugs, and to facilitate Cyprus’ participation in EU instruments and policies.

2.2 Project purpose:
Establishment a national focal point in Cyprus and development of its administrative and operational capacities to fully participate in the activities of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), development of a National Drugs Strategy including a drug demand reduction strategy, and enhancement of the intervention capacities of all agencies (government institutions and NGOs) involved in the implementation of the EU Acquis regarding drug prevention.

2.3 Accession Partnership and NPAA priority:

NPAA
Medium-term priorities:
Justice and Home Affairs - The focal point for co-operation with the EMCDDA will be set up by 1.1.2003. (Personnel will be recruited, building and equipment secured and an operational budget allocated to it).

European Commission 2001 Regular Report:
Chapter 24 – Co-operation in the field of Justice and Home Affairs
In view of Cyprus’ participation in Reitox (information network on drugs and drug addiction) preparations for the necessary legislative and administrative arrangements for the appointment of a national focal point and representative for the European Monitoring Center for Drug Addiction continue.

2.4 Contribution to National Development Plan
N/A

2.5 Cross Border Impact
N/A
3. **DESCRIPTION**

3.1 **Background and justification:**

Cyprus has never been a drug producing country on a commercial scale, and almost all locally consumed drugs with the exception of cannabis are imported. However, increasing trends of drug use have been noted in recent years as well as changes in the age group and the drugs used, i.e. the average age of initial drug use has decreased, with the drug of choice being heroin starting at 15 years of age, whereas cannabis was mostly preferred until recently.

While drug supply reduction has made considerable progress with intensive suppressive measures implemented by the authorities in recent years, demand reduction has gone through a disproportionate development. Responding to this need, the authorities established in February 2001 a National Co-ordinating Mechanism for Drugs Issues, the Antidrugs Council, with a special mandate, inter alia, to develop a National Drug Strategy and co-ordinate all Government and NGO initiatives in the field of drug prevention, with emphasis on Drug Demand Reduction Programmes. The Council has already started drafting an outline of a National Drug Strategy. Sectoral Strategies must be prepared to complement it, while Action Plans must be drawn for its implementation, in line with the EU Drug Strategy (2000-2004) and the EU Action Plan to Combat Drugs (2000-2004). Hence, it is crucial that the Antidrugs Council and all agencies involved in this process develop a sufficient capacity for planning and implementing these Strategies and Action Plans. It is also necessary that the Council develop the skills for evaluating the Drug Demand Reduction Programmes (DDR), implemented by Government institutions and Non-governmental organisations.

The implementation of Regulation 93/302/EEC requires participation of the EU Member States in the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and to the European Information Network on Drugs and Drug Addiction (Reitox). In March 2001 a decision allowing the Commission to negotiate the participation of the Candidate Countries in the REITOX network of the EMCDDA has been approved by the European Council, and negotiations are expected to begin soon.

In view of the above, the preparation for participation to the EMCDDA and Reitox, is considered very important by the relevant authorities in Cyprus. At the moment as far as drug related data collection is concerned, there is no drug information system and the data collected by various agencies, is limited, uncoordinated and non comparable with EMCDDA indicators. Consequently, the establishment of a National Focal Point with trained personnel and the development of an efficient national network and data collection system are considered necessary for effective participation to the activities of the EMCDDA.

The services of an EU expert have been commissioned in order to conduct a preliminary initial assessment of the local situation regarding drug-related data collection, analysis and dissemination. The outcome of this study led to the assignment to the same expert of the preparation of the legislation needed for the establishment of a National Focal Point to the EMCDDA. The draft legislation is currently undergoing legal vetting by the Government’s Legal Services and enactment of the legislation is expected by early 2002. Following this, the National Focal Point - which will be located with the Antidrugs Council - will be established for participation to the EMCDDA activities.

3.2 **Linked activities:**

The drug sector is an extremely complex one that, at the national level, involves a wide range of government departments and agencies, as well as non-governmental organisations. It is also an area of major international concern for other governments, regional and international organisations.
The range of activities and actions planned and undertaken in the drug sector is consequently enormous and the co-ordination required to maximise synergies and avoid duplication is extremely complex, both at the national and international level. In addition to the specific activities listed below, the Cyprus Government will seek to ensure co-ordination with the activities of all other stakeholders in the area.

- The Pompidou Group:
  Cyprus joined the Pompidou Group (Cooperation Group to Combat Drug Abuse, Council of Europe) in 1989. The Permanent Correspondent to the Pompidou Group who regularly participates in the meetings held for promoting its work programme and liaising with member governments, is the Permanent Secretary of the Ministry of Health. Participation to the Group’s work includes meetings and activities in all sectors involved in the efforts to reduce drug abuse such as health, social affairs, education, justice, law enforcement, sports and youth.

- Short-term technical assistance project for the establishment of a National Drugs Monitoring Centre financed by national budget resources: See 3.1. Background and Justification

The Central and Eastern European Candidate Countries (CEECs) have received assistance in policy development and drug information, supply and demand reduction since 1993 under the PHARE Multi-beneficiary Drugs Programme.

Under the same programme the PHARE EMCDDA-CEEC co-operation project has started in February 2001 and will last for 18 months. Under the project the EMCDDA provides technical assistance to the 10 CEECs in order to prepare them for their integration into the EMCDDA through establishing the necessary legal and institutional framework of the national focal points and strengthen their capacities in line with the EU Acquis. The specific objectives are to develop further the institutional base of the National Focal Points, similarly to the EU REITOX Focal Points.

To consolidate the relationship between the CEECs National Focal Points (NFP) and the EMCDDA and to involve the NFP directly into the EMCDDA activities and work programme.

3.3 Results:
By the end of the project, it is expected that the following will be accomplished:
- National Focal Point adequately equipped and staffed, established within the Antidrugs Council and in a position to provide valid and comparable data as required by the EMCDDA.
- Clear mandate given to the NFP for establishing co-operation with all information sources from both supply and demand reduction sides.
- System of data collection, analysis and dissemination compatible with the EMCDDA established, and a joint work-programme adopted with the EMCDDA for the development of the five key indicators and other relevant core data.
- Data providers trained in system of data collection
- National Focal Point staff and other key personnel trained
- “Early Warning System” on new synthetic drugs ready for activation
- Resource and Documentation Library on Drugs created within the National Focal Point
- National Drug Strategy reviewed, complemented by Sectoral Strategies and Action Plans, in line with the EU Drug Strategy and aligned with EU standards and best practices
- National Drug Strategy includes a specific component on the NFP and the National Drugs Information System
• The organisational set up of the Antidrugs Council reinforced, in order to effectively assume its functions and roles in introducing and implementing drug policy
• National Drug Demand Strategy developed and a National Programme for Demand Reduction prepared
• Existing drug demand reduction programmes evaluated, and effective DDR models tried on a pilot basis and when successful, introduced for nation-wide application
• Government institutions’ and NGOs’ efforts and capabilities in drug demand reduction strategies coordinated and reinforced—training needs analysis prepared and staff training programmes implemented
• Assessment of needs in the area of Primary Prevention and a Primary Prevention Programme based on the National Drug Strategy developed.

3.4 Activities:
In order to meet the specific objectives and to produce the results indicated in section 3.3, the project activities will address three main areas. These are:

3.4.1 Evaluation and Implementation of a comprehensive National Drug Strategy – Support to the Antidrugs Council in the development of its Secretariat and other institutional framework

3.4.1.1. Support for the creation and development of structures required for the effective functioning of the Antidrugs Council:
A National Co-ordinating Mechanism for Drugs Issues, the Antidrugs Council, was established by law in February 2001. The Articles of this Law provide for the creation of a Secretariat and a number of sub-structures to support its work, i.e. committees and sub-committees, to address sectoral issues. The Council is already active, but further work is required to define and to support its strategic set-up and activities, and the activities of the other sub-structures.
This component will provide expert technical assistance to assist in the:

• Development of a management and organisational plan for effective functioning of the Antidrugs Council and its substructures;
• Development of systems to support the Antidrugs Council to undertake its functions effectively, including an efficient communication network between ministries, departments and agencies involved;

Development of required systems, according to identified needs.

3.4.1.2 Evaluation and Implementation of a comprehensive National Drug Strategy:
Cyprus currently has no National Strategy on Drugs and the urgent need to develop one, is viewed as of highest importance by the Cyprus Government and by the European Union. Consequently, the Cyprus agencies with responsibilities in the fight against drugs will co-operate, in order to develop a comprehensive National Drugs Strategy. A special committee formed within the Antidrugs Council is already proceeding with the first draft of the Strategy, which will be submitted for adoption to the Inter-ministerial Committee for the Fight Against Drugs, chaired by the President of the Republic.

This component will provide:

• Long-term assistance to assure an effective, stable and consistent approach to the drafting, promotion and implementation of the Strategy;
• Short-term technical assistance to advise on the drafting of Strategy documents—identification of key issues and priorities to be included in the Strategy
• A programme for development of staff involved in the production of strategic documents (training, exchange of experience etc.).

3.4.2 Establishment of a National Focal Point with the European Drugs Monitoring Centre (EMCDDA):

Cyprus does not have a National Focal Point for participation to the EMCDDA as required by Council Regulation No. 302/93 on the establishment of the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA), and the Decision of the EMCDDA Management Board of 23 October 1998 on the role and the financing of national Focal Points.

In order to provide a sound legal basis and the support required for the National Focal Point to properly carry out its functions in accordance with the EU legislation, the Antidrugs Council has assigned the drafting of the legislation, which will explicitly define the Centre’s role and functions to an EU expert.

Following the enactment of the legislation programmed for early 2002, the Council will proceed with the setting up of the Centre, so that an information system for the collection, analysis and distribution of objective, comparable and reliable data on drugs, in line with the methodology of the EMCDDA, is developed.

This component will include expert assistance for the setting up of the National Focal Point, and will include advice on all necessary measures as follows:

• Definition of a multi annual work programme, including the objectives assigned to the NFP, and the corresponding job descriptions for its staff.
• Recruitment of personnel and development of a suitable training programme in accordance with EMCDDA recommendations, and in close co-operation with the Reitox Academy training programme
• Purchase of hardware equipment and software and other necessary electronic equipment
• Development of a data source network aiming at the collection of reliable, valid and comparable drug epidemiological data
• Training of staff of Government institutions and NGOs, responsible for data collection
• Definition of a framework for the development of the five key indicators and other relevant core data as required by the EMCDDA
• Development of a competent service for epidemiological analysis and interpretation of data
• Setting up of Drug Information and Documentation Systems within a Resource and Documentation Library
• Establishment of the Early Warning System so that there is immediate access to information on new synthetic drugs
• Establishment of co-operation with other national focal points as well as participation in other drug-related instruments of the EU

This component will include the financing of national Reitox Training Seminars to be organised in co-operation with the EMCDDA and of staff participation in EMCDDA meetings and Reitox Academy Training activities. The costs to be covered will include those of the EU and Reitox trainers selected jointly with the EMCDDA, at the exception of the costs for the participation of EMCDDA staff.

National budget resources will cover employment of personnel, purchase of hardware and software equipment, as well as any other necessary electronic equipment for participation in Reitox, and for the Drug Information and Documentation Systems (Resource and Documentation Library).
The particular methodology developed by the EMCDDA under the Phare programme, (see 3.1. Background and justification) will be applied to address objectives of this component, through close co-ordination between the Head of the National Focal Point, the PAA and the EMCDDA under the twinning arrangement.

3.4.3 Development of National Drug Demand Reduction Strategy, inter-agency coordination and Development of Primary Prevention Programme

No national strategy for demand reduction exists at present time. Most initiatives directed towards drug demand reduction, are operated without inter-agency planning and coordination, and none of them has been properly evaluated in order to assess its efficacy.

3.4.3.1. Support for the development of a National Strategy for Demand Reduction:
I see this point as part of the development of a national drug strategy and would put this as a “sub-point” under the chapter of the development of a national drug strategy.

In support of the National Drug Strategy, it is necessary to develop and implement a balanced and integrated Drug Demand Reduction Strategy and programmes, based upon the key element of the global strategy.

This component will assist the agencies involved to define their respective responsibilities, priorities etc. and to develop the Sectoral Strategies and Action Plans accordingly. These will be submitted to the Antidrugs Council for consideration and approval.

This component will provide:
- Short-term technical assistance to evaluate existing efforts at drug demand reduction
- Short-term technical assistance to advise on the development of the Drug Demand Reduction Strategy and the National Programme for Demand Reduction;
- The planning and testing of drug demand reduction models and their introduction to geographically high risk areas
- The development of appropriate evaluation methods for demand reduction models
- Training programme of staff employed at drug demand reduction services and agencies, in order to increase effectiveness
- A programme for development of staff involved in the development of programme documentation (training, study visits etc.).

3.4.3.2 Support for the development of closer working relationship between agencies involved in demand reduction:
This component addresses the effective inter-agency co-operation as a pre-requisite for the implementation of a balanced and integrated Drug Demand Reduction Strategy. Currently, the co-operation between agencies occurs both at the national and local level, but these procedures need to be formalised and integrated into a consistent national approach for inter-agency work.

This component will provide technical assistance to advise on appropriate legal and practical ways to enhance inter-agency co-operation and to assist in the drafting of required documentation (National Law, Protocols, Memoranda of Understanding etc.).

3.4.3.3 Support for the development of Primary Prevention Programme:
This component will assist the involved agencies to develop a Primary Prevention Programme, based upon the key elements of the Demand Reduction Strategy, and addressing among other subjects, those which are currently high priority i.e.: a training programme for the staff involved in educational and other activities related to drug problems, assessment of youth attitude vis-à-vis drugs, assessment of needs to inform the general public about the drug problem, epidemiological and other studies, development and publishing of manuals on drug consumption and dependence, information-education-communication campaigns and drug hot-line services.
This component will provide:

- Short-term technical assistance to evaluate existing efforts and advise on the development of the Primary Prevention Programme;
- A programme for development of staff involved in the development of programme documentation (training, study visits etc.).

3.5 Twinning

All the above components will be implemented through twinning arrangements. The twinning assistance will be received from an appropriate agency or a consortium of agencies in one or several EU Member States.

Tasks of the Pre-accession Advisor (PAA):

- to provide technical advice on the development and content of drug strategies and policies;
- to facilitate/organise meetings between the drug prevention agencies involved/beneficiaries of the project;
- to promote inter-agency co-operation and joint working;
- to co-ordinate all issues related to the setting up of the National Focal Point with the EMCDDA, and in line with the recommendations of the Joint Cyprus-EMCDDA Assessment Report.
- to liaise with the appropriate EU institutions for the purpose of staff training, and with the Reitox Academy Training Programme for the Reitox-related training activities.

Short-term expertise will be required for the performance of tasks as described in section 3.4.

Profile of the PAA:

- solid background in the development of national drug policies and strategies;
- sound knowledge of regulations and policies of the European Union, in relation to drug prevention and accession requirements for the Candidate Countries in the drug sector;
- sound communication skills and previous experience of working in a multi-disciplinary and multi-national team;
- previous experience as project co-ordinator/project manager;
- sound knowledge of English.

Duration of the assignment of the PAA: The PAA will be seconded to the Antidrugs Council for a period of 12 calendar months.

4. Institutional Framework

The Antidrugs Council, which is the beneficiary of the project, was established in February 2001, on the basis of the Law “on the Prevention of the Use and Dissemination of Drugs - The Establishment of the Antidrugs Council and Fund” and is chaired by the Health Minister. It comprises heads of the key agencies with responsibilities in the fight against drugs, as follows:

- Ministry of Health
- Ministry of Interior
- Ministry of Justice and Public Order
- Ministry of Labour and Social Insurance
- Ministry of Education and Culture
- Ministry of Defence
- The Cyprus Youth Board
- The Church of Cyprus
- The Cyprus Police
- Two NGO Representatives
- Two “Par excellence” Scientist: (Psychologists)
The Antidrugs Council draws upon the general conception and ensures the integrated co-ordination by the Government of the fight against drugs. Underneath, the permanent Secretariat—currently in the process of being set up—will be in charge of the daily co-ordination of various committees and commissions and of the meeting preparation.

5. **Detailed Budget**

*(Million Euro)*

<table>
<thead>
<tr>
<th>Component</th>
<th>Investment (1)</th>
<th>Institution Building (2)</th>
<th>Total EU financing (=I+IB)</th>
<th>National co-financing (3)</th>
<th>IFT TOTAL</th>
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<tbody>
<tr>
<td>Development/implementation of National Drug Strategy</td>
<td>0.10</td>
<td>0.10</td>
<td>0.03</td>
<td>0.13</td>
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<tr>
<td>Establishment of a National Focal Point</td>
<td>0.15</td>
<td>0.15</td>
<td>0.05</td>
<td>0.20</td>
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<tr>
<td>Development of Drug Demand Reduction Strategy/Primary Prevention Programmes</td>
<td>0.15</td>
<td>0.15</td>
<td>0.05</td>
<td>0.20</td>
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<tr>
<td>TOTAL</td>
<td>0.40</td>
<td>0.40</td>
<td>0.13</td>
<td>0.53</td>
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</table>

(1) - In relation to equipment, software and related services (installation, testing, training etc.);
(2) - In relation to training, changes in organisation, procedures, legislation, etc.
(3) - In relation to the running cost of the project

6. **Implementation Arrangements**

6.1 Implementing Agency:

The Implementing Agency will be the Mental Health Services of Ministry of Health. A Project Steering Committee (PSC) will be set up comprising of senior representatives of the Ministry of Health, the Antidrugs Council and the Planning Bureau. The PSC will monitor, supervise and coordinate the overall progress and implementation of the project. The PSC will provide guidance for the different components of the project, will define priorities, approve and monitor budgets and approve the results. The PSC, will be chaired by the Programme Authorising Officer (PAO), who will have the overall responsibility for all issues concerning the management and monitoring of the project.

The PAO will be:
Dr Andreas Demetriou
Director of the Mental Health Services of the Ministry of Health,
Tel No.: +357 2 402101
Fax No.: +357 2 487941
E-mail: director.mhs@cytanet.com.cy

The AntiDrugs Council which will be the beneficiary of the project as well as the other Cypriot agencies involved, will support the implementation of the proposed project by assuring the necessary organisational environment, making available the necessary personnel, and covering the cost of the national experts, the necessary equipment, building infrastructure and the related running and administrative costs.
The Pre-Accession Advisor (PAA) will be located within the Antidrugs Council, which will provide office space and logistical support. He/she will work closely with the PAO and the officers and institutions involved in the PSC, and will co-ordinate the short-term experts supporting implementation of the various components described at § 3.4 above.

6.2 Twinning
Twinning is foreseen with an agency or a consortium of agencies in one or several EU Member States, for the ‘Institutional Building’ part of the project (0.40 EURO).

Contact Person for Twinning:
Mrs Tonia Bayiada
Executive Secretary of the Antidrugs Council
Tel No.: +357 2 309503
Fax No.: +357 2 434189
E-mail: melalula@spidernet.com.cy

6.3 Non-standard aspects
The project will be managed according to the Decentralised Implementation System (DIS) rules.

6.4 Contracts
N/A

7. IMPLEMENTATION SCHEDULE
7.1 Start of tendering/call for proposals: February 2002
7.2 Start of project activity: September 2002
7.3 Project completion: September 2003

8. EQUAL OPPORTUNITY
Article 28 of the Constitution safeguards the right of all persons to equality before the law, the administration and justice and of equal protection thereof and treatment thereby. Any direct or indirect discrimination against any person on the grounds, i.e. of his sex, is prohibited.

Furthermore, the prevailing legislation with respect to equality of treatment for men and women is partly in conformity with the Acquis Communautaire. The following laws currently enforce equal opportunity issues: the Equal Pay between Men and Women for Work of Equal Value Law (158/89), the Protection of Maternity Law (100(I)/97), the Termination of Employment Law (24/67) as amended, and the Commissioner for Administration Law (Law 3/91) as amended. Cyprus has ratified by the Law 39/62 the European Convention for the Protection of Human Rights and Fundamental Freedoms. Various international Conventions, which guarantee equal rights between men and women, have also been ratified. The Ministry of Health and the Antidrugs Council are equal opportunity employers.

9. ENVIRONMENT
N/A

10. RATES OF RETURN
N/A

11. INVESTMENT CRITERIA
N/A
12. CONDITIONALITY AND SEQUENCING

N/A

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ANNEXES

1. Logical framework matrix in standard format
2. Detailed implementation time chart in standard format
3. Contracting and disbursement schedule by quarter for full duration of programme
**LOGFRAME PLANNING MATRIX FOR**

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<tr>
<td></td>
<td>Total Budget: 0.53 EURO</td>
<td>EU Budget: 0.40 EURO</td>
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**Overall Objective**
To promote further alignment with the EU Acquis in the fight against drugs, and to facilitate Cyprus’ participation in EU instruments and policies.

<table>
<thead>
<tr>
<th>Objectively Verifiable Indicators</th>
<th>Sources of Verification</th>
</tr>
</thead>
</table>
| • Full alignment with the drugs Acquis at the time of Cyprus’ accession  
• Full participation of Cyprus’ instruments in EU drug related instruments and policies | European Commission’s Opinion on the Status of Preparation of Cyprus for Accession |

**Project Purpose**
Establishment of administrative and information support to enable Cyprus’ full participation to the activities of the European Monitoring Centre for Drugs and Drug Addiction, development of a National Drugs Strategy, and enhancement of the intervention capacities of all agencies (Government institutions and NGOs), involved in the implementation of the EU Acquis regarding drug prevention.

<table>
<thead>
<tr>
<th>Objectively Verifiable Indicators</th>
<th>Sources of Verification</th>
<th>Assumptions</th>
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</table>
| • Administrative and information support for full participation to the activities of the EMCDDA established  
• National Drugs Strategy developed and implemented  
• Intervention capacities of all drug prevention agencies involved in EU Acquis implementation enhanced | Regular Reports to the Commission  
EMCDDA Annual Report on the State of the Drugs Problem in the EU  
National Drugs Strategy adopted by the Cyprus Government  
EMCDDA Assessment Report and updated Country Profile | National legislation fully harmonised and implemented  
Employment of new staff  
National Focal Point infrastructure secured from the National Budget |
<table>
<thead>
<tr>
<th>Results</th>
<th>Objectively Verifiable Indicators</th>
<th>Sources of Verification</th>
<th>Assumptions</th>
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<tbody>
<tr>
<td>• National Focal Point established within the Antidrugs Council and in position to provide valid and comparable data as required by the EMCDDA.</td>
<td>• National Focal Point adequately equipped and staffed, established and connected with Reitox.</td>
<td>Regular reviews by representatives of the European Commission.</td>
<td>Twinning assistance from an appropriate agency/ies in EU Member State/s and in line with EU acquis on drugs and drugs information systems.</td>
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<tr>
<td>System of data collection, analysis and dissemination compatible with the EMCDDA established, and the five key indicators introduced.</td>
<td>• EMCDDA indicators adopted.</td>
<td>Regular reports by the Pre-Accession Advisor.</td>
<td>Full commitment of the Government institutions with responsibilities in the fight against drugs and relevant NGOs.</td>
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<td>Data providers trained in system of data collection.</td>
<td>• Trained data providers and National Focal Point personnel in place.</td>
<td>Regular reports by the EMCDDA.</td>
<td>Effective co-ordination between the various components of the project.</td>
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<tr>
<td>National Focal Point staff and other key personnel trained.</td>
<td>• Data System established.</td>
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<td>Adequate provisions of the project.</td>
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<td>“Early Warning System” on new synthetic drugs.</td>
<td>• Early Warning System established.</td>
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<td>Close cooperation with the EMCDDA for NFP development.</td>
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<td>Resource and Documentation Library on Drugs created within the National Focal Point.</td>
<td>• Drugs Resource and Documentation Centre functioning.</td>
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<tr>
<td>Organisational set up of the Antidrugs Council reinforced, in order to effectively assume its functions and roles in introducing and implementing drug policy.</td>
<td>• National Action Plan on Drugs Information System as an integrated part of the National Drug Strategy.</td>
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<td>National Drug Demand Strategy and a National Programme for Demand Reduction.</td>
<td>• Antidrugs Council functioning effectively.</td>
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<td>Existing drug demand reduction programmes evaluated, and effective DDR models tried on a pilot basis and when successful, introduced for nation-wide application.</td>
<td>• National Drug Demand Strategy and National DDR Programme prepared.</td>
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<td>Government institutions and NGOs efforts and capabilities in drug demand reduction strategies co-ordinated and reinforced.</td>
<td>• Effective DDR programmes introduced nation-wide.</td>
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<td>DDR staff training programmes implemented.</td>
<td>• DDR actions co-ordinated nation-wide.</td>
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<td>• DDR personnel trained.</td>
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<td>• Primary Prevention Programme prepared.</td>
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<td>Activities</td>
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<tr>
<td>• Evaluation and implementation of a comprehensive National Drug Strategy</td>
<td>Twinning assistance from agency/ies in EU Member State/s</td>
<td>Full commitment of the involved authorities</td>
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<td>• Support for the creation and development of structures required for the effective functioning of the Antidrugs Council</td>
<td>Participation of Cypriot experts in REITOX Academy Training activities organised on purpose with the EMCDDA</td>
<td>Twinning assistance from an appropriate agency/ies in EU Member State/s</td>
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<tr>
<td>• Setting up of a National Focal Point:</td>
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<td>Effective monitoring of project implementation</td>
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<tr>
<td>• Training of National Focal Point personnel</td>
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<td>Timely availability of adequate resources</td>
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<tr>
<td>• Development of a data source network for the collection of drug epidemiological data</td>
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<td>Joint design of NFP-related training activities with the EMCDDA</td>
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<td>• Training of personnel responsible for data collection</td>
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<td>• Development of the EMCDDA five key indicators</td>
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<td>• Development of an epidemiological analysis and data interpretation service</td>
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<td>• Setting up of Drug Information and Documentation Systems within a Resource and Documentation Library</td>
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<tr>
<td>• Establishment of the EMCDDA Early Warning System</td>
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<td>• Establishment of co-operation with all other drug related instruments in the EU</td>
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<tr>
<td>• Development of National Drug Demand Strategy</td>
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<tr>
<td>• Development of closer working relationships between agencies involved in demand reduction</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Development of a Primary Prevention Programme</td>
<td></td>
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</tbody>
</table>

**Preconditions**

Full commitment of all involved authorities
European Union Budget and National Budget available
### DETAILED TIME IMPLEMENTATION CHART FOR THE PROJECT

<table>
<thead>
<tr>
<th>COMPONENT</th>
<th>2001</th>
<th>2002</th>
<th>2003</th>
<th>2004</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establishment of a National Focal Point with the European Drugs Monitoring Centre (EMCDDA)</td>
<td>D D D</td>
<td>D D D D D D C C I I I I</td>
<td>I I I I I I I I X</td>
<td></td>
</tr>
<tr>
<td>Development of National Drug Demand Reduction Strategy, inter-agency co-ordination and Development of Primary Prevention Programme</td>
<td>D D D</td>
<td>D D D D D D C C I I I I</td>
<td>I I I I I I I I X</td>
<td></td>
</tr>
</tbody>
</table>

D = Design  
C = Contracting  
I = Implementation  
X = Closure
### ANNEX 3

**CUMULATIVE CONTRACTING AND DISBURSEMENT SCHEDULE**

All figures in million EURO

<table>
<thead>
<tr>
<th></th>
<th>31/12/01</th>
<th>31/03/02</th>
<th>30/06/02</th>
<th>30/09/02</th>
<th>31/12/02</th>
<th>31/03/03</th>
<th>30/06/03</th>
<th>30/09/03</th>
<th>31/12/03</th>
<th>31/03/04</th>
<th>30/06/04</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CONTRACTED</strong></td>
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</tr>
<tr>
<td><strong>DISBURSEMENT</strong></td>
<td>0.40</td>
<td></td>
<td></td>
<td>0.18</td>
<td>0.28</td>
<td>0.38</td>
<td>0.40</td>
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</tbody>
</table>

**NB:**
1. All contracting should normally be completed within 6-12 months and **must** be completed within 24 months of signature of the FM.
2. All disbursements **must** be completed within 36 months of signature of the FM.