



## FINAL MINUTES OF THE SIXTY-FOURTH MEETING OF THE MANAGEMENT BOARD (16–17 DECEMBER 2021)

16 DECEMBER 2021

### 1. Introduction by the Chair

The **Chair, Ms Laura d'Arrigo**, welcomed the participants at the 64<sup>th</sup> EMCDDA Management Board meeting. Due to the situation of the COVID-19 pandemic, the EMCDDA Management Board meeting was held in hybrid format, at the EMCDDA and by video conference through Webex, with remote simultaneous interpretation in English, French and German as active languages, and Danish, Portuguese and Slovenian as passive languages.

The Chair welcomed the new members present at the meeting. Ms Anna-Liisa Uisk, Advisor at the Public Health Department of the Ministry of Social Affairs, was nominated as member for Estonia. Ms Hege Christina Bredesen, Deputy Director General at the Ministry of Health and Care Services, and Mr Torbjørn Brekke, Senior Drug Policy Adviser at the same Ministry, were nominated respectively as member and substitute member for Norway. Hungary was not present at the meeting, but gave its proxy vote to Austria.

Mr Andreas Weinseiss accompanied the Vice-Chair for Austria. Ms Ana Sofia Santos, Head of the Department for International Relations of SICAD, accompanied the Portuguese member.

The European Commission was represented by Mr Olivier Onidi, Deputy Director-General of DG HOME, Ms Floriana Sipala (DG HOME), as well as Mr Péter Mihok (DG HOME) as observer.

The Chair welcomed Ms Ioanna Yiasemi, who has been elected as Spokesperson of the Reitox National Focal Points (NFPs) in November. Ms d'Arrigo expressed her sincere gratitude to the former Spokesperson, Ms Lies Gremeaux, for her support and constructive collaboration.

The UNODC was not represented at the meeting.

The Chair reminded the participants that the Budget and the Executive Committee met on 15 December in order to prepare the Management Board meeting.

The Chair summarised the main parts of the agenda of the meeting. The Chair invited the EMCDDA staff to join the Management Board meeting virtually at 12.30 to address some words at the end of her mandate. A restricted session took place only with the officially nominated members and substitute members of the Management Board for the election of the Chair and Vice-Chair of the Management Board, a member to the Executive Committee and a member to the Budget Committee. For technical reasons and to ensure the full confidentiality during the voting procedures, the restricted session has been extended to the whole afternoon session on 16 December.

### 2. Adoption of the agenda

EMCDDA/23/21 rev 2  
EMCDDA/24/21

**PT** suggested adding a point for information on the Lisbon Addictions Conference 2022 under 'Any other Business'. Mr Denis Huber, Executive Secretary of the Pompidou Group of the Council of Europe, proposed adding a point of information on the 2<sup>nd</sup> Pompidou Group Symposium on experience with new evolutions in drug policy, which was organised on 15 December in Lisbon.

**Decision: The Management Board adopted the revised agenda of the meeting.**

## **PART I: Exchange of views**

### **3. Exchange of views on new trends in the drugs situation in the EU during the COVID-19 pandemic**

#### **3.1. Presentation by the EMCDDA**

**EMCDDA/25/21**

The **Scientific Director** gave an overview on the new trends in the drugs situation from the EMCDDA's perspective.

Since early 2020 the COVID-19 pandemic has seen the introduction of unprecedented measures to protect public health, which impacted on all aspects of the drugs phenomenon in Europe and responses to it. Drug production and trafficking appears to have adapted rapidly to pandemic-related restrictions, and there is little evidence of any major disruptions in supply. Social distancing measures may have affected retail drug dealing, but this appears to have led to a greater adoption of new technologies to facilitate drug distribution, possibly accelerating the trend we have seen in recent years, where the market is becoming increasingly digitally enabled. Rather, we continue to observe the risks to public health arising from the availability and use of a wide range of substances, often of high potency or purity.

The preliminary analysis of the impact of COVID-19 also reveals that while some services for those with drug problems have been disrupted, the care sector has also adapted rather quickly, and services were able to introduce innovative working practices such as the increased use of tele-medicine to mitigate the impact of the current crisis on their clients. A range of indicators show that patterns of use are becoming more complex, with people who use drugs being presented with a greater selection of substances. There is a need to invest more in better understanding the implications of patterns of polydrug use and how they can increase harm.

It is urgent to recognise that there is not only a wider variety of people now personally experiencing drug problems, but drug problems are impacting on communities in a wider variety of ways. As Europe's drug problems continue to rapidly evolve, so too must Europe's response to drugs. At the policy level, the new EU Drugs Strategy and action plan 2021–25, while reaffirming the EU's commitment to a balanced and evidence-based approach to the drugs phenomenon, provide a robust and comprehensive framework for concerted action to protect and improve public health and wellbeing and to offer a high level of security.

#### **3.2. Discussion and sharing of experiences in the EU Member States**

**AT** confirmed that most of the aspects described by the EMCDDA were verified in Austria. In the first phase of the COVID-19 pandemic, slight to strong declines in the availability and utilisation of harm reduction offers were reported in Austria in April 2020 (offers of street work, drug checking and offers in low-threshold facilities with direct contact had to be discontinued or greatly reduced). Overall, however, the treatment systems have proven to be stable and flexible. **AT** reacted early and adapted the opioid substitution therapy (OST)-system during the pandemic. In order to reduce the number of physical contact of clients in OST, **AT** has implemented a relaxation of the legal framework for OST clients. The provisions proved to be effective and were extended to the end of June 2022. The **AT** government invested an additional amount of EUR 13 Mill. to tackle the effects of the pandemic on drug services.

Waste water analysis showed an increase in regional use of methamphetamines, and a decrease in cocaine and cannabis use. The medium to long-term effects of the COVID-19 pandemic on high-risk drug use cannot be assessed yet. Additional burdens caused by the pandemic (loneliness, fears, job loss) may lead to an increase in psychiatric comorbidities among addicts.

**Ms Ferreira Borges, representative of WHO**, commended the work of the EMCDDA and Member States during the COVID-19 pandemic and stressed excellent collaboration with the EMCDDA, in particular in the area of prison health. WHO noted that the pandemic provided a opportunity for increasing the use of digital technologies for OST and e-health interventions in several EU Member States and outside of Europe, which have proven to be quite effective. WHO Europe launched an initiative aiming at transforming attitudes towards mental health in the general population.

**Ms Malliori, representative of the European Parliament**, noted that in Greece an increase in violence cases was registered during the pandemic, possibly in connection with drug use, and wondered if **AT** or the EMCDDA had data on this issue.

In **AT** there was no significant increase of violence due to illicit drugs consumption, but some increase in domestic violence during the second and third lockdown, more in connection with alcohol consumption.

The **Scientific Director** informed that a study on systemic and drug-related violence will come up in the next European Drug Markets Report (EDMR), and these complicated issues have to be addressed in the context of drug monitoring.

**FR** noted that there was no explosion of addictions though was observed an increase in the use of alcohol for a part of the people who used to drink before the pandemic. This was often linked to an increase of violence in the family environment, in particular against women. It was also noted an increase in the use of tobacco among smokers - but also sometimes a decrease. Variations in the use of cannabis has followed the same variations. A strong increase was reported in online gaming.

**DE** drew the attention to the difficult physical condition of children and young people during and after the lockdown, as they were increasingly exposed to domestic violence and excessive alcohol consumption. The prevention efforts and offers for help for children of drug addicted persons were not successful enough. DE has invested EUR 2 Billion for two years for prevention in schools, but not specifically for prevention of addictions. Drug prevention for children and young people should be intensified.

**NL** underlined the challenge of mental health problems. The school programmes for prevention of children should be restarted. Students and young adults develop increasingly mental health problems, sports have been restricted, and a challenge is how to prevent this group from using alcohol and illicit drugs, mainly cannabis. Another challenge will have to be faced when nightlife and festivals will start again, to prevent young people from drugs and alcohol use.

**SI** gave priority to early prevention for children and harm reduction since the beginning of the pandemic, and during its Presidency. SI also drew the attention to the increase of HIV cases in drug users in November–December, and the urgent need of prevention in this area.

**Mr Walsh** conveyed 3 policy messages from the **IE** experience of COVID-19. Firstly the recognition of the social determinants of drug and alcohol use: drugs use is more associated with people experiencing poverty and social exclusion. During the pandemic, government policy has greatly recognised the key role of housing and living conditions on drugs use, and focused on a concerted policy response to the health and addiction needs of people in emergency homeless accommodation. Secondly, the public health response to drug and alcohol use has been promoted and strengthened, a new dynamic and urgency is apparent. New outreach and engagement services have been developed for drug users, a greater priority has been placed under health needs, and an improving access to harm reduction and treatment services provided. Additional public resources have been invested in addiction services to support and strengthen public health response. Thirdly, service delivery has changed, with a greater emphasis on partnership between different arms of the State to address the use of drugs and alcohol. Drug issues are increasingly shared concerns. There are links with domestic and gender-based violence services, services providing food and essential commodities, and with the wider provision of health care including vaccination programmes. A greater partnership between public services and communities resulted in a mobilisation of resources to tackle drugs and alcohol issues.

**Mr Keenan** detailed changes in service and new trends. IE made very early in the pandemic legislative changes to allow for e-prescribing and emergency supply of controlled drugs for e-prescribing, developed rapid induction protocols for Opioid Agonist Treatment (OAT) and prioritised buprenorphine among the OAT cohort. Virtual Clinics were established in remote areas, and take-home regulations extended. Waiting lists for OAT eliminated and Naloxone provision prioritised. A survey of people using HSE Addiction Services was conducted in March and April 2020. IE organised a Drugs.ie harm reduction advice and awareness campaign for people who use drugs during COVID-19 pandemic (<https://www.drugs.ie/afterlockdown/>), online and shared at a regional level, and collaborated with the EMCDDA to promote the EU Web Survey on Drugs on COVID-19 patterns of use, generating over 600 respondents.

Since the beginning of the COVID-19 pandemic, SICAD (Serviço de Intervenção nos Comportamentos Aditivos e nas Dependências, of the **PT** Ministry of Health), has coordinated a working group that includes the Regional Health Administrations and the Social Security Institute. This group has prepared guidelines for services working with homeless people and people with Alcohol Use Disorders housed in shelters.

Emergency social responses were set up, mainly in large cities and with the strong involvement of municipalities, with the participation of health services, social support services and relevant NGOs. Additional funding was provided for harm reduction responses, reinforced by a contribution from the private sector (Calouste Gulbenkian Foundation). The opioid substitution treatment regulations were adjusted to allow for an increase in take-home doses, always depending on the client's clinical assessment. Admission procedures have been relaxed, notably for low-threshold methadone programmes, which have seen an increase in demand. The supply of naloxone to treatment and harm reduction centres has been expanded to counter the increase in overdoses. Despite of the

difficulties during the COVID pandemic for users, services and professionals, 2020 saw some developments with regard to assisted drug consumption facilities; not only did the pilot project of the mobile unit in Lisbon enter its second year, with growing numbers, but decisive steps were also taken towards the launch of another fixed facility in Lisbon (inaugurated in May 2021), and another one about to open, in Porto, involving municipalities, SICAD and NGOs.

In terms of drug supply, an increase in the use of maritime transport for the introduction of drugs into the national territory was observed. An increase in the abuse of psychotropic medicines, namely benzodiazepines, often used by injection, has been reported during the period of greater limitation of the usual markets. With the return to normality, namely in recreational settings, an enormous diversity of psychotropic substances are available and there is the perception of an explosion in consumption, although there is not yet robust scientific evidence. There is an increase in petty criminality associated with the scarcity of substances on the market, as well as aggressive behavioural reactions (domestic and alcohol-related violence).

PT collaborated with the EMCDDA and the Reitox network, as well as with the Pompidou Group of the Council of Europe, in sharing best practices during the COVID-19 crisis. It was an opportunity to increase collaboration at the national level with other national networks, not only those related to illicit and licit drugs, but also those related to the general (public) health system and law enforcement.

**Mr Onidi, representative of the European Commission**, thanked the Chair, the Director and his team for having organised the meeting in a hybrid format. He praised the excellent adaptation of the EMCDDA to the COVID-19 situation in terms of effectiveness and continuity. In terms of outputs, the EMCDDA did not rush into producing reports, but waited for feedback from its partners in the different countries and looked into issues from a longer-term perspective. The COVID-19 pandemic had different impacts on use and supply, but also very positive responses in the prevention area were put in place.

The European Commission had expressed the wish at the last meeting that the EMCDDA should integrate further environmental and greening elements, which have been included as priorities by the FR Presidency as discussion points. Now, the next EDMR should draw some of the lessons of the COVID-19 situation in terms of looking at possible other disruptive geopolitical and social situations (e.g. situation in Afghanistan) by anticipating some possible megatrends and disruptions. The EMCDDA should look at the consequences in terms of getting out of the COVID-19 situation progressively, and also at the substitution effect (have some of the events characteristics in the COVID time brought some substitution in products, supply or treatment, new users groups?) and the additionality of some developments (e-health measures). The EDMR should point out, like a manual, how to survive in terms of crisis and be resilient, that could be useful for all stakeholders. Some of the consequences on the working of the EMCDDA should also be analysed, relating to the revision of the mandate of the agency, and in particular the use of some drug substances together with other types of substances. This will feed further discussions at the Council at political level notably in the context of the discussions of the Commission proposal for the revision of the EMCDDA mandate.

The **Chair** welcomed the presentations and interventions. The current trends will have to be verified, and more rapid report mechanisms should allow to analyse the impact of the COVID-19 pandemic on drug consumption in Europe.

All powerpoint presentations are uploaded on the Management Board consultation site.

## **PART II: *Items for decision and information***

### **4. Activity reports:**

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| <b>4.1. Report on the activities of the Chair</b>             | <b>EMCDDA/26/21</b> |
| <b>4.2. Report from the Budget Committee</b>                  | <b>EMCDDA/27/21</b> |
| <b>4.3. Report on the external activities of the Director</b> | <b>EMCDDA/28/21</b> |

No comments were made on these activity reports.

### **5. Presentations by EU Presidencies**

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| <b>5.1. Presentation on the conclusions of the Slovenian Presidency</b> | <b>EMCDDA/29/21</b> |
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Mr Hren presented the first conclusions of the **SI** Presidency of the Council of the European Union in the second half of 2021.

Following the approval by the Council of the EU Drugs Strategy 2021–2025 under the German Presidency and of the EU Drugs Action Plan 2021–2025 under the Portuguese Presidency, the process of implementation of the Action Plan started under the Slovenian Presidency. One of the specific priorities was the preparation of the 64<sup>th</sup> session of the Commission on Narcotic Drugs (CND), including the Intersessionals, the reconvened session and resolutions. Another priority was aimed at strengthening the early prevention in the field of illicit drugs.

In response to the increased level of overdose deaths in the EU since 2012, the Presidency decided to bring back the practice of thematic discussions that already took place in the past at the Horizontal Working Party on Drugs (HDG) meetings. At the 14 September 2021 HDG meeting, an informal ad hoc working group on the INCB initiative to develop 'Guidelines on international drug control requirements for the cultivation, manufacture and utilization of cannabis for medical and scientific purposes', was created. The National Drugs Coordinators meeting took place on 22 September and focused on the importance of early prevention and socio-emotional learning skills.

In a standing item at each HDG meeting, the Presidency organised the pooling of information on the developments in Afghanistan in relation to drugs and their current and potential impact on the drugs situation in that region as well as globally. The aim was to facilitate monitoring of the situation and enhance crisis-preparedness. The EMCDDA, Europol, the Principal Adviser to the EU Counter-terrorism Coordinator and the UNODC participated in those discussions. In addition, this was a standing item at dialogues and expert meetings with third countries.

In the area of international cooperation, the SI Presidency gave priority to a EU–Western Balkans expert meeting on drugs on 6 October 2021. It also organised a EU–USA Dialogue on Drugs on 14 September 2021, a Technical Committee meeting of the Cooperation and Coordination Mechanism on Drugs between the EU, Latin America, and the Caribbean (EU–CELAC) on 26 October and a EU–Russia expert meeting on drugs, on 24 November. Following the proposal by the Commission to launch a new EU–Colombia Dialogue on Drugs, the Presidency conducted the negotiations in the HDG, leading to the agreement at HDG level and to the decision by Coreper/Council to launch the Dialogue.

Mr Hren thanked the EMCDDA Director for all the support offered by the agency during the Presidency.

On behalf of the Management Board, the **Chair** congratulated the SI Presidency for its achievements in all areas of an ambitious programme, in a difficult period of time, and thanked SI for its competence.

## 5.2. Presentation of the programme for the French Presidency

EMCDDA/30/21

Dr Prisse thanked SI for its work and presented the priorities of the **FR** Presidency in the first half of 2022. The Presidency of the HDG will be ensured by the MILDECA (Mision Interministérielle de Lutte contre les drogues et les conduites addictives), the FR Ministry for Europe and Foreign Affairs and the FR Permanent Representations in Brussels and Vienna.

The main priorities in the field of drugs are the negotiation of a revision of the EMCDDA Regulation, and discussion in HDG meetings will focus on the following topics: 'Drugs in the digital era: fighting against trafficking, information, prevention and care', 'Cocaine: how to respond to the increase of supply and demand?' and the environmental impact of drugs. The FR Presidency will prepare the 65<sup>th</sup> session of the Commission on Narcotic Drugs (CND) to take place in Vienna in the week of 14–18 March 2022. This event will provide the opportunity to stress the importance of the EU Drugs Strategy 2021–2025 and prepare resolutions and declarations of the EU.

The HDG will prepare EU dialogues with third countries, such as the US, China and Brazil. The HDG will prepare a technical committee and a High-Level EU-CELAC meeting on 4 May and 17 June respectively. The national drug coordinators meeting will take place on 8 April 2022 in Paris on 'Drugs in the digital era: fighting against trafficking, information, prevention and care'.

Ms Laura d'Arrigo from MILDECA will be the Chair the HDG during the FR Presidency, and Mr Adrien Frier from the Ministry of Europe and Foreign Affairs will be Co-Chair for dialogues with third countries.

The **Director** assured FR of the full support from the EMCDDA during its Presidency. A list of specific requests from Presidencies would be helpful. The Director extended this invitation already to the upcoming CZ and SE Presidencies.

**Mr Onidi, representative of the European Commission**, thanked the SI Presidency for its work and ambitious programme in a challenging time, and stressed the importance of the priorities set by the FR Presidency, such

as the continuation of the implementation of the EU Drugs Strategy and EU Action Plan on Drugs 2021–25, which are fundamental for the European Commission (EC).

Mr Onidi updated the Management Board members on the revision of the EMCDDA founding Regulation. Taking the last external evaluation of the agency as a starting point, the EC discussed main elements for the modernisation of the agency closely with the EMCDDA, the Management Board and Member States. The proposal from the EC for a new Regulation does not propose a dramatic change of the scope of the EMCDDA's work, which will continue to focus on drugs as known within the current remit of the agency. However, it is suggested to give the EMCDDA an explicit responsibility to work more on the interactions between drugs and other substance-based addictions, analysing interlinkages and lessons learnt. The EMCDDA should also be mandated to increase its capability to assess risks and present threat assessments. The agency should be the initiator and manager of a proper threat assessment/risk assessment cycle in terms of drugs, in all its dimensions. The EMCDDA should also have access to a virtual forensic and toxicological laboratory. The Reitox network, one of the prime ways of functioning of the agency, will be significantly strengthened, by giving additional legal certainty to activities already undertaken by the NFPs, and adding legal possibilities to be more agile in terms of collecting, analysing and keeping data. Upon request by the Member States, the EMCDDA should be able to certify initiatives put in place at national level to help building best practices and improving the comparability between the Member States. The EMCDDA's capability to support Member States in prevention and awareness raising campaigns with key messages and components will be strengthened. Finally, the EMCDDA mandate regarding international activities should be clarified and strengthened.

The legislative proposal will be supported with an additional budget of EUR 63 Mill. and 40 supplementary posts in the establishment plan up to 2027. The proposal should be adopted early January 2022 by the College of Commissioners. With the keen interest of the Council for the revision of the EMCDDA's mandate and the strong support from the EP over the past years for the growth of the agency, the EC expressed its expectation that the Council can reach a common approach by the end of the FR Presidency and the negotiations with the EP concluded still in 2022, in order that the revision of the EMCDDA Regulation can be adopted in 2023 and enter into force in 2024. Mr Onidi thanked the EMCDDA, the Management Board members for their input and the DG HOME colleagues for their work on the new EMCDDA Regulation, aiming at reinforcing the sustainability of the agency for the future.

**NL** wondered if the EMCDDA Management Board will have the opportunity to discuss more in detail the EC proposal once it is published, and if the additional resources will affect the EMCDDA's preliminary draft budget for 2023.

**DE** agreed that a discussion in the Management Board should be foreseen, in parallel to the ones to be held at HDG meetings.

**Mr Onidi, representative of the European Commission**, replied that the agreement between the Council and the European Parliament (EP) is expected for 2024, and the additional resources would become available in 2024, but that here is a common interest to try to adopt the proposal as soon as possible.

The **Director** expressed his gratitude to DG HOME for all the efforts and the work undertaken on this file. He reminded that some Member States had questions about the virtual laboratory and prevention campaigns during the meeting organised by the EC with the Management Board on the impact assessment. A session could be organised by the EMCDDA senior management with the Management Board members by video conference to give further explanations, also on the role and the added value of the Reitox NFPs.

The **Chair** thanked DG Home for the presentation of the draft proposal and stressed the importance of the coordination at national level for expressing the positions of the Member States in the Council.

The **Chair** addressed words of gratitude at the end of her second mandate to the Director and entire EMCDDA staff, who joined the meeting online. She thanked in particular the Director, for having provided a new vision and impetus to the Centre and ensured a constant dialogue with all the stakeholders and the team. The Chair and the Director have been very complementary and formed a real and effective team. Their only common objective has always been to find the best solution for the Agency. Ms d'Arrigo also sincerely thanked Mr Pereyra, Head of the Executive Office, and Ms Blum, Senior Policy Officer to the Management Board, for their valuable collaboration, and Ms Costa and Ms Popova for their efficiency.

The Chair thanked each Unit for their respective collaboration and contributions. As future Chair of the Horizontal Drugs Group during the French Presidency of the EU, Ms d'Arrigo looks forward to the Commission's proposal for the revision of the mandate of the Center. She will consecrate her experience and energy in making sure the new founding regulation will correspond to the needs of all Member States and the institutions and respond to the

long-term general interest. She will do her best to make sure the EMCDDA will be even more performant in alerting on the new threats and trends and in providing the most useful and adapted best practices.

Her intervention was shared by email with the staff.

Ms d'Arrigo will continue to represent FR, together with Mr Prisse, on the Management Board.

## 6. Operational and financial programming:

### 6.1. EMCDDA Draft budget for 2022

EMCDDA/31/21

The **Chair of the Budget Committee** informed that the Executive Committee adopted, on behalf of the Management Board, budget transfers within the EMCDDA 2021 budget by written procedure on 7 December 2021.

Mr Gillard summarised the main figures of the draft EMCDDA budget for 2022.

The EC proposed an amount for the EU 2022 contribution to the EMCDDA (EUR 16 946 659) which reflects a 2% increase of the amount of the EU subsidy for 2021, with a stable number of authorised posts in the establishment plan. The EP supported an increase of the EU 2022 subsidy to the EMCDDA to EUR 18 106 000, i.e. the amount foreseen in the EMCDDA 2022 preliminary draft budget adopted by the Management Board in December 2020. The EU budget for 2022 adopted by the EU Budget authority reflects the EC proposal for the EU 2022 contribution to the EMCDDA. The Council has not proposed any cuts to the EC proposal. As a consequence of the difference of EUR 1.5 Mill. and as announced at the MB meeting of June 2021, the EMCDDA draft budget for 2022 proposes a reduction of the Reitox 2022 co-financing by 25%, this resulting in a 2022 Reitox grant of about EUR 60 000 per NFP, instead of about EUR 80 000. The Budget Committee recommends to the Management Board to adopt the EMCDDA budget for 2022.

**Ms Yiasemi, Spokesperson of the Reitox NFPs**, shared the concerns expressed by the Heads of NFPs about the different impacts of the reduction of the Reitox co-financing in 2022. Nevertheless, the Reitox network expressed its interest to continue making the best efforts to provide added value to the EU/EMCDDA and the Member States, and keep delivering products and services to the EMCDDA's customers. An agreement has been reached at the Heads of the Reitox NFPs meeting in November 2021 on some reduction of tasks for the Reitox network.

The **Director** informed about a point of procedure concerning possible conflicts of interests given that some members of the Management Board are also Heads of NFPs. The Director assessed that there were no conflicts of interest, since the reduction of the Reitox co-financing is a temporary measure and is equally applicable to all Reitox Focal Points. If the Management Board had to discuss a decision that would potentially introduce a difference between the countries, the members/substitute members representing an NFP would have a conflict of interest. Then the Management Board would have to apply mitigating measures. The Management Board agreed with the Director's assessment.

The Director thanked DG HOME for its support and efforts to reach an increase of the EU 2022 contribution to the agency. The EMCDDA informed the Reitox network in due time and full transparency of the possible reduction of the Reitox co-financing, and the Director stressed the constructive attitude of the NFPs. In order to mitigate the negative impact of the reduction of 25% of the 2022 Reitox grants, the EMCDDA offered its support to all NFPs willing to request their respective national authorities to, at least, maintain the same amount of their contribution as in the previous years, and, if possible, to increase the national contribution in order to neutralise the EMCDDA cut. The aim is to contribute ensuring that those NFPs which are more affected by the reduction of the 2022 Reitox grant may maintain as much as possible their resources to contribute to the EMCDDA work in 2022.

**NL** stressed that the EU Budget Authority has not increased the total budget of the EMCDDA, and wondered how the agency will make further savings.

The **Director** explained that the EMCDDA appropriations for operational activities, including for meetings and missions, amount to only EUR 1 Mill., without the Reitox co-financing. The EMCDDA will commit to ensure the full implementation of the L1 activities of its work programme, but the size and importance of some L2 and L3 activities will have to be scaled down or cancelled according to the actual availability of budget resources. Some upcoming vacant posts for reasons of retirement could also not be filled in immediately.

**DE** expressed the view that the draft budget 2022 seems to be a balanced proposal given the current situation, but hoped that the co-financing for the Reitox network will be reestablished at the previous level of appropriations as soon as possible, to make full use of the network's added value.

**Mr Onidi, representative of the European Commission**, stated that the added value of the agency should be better communicated to national representatives in the Council, and called for the reduction of the Reitox co-financing to be compensated by the Member States. There might be a possibility for the EMCDDA to ask for a transfer within the EU 2022 budget of up to EUR 700 000 to 'top up' the EU subsidy to the EMCDDA for 2022, but such a possibility could not be used to compensate the loss for the Reitox NFPs.

The **Chair of the Budget Committee** added that appropriate justifications will have to be provided by the EMCDDA in order to ask formally for the EC to consider the possibility of such a 'topping up' exercise. This possible additional funding would not concern the Reitox co-financing and the request cannot be presented before mid 2022.

The **Chair** thanked the EMCDDA and the Reitox network for their constructive attitude.

**Decision:** The Management Board unanimously adopted the EMCDDA budget for 2022.

## **6.2. EMCDDA Single Programming Document for 2022–24 and work programme for 2022** **EMCDDA/32/21**

The **Director** acknowledged the comments from the European Commission and the Scientific Committee in their formal opinions, as well as the valuable feedback received from the NFPs and key partner EU agencies.

The programming period 2022–2024 will see a transformative effort of the EMCDDA in a period of uncertainty and complexity (among others: COVID-19 pandemic unfolding; unprecedented technological disruption impacting daily operations and core business alike; evolving customers' needs; new EMCDDA mandate).

- The first iteration of the revised model for the *European Drug Report* package will be launched in 2022, as part of a stepwise approach towards the full digital presentation of this flagship EMCDDA publication. Management Board members and other stakeholders will be asked for feedback.
- An innovative digital update of the *European Responses Guide* was published in 2021 in new modular format and new mini guides will continue to be published throughout 2022, underpinning much of the agency's work undertaken in the area of health and social responses to drug-related problems. A series of webinars will ensure that the key themes from the mini guides are disseminated widely among European policymakers and professionals.
- The fourth edition of the *EMCDDA–Europol EU Drug Markets Report* will see an evolution towards a modular approach, with the launch in 2022 of the first two modules on cocaine and methamphetamine, providing comprehensive analyses of these most pressing contemporary drug market challenges in Europe.
- First tools and products will be available in 2022 from the data development project on cannabis policy. Among the outputs are a cannabis policy web page based on frequently asked questions, an EMCDDA cannabis toolkit, which will include examples of different cannabis policy monitoring and evaluation models, and the further enhanced cannabis news alert initiative.
- In terms of conferences, missions and technical meetings, the EMCDDA will not come back to the same format of events as before the COVID-19 pandemic, and this will be reflected in the budget. The EMCDDA will check with the European Commission the feasibility of the *Third European Conference on Drug Supply* that will be organised jointly with the European Commission in 2022, in Brussels. The EMCDDA, as one of the main partners in the programme and organising committees, will ensure the coordination of the scientific programme of the *Fourth European Conference on Addictive Behaviours and Dependencies* (Lisbon Addictions) in November 2022.
- The EMCDDA has adapted to the COVID-19 pandemic and, in a series of rapid studies, reported on the impact of COVID-19 on the operation of the drug markets; the situation requires now regular monitoring and review.
- The EMCDDA will continue to strengthen its data collection ecosystem, integrating established and novel methods. This is the core of the agency, on which the foundations of the new business model will be built. This ecosystem includes established and complementary data collections, in close collaboration with the Reitox Network and other networks of data-generating experts (e.g. SCORE, Euro-DEN, TEDI, ESCAPE), as well as the real-time innovative monitoring of surface and darknet.
- Together with national and European partners, the agency will continue to ensure that the EU maintains its world-leading capacity and capability to detect, assess and respond to public health and social threats caused by New psychoactive Substances (NPS), through the implementation of the EWS and risk assessment of NPS.
- 2022 will be the final year of implementation of projects EMCDDA-IPA 7 and EU4MD, and the second year of implementation of project EMCDDA4GE.



- The project COPOLAD III is planned to start on 1 July 2022 (the contract for an EUR 800 000 grant will be negotiated by the EMCDDA with the EC and presented to the Management Board in June 2022).
- 2022 will mark the first year of the implementation of the transformative roadmap (action plan) of the new EMCDDA business model initiative.
- The EMCDDA will follow-up closely with the EC on the discussions around the new EMCDDA mandate and take the necessary preparatory measures, as appropriate.
- This new SPD and work programme 2022 will be implemented under important resources pressure, and the Director thanked his staff for their constant commitment and hard work.

**Ms Comiskey, Chair of the Scientific Committee**, noted that the Scientific Committee recognised the effort of the EMCDDA and its staff to provide a quick response to the impact of the COVID-19 pandemic on the drugs situation over the past two years. The agency should reflect about the lessons learnt, and how it will be able to respond to future challenges. The Scientific Committee reiterated its willingness to support the EMCDDA for any priorities in the health or security area, and in particular concerning mental health issues associated to drug use.

**DK** thanked the Director for the excellent document, and suggested adding a reference to the closer collaboration of the Reitox NFPs under the activity 'Review of the European data collection and reporting model' on page 17.

The **Director** confirmed that this review will be implemented in partnership with the Reitox network, during which the mandatory tasks of the NFPs and supplementary information sources will be discussed. He stressed that NFPs are not only data providers for the EMCDDA but are also among its customers, and should have access to complementary information from other expert networks. The final SPD for 2022–2024 will include a reference to the Reitox network in this part of the text.

**NL** expressed its particular interest in the project with the Tomorrowland festival, and offered support to the EMCDDA.

The **Chair** thanked Ms Murgea, Strategic planning and corporate performance manager, for her high-level work, and all the colleagues involved.

**Decision:** The Management Board adopted unanimously the final EMCDDA Single Programming Document for 2022–24 and work programme for 2022.

### 6.3. EMCDDA Preliminary draft budget for 2023

EMCDDA/33/21

The **Chair of the Budget Committee** reminded that the additional budget accompanying the new EMCDDA Regulation will become available only in 2024.

The EU Multiannual Financial Framework for 2021–27 envisages an increase by 2% of the EU 2022 subsidy to the EMCDDA, compared to the amount adopted by the EU Budget Authority for 2022 (EUR 16 946 659), with a stable number of posts in the EMCDDA establishment plan. The Budget Committee however considered that the request of the Management Board for the EU subsidy to the EMCDDA for 2023 should be consistent with the one requested for 2022. Therefore, the EMCDDA 2023 budget should rely on an EU subsidy whose amount reflects an increase by 2% compared to the amount (EUR 18 106 000) requested for 2022, thus EUR 18 837 482.

The Budget Committee agreed that the EMCDDA has to make visible its actual budget needs and constraints in order to receive the necessary and adequate resources. A 2% increase of the adopted EU subsidy for 2022 is not sufficient to fully meet the actual needs entailed by the proper implementation of the EMCDDA's tasks.

**Mr Onidi, representative of the European Commission**, took note of the position of the Budget Committee but stressed that the Commission will propose only a 2% increase on the actual budget voted for 2021, in line with the EU Multiannual Financial Framework for 2021–27.

**Decision:** The Management Board adopted the EMCDDA preliminary draft budget for 2023, with the abstention of the European Commission for institutional reasons.

### 6.4. EMCDDA Preliminary draft Single Programming Document for 2023–25 and work programme for 2023

EMCDDA/34/21

**Ms Yiasemi, Spokesperson of the Reitox NFPs**, commented that the new EMCDDA Business Model and the revision of the EMCDDA mandate provide a unique opportunity for the Reitox network to deliver more added value to the EU and EMCDDA stakeholders, within the Reitox Development Framework. It is also an opportunity to redefine and strengthen the role and purpose of the NFPs with the EMCDDA.

After the formal transmission of the EMCDDA draft SPD for 2023–25 and the work programme for 2023 by 31 January 2022 to the EC, the Commission will adopt its formal opinion as usual after an inter-service consultation.

**Decision:** The Management Board adopted the EMCDDA Preliminary Single Programming Document for 2023–25 and work programme for 2023, with the abstention of the European Commission for institutional reasons.

### **PART III: *Restricted session***

#### **7. Restricted session:**

The **Chair** reminded that the votes on the election of a member to the Executive Committee and on the reclassification of the Director will take place in restricted session – only with the presence of the members and substitute members of the Management Board, without the observers. The Chair proposed that Mr Péter Mihok, from DG HOME and the following EMCDDA staff members stay in this session:

- Mr Fabian Pereyra, Head of the Executive Office
- Ms Monika Blum, Senior Policy Officer to the Management Board
- Ms Elsa Costa, Ms Magdalena Popova and Mr Marco Costa for administrative assistance

The members and substitute members of the Management Board received an e-mail from 'DIGIT-EUSURVEY@nomail.ec.europa.eu' with the link to vote at the e-mail address that they provided for the restricted session.

According to the rules of procedure of the EMCDDA Management Board, its decisions are adopted by a two-thirds majority of its members with the right to vote. Annex II to these rules of procedure stipulate that decisions concerning the selection and appointment of the Director shall be taken by a two-thirds majority of its members, by secret vote. The 27 EU Member States have one vote each, the European Commission 2 votes and the European Parliament 2 votes (total: 31 votes). Hungary did not participate in the meeting and gave its proxy vote to Mr Franz Pietsch from Austria. Norway and Turkey are members of the EMCDDA without voting rights.

#### **7.1. Election of the Chair of the Management Board**

**EMCDDA/35/21**

Mr Franz Pietsch, member for AT on the Management Board, was the only candidate for becoming Chair of the Management Board. He presented his candidature and motivation.

31 votes were expressed. The Chair, Mr Onidi and Ms Malliori opened the secret ballots and received the result from the online voting from the EMCDDA.

**Decision:** The Management Board elected Mr Franz Pietsch, member for Austria on the EMCDDA Management Board, as Chair of the Management Board for a mandate from 1 January 2022 to 31 December 2024.

#### **7.2. Election of the Vice-Chair of the Management Board**

**EMCDDA/36/21**

Mr Xavier Poos, member for LU on the Management Board, was the only candidate for becoming member on the Executive Committee.

31 votes were expressed. The Chair, Mr Onidi and Ms Malliori opened the secret ballots and received the result from the online voting from the EMCDDA.

**Decision:** The Management Board elected Mr Xavier Poos, member for Luxembourg on the EMCDDA Management Board, as Vice-Chair for a mandate from 1 January 2022 to 31 December 2024.

#### **7.3. Election of one Executive Committee member**

**EMCDDA/37/21**

Mr Joan Ramon Villalbí Hereter, member for ES on the Management Board, was the only candidate for becoming member on the Executive Committee.

31 votes were expressed. The Chair, Mr Onidi and Ms Malliori opened the secret ballots and received the result from the online voting from the EMCDDA.

**Decision:** The Management Board elected Mr Joan Ramon Villalbí Hereter, member for ES on the EMCDDA Management Board, as member of the Executive Committee for a mandate from 1 January 2022 to 31 December 2024.

#### 7.4. Election of one Budget Committee member

EMCDDA/38/21

Mr Claude Gillard, member for BE on the Management Board, was the only candidate for becoming member on the Budget Committee.

31 votes were expressed. The Chair, Mr Onidi and Ms Malliori opened the secret ballots and received the result from the online voting from the EMCDDA.

**Decision:** The Management Board elected unanimously Mr Claude Gillard, member for BE on the EMCDDA Management Board, as member of the Budget Committee for a mandate from 1 January 2022 to 31 December 2024. The Management Board also elected unanimously Mr Claude Gillard as Chair of the Budget Committee for the same period.

### **PART II: *Items for decision and information***

#### **8. Strategic issues:**

##### **8.1. New EMCDDA Business Model: conceptual framework and implementation plan**

EMCDDA/39/21

The **Director** reminded that the EMCDDA Strategy 2025, adopted in 2016, describes the Agency's goals to contribute to 'a healthier and more secure Europe through better-informed drug policy and action'. The strategy identifies the Agency's key stakeholders: the EU institutions, national decision-/policymakers, and professionals working in the drugs field. To keep delivering a high-quality added value to its stakeholders in a changing environment, the EMCDDA needs transforming itself into a customer-centric organisation, and it will re-engineer its working processes accordingly. A change to the internal business model of the Agency is envisaged in the EMCDDA Strategy 2025 and is in total continuity with the work done under the first Roadmap 2016–2020 and with key milestones of the Roadmap 2025 that was adopted by the Management Board in June 2021.

Our current model gives priority to the production of data, statistics, and reports. Whilst these tasks remain essential, the new business model brings an additional layer that ensures that the analysis developed as part of the services we offer helps address key stakeholders' needs.

Building on existing data collection approaches, the new model explicitly recognises that the tasks of the Agency have become more complex and require us to communicate with a greater number of stakeholders in a more tailored fashion. In this sense, 'communication' also becomes a matter of 'interaction' and 'co-production' of knowledge. The relationship with our partners and customers has become bi-directional: they can be both our customers and our data providers. The Agency's long-term experience shows that a significant part of our value comes from our ability to maintain an ongoing conversation with policymakers, practitioners, and researchers active in the drugs area.

This new customer-centric model provides the Agency with greater potential to deliver the high quality and timely scientific analysis required to inform future European policies and responses to drug-related problems. With this development, we will continue to transform the agency from principally an information provider into a service provider, able to better anticipate and respond to evolving stakeholders' needs.

The objective is to transform the existing set of websites, databases, mailing lists and publications into a comprehensive EMCDDA Digital Ecosystem. The Digital Ecosystem will organise the resources and facilitate interactions with our stakeholders through dedicated interfaces that will present the information available according to their profile and topics of interest.

The new business model and the future new mandate of the Agency offer a unique opportunity to negotiate a new alliance between the EMCDDA and the Reitox national focal points. The essence of this agreement would be their joint commitment to serving their stakeholders better and delivering more value collectively to their customers within the limits of their respective mandates.

The Director gave a demonstration of what the future EMCDDA Digital Platform will look like, which was produced together with the external consultant ATOS Consulting.

The new business model will need to integrate the revised mandate and competencies of the Agency once they are adopted. While this does not prevent progress on the change required based on the EMCDDA's current competencies, it is not possible to make a formal commitment without knowing the outcome of the negotiations on the new regulation. Hence, the Implementation Plan presented to the Management Board for adoption gives an intermediary milestone, until mid-2024, and focuses on the preparatory work.

The Implementation Plan maps the main objectives and tasks to be completed during the preparatory and transition phase, until the formal adoption and the entry into force of the new EMCDDA Regulation, which is expected by mid-2024. The Plan is structured around six tracks: Customers and Value Proposition, Production and Resources – Data, Production and Resources – Organisation, Partnerships, Customer Relations and Channels, Cost Structure & Revenue.

The Director added that the EMCDDA will continue its efforts in optimizing the use of its resources, for instance through a new service of automated translation proposed by the Translation Centre, and for which the costs are considerably lower (EUR 0,30 per page instead of EUR 78 (standard) or EUR 108 (urgent requests)).

The Director thanked Ms Moreira for her work with the external consultant on the reflections for the New Business Model.

**DK** noted that the Implementation Plan refers to the development of new networks, and wondered about which type of networks were meant and how they will be identified.

The **Director** explained that the basic approach would be the one of co-production, and that the networks will be identified in line with the revision of the mandate. For the establishment of a virtual laboratory for example, the EMCDDA would set up a network to cooperate with already existing national forensic and toxicological laboratories, experts in prevention, members of the Reference Group on Drug Supply indicators etc.

**Decision: The Management Board adopted unanimously the conceptual framework and implementation plan of the new EMCDDA Business Model.**

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## **9. International cooperation:**

### **9.1. Outcomes of cooperation with non-EU countries, international organisations and other EU agencies** **EMCDDA/40/21**

The **Director** drew the attention to the third edition of Cooperation Programme between Latin America, the Caribbean and the European Union on Drugs Policies (COPOLAD), which started in February 2021 and aims at strengthening drug policies in Latin American and Caribbean (LAC) countries. The EMCDDA has collaborated with the previous programmes III (through its components of building national observatories, Early Warning Systems, implementation and dissemination of best practices and prevention), and has been invited by the EC to have a more active role in COPOLAD, and negotiations are ongoing for an agreement that would grant the EMCDDA a financing of EUR 800 000 for this role.

**ES** added that COPOLOAD III represents an excellent opportunity for the EU to influence drug policies in Caribbean countries, and that FIAP, a ES foundation, chairs the project together with an IT foundation. The project is however difficult as the management and staff have changed, and the process is slow.

The **Chair** thanked ES for its crucial role in the COPOLAD project since the beginning.

#### **- Candidate and potential candidate countries:**

### **9.2. Overview of the drugs situation in the Western Balkans** **EMCDDA/41/21**

The **Director** observed that the EMCDDA approach for technical cooperation has changed over the past ten years, and the European Commission has recognised this work. The EMCDDA has an increased role to inform the EU institutions and Member States about the drugs situation and emerging threats in the Western Balkans.

There are needs for more investments in demand reduction, especially since some international donors have reduced or interrupted their financial support to the countries of the region. As presented in the European Drug Market Report and other publications, there are more organised criminal groups from the Western Balkans active in drug production and trafficking in the EU but also in Latin America for instance, and there remain very important

issues associated with corruption in these countries. The EMCDDA should help raising awareness about these issues, and the Director presented the highlights from the EMCDDA briefing on the Western Balkans which was shared with the Management Board members.

The EMCDDA continues its investments in finding the best available and trustworthy sources of information for a strategic overview on the drugs situation in this region, in close collaboration with the EC and the Council. However, the high-level meetings between the EU and its Member States, on the one hand, and the countries from the Western Balkans, on the other hand, do not put the drugs issue on the agenda as it should be. Consequently, it may unwittingly give the impression to the countries of the region that drugs are not a priority for the EU as such. Therefore they do not make sufficient efforts to improve and strengthen their national drugs strategies. Hence, the EU should give a strong political signal showing that drugs and the Balkan Route are a matter of concern, and it expects partner countries to fulfil their obligations.

SI organised an EU dialogue with the Western Balkans during its Presidency and the Council committed to organising such meetings on an annual basis in the second half of the year. SI collaborated with the Western Balkan countries over the past six years and strongly supports the EMCDDA activities in the region. The **Chair** wondered if a bilateral approach between the EU and each of the Western Balkan countries could be more efficient, and stressed the importance of including this issue higher on the EU political agenda.

### **9.3. The EMCDDA/IPA 7 project (Instrument for Pre-Accession) EMCDDA/42/21**

No comments were made.

#### **- European Neighbourhood Countries:**

### **9.3. 'EU4 Monitoring Drugs' project EMCDDA/43/21**

No comments were made.

### **9.4. Working arrangement between the EMCDDA and Georgia EMCDDA/44/21**

The Director reminded that the first Memorandum of Understanding between the EMCDDA and Georgia was signed in 2015. In May 2021, the Management Board mandated the EMCDDA Director to renegotiate a Working Arrangement with the Ministry of Justice of Georgia, further to a request of the latter in December 2020 due to changes in the country. The European Commission will soon issue its favourable opinion on the working arrangement.

**Decision:** The Management Board took full note of and agreed with the Working Arrangement between the EMCDDA and the Ministry of Justice of Georgia, and mandated the Director to sign the Working Arrangement on a date and place to be jointly decided.

### **9.5. Technical cooperation project EMCDDA–Georgia EMCDDA/45/21**

No comments were made.

## **10. Performance and internal controls:**

### **10.1. Implementation of the EMCDDA action plan to follow up on the recommendations of the EMCDDA's external evaluation EMCDDA/46/21**

The **Chair of the Scientific Committee** informed that further to recommendation 4 of the external evaluation ('Polydrug use should be better monitored and explored'), the Scientific Committee prepared a position paper on 'Extending the EMCDDA's monitoring and reporting framework to cover the substance misuse topic and its consequences for European policies and responses in a more holistic manner'. This paper supports a more holistic framework for the concept of poly-drug use.

**Decision:** The position paper from the Scientific Committee will be circulated to the Management Board members.

### **10.2. Update of the EMCDDA's Anti-Fraud Strategy EMCDDA/47/21**

The **Director** informed that the European Commission commented at the Executive Committee meeting that the updated EMCDDA's Anti-Fraud Strategy should indicate a validity of the document for two years instead of three,

considering the entry into force of the new Agency' Regulation. The sentence will be modified as follows: 'The EMCDDA Anti-Fraud Strategy will be reassessed and updated, as required and appropriate, three years after its adoption or, any time sooner, in the case a new founding Regulation of the Agency is adopted and enters into force'.

**Decision:** The Management Board adopted the revised updated EMCDDA's Anti-Fraud Strategy. The final version will be circulated to all Management Board members after the meeting.

**10.3. State of implementation of the recommendations issued by the Internal Audit Service (IAS) EMCDDA/48/21**

No comments were made.

**10.4. EMCDDA Action Plan further to the 2020 IAS Audit on human resources management and ethics at the EMCDDA EMCDDA/49/21**

**Decision:** The Management Board endorsed the EMCDDA Action Plan further to the 2020 IAS Audit on human resources and ethics at the EMCDDA.

**11. Data protection and prevention and management of conflicts of interest:**

**11.1. Assessment of the implementation of the EMCDDA Policy for the prevention and management of conflicts of interest for Management Board members, substitutes and observers EMCDDA/50/21**

The **Director** informed that the declarations submitted by the new members of the Management Board until 13 December 2021 show no existing conflicts of interest.

**Decision:** The Management Board took note of the outcome of the screening conducted by the EMCDDA Director that has revealed that for the moment there is no conflict of interest.

**12. Any other business:**

**- Lisbon Addictions Conference 2022 EMCDDA/51/21**

Mr Goulão provided information on the preparation of the Lisbon Addictions Conference, which will take place from 23 to 25 November 2022, under the overarching theme of 'Global Addictions', and he announced that once again Management Board members will be able to participate in the Conference by benefitting from a waiving of the registration fee.

**- 2nd Pompidou Group Symposium on experience with new evolutions in drug policy (Lisbon, 15 December 2021)**

**Mr Huber, Executive Secretary of the Pompidou Group of the Council of Europe**, provided some feedback on the closing event of the 50<sup>th</sup> Anniversary of the Pompidou Group, the second Symposium on experience with new evolutions in drug policy, which was held at the Conference Centre in Lisbon on 15 December.

The **Chair** expressed her sincere gratitude to all Management Board members for their collaboration and support during her two mandates. On the eve of the first Management Board meeting that Ms d'Arrigo would chair, in June 2016, the UK announced its withdrawal from the EU. The budgetary difficulties was a recurrent issue during the past six years. And the COVID-19 pandemic interrupted the usual way of working. The EMCDDA adapted to the challenging circumstances, and also became more agile and resilient. The Management Board faced the challenges and can look back on several important achievements. The Board adopted the EMCDDA Strategy 2025, discussed the positive conclusions of the external evaluation and implemented some changes, adopted the necessary administrative and financial decisions, witnessed a tangible improvement of the EMCDDA collaboration with the IAS and regularly followed up on the question of conflicts of interest. The Management Board adopted several Working Arrangements with third countries. In general, the EMCDDA became more visible on the international scene as a centre of excellence on drugs. The thematic discussions, on subjects which were sometimes sensitive, allowed the Management Board members to share experience and innovative approaches. The meetings were always held in an excellent atmosphere of collaboration.

Ms d'Arrigo thanked in particular the Vice-Chair, Mr Pietsch, and congratulated him on his election as Chair. She further thanked all the members of the Executive Committee and Budget Committee, and especially Mr Gillard, dean of the Management Board for his clear presentations on budgetary issues. The Chair expressed her thanks to the EC and in particular to DG HOME, the representatives of the EP, the NO and TU delegations, the Chairs of the Scientific Committees and Spokespersons of the Reitox network, as well as the observers from international organisations for their contributions.

She thanked the Director and the EMCDDA staff for the preparation of the meeting, and the Board members for their contributions. Ms d'Arrigo thanked in particular Ms Elsa Costa for her work, as she will start new functions within the EMCDDA soon. The Chair also expressed her thanks to the interpreters.

The next meeting will take place on 21 June 2022.

(s.) Laura d'Arrigo  
Chair of the Management Board

Annexes: I List of participants  
II List of decisions and conclusions  
III List of action points

Copy: Members, substitutes and observers of the Management Board