



INTER-AMERICAN DRUG ABUSE

CONTROL COMMISSION

CICAD

SIXTY-SECOND REGULAR SESSION
December 13 - 15 , 2017
Washington, D.C.

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**PROPOSED EVALUATION INSTRUMENT AND OTHER DOCUMENTS OF THE EVALUATION
PROCESS FOR THE SEVENTH ROUND OF THE MULTILATERAL EVALUATION MECHANISM
(MEM) PREPARED BY THE INTER-GOVERNMENTAL WORKING GROUP (IWG)**

**MULTILATERAL EVALUATION MECHANISM (MEM)
Seventh Evaluation Round**

**Proposed Evaluation Instrument and other Evaluation Process Documents
prepared by the Inter-governmental Working Group (IWG)**

Introduction

In fulfillment of the mandate issued by the CICAD Commissioners during their sixtieth regular session (2016), the Inter-governmental Working Group (IWG) submits, for the consideration of the Commission, the attached components that constitute the evaluation process documents for the Multilateral Evaluation Mechanism (MEM) Seventh Evaluation Round.

Evaluation Process Documents

The Seventh Round evaluation process will be carried out based on the objectives of the Plan of Action, 2016-2020 of the CICAD Hemispheric Drug Strategy, on which member states will be evaluated. The primary goal will be to determine each member state's situation with regards to each of these objectives.

The documents that are part of the evaluation process include:

- a) **Evaluation Questionnaire:** This component is the key instrument of the evaluation process. It contains the questions that the countries will need to respond, providing the necessary information that will allow the GEG to analyze the reality of the country in each of the areas that make up the Hemispheric Drug Strategy and its Plan of Action 2016-2020. The evaluation period will cover the years 2014 to 2018 (ANNEX I).

In addition, each country has to include an Introductory Document to contextualize its situation and the particular challenges faced in addressing the drug problem, following the outline provided (ANNEX II).

- b) **Evaluator's Manual:** This document guides the MEM's Governmental Expert Group (GEG), in accordance with the Procedural Manual, in the development of guidelines to evaluate member states' progress in the implementation of the Plan of Action 2016-2020 objectives.

This manual includes the 30 objectives in the Plan of Action corresponding to the five areas of the Hemispheric Drug Strategy, and describes priority actions for each objective, which the evaluator should take into consideration when analyzing compliance. In addition, each priority action includes the respective question number(s)

in the Evaluation Questionnaire and is accompanied by an interpretive note that will aid the evaluators in better understanding the objective of that action (ANNEX III).

- c) **Procedural Manual:** This Manual contains a description on the operational process of the Multilateral Evaluation Mechanism (MEM), the stakeholders involved in the evaluation process and their respective roles, as well as the general aspects for the GEG's preparation of the reports. (ANNEX IV).
- d) **Calendar of Activities:** This component outlines the activities of the evaluation process for the MEM Seventh Evaluation Round, including deadlines such as, information submitted by member states, GEG meetings, training activities and official publications (ANNEX V).



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**PROPOSED EVALUATION QUESTIONNAIRE FOR THE SEVENTH
ROUND OF THE MULTILATERAL EVALUATION MECHANISM (MEM)**



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**MULTILATERAL EVALUATION MECHANISM (MEM)
INTER-GOVERNMENTAL WORKING GROUP (IWG)**

DRAFT EVALUATION QUESTIONNAIRE

(November 8, 2017)

INSTITUTIONAL STRENGTHENING

INSTITUTIONAL STRENGTHENING

OBJECTIVE

1

ESTABLISH AND/OR STRENGTHEN NATIONAL DRUG AUTHORITIES, PLACING THEM AT A HIGH POLITICAL LEVEL AND PROVIDING THEM WITH THE NECESSARY CAPABILITIES AND COMPETENCIES TO COORDINATE NATIONAL DRUG POLICIES IN THE STAGES OF FORMULATION, IMPLEMENTATION, MONITORING, AND EVALUATION.

1. Does your country have a national drug authority¹?

Yes

No

If yes:

1.a. Please provide the name of the national drug authority.

1.b. Please indicate the year that the national drug authority was established.

1.c. Please indicate the national drug authority's position within the government administrative structure.

If no:

1.d. Please describe how the drug plan or strategy is coordinated.

2. Does the national drug authority of your country have a legal basis?

Yes

No

¹ The national drug authority (ies) is (are) the central or national governmental body(ies) responsible for the design, coordination and follow-up of the implementation or execution of the national anti-drug plan/strategy.

INSTITUTIONAL STRENGTHENING

If yes:

2.a. Please indicate the law or decree that establishes the functions of the national drug authority and attach the corresponding document or web link.

3. Is there an annual budget² for your country's national drug authority?

Yes No

If yes:

3.a. Please indicate if the national drug authority's budget is integrated with the budget of another government agency or is independent.

	Mark only one	
Independent	<input type="checkbox"/>	
Integrated	<input type="checkbox"/>	Specify agency: _____

3.b. Please provide the annual budget amount of the national drug authority for the following years:

Year	2014	2015	2016	2017	2018
Annual budget amount (US dollars)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If no:

3.c. Please explain how the necessary human and material resources to implement national drug policies are financed.

² An annual budget for the national authority is one that facilitates the administration of its structure, functions, and obligations, as well as any operational activities that might be included in its mandate. This budget is not necessarily meant to cover the cost of specialized agencies in the areas of demand reduction, supply reduction, alternative development, and control measures, among others.

INSTITUTIONAL STRENGTHENING

4. Which areas does the national drug authority coordinate and/or organize?

Area	Yes	No
Demand reduction		
Supply reduction		
Alternative, integral and sustainable development programs		
Control measures		
Drug observatory		
International cooperation		
Program evaluation		
Others. Please specify: _____		

5. Does your country have an ongoing coordination and organization mechanism among agencies and other levels of government, in order to implement the national drug plan or strategy?

Yes No

If yes:

5.a. Please briefly explain how this mechanism functions.

CONTEXT OBSERVATIONS FOR OBJECTIVE 1:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

INSTITUTIONAL STRENGTHENING

OBJECTIVE

2

FORMULATE, IMPLEMENT, EVALUATE AND UPDATE NATIONAL DRUG POLICIES AND/OR STRATEGIES THAT WILL BE COMPREHENSIVE AND BALANCED, BASED ON EVIDENCE THAT INCLUDE A CROSS-CUTTING HUMAN RIGHTS PERSPECTIVE, CONSISTENT WITH OBLIGATIONS OF PARTIES UNDER INTERNATIONAL LAW³ WITH A FOCUS ON GENDER AND EMPHASIZING DEVELOPMENT WITH SOCIAL INCLUSION.

6. Does your country have a national drug plan or strategy?

Yes

No

If yes:

6.a. Please indicate the name of the national drug plan or strategy and attach the corresponding document or web link.

6.b. Please indicate the years covered by the national drug plan or strategy.

6.c. Please indicate who approves the national drug plan or strategy (e.g.: Cabinet of Ministers, Parliament, other).

6.d. Please indicate the current status of the national drug plan or strategy.

Current status	Mark only one	Observations
Current and being implemented	<input type="checkbox"/>	
Drafted but pending approval	<input type="checkbox"/>	
Being drafted – (Please provide timeframe for completion and approval)	<input type="checkbox"/>	
Its period has expired. No action has been taken	<input type="checkbox"/>	

³ Full respect for international law and the Universal Declaration of Human Rights, observing the principles of sovereignty and the territorial integrity of States, nonintervention in the internal affairs of States, fundamental liberties, inherent human dignity, and equal rights and mutual respect among States.

INSTITUTIONAL STRENGTHENING

7. Which areas does the national drug plan or strategy include?

Area	Yes	No
Institutional strengthening		
Demand reduction		
Supply reduction		
Control measures		
International cooperation		

8. Are the relevant actors⁴ from priority areas⁵ involved in drafting, implementation, evaluation and/or updating the national drug plan or strategy?

Relevant actors	Yes	No
Health Ministry		
Social Affairs Ministry		
Interior Ministry		
Justice Ministry		
Regional and/or local governments		
Scientific community / academia		
Civil society and other social actors		
Ministry of Women		
Others (specify): _____		

9. Have municipalities/local governments transferred responsibilities on drugs issues (specific or related) and/or have enough autonomy with legal basis to take responsibility of and implement concrete actions, in coordination with the national drug authority?

Yes No

If yes:

9.a. Please describe.

⁴ **Relevant actors:** Includes civil society, scientific community, academia, and government at the national, regional and local levels, women’s rights organizations, LGBTI groups, among others.

⁵ **Priority areas:** e.g.: Institutional strengthening, demand reduction, supply reduction, control measures and international cooperation.

INSTITUTIONAL STRENGTHENING

10. Does your country's national drug authority have, in its central structure, an office or operational unit to promote, coordinate, train and provide technical support on drug-related issues to local governments or stakeholders?

Yes No

If yes:

10.a. Please describe which of these functions are covered by this office or operational unit.

11. Does the national drug authority of your country have coordinators, offices or representatives within your country's territories, as part of a decentralized operational and coordination structure at the local level, to respond to the drug problem?

Yes No

If yes,

11.a. Please describe how does the decentralized operational and coordination structure at the local level functions.

12. Does your country have a specific and stable mechanism or program to transfer funds or finance drug initiatives or projects implemented by local municipalities or governments?

Yes No

If yes:

12.a. Please describe this mechanism or program.

INSTITUTIONAL STRENGTHENING

13. Does your country's national drug plan or strategy take into account the United Nations Sustainable Development Goals (SDG) of the 2030 Agenda⁶?

Yes No

If yes:

13.a. Please list every action and SDG goal taken into account in your country's drug plan strategy⁷.

14. Is the human rights perspective included in your country's national drug plan or strategy⁸?

Yes No

If yes:

14.a. Please explain how the human rights perspective is included.

⁶ Available at: <http://www.un.org/sustainabledevelopment/sustainable-development-goals/>

⁷ The related **SDG goals** are: Goal 1: "End poverty in all its forms everywhere;" Goal 2: "End hunger, achieve food security and improved nutrition and promote sustainable agriculture;" Goal 3: "Ensure healthy lives and promote well-being for all at all ages;" Goal 5: "Achieve gender equality and empower all women and girls;" Goal 15: "Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss;" Goal 16: "Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels;" Goal 17: "Strengthen the means of implementation and revitalize the global partnership for sustainable development."

⁸ Take into account UNGASS operational recommendations 2016 (Resolution A/S-30/L.1). "Operational recommendations on intersectoral matters: drugs and human rights, youth, children and women and communities. The drugs and human rights, youth, women, children, the vulnerable members of communities and society. Proportional policies and responses and efficient, such as legal guarantees and safeguarding that relate to the criminal proceeding and the justice sector." United Nations, Outcome document of the thirtieth special session of the General Assembly, *Our joint commitment to effectively addressing and countering the world drug problem* (New York, 2016).

INSTITUTIONAL STRENGTHENING

15. Does your national drug plan or strategy specifically include a gender approach⁹?

Yes No

If yes:

15.a. Please explain how the gender approach was included, taking into account the appropriate international instruments. Indicate if the gender approach has a legal basis.

15.b. Please indicate whether or not the national drug authority receives technical support for implementing programs with a gender approach.

16. Does the national drug plan or strategy include development with social inclusion?

Yes No

If yes:

16.a. Please explain how is development with social inclusion being considered.

⁹ The gender perspective entails recognizing that drug policies have a differential impact on women and men and if these differences are not specifically addressed they tend to amplify and deepen the existing inequalities in human development, product of an androcentric and patriarchal society. Inclusion of a gender perspective entails the actions undertaken within the drug policies framework contributing to closing the gender gap. The UNGASS 2016 Resolution notes “Mainstream a gender perspective into and ensure the involvement of women in all stages of the development, implementation, monitoring and evaluation of drug policies and programmes, develop and disseminate gender-sensitive and age-appropriate measures that take into account the specific needs and circumstances faced by women and girls with regard to the world drug problem and, as States parties, implement the Convention on the Elimination of All Forms of Discrimination against Women.” United Nations, Outcome document of the thirtieth special session of the General Assembly, *Our joint commitment to effectively addressing and countering the world drug problem* (New York, 2016).

INSTITUTIONAL STRENGTHENING



CONTEXT OBSERVATIONS FOR OBJECTIVE 2:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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INSTITUTIONAL STRENGTHENING

OBJECTIVE 3

DESIGN AND COORDINATE NATIONAL DRUG POLICIES AND/OR STRATEGIES WITH OTHER PUBLIC POLICIES AND/OR STRATEGIES THAT ADDRESS FUNDAMENTAL CAUSES AND CONSEQUENCES OF THE DRUG PROBLEM.

17. Does your country have means to coordinate between agencies responsible for drug policies and those responsible for other public strategies and/or policies¹⁰?

Yes

No

18. Does your country have multisectoral plans and programs aimed at preventing and counteracting the socio-economic causes and consequences of the drug problem, particularly those affecting human rights, public health, gender and development?

Yes

No

19. What are the issues included (e.g.: crime prevention, violence, victimization, social exclusion, corruption and gender approach) in the drafting of national social public policy to address the socio-economic causes and consequences of the drug problem?

CONTEXT OBSERVATIONS FOR OBJECTIVE 3:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

¹⁰ For example: health care, human services, criminal justice, education and labor.

INSTITUTIONAL STRENGTHENING

OBJECTIVE

4

ESTABLISH AND/OR STRENGTHEN NATIONAL OBSERVATORIES ON DRUGS (OR SIMILAR TECHNICAL OFFICES) FOR THE DEVELOPMENT OF NATIONAL DRUG INFORMATION SYSTEMS AND FOSTERING SCIENTIFIC RESEARCH IN THIS AREA.

20. Does your country have a national observatory on drugs (or similar technical office) with financial, human and technological resources?

Yes

No

If yes:

20.a. Does the national observatory on drugs have a legal basis?

Yes

No

If yes:

20.a.1. Please attach the law or decree establishing the national observatory on drugs or web link.

21. Does the national observatory on drugs have a budget to carry out its functions?

Yes

No

22. Does the national observatory on drugs have a national drug information network¹¹?

Yes

No

¹¹ According to the Manual for the Implementation of a National Observatory on Drugs that was drafted jointly by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and Inter-American Drug Abuse Control Commission/Organization of American States (CICAD/OAS):

National Drug Observatory: organization whose purpose is to provide its country with factual, objective, reliable and comparable information on drugs, drug addiction and its consequences.

National Drug Information Network: integrates general and specialized sources of advanced information and know-how, as well as systematic monitoring programs and ad hoc studies on target groups.

National Information System on Drugs: organized set of elements that allow the interaction of stakeholders with the purpose of accessing, collecting, storing and transforming data into relevant information to obtain a comprehensive overview of the drug situation in the country, and consists of two fundamental components: a national data collection network and a national drug observatory.

INSTITUTIONAL STRENGTHENING

If yes:

22.a. Select in the following table, all stakeholders participating in the national drug information network:

Stakeholders	Yes	No
Universities		
Health institutions		
Statistical and census institutions		
Private consultants		
Civil society and other social stakeholders ¹²		
International organizations of cooperation		
Others. Please specify: _____		

23. Which demand reduction studies has your country carried out and for which the results have been published?

Demand reduction				
Studies	Studies carried out and published		Year of most recent study	Attach web link
	Yes	No		
Survey of secondary school students				
National household surveys (12-64 years)				
Patient register of treatment centers				
Cross-section survey of patients in treatment centers				
Survey of patients in emergency rooms				
Survey of higher education students				
Survey of populations in conflict with the law				
Studies on drug-related mortality				
Studies on drug-related morbidity				
Studies on gender conditions related to drug problems				
Survey of other target populations. Please specify: _____				
Others. Please specify: _____				

¹² **Other social stakeholders:** local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations).

INSTITUTIONAL STRENGTHENING

24. What information does your country have related to supply reduction, trafficking and related crimes?

Supply reduction, trafficking and related crimes				
Information	Available information		Year of most recent information	Attach web link
	Yes	No		
Quantification of illicit crop cultivation including crops grown indoors				
Number of seizures of illicit drugs and raw materials for their production				
Quantities of illicit drugs and raw materials for their production seized				
Number of seizures of controlled chemical substances (precursors)				
Quantities of seized controlled chemical substances (precursors)				
Number of seizures of pharmaceutical products				
Quantities of seized pharmaceutical products				
Number of persons formally charged with drug use, possession and trafficking				
Number of persons convicted of drug use, possession and trafficking				
Number of laboratories producing illicit plant-based drugs detected and dismantled				
Number of laboratories producing illicit drugs of synthetic origin detected and dismantled				
Chemical composition of seized drugs				
Sale price of drugs (for consumers)				
Number of persons formally charged with money laundering				
Number of persons convicted of money laundering				
Number of persons formally charged with trafficking in firearms, explosives, ammunition and related materials				
Number of persons convicted of trafficking in firearms, explosives, ammunition and related materials				
Number of persons formally charged with diversion of chemical substances				
Number of persons convicted of diversion of chemical substances				
Others. Please specify: _____				

INSTITUTIONAL STRENGTHENING

25. Do the indicators or information that your country's national observatory on drugs manage, include and systematically analyze data that is disaggregated by gender, age, socio-economic and educational level, and ethnicity, as appropriate?

Yes No

If yes:

25.a. Please indicate which of the studies in the previous tables include data disaggregated by gender, age, socio-economic and educational level, and ethnicity, as appropriate.

26. Has your country carried out or is currently carrying out studies to evaluate drug programs and/or interventions?

Scope	Are evaluation studies carried out		If yes, specify: Title of the study Assessment year Means of verification (Attach the corresponding document or web link)
	Yes	No	
Demand reduction			
Supply reduction			
Control measures			

CONTEXT OBSERVATIONS FOR OBJECTIVE 4:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

INSTITUTIONAL STRENGTHENING

OBJECTIVE

5

ENCOURAGE THE DESIGN, ADOPTION AND IMPLEMENTATION OF ALTERNATIVES TO INCARCERATION FOR LOW-LEVEL DRUG-RELATED OFFENSES, WHILE TAKING INTO ACCOUNT NATIONAL, CONSTITUTIONAL, LEGAL AND ADMINISTRATIVE SYSTEMS AND IN ACCORDANCE WITH RELEVANT INTERNATIONAL INSTRUMENTS.

27. Does your country's law provide for alternative measures to incarceration¹³ for low-level drug offenses¹⁴?

Yes

No

If yes:

27.a. Please indicate the name of the law and attach the corresponding document or web link.

¹³ The 2015 *CICAD Technical Report on Alternatives to Incarceration for Drug-related Offenses* defines alternatives to incarceration as:

“Any measure (whether legal reforms, strategies, programs or policies) intended to: i) reduce criminal prosecution, ii) limit the use of incarceration as a punishment, or iii) decrease the time of actual deprivation of liberty in the event of incarceration, for individuals who have committed drug-related offenses.”

In this regard, the Report notes:

“Alternatives to incarceration can be grouped into three broad categories according to the stage in judicial proceedings at which they occur. Accordingly, this report refers to: a) Measures taken prior to the opening of a criminal proceeding, and aimed at limiting entry into the criminal justice system; b) Measures applied during criminal proceedings, and aimed at either preventing the criminal case from resulting in incarceration, or making the incarceration proportional to the offense; and c) Measures for prison populations, aimed at providing for early release of convicted and imprisoned individuals along with social integration strategies.”

In order to recognize, review and foster alternatives to incarceration the States can assess suitability of implementation, foster and/or amend legislation, changes to drug polices or implement specific programs.

Tokyo Rules: United Nations Standard Minimum Rules for Non-custodial Measures. General Assembly Resolution 45/110. 14 December 1990. Available at:

https://www.unodc.org/pdf/criminal_justice/UN_Standard_Minimum_Rules_for_Non-custodial_Measures_Tokyo_Rules.pdf

Bangkok Rules: United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders. General Assembly Resolution 65/229. 21 December 2010. Available at:

https://www.unodc.org/documents/justice-and-prison-reform/Bangkok_Rules_ENG_22032015.pdf

¹⁴ Low-level offenses are referred to crimes punishable with a maximum sentencing up to a year of incarceration/imprisonment, or crimes punishable with a minimum sentencing of less than six months of incarceration/imprisonment. Notwithstanding those established by the respective legal systems of member states.

INSTITUTIONAL STRENGTHENING

27.b. Do the alternative measures to incarceration for low-level drug-related offenses take into account gender differences in accordance to the relevant international instruments?

Yes No

If yes:

27.b.1. Please explain how gender differences are taken into account.

27.c. Have mechanisms been developed to monitor and evaluate the impact of implementing alternative measures to incarceration for low-level drug offenses?

Yes No

If yes:

27.c.1. Please indicate which agency is responsible for implementing the monitoring and evaluation mechanisms.

27.c.2. Do these mechanisms involve academic and research institutions?

Yes No

27.c.3. Please explain how these mechanisms work.

If no:

27.d. Is there any legislative reform initiative that takes into account the implementation of these measures?

Yes No

INSTITUTIONAL STRENGTHENING



CONTEXT OBSERVATIONS FOR OBJECTIVE 5:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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INSTITUTIONAL STRENGTHENING

OBJECTIVE

6

PROMOTE AND IMPLEMENT, AS APPROPRIATE, COMPREHENSIVE PROGRAMS THAT PROMOTE SOCIAL INCLUSION IN ACCORDANCE WITH THE POLICIES, LAWS AND NEEDS OF EACH COUNTRY, ESPECIALLY FOR THOSE VULNERABLE POPULATIONS, WITH DIFFERENT LEVELS AND FORMS OF INVOLVEMENT.

28. Does your country have interinstitutional and multisectoral programs that promote the social integration¹⁵ of individuals affected by the drug problem?

Yes

No

If yes:

28.a. Please specify which are the programs and towards which sectors were these directed?

CONTEXT OBSERVATIONS FOR OBJECTIVE 6:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

¹⁵ Social integration in relation to the drug phenomenon means looking both at the processes used for individuals affected by drug abuse and at each of the contexts of intervention. By so doing, we attempt to achieve a consistent, complementary vision and approach to the various factors that determine or affect pathways for prevention, mitigation, and/or rehabilitation, influencing these factors in coordination with other institutions and helping individuals, families, and groups directly affected by the problem to achieve full inclusion with respect to their personal relationships and development and, in general, their life in society. Inter-American Drug Abuse Control Commission (CICAD), Valdivia Declaration, *On Social Integration: Exclusion and Drugs* (Valdivia, Chile, 2014). Available at:

http://www.cicad.oas.org/fortalecimiento_institucional/dtca/ai_dialog/documents/declaracionValdivia_ENG.pdf

INSTITUTIONAL STRENGTHENING

OBJECTIVE

7

FOSTER PROPORTIONATE SENTENCING, WHERE APPROPRIATE, THAT ADDRESSES THE SERIOUSNESS OF DRUG OFFENSES AND SAFEGUARDING LEGAL PROCEEDINGS.

29. Does your country have legislation on proportionate sentencing, in particular for low-level drug-related offenses?

Yes

No

If yes:

29.a. Please indicate the name of the legislation and attach the corresponding document or web link.

30. Does your country have special courts or tribunals for low-level drug-related offenses?

Yes

No

If yes:

30.a. Please describe the special courts or tribunals and attach corresponding document or web link.

CONTEXT OBSERVATIONS FOR OBJECTIVE 7:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

DEMAND REDUCTION

DEMAND REDUCTION

OBJECTIVE

1

ESTABLISH DEMAND REDUCTION POLICIES WITH A PUBLIC HEALTH FOCUS THAT ARE EVIDENCE-BASED, COMPREHENSIVE, MULTIDISCIPLINARY, MULTISECTORAL, AND RESPECTFUL OF HUMAN RIGHTS, CONSIDERING THE GUIDELINES AND/OR RECOMMENDATIONS OF SPECIALIZED INTERNATIONAL ORGANIZATIONS.

1. Does your country have demand reduction policies that include programs¹ in the areas of prevention, treatment², and social integration³?

Area	Yes	No
Prevention	<input type="checkbox"/>	<input type="checkbox"/>
Treatment	<input type="checkbox"/>	<input type="checkbox"/>
Social integration	<input type="checkbox"/>	<input type="checkbox"/>

If yes:

- 1.a. Please indicate if these programs include the following approaches:

Approach	Yes	No	If yes, attach the corresponding document or web link
Human rights	<input type="checkbox"/>	<input type="checkbox"/>	
Inter-cultural ⁴	<input type="checkbox"/>	<input type="checkbox"/>	
Age differences ⁵	<input type="checkbox"/>	<input type="checkbox"/>	
Gender	<input type="checkbox"/>	<input type="checkbox"/>	
Others (specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	

¹ A program should include the following minimum components: objectives, activities, work plan, identified and assigned resources, target population, definition of a location and a time frame for its execution. The brief and sporadic activities, actions or talks are not considered a program.

² Quality treatment and adapted to the needs of each individual that is directly or indirectly affected by drug and alcohol use, always using hospitalization as a last therapeutic resource and when it is properly justified. It can be provided in coordination with community and/or neighborhood centers, primary health care centers, detoxification units, devices specialized in acute care and clinical stabilization, outpatient approaches, full or half-day care centers, halfway alternatives and residential treatments. Rehabilitation is considered as a stage of the treatment process.

³ Any social intervention with the aim of integrating former or current problem drug users into the community. The three 'pillars' of social integration are (1) housing, (2) education and (3) employment (including vocational training). May also be referred to as "social re-integration or social re-insertion."

⁴ **Inter-cultural approach:** Including the cultural diversity and the needs related to it in designing health programs and services, while respecting, accompanying and valuing cultural differences in practice and from a viewpoint of community actors.

⁵ **Age difference approach:** refers to the needs during different life stages: childhood, adolescence, adulthood.

DEMAND REDUCTION

2. Does your country take into account the guidelines and recommendations of specialized international organizations⁶ in establishing demand reduction programs?

Program	Yes	No	Attach corresponding document or web link
Prevention			
Treatment			
Social integration			

3. Does your country have mechanisms for dissemination of and access to information⁷ on prevention, treatment and social integration services?

Services	Yes	No
Prevention		
Treatment		
Social integration		

4. Does your country have monitoring instruments⁸ for demand reduction programs?

Yes No

5. Has your country carried out any process⁹ or intermediate outcome evaluations¹⁰ of drug abuse prevention programs?

⁶ For example: For prevention: United Nations Office on Drugs and Crime (UNODC), *International Standards on Drug Use Prevention* (Sao Paulo, 2013). For treatment: United Nations Office on Drugs and Crime (UNODC)/World Health Organization (WHO), *International Standards for the Treatment of Drug Use Disorders* (Vienna, 2016).

⁷ **Mechanisms for dissemination of and access to information:** Tools for the promotion and dissemination of prevention, treatment and social integration services. Examples of dissemination of and access to information mechanisms are: social networks, mass media publicity, brochures, toll-free phone lines, information published in governmental web portals, dissemination through publicity and communication campaigns.

⁸ The instruments referred to are those of diagnostics, process, results and audits. The mode of collecting information could be quantitative and/or qualitative, for example: structured surveys, in-depth interviews, etc.

⁹ **Process evaluation:** includes documenting each step of the design of a specific intervention, to determine its efficacy, efficiency and effectiveness. It seeks to determine whether the intervention efficiently meets its short term goals, has successfully reached the target population, and the materials used are appropriate.

¹⁰ **Intermediate outcome evaluation:** assesses the effectiveness of the program; that is, what the project is expected to change. The outcome may include changes in behavior, status, attitude or certification of the beneficiaries after receiving the program's goods or services. The importance of the intermediate outcome evaluation lies in the expectation that the results will drive the final outcome (impact) of the program or project.

DEMAND REDUCTION

Yes No

If yes:

5.a. Please provide the following information:

Program evaluated	Title of evaluation performed ¹¹	Type of evaluation performed	Year of program evaluation

6. Has your country conducted impact evaluations¹² (best practices) or any other related and current study of drug abuse prevention programs?

Yes No

If yes:

6.a. Please complete the table below:

Evaluated program	Title of study performed or underway	Year of publication of research findings	Carried out by [specify research institution(s) or individual researcher(s)]

¹¹ **Title of evaluation performed:** Please indicate the title of the evaluations, the institutions that carried out the evaluations and bibliographical references.

¹² **Impact evaluation:** This is an assessment of the final outcomes of key actions or inputs relative to what would have occurred in the absence of an intervention. These results indicate a change in the conditions of the target population directly attributable to these actions. In some instances it is difficult to carry out these measurements, due to the difficulty in isolating the effects of other external variables and/or because many of these effects are long term.

DEMAND REDUCTION

7. Is your country implementing, as appropriate, coordination mechanisms to develop and implement demand reduction programs allowing for the participation of and coordination with civil society and other social stakeholders¹³?

Yes No

If yes:

- 7.a. Please indicate which are the coordination mechanisms.

8. Does your country implement measures aimed at minimizing the adverse public health and social consequences of drug abuse, using the technical guide, jointly published by the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC) and the Joint United Nations Program on HIV/AIDS (UNAIDS)¹⁴ as a reference?

Yes No

If yes:

- 8.a. Please describe these measures.

CONTEXT OBSERVATIONS FOR OBJECTIVE 1:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

¹³ **Other social stakeholders:** local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations).

¹⁴ WHO, UNODC, UNAIDS, *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (2012 revision). Available at: http://www.who.int/hiv/pub/idu/targets_universal_access/en/.

DEMAND REDUCTION

OBJECTIVE
2

ESTABLISH AND/OR STRENGTHEN AN INTEGRATED SYSTEM OF UNIVERSAL, SELECTED AND INDICATED PREVENTION PROGRAMS ON DRUG USE, GIVING PRIORITY TO VULNERABLE AND AT-RISK POPULATIONS, EVIDENCE-BASED AND INCORPORATING A HUMAN RIGHTS, GENDER, AGE AND MULTICULTURAL APPROACH.

9. Does your country develop or implement prevention strategies and/or programs in the following target populations?

Yes	No	Population group	Estimated Coverage		Name of program	Type of program (universal, selective, indicated) ¹⁷
			Target population ¹⁵	Coverage rate ¹⁶		
		School children and university students:				
		• Pre-school				
		• Elementary/primary				
		• Junior high & high school (secondary school)				

¹⁵ **Target population:** population group that the program seeks to address. The size of the target population will depend on the type of program that is to be implemented. In the case of universal prevention programs, it will be the entire population group, while selective or indicated prevention programs will target the population “at risk” or at “high risk.”

¹⁶ **Coverage rate:** population group actually served by a program expressed as a percentage of the target population.

$$\frac{\text{Size of population served}}{\text{Size of target group}} \times 100 \text{ (or appropriate population unit)}$$

Example: Target population = all primary school children in the country = 10,000

Population served = primary school children in the country to whom the prevention program was delivered during the year = 1,000

$$\text{Coverage rate} = \frac{1,000}{10,000} \times 100 = 10\%$$

¹⁷ **Type of program:**

Universal prevention: Target the general population, such as all students in a school. This level of prevention strengthens values, attitudes, knowledge and abilities that allow the child or youth to lead a healthy and drug-free lifestyle.

Selective prevention: Target at-risk groups or subgroups of the general population, such as children of drug-users or poor school achievers.

Indicated prevention: Are designed for people who are already experimenting with drugs or who exhibit other risky behaviors.

CICAD’s Hemispheric Guidelines on School-based Prevention (Washington, D.C., 2005).

DEMAND REDUCTION

Yes	No	Population group	Estimated Coverage		Name of program	Type of program (universal, selective, indicated) ¹⁷
			Target population ¹⁵	Coverage rate ¹⁶		
		<ul style="list-style-type: none"> University/tertiary education 				
		Street Population¹⁸:				
		<ul style="list-style-type: none"> Boys/girls 				
		<ul style="list-style-type: none"> Street youths 				
		<ul style="list-style-type: none"> Adults 				
		Family				
		Gender				
		<ul style="list-style-type: none"> Women 				
		<ul style="list-style-type: none"> Men 				
		LGBTI				
		Community				
		Indigenous people ¹⁹				
		Migrants and refugees				
		Individuals in the workplace ²⁰				
		Incarcerated individuals				
		Others ²¹ (Please specify: _____)				

¹⁸ **Street Population:** Children and young people who are not in school and who either live on the street or who, while living at home, spend their time in the streets, and to adults who live on the street (homeless people) in socially precarious conditions.

¹⁹ **Indigenous people:** According to the United Nations, indigenous peoples are the holders of unique languages, knowledge systems and beliefs and possess invaluable knowledge. Also, hold their own diverse concepts of development, based on their traditional values, visions, needs and priorities.

http://www.un.org/esa/socdev/unpfii/documents/5session_factsheet1.pdf

²⁰ Workplace drug abuse programs may include drug and alcohol abuse prevention and education for employees and management; employee assistance programs; referral to and/or financial assistance for treatment for substance abuse; on-site facilities made available for Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) groups; and written policies about non-use of alcohol and other licit and illicit drugs on the job.

²¹ **Other groups at risk:** Each member state should determine those population groups that may, in that country, be at higher risk for the use of drugs. These high-risk groups might include prostitutes, migrants, HIV-positive individuals, homeless people, street youth and injecting drug users.

DEMAND REDUCTION

CONTEXT OBSERVATIONS FOR OBJECTIVE 2:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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DEMAND REDUCTION

OBJECTIVE

3

ESTABLISH AND STRENGTHEN, AS APPROPRIATE, A NATIONAL TREATMENT, REHABILITATION AND SOCIAL INCLUSION SYSTEM FOR PEOPLE WITH PROBLEMATIC DRUG USE, INCLUDING A HUMAN RIGHTS AND GENDER-BASED APPROACH, TAKING INTO ACCOUNT INTERNATIONALLY ACCEPTED QUALITY STANDARDS.

10. Does your country have a national system for comprehensive treatment and social integration programs and devices²² for people with problematic drug use²³, guaranteeing non-discrimination?

Yes

No

If yes:

10.a. Please indicate if the national system includes the following specialized programs and devices:

Programs/Devices	Yes	No	Attach corresponding document or web link
Early intervention (brief intervention, counselling)			
Crisis intervention			
Diverse treatment modalities			
Dual pathology (co-morbidity)			
Social integration and services related to recovery support			

10.b. Do these programs and devices take into account the *International Standards for the Treatment of Drug Use Disorders* of the United Nations Office on Drugs and Crime (UNODC) and World Health Organization (WHO)?

Yes

No

If yes:

²² From a mental health perspective, the notion of devices refers to the idea of different assistance procedures. A device is one that is constructed in a cunning way and focuses actions to obtain measurable results, in order to reach a defined objective, in this case being the highest level of health and well-being, as possible.

²³ Problematic drug use (PDU) is what persons have known as drug abusers or dependents. Equivalent to the “hazardous use,” “abuse” and “dependence” categories, described in the WHO ICD-10 and the American Psychiatric Association DSM-IV. This type of use tends to be related to personal or family difficulties and with adverse social and economic circumstances.

DEMAND REDUCTION

10.b.1. Please explain how your country monitors compliance with these standards.

11. Does your country have mechanisms to facilitate access and ensure the quality of treatment services for those with problematic drug use disorders?

Yes

No

If yes:

11.a. Please attach the corresponding document or web link on these mechanisms.

11.b. Please indicate who provides these services:

Institution	Outpatient	Residential
Public health system		
Private institutions		
Non-governmental organizations		
Religious institutions		

11.c. Please describe how is the gender perspective included in the treatment services offered.

11.d. Has your country established and maintained cooperative relationships with governmental/non-governmental organizations that provide social and community support services, with a gender perspective, for the social integration of vulnerable populations?

Yes

No

If yes:

DEMAND REDUCTION

11.d.1. Please briefly describe the actions carried out within this cooperation framework.

12. Does your country have mechanisms to continually monitor and evaluate the results of care, treatment and social integration programs?

Yes

No

If yes:

12.a. Please indicate if the gender and human rights approaches were taken into account during the evaluation and monitoring of care, treatment and social integration programs.

13. Does your country have mechanisms to protect the rights of people with problematic drug use in treatment programs and services?

Yes

No

If yes:

13.a. Please briefly describe these mechanisms.

13.b. Do these mechanisms have protocols to protect the confidentiality of the information provided by the recipients of these services?

Yes

No

13.c. Do these mechanisms include the process of providing adequate information on treatment and informed consent?

DEMAND REDUCTION

Yes No

14. Does your country have supervisory mechanisms for establishments that offer treatment and rehabilitation services for those with problematic drug use?

Yes No

If yes:

14.a. Please briefly describe how your country's monitoring mechanism operates.

14.b. Can the supervisory mechanisms be used to systematize and compile information on the services being implemented?

Yes No

CONTEXT OBSERVATIONS FOR OBJECTIVE 3:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

DEMAND REDUCTION

OBJECTIVE

4

FOSTER ONGOING TRAINING AND CERTIFICATION OF HUMAN RESOURCES THAT PROVIDE PREVENTION, TREATMENT, REHABILITATION AND SOCIAL REINTEGRATION SERVICES.

15. Has your country carried out reviews to determine the training needs of personnel working in prevention, treatment and social reintegration programs?

Programs	Yes	No
Prevention		
Treatment		
Social reintegration		

16. Does your country offer ongoing competence-based training in the areas of prevention, treatment and social reintegration?

Yes

No

If yes:

16.a. Please specify the training educational levels and provide the corresponding documents or web link.

17. Does your country participate in prevention, treatment and social reintegration training programs offered by specialized international organizations?

Yes

No

18. Does your country's training in prevention, treatment and social reintegration include a gender perspective?

Yes

No

DEMAND REDUCTION

19. Does your country certify personnel that work on prevention, treatment and social reintegration services?

	Yes	No	Level (basic, intermediate, advanced)	Organization/Institution responsible for certification
Prevention				
Treatment				
Social reintegration				

CONTEXT OBSERVATIONS FOR OBJECTIVE 4:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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DEMAND REDUCTION

OBJECTIVE
5

ESTABLISH AND/OR STRENGTHEN GOVERNMENTAL INSTITUTIONAL CAPACITIES TO REGULATE, ENABLE, ACCREDIT AND SUPERVISE PREVENTION PROGRAMS AND, CARE AND TREATMENT SERVICES.

20. Does your country have regulatory measures for accrediting prevention programs and for care and/or treatment services²⁴?

Yes

No

21. Does your country have an accreditation process for treatment centers?

Yes

No

If yes:

21.a. Please indicate the entity(ies) that accredit and briefly describe the accrediting process.

22. Does your country have supervisory mechanisms in place to ensure that the quality criteria of prevention services are met?

Yes

No

If yes:

22.a. Please indicate the supervisory mechanisms used and who is responsible for overseeing them.

²⁴ **Treatment services:** Provision of structured interventions to treat psychosocial and health problems related to drug use in order to improve health and increase/improve social and personal welfare.

DEMAND REDUCTION

23. Does your country have supervisory mechanisms to ensure that the quality criteria of the care and/or treatment services are met?

Yes

No

If yes:

23.a. Please indicate the supervisory mechanisms used and who is responsible for overseeing them.

24. Has your country conducted an assessment to determine the national needs regarding care and treatment services offered during the evaluation period (2014 – 2018)?

Yes

No

If yes:

24.a. Please explain the results of the assessment.

CONTEXT OBSERVATIONS FOR OBJECTIVE 5:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

SUPPLY REDUCTION

SUPPLY REDUCTION

OBJECTIVE

1

DESIGN, IMPLEMENT AND STRENGTHEN COMPREHENSIVE AND BALANCED POLICIES AND PROGRAMS, AIMED AT PREVENTING AND DECREASING THE ILLICIT SUPPLY OF DRUGS, IN ACCORDANCE TO THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

1. Has your country designed, implemented and updated national policies and programs to prevent and decrease illicit crops and the illicit production of drugs?

Yes

No

If yes:

- 1.a. Please indicate which agency and/or institution are/is responsible for carrying out these actions.

2. Are there budgetary mechanisms in your country to ensure allocation of resources to illicit supply of drugs reduction programs?

Yes

No

3. Is traditional licit use taken into account in your country, where there is historical evidence of such use, when designing and implementing policies and programs to reduce the illicit supply of drugs?

Yes

No

If yes:

- 3.a. Please describe how these traditional licit uses are taken into account and attach the corresponding document or provide the web link.

SUPPLY REDUCTION

4. Does your country include environmental protection measures in its policies and programs to reduce the illicit supply of drugs?

Yes No

If yes:

- 4.a. Please describe these environmental protection measures.

5. Has your country established mechanisms for interinstitutional cooperation between public and private institutions to provide a comprehensive response to the illicit production of drugs?

Yes No

6. Are the drug supply reduction programs implemented by your country supplemented by drug-related crime prevention initiatives that address social and economic risk factors?

Yes No

If yes:

- 6.a. Do these programs include participation from civil society and other social stakeholders¹?

Yes No

- 6.b. Please attach the corresponding documents or provide web link.

¹ **Other social stakeholders:** local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations).

SUPPLY REDUCTION

CONTEXT OBSERVATIONS FOR OBJECTIVE 1:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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SUPPLY REDUCTION

OBJECTIVE 2

DEVELOP AND IMPLEMENT MECHANISMS TO COLLECT AND ANALYZE INFORMATION FOR THE DEVELOPMENT OF POLICIES AND ACTIONS AIMED AT DECREASING THE ILLICIT SUPPLY OF DRUGS.

7. Does your country have mechanisms or systems to collect and analyze information related to the illicit supply of drugs?

Yes

No

If yes:

7.a. Please indicate the name of the institution(s) participating in these mechanisms or systems.

8. Does your country carry out periodic studies and research on the structural and socioeconomic factors influencing the illicit supply of drugs situation?

Yes

No

If yes:

8.a. Please indicate which studies and research were carried out (title, date of completion, web link).

9. Does your country prepare or update studies and/or research on medical and scientific uses and other legal use, as appropriate, of crops containing narcotic or psychotropic substances subject to the international control system?

Yes

No

SUPPLY REDUCTION

If yes:

- 9.a. Please indicate which studies and/or research were carried out (study title, year of completion, web link).

10. Does your country promote and implement mechanisms to identify chemical profiles and characteristics of drugs² subject to the international control system?

Yes

No

If yes:

- 10.a. Please indicate which mechanisms are implemented to identify chemical profiles and characteristics of drugs subject to the international control system.

11. Does your country promote and implement mechanisms for the identification of new psychoactive substances³ (NPS)?

Yes

No

If yes:

- 11.a. Does your country have an early warning system to identify NPS?

Yes

No

² **Drug characterization and impurity profiling:** The use of scientific laboratory information in support of law enforcement operation work, and is aimed at establishing links between drug samples. It consists of the systematic collection and sharing, in a standardized form, of physical and chemical information on a drug seizure, including the analysis and use of trace impurities to link different drug samples.

³ **New psychoactive substances (NPS):** Substances of abuse, either in a pure form or a preparation, that are not controlled by the 1961 Single Convention on Narcotic Drugs or the 1971 Convention on Psychotropic Substances, but which may pose a public health threat. The term “new” does not necessarily refer to new inventions — several NPS were first synthesized 40 years ago — but to substances that have recently become available on the market. United Nations Office on Drugs and Crime (UNODC), *UNODC Early Warning Advisory (EWA) on New Psychoactive Substances*. Available at: <https://www.unodc.org/LSS/Page/NPS>

SUPPLY REDUCTION

If yes:

11.a.1. Please indicate how the warning system works (Participating agencies, responsibilities).

12. Does your country use standardized and comparable methodologies⁴ to measure illicit crops and drug production?

Yes

No

If yes:

12.a. Please list the standardized and comparable methodologies used.

Methodologies to measure illicit crops	Methodologies to measure illicit drug production

12.b. Please indicate which standardization criteria are used to ensure comparability.

⁴ Such as satellite imagery, scientific studies of crop yields or efficiency of typical illicit drug laboratories, among others.

SUPPLY REDUCTION

CONTEXT OBSERVATIONS FOR OBJECTIVE 2:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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SUPPLY REDUCTION

OBJECTIVE 3

DESIGN, IMPLEMENT AND/OR STRENGTHEN LONG-TERM PROGRAMS WHICH ARE BROAD AND AIMED AT DEVELOPMENT THAT INCLUDES RURAL AND URBAN ALTERNATIVE, INTEGRAL AND SUSTAINABLE DEVELOPMENT PROGRAMS, AND, AS APPROPRIATE, PREVENTIVE ALTERNATIVE DEVELOPMENT, IN ACCORDANCE WITH THE POLICIES, LEGISLATIONS AND NEEDS OF EACH COUNTRY, AS APPROPRIATE.

13. Has your country designed and implemented alternative, integral and sustainable development programs or preventive alternative development, as appropriate, as part of the strategies to control and reduce illicit crops?

Yes

No

If yes:

13.a. Please provide the year your country began implementing alternative, integral and sustainable development programs or preventive alternative development programs:

Program type	Year
Alternative, integral and sustainable development programs	
Preventive alternative development programs	

13.b. Does your country have a national entity that coordinates and evaluates the implementation of alternative development programs?

Yes

No

If yes:

13.b.1. Please provide the name of the national entity.

SUPPLY REDUCTION

13.c. Please indicate which illicit crops are subject to alternative development programs implemented.

Crop	Yes	No
Coca		
Marijuana/cannabis		
Poppy		
Others. Please specify: _____		

13.d. Please attach the corresponding documents or web links regarding alternative, integral and sustainable development programs or preventive alternative development, as appropriate.

14. Does your country exchange experiences and best practices with other countries in the Hemisphere on the design and implementation of alternative, integral and sustainable development programs, including preventive alternative development, as appropriate?

Yes No

If yes:

14.a. Please provide the following Information on the exchange of information and experiences with other countries in the Hemisphere during the evaluation period (2014-2018):

Agencies with which experiences and best practices are exchanged	Experiences and best practices exchanged

SUPPLY REDUCTION

15. Does your country use intermediate and/or outcome results indicators, to monitor and evaluate the effectiveness of alternative, integral and sustainable development programs, including preventive alternative development, as appropriate, in the medium and long terms?

Yes No

If yes:

15.a. Please describe the indicators used:

Indicator	Type of result indicator	
	Intermediate	Outcome

15.b. Please report if the indicators mentioned evaluate the following aspects:

Aspects	Yes	No
Economic and social development of individuals and communities		
Reduction of illicit crops containing narcotic and psychotropic substances		

16. Are your country's alternative, integral and sustainable development programs, including preventive development, as appropriate, supplemented by public policies that strengthen the government's presence in areas affected by illicit crops?

Yes No

If yes:

16.a. Please provide the following information:

Agencies that supplement alternative development programs in affected areas	Yes	No
Ministry of Agriculture		
Agricultural Research		
Ministry of Education		

SUPPLY REDUCTION

Agencies that supplement alternative development programs in affected areas	Yes	No
Ministry of Health		
Ministry of the Interior / National Police (law enforcement)		
Ministry of National Security/ Defense		
Transportation / Public Works Ministry		
Ministry of Women / Family		
Ministry of Commerce (International)		
Public Ministry		
Ministry of Labor / Social Affairs		
National Drug Authority		
Others. Please specify: _____		

17. Do communities and target groups⁵ in your country participate in the design, implementation and supervision processes of alternative, integral and sustainable development programs, including preventive development, as appropriate?

Yes No

If yes:

17.a. Please provide details of the participation of communities and target groups in said processes.

18. Does your country promote sustainable urban development⁶ initiatives in urban populations affected by illicit activities related to drug trafficking and related crimes?

Yes No

⁵ Local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations), as appropriate.

⁶ **Sustainable urban development:** "a process of co-evolution and synergic integration between the three subsystems that make up the city: the economic, the social and the physical environment." *El Desarrollo Urbano Sostenible*. Available in Spanish only at: <https://dialnet.unirioja.es/servlet/articulo?codigo=65353>)

SUPPLY REDUCTION

If yes:

18.a. Please list the sustainable urban development initiatives implemented and their target populations:

Type of sustainable urban development initiative	Target populations
Crime prevention ⁷	
Community cohesion	
Citizen security and protection	
Stimulate innovation and entrepreneurship	
Promotion of employment	
Others. Please specify: _____	

CONTEXT OBSERVATIONS FOR OBJECTIVE 3:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

⁷ **Crime prevention:** comprises strategies and measures that seek to reduce the risk of crimes occurring, and their potential harmful effects on individuals and society, including fear of crime, by intervening to influence their multiple causes. United Nations Office on Drugs and Crime (UNODC), *Compendium of United Nations Standards and Norms in Crime prevention and Criminal Justice*, page 294. Available at: https://www.unodc.org/pdf/criminal_justice/Compendium_UN_Standards_and_Norms_CP_and_CJ_English.pdf

SUPPLY REDUCTION

OBJECTIVE

4

DESIGN AND IMPLEMENT PLANS AND/OR PROGRAMS TO MITIGATE AND REDUCE THE IMPACT OF ILLICIT CROPS AND DRUG PRODUCTION ON THE ENVIRONMENT, WITH THE INCORPORATION AND PARTICIPATION OF LOCAL COMMUNITIES, IN ACCORDANCE WITH THE NATIONAL POLICIES OF MEMBER STATES.

19. Does your country carry out research and/or studies to determine the characteristics and extent of the environmental impact caused by the illicit cultivation of crops and illicit drug production?

Yes

No

If yes:

19.a. Please provide the titles and publication dates of the research and/or studies carried out during the evaluation period (2014 – 2018) in the following table:

Study/research	Web link

20. Does your country design and implement specific plans based on the results of research and/or studies carried out to mitigate and reduce the negative environmental impact of the illicit cultivation of crops and illicit drug production, with the participation of local communities?

Yes

No

If yes:

20.a. Please list the specific plans implemented:

Implemented plans	Participating local communities	Web link

SUPPLY REDUCTION

CONTEXT OBSERVATIONS FOR OBJECTIVE 4:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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SUPPLY REDUCTION

OBJECTIVE
5

ESTABLISH, AS APPROPRIATE, AND BASED ON EVIDENCE THE EFFECTS CAUSED BY SMALL-SCALE DRUG TRAFFICKING ON PUBLIC HEALTH, THE ECONOMY, SOCIAL COHESION AND CITIZEN SECURITY.

21. Does your country have characterization methodologies⁸ with territorial and socio-economic approaches on micro-drug trafficking or small-scale drug trafficking⁹ and how it affects public health, the economy, social cohesion and citizen security?

Yes No

If yes:

21.a. Please briefly explain the methodologies and attach corresponding documents or web links.

22. Does your country exchange information on the effects of small-scale drug trafficking or micro-drug trafficking in the following sectors?

Sectors	Yes	No
Health	<input type="checkbox"/>	<input type="checkbox"/>
Society	<input type="checkbox"/>	<input type="checkbox"/>
Economy	<input type="checkbox"/>	<input type="checkbox"/>
Security	<input type="checkbox"/>	<input type="checkbox"/>

If yes:

22.a. Please explain how this information is exchanged at the national and international level:

Countries and entities with which information was exchanged	Means of exchange	Year
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

⁸ **Characterization methodologies:** Research mechanisms that explain a given phenomenon, taking into account socio-economic variables (age, gender socio-economic level, educational level).

⁹ For the purposes of this objective, the terms “micro-trafficking” and “small-scale drug trafficking” are used interchangeably to refer to this phenomenon.

SUPPLY REDUCTION

CONTEXT OBSERVATIONS FOR OBJECTIVE 5:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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CONTROL MEASURES

CONTROL MEASURES

OBJECTIVE

1

ADOPT AND/OR STRENGTHEN COMPREHENSIVE AND BALANCED PROGRAMS AIMED AT PREVENTING AND REDUCING DRUG TRAFFICKING, IN ACCORDANCE WITH THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

1. Does your country have protocols or operating procedures to detect, investigate, and dismantle laboratories or facilities for the illicit processing or manufacture of drugs?

Yes No

If yes:

1.a. Please attach corresponding document or web link of the protocols or procedures.

1.b. Do these protocols or procedures provide adequate safety and health measures for personnel involved in the dismantling of the laboratories or facilities?

Yes No

1.c. Do they include actions that minimize damage to the environment and optimize the management of chemical and hazardous waste?

Yes No

2. Does your country have programs and/or strategies to detect and seize drugs, through monitoring, inspections or checkpoints in any of the following routes?

Route	Yes	No	Please attach the corresponding document or web link of the programs and/or strategies
Land	<input type="checkbox"/>	<input type="checkbox"/>	
Riverine	<input type="checkbox"/>	<input type="checkbox"/>	
Air	<input type="checkbox"/>	<input type="checkbox"/>	
Sea	<input type="checkbox"/>	<input type="checkbox"/>	

CONTROL MEASURES

If yes:

2.a. Is there evaluation and follow-up of the said programs and/or strategies?

Yes No

3. Does your country have laws or regulations providing for the use of specialized investigation tools and techniques to prevent and reduce drug trafficking?

Yes No

If yes:

3.a. Do these laws or regulations include a human rights perspective?

Yes No

3.b. Please attach the corresponding laws or regulations or web link.

4. Does your country implement or participate in ongoing training programs linked to regulations, processes and procedures on drug trafficking and related crimes, as well as, specialized investigative techniques and intelligence for personnel involved in interdiction operations?

Yes No

If yes:

4.a. Please describe the type of training programs carried out.

CONTROL MEASURES

5. Does your country have updated diagnoses or studies¹ to identify new trends and threats on drug trafficking and related crimes?

Yes No

If yes:

- 5.a. Please attach the corresponding documents or web link.

6. Does your country implement interinstitutional collaboration and cooperation mechanisms to carry out coordinated activities to dismantle organized crime groups involved in drug trafficking and related crimes?

Yes No

7. Is there an agency responsible for analyzing chemical substances, precursors and pharmaceuticals, including new psychoactive substances²?

Yes No

If yes:

- 7.a. Please indicate the name of the agency responsible for these activities.

¹ The diagnoses or studies should help to identify new trends and patterns, modus operandi and emerging threats from criminal organizations.

² **New psychoactive substances (NPS):** Substances of abuse, either in a pure form or a preparation, that are not controlled by the 1961 Single Convention on Narcotic Drugs or the 1971 Convention on Psychotropic Substances, but which may pose a public health threat. The term “new” does not necessarily refer to new inventions — several NPS were first synthesized 40 years ago — but to substances that have recently become available on the market. United Nations Office on Drugs and Crime (UNODC), *UNODC Early Warning Advisory (EWA) on New Psychoactive Substances*. Available at: <https://www.unodc.org/LSS/Page/NPS>.

CONTROL MEASURES

8. Does your country have or participate in ongoing training programs for personnel involved in the analysis of chemical substances, precursors and pharmaceutical products, including new psychoactive substances?

Yes

No

If yes:

- 8.a. Please indicate those training programs.

CONTEXT OBSERVATIONS FOR OBJECTIVE 1:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

CONTROL MEASURES

OBJECTIVE
2

ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION OF CONTROLLED CHEMICAL SUBSTANCES TOWARDS ILLICIT ACTIVITIES.

9. Does your country have a competent authority responsible for controlling domestic trade to prevent diversion of controlled chemical substances towards illicit activities?

Yes

No

If yes:

- 9.a. Please indicate the competent authority and corresponding legislation, regulation or other norm that establishes it. Please attach the corresponding document or web link.

10. What instruments or mechanisms does your country have to inform the industry and users in general of applicable controls and cooperation methods, to prevent the diversion of controlled chemical substances?

Instrument or mechanism	Please attach the corresponding document or web link

11. Does your country's competent authority, responsible for controlling domestic trade, carry out regular inspections and audits of the establishments of individuals and corporations authorized to handle controlled chemical substances?

Yes

No

12. Does your country have an updated register of all individuals and corporations handling controlled chemical substances?

Yes

No

CONTROL MEASURES

13. Does your country carry out analyses that include the exchange of information through existing mechanisms of substances in the international field, their analogs and precursors, which pose a threat to public health³?

Yes No

If yes:

13.a. Please briefly describe how the information is exchanged.

14. Does your country have legislation incorporating the control measures in Article 12, Paragraphs 8 and 9 of the 1988 United Nations Convention⁴ to prevent diversion of controlled chemical substances towards illicit activities?

Yes No

If yes:

14.a. Please attach the corresponding legislation or web link.

15. Which control measures listed in Article 12, Paragraph 8 of the 1988 United Nations Convention are included in your country's legislation?

Control measures	Yes	No
Control of all persons and enterprises engaged in the manufacture and distribution of controlled chemical substances	<input type="checkbox"/>	<input type="checkbox"/>
Control, under license, the establishment and premises in which manufacture or distribution of controlled chemical substances may take place	<input type="checkbox"/>	<input type="checkbox"/>
Require that licensees obtain a permit for manufacturing or distributing controlled chemical substances	<input type="checkbox"/>	<input type="checkbox"/>
Prevent the accumulation of controlled chemical substances in the possession of manufacturers and distributors, in excess of the quantities required for the normal conduct of business and the prevailing market conditions	<input type="checkbox"/>	<input type="checkbox"/>

³ All of the substances included in tables I and II of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

⁴ United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

CONTROL MEASURES

16. Which control measures listed in Article 12, Paragraph 9 of the 1988 United Nations Convention are included in your country's legislation?

Control measures	Yes	No
A system to monitor international trade in controlled chemical substances in order to facilitate the identification of suspicious transactions	<input type="checkbox"/>	<input type="checkbox"/>
The monitoring system shall be used by manufacturers, importers, exporters, wholesalers and retailers to inform the competent authorities of suspicious orders and transactions	<input type="checkbox"/>	<input type="checkbox"/>
Any controlled substance is seized if there is sufficient evidence that it will be used in the illicit manufacture of narcotics or psychotropic substances	<input type="checkbox"/>	<input type="checkbox"/>
The competent authorities are notified, as soon as possible, if there is reason to believe that the import, export or transit of a substance is destined for the illicit manufacture of narcotic drugs or psychotropic substances, including in particular information about the means of payment and any other essential elements which led to that belief	<input type="checkbox"/>	<input type="checkbox"/>
Requirements to ensure that imports and exports are properly labelled and documented. Commercial documents such as invoices, cargo manifests, customs, transport and other shipping documents include the names of the substances, the quantity, and the name and address of the exporter, the importer and, when available, the consignee. These documents are maintained for a period of not less than two years and may be made available for inspection by competent authorities	<input type="checkbox"/>	<input type="checkbox"/>

17. Does your country comply with requesting the information in Article 12, Paragraph 10 of the 1988 United Nations Convention?

Yes No

18. Does your country use the information system for pre-export notifications (International Narcotics Control Board's - INCB PEN Online) of controlled chemical substances⁵?

Yes No

If no:

18.a. Does your country have alternative mechanisms to timely respond to pre-export notifications of controlled chemical substances made by other States?

Yes No

⁵ As per paragraph 10, Article 12 of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

CONTROL MEASURES

If yes:

18.a.1. Please briefly describe the alternative mechanisms.

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19. Does your country have training programs on the identification and handling of controlled chemical substances?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

If yes:

19.a. Please list the training programs on the identification and handling of existing controlled chemical substances and the agency in charge.

Training Programs	Agency in Charge

CONTEXT OBSERVATIONS FOR OBJECTIVE 2:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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CONTROL MEASURES

OBJECTIVE 3

ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION TOWARDS ILLICIT ACTIVITIES OF PHARMACEUTICAL PRODUCTS CONTAINING PRECURSOR SUBSTANCES OR THOSE CONTAINING NARCOTIC DRUGS AND/OR PSYCHOTROPIC SUBSTANCES, ENSURING THE ADEQUATE AVAILABILITY AND ACCESS SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES.

20. Does your country have an updated register of individuals and corporations handling pharmaceutical products containing precursor substances, narcotics or psychotropic substances?

Yes

No

If yes:

20.a. Please briefly describe what information is recorded in the register.

21. Does your country issue licenses to manufacturers and distributors of pharmaceutical products containing precursor substances, narcotics or psychotropic substances for their control?

Yes

No

If yes:

21.a. Please briefly describe the process of issuing licenses.

22. Does your country carry out regular inspections or audits of the establishments of individuals and corporations authorized to handle pharmaceutical products containing precursor substances, narcotics or psychotropic substances?

Yes

No

CONTROL MEASURES

If yes:

22.a. Please briefly describe the process of the inspections and audits.

23. Does your country have criminal, civil and/or administrative penalties for infractions or violations by individuals or corporations that handle pharmaceutical products containing precursor substances, narcotics or psychotropic substances?

Yes

No

If yes:

23.a. Please attach the corresponding laws or regulations or web link.

CONTEXT OBSERVATIONS FOR OBJECTIVE 3:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

CONTROL MEASURES

OBJECTIVE
4

ENSURE ADEQUATE AVAILABILITY AND ACCESSIBILITY OF SUBSTANCES SUBJECT TO INTERNATIONAL CONTROL SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES, PREVENTING THEIR DIVERSION.

24. Does your country have special processes for issuing import and export authorizations for substances subject to international control for medical and scientific purposes?

Yes

No

If yes:

24.a. Please indicate how long it takes, on average, for an import or export authorization to be issued in the following cases.

Product type	Average time taken for the issuing of import permits	Average time taken for the issuing of export permits
Narcotic or psychotropic raw materials for the manufacture of medicines		
Medication containing narcotic or psychotropic drugs		
Analytical patterns classified as narcotic or psychotropic		
Medication classified as narcotic or psychotropic for the personal use of travelers entering or leaving the country		

25. Does your country have an updated register or database of individuals and companies importing and exporting substances subject to international control for medical and scientific purposes?

Yes

No

26. Does your country have training and/or awareness activities for competent national authorities and health professionals on the proper access to substances subject to international control solely for medical and scientific purposes?

Yes

No

CONTROL MEASURES

If yes:

26.a. Please indicate which are these training and/or awareness activities.

27. Does your country have a regulatory framework or guidelines⁶ to govern the acquisition of substances subject to international control for medical and scientific purposes?

Yes

No

If yes:

27.a. Please indicate the laws, regulations and/or administrative measures adopted to improve access to these substances by the medical and scientific communities and attach the corresponding documents or web links.

CONTEXT OBSERVATIONS FOR OBJECTIVE 4:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

⁶ Procedural and administrative guidelines should be easily accessible and understood, and should not inexplicably or significantly delay the process.

CONTROL MEASURES

OBJECTIVE

5

STRENGTHEN NATIONAL MEASURES TO ADDRESS THE CHALLENGE OF NEW PSYCHOACTIVE SUBSTANCES AND THE THREAT OF AMPHETAMINE STIMULANTS.

28. Does your country have an early warning system to identify and trace new psychoactive substances, amphetamine-type stimulants⁷ and other substances subject to international control?

Yes

No

If yes:

28.a. Is the information shared with other regional or global systems?

Yes

No

If yes:

28.a.1 Please indicate which systems are used by your country to share the information.

29. Does your country have regulatory frameworks and/or guidelines to identify and address the challenges posed by the onset of new psychoactive substances and amphetamine type stimulants?

Yes

No

If yes:

29.a. Please list the regulatory frameworks and/or guidelines and attach corresponding documents or web links.

⁷ **Amphetamine-type stimulants (ATS):** group of substances comprised of synthetic stimulants, including amphetamine, methamphetamine, methcathinone, and ecstasy group substances (e.g. MDMA and its analogues). United Nation Office on Drugs and Crime (UNODC) – Inter-American Drug Abuse Control Commission (CICAD), Global SMART Programme, *Amphetamine-Type Stimulants in Latin America* (2014). Available at: http://www.cicad.oas.org/Smart/Reports/1_ENG.pdf.

CONTROL MEASURES

30. What new special investigative techniques, updated equipment and/or technology has your country acquired and used to detect and analyze new psychoactive substances?

CONTEXT OBSERVATIONS FOR OBJECTIVE 5:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

CONTROL MEASURES

OBJECTIVE
6

ESTABLISH, UPDATE AND STRENGTHEN, AS APPROPRIATE, THE LEGISLATIVE AND INSTITUTIONAL FRAMEWORKS TO COUNTER MONEY LAUNDERING DERIVED FROM DRUG TRAFFICKING.

31. Has the country updated and/or strengthened the legislative and institutional frameworks to counter money laundering⁸ derived from drug trafficking?

Yes

No

If yes:

31.a. Please attach the corresponding documents or web links.

32. Does your country have a program to train officials and other vulnerable sectors⁹ on prevention, detection, investigation, prosecution, and control of money laundering derived from drug trafficking?

Yes

No

33. Does your country have protocols that enable the authorities to conduct financial and asset investigations parallel to drug trafficking investigations?

Yes

No

If yes:

33.a. Please briefly describe and attach those protocols.

⁸ Money laundering is criminalized in accordance to the United Nations Convention against Illicit Traffic in Narcotic Drugs (Vienna, 1988) and the United Nations Convention against Transnational Organized Crime (Palermo, 2000).

⁹ **Vulnerable sectors:** Please refer to Recommendation 1 of the Financial Action Task Force (FATF): "Assessing risks & applying a risk-based approach." Available at:

http://www.fatf-gafi.org/media/fatf/documents/recommendations/pdfs/FATF_Recommendations.pdf.

CONTROL MEASURES

34. Does your country have mechanisms allowing for inter-agency coordination and cooperation in the area of preventing and controlling money laundering?

Yes

No

If yes:

34.a. Please briefly describe those mechanisms.

35. Does your country have a financial intelligence unit¹⁰?

Yes

No

If yes:

35.a. Please attach the corresponding document or web link.

35.b. Please indicate the unit's location within the government.

36. Does your country have mechanisms for analyzing money laundering risks, in accordance with the Financial Action Task Force (FATF) recommendations?

Yes

No

If yes:

36.a. Please describe what mechanisms your country uses.

¹⁰ **Financial intelligence unit:** Please refer to the Financial Action Task Force (FATF) recommendation 29: "Financial Intelligence Units." Available at:

http://www.fatf-gafi.org/media/fatf/documents/recommendations/pdfs/FATF_Recommendations.pdf.

CONTROL MEASURES

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CONTEXT OBSERVATIONS FOR OBJECTIVE 6:

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AGENCY AND OFFICIAL PROVIDING INFORMATION:

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CONTROL MEASURES

OBJECTIVE 7

ESTABLISH AND/OR STRENGTHEN AGENCIES FOR THE ADMINISTRATION AND DISPOSITION OF SEIZED AND/OR FORFEITED ASSETS IN CASES OF DRUG TRAFFICKING, MONEY LAUNDERING AND OTHER RELATED CRIMES.

37. Does your country have legislation, regulations and/or procedures as well as other specific measures, in accordance with international conventions and treaties, to facilitate the seizure and forfeiture of assets, instruments, or products deriving from drug trafficking and other related crimes?

Yes

No

If yes:

37.a. Please attach the corresponding document or web link.

38. Does your country have a competent authority responsible for the administration of seized and forfeited assets?

Yes

No

If yes:

38.a. Please attach the corresponding law, decree or regulation on the creation of the competent authority or web link.

39. Does your country have regulations to facilitate the accountability and transparency of the administration of seized and forfeited assets?

Yes

No

If yes:

39.a. Please attach the corresponding regulations or web link.

CONTROL MEASURES

40. Does your country offer or participate in specialized training programs¹¹ for the administration and disposition of seized and forfeited assets?

Yes

No

If yes:

40.a. Please indicate the name and type of training offered and received (workshops, seminars, degree courses, among others).

	Name and type of training offered	Name and type of training received
National agencies		
International organizations		

CONTEXT OBSERVATIONS FOR OBJECTIVE 7:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

¹¹ Specialized training programs may include workshops, seminars, degree courses, or refresher training in techniques and methodologies for the administration and disposition of seized and forfeited assets.

CONTROL MEASURES

OBJECTIVE

8

STRENGTHEN NATIONAL INFORMATION GATHERING SYSTEMS AND MECHANISMS FOR EXCHANGING INTELLIGENCE INFORMATION TO DETECT ROUTES AND METHODS USED BY CRIMINAL DRUG TRAFFICKING ORGANIZATIONS.

41. Does your country have ongoing training programs for personnel responsible for detecting trafficking routes and methods used by drug trafficking criminal organizations?

Yes

No

42. Does your country have tools that promote and strengthen cooperation and the exchange of information among domestic law enforcement agencies responsible for drug trafficking control and related crimes?

Yes

No

43. Does your country have national information gathering mechanisms to exchange of intelligence information to detect routes and methods used by drug trafficking criminal organizations?

Yes

No

If yes:

43.a. Please specify the characteristics of these national information gathering mechanisms.

44. Does your country have a national information system on drug trafficking and related crimes, including alerts on changing behaviors and modus operandi of criminal organizations?

Yes

No

CONTROL MEASURES

If yes:

44.a. Please indicate which agencies provide the information.

CONTEXT OBSERVATIONS FOR OBJECTIVE 8:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

INTERNATIONAL COOPERATION

INTERNATIONAL COOPERATION

OBJECTIVE

1

PROMOTE AND STRENGTHEN COOPERATION AND COORDINATION MECHANISMS TO FOSTER TECHNICAL ASSISTANCE, IMPROVE EXCHANGE OF INFORMATION AND EXPERIENCES, AND SHARE BEST PRACTICES AND LESSONS LEARNED ON DRUG POLICIES AND RELATED CRIMES.

1. Does the country carry out activities for the promotion and strengthening of technical assistance and horizontal cooperation among OAS member states, third States and with relevant international organizations?

Yes

No

If yes:

- 1.a. Please provide details on the activities carried out.

2. Has your country exchanged technologies with foreign counterparts on the systematization of regulation, studies, research, and bibliographic material produced by countries and international organizations?

Yes

No

If yes:

- 2.a. Please provide details on the type of technology exchanges carried out.

3. Has your country established secure communication channels for the exchange of intelligence information on drug interdiction and control?

Yes

No

If yes:

- 3.a. Please describe the type of existing communication channels.

INTERNATIONAL COOPERATION

4. Does your country promote the exchange with foreign counterparts of best practices on training, specialization and professional development of the staff responsible for implementing the national drug plan and/or strategy?

Yes No

If yes:

- 4.a. Please describe the exchange activities carried out.

5. Does your country participate in regional coordination activities¹ to prevent crimes related to drug trafficking, such as, firearms trafficking, extortion, kidnapping, money laundering, corruption, among others?

Yes No

If yes:

- 5.a. Please specify the activities in which you country participated.

6. Are there bilateral mechanisms in your country for coordination and collaboration with other countries, focused on the dismantling of criminal groups linked to drug trafficking and related crimes?

Yes No

If yes:

- 6.a. Please indicate with which countries have these mechanisms been established.

¹ Through existing information exchange inter-governmental networks, such as United Nations, Interpol and other organizations and through diplomatic channels, among others.

INTERNATIONAL COOPERATION

6.b. Please indicate how frequently meetings are carried out under these mechanisms.

CONTEXT OBSERVATIONS FOR OBJECTIVE 1:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

INTERNATIONAL COOPERATION

OBJECTIVE

2

STRENGTHEN THE MULTILATERAL COOPERATION AND COORDINATION MECHANISMS IN THE AREA OF FORFEITURE AND MANAGEMENT OF ASSETS DERIVED FROM DRUG TRAFFICKING AND RELATED CRIMES.

7. Has your country reviewed and updated, as appropriate, the regulatory and procedural frameworks allowing for effective cooperation mechanisms with other countries and relevant international organizations on forfeiture and management of assets derived from drug trafficking, money laundering and other related crimes?

Yes

No

If yes:

- 7.a. Please attach the corresponding regulatory and procedural frameworks or web link.

8. Has the Financial Action Task Force (FATF) or a FATF body, such as the Caribbean Financial Action Task Force (CFATF) or the Financial Action Task Force of Latin America (GAFILAT) evaluated your country?

Yes

No

If yes:

- 8.a. Please indicate the year of your latest evaluation.

9. Does your country have mechanisms and procedures enabling the competent authorities to undertake expeditious actions in response to mutual legal assistance requests on investigation and forfeiture of assets derived from drug trafficking and related crimes?

Yes

No

INTERNATIONAL COOPERATION

If yes:

9.a. Please briefly describe said procedures and attach corresponding documents or web links.

10. Do your country's competent authorities have legal powers to exchange information on money laundering investigations, including identification and tracing of the instruments associated with this offense, through information exchange networks, such as, Interpol, Regional Asset Recovery Network (RRAG) of GAFILAT, among other similar ones?

Yes

No

In either case:

10.a. Please detail.

CONTEXT OBSERVATIONS FOR OBJECTIVE 2:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

INTERNATIONAL COOPERATION

OBJECTIVE 3

SUPPORT THE MULTILATERAL EVALUATION MECHANISM (MEM) PROCESS, NOTING THE LEVEL OF PROGRESS AND COMPLIANCE OF THE COMMITMENTS UNDERTAKEN BY MEMBER STATES.

11. Does your country systematically gather current and quality² information to follow-up on the implementation of MEM recommendations?

Yes

No

If yes:

11.a. Please describe the challenges encountered by your country to systematically gather the information requested.

12. Has your country designated appropriate authority(ies) and representative(s) to carry out MEM related activities?

Yes

No

13. Does the country disseminate the MEM reports to the general public and especially to the competent authorities for the adoption of the necessary corrective and proactive measures?

Yes

No

If yes:

13.a. Please indicate which means are used to disseminate the MEM reports.

² Clear, accurate and concise information.

INTERNATIONAL COOPERATION

14. Does your country share information on hemispheric cooperation initiatives³ on addressing the world drug problem, to support the implementation of the MEM process recommendations?

Yes

No

If yes:

14.a. Please detail how information is shared and with whom.

CONTEXT OBSERVATIONS FOR OBJECTIVE 3:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

³ For example: Studies, questionnaires, surveys, discussions, among others.

INTERNATIONAL COOPERATION

OBJECTIVE

4

STRENGTHEN INTERNATIONAL COOPERATION AS DEFINED IN THE INTERNATIONAL LEGAL INSTRUMENTS RELATED TO THE WORLD DRUG PROBLEM, WITH RESPECT FOR HUMAN RIGHTS.

15. Has your country enacted and/or adopted during the evaluation period (2014-2018) legislation and/or administrative measures and actions, as appropriate, to improve implementation of obligations set forth within international legal instruments⁴ regarding the world drug problem, respecting human rights and gender equality?

Yes

No

If yes:

15.a. Please specify the names of the legislation/administrative measures and actions and attach the corresponding documents or web links.

⁴ United Nations Single Convention on Narcotic Drugs (1961), amended by the 1972 Protocol, the United Nations Convention on Psychotropic Substances (1971), the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), the United Nations Convention against Transnational Organized Crime (2000) and its three Protocols: against the Smuggling of Migrants by Land, Sea and Air; to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children and against the Illicit Manufacturing and Trafficking in Firearms, their Parts and Components and Ammunition; the United Nations Convention against Corruption (2003); the Inter-American Convention on Mutual Assistance in Criminal Matters (1992), the Inter-American Convention against Corruption (1996), and the Inter-American Convention against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives, and other Related Materials (CIFTA) (1997); UNGASS 2016 Outcome Document: *Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem*, CICAD 2010 Hemispheric Drug Strategy and its Plan of Action, 2016-2020; 2009 United Nations Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem; United Nations 2030 Agenda for Sustainable Development; Organization of American States (OAS) 2013 Declaration of Antigua, Guatemala: *For a Comprehensive Policy against the World Drug Problem in the Americas*; and 2014 OAS General Assembly Resolution: *Reflections and Guidelines to Formulate and Follow-up on Comprehensive Policies to Address the World Drug Problem in the Americas*.

INTERNATIONAL COOPERATION

16. Has your country ratified or acceded⁵ to the following international legal instruments?

Conventions and Protocols			Yes	No
United Nations Conventions	Convention against Transnational Organized Crime, 2000	Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children		
		Protocol against the Smuggling of Migrants by Land, Sea and Air		
		Protocol against the Illicit Manufacturing and Trafficking in Firearms, their Parts and Components and Ammunition		
	Single Convention on Narcotic Drugs, 1961			
	Convention on Psychotropic Substances, 1971			
	Convention against Corruption, 2003			
	Inter-American Conventions	Convention against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives, and other Related Materials (CIFTA), 1997		
Convention against Corruption, 1996				
Convention on Mutual Assistance in Criminal Matters, 1992				

CONTEXT OBSERVATIONS FOR OBJECTIVE 4:

AGENCY AND OFFICIAL PROVIDING INFORMATION:

⁵ **Accession:** Act whereby a state accepts the offer or the opportunity to become a party to a treaty already negotiated and signed by other states. It has the same legal effect as ratification. Accession usually occurs after the treaty has entered into force. United Nations Treaty Collection. Web link: https://treaties.un.org/Pages/Overview.aspx?path=overview/glossary/page1_en.xml.

INTERNATIONAL COOPERATION

OBJECTIVE

5

PROMOTE COMMON UNDERSTANDING OF NATIONAL LEGAL NORMS, REGULATIONS, AND INTERNAL PROCEDURES FOR THE IMPLEMENTATION OF HEMISPHERIC JUDICIAL COOPERATION MECHANISMS AND MUTUAL LEGAL OR JUDICIAL ASSISTANCE RELATED TO DRUG TRAFFICKING AND RELATED CRIMES.

17. Has your country established bilateral and/or regional international cooperation agreements for mutual legal or judicial assistance on the control of drug trafficking and related crimes?

Yes

No

If yes:

17.a. Please indicate the bilateral and/or regional international cooperation agreements and attach the corresponding documents or web links.

18. Does your country have laws or other legal provisions to provide mutual legal or judicial assistance to third party States in investigations, trials, and legal proceedings for drug trafficking and related crimes?

Yes

No

If yes:

18.a. Please indicate and specify the corresponding laws or legal provisions and articles and attach the corresponding documents or web links.

19. Does your country have laws or other legal provisions that permit extradition for drug trafficking and related crimes?

Yes

No

INTERNATIONAL COOPERATION

If yes:

19.a. Please indicate and specify the law or legal provision and corresponding articles or regulations and provide web link.

19.b. Please indicate with which countries there are signed extradition agreements on drug trafficking and related crimes.

19.c. Are there laws or other legal provisions that permit extradition of nationals for drug trafficking and related crimes?

Yes No

If no:

19.c.1. Please briefly describe the measures taken to carry out criminal proceedings.

CONTEXT OBSERVATIONS FOR OBJECTIVE 5:

AGENCY AND OFFICIAL PROVIDING INFORMATION:



OAS | CICAD



**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION**

CICAD

**SIXTY-SECOND REGULAR SESSION
December 13 - 15 , 2017
Washington, D.C.**

**OEA/Ser.L/XIV.2.62
CICAD/doc.2328/17
8 November 2017
Original: English**

**PROPOSED INTRODUCTORY DOCUMENT OUTLINE FOR THE EVALUATION INSTRUMENT OF
THE SEVENTH ROUND OF THE MULTILATERAL EVALUATION MECHANISM (MEM)**

MULTILATERAL EVALUATION MECHANISM (MEM) – SEVENTH ROUND
2016-2018

Draft Introductory Document Outline

The introductory document to the Seventh Evaluation Round Questionnaire is essential in the evaluation process. Therefore, it is necessary that the MEM National Coordinating Entity (NCE) of each member state draft and submit the document along with the responses to the Evaluation Questionnaire within set deadlines.

This is an important document so that evaluators can better understand the context and characteristics under which the drug phenomenon develops at the national level. Hence, the Governmental Expert Group (GEG) will have additional information to take into account during their evaluations on the reality of the drug problem in each country and the strategy implemented to address it.

To ensure that the GEG has the most relevant information, suggest that the introductory document be no more than three pages and take into account the following outline:

I. Introduction

The introductory document should include the following elements:

1. General overview of the geographic, economic and social reality of the country and the political - administrative system;
2. Brief history of the drug phenomenon in the country; and
3. Emerging challenges in addressing the problem.

II. National Drug Strategy: General Description¹:

Suggest including the following aspects:

1. Description of the national drug plan and/or strategy objectives; and
2. General description on including the gender and human rights perspectives in drug public policies in the country.

¹ Also, a list of web pages can be attached to include additional information on the drug plan or strategy of the country.

III. Conclusion

The conclusion should include the following:

1. A general outlook on the country's implementation of its national drug plan and/or strategy²;
2. Specific areas of the drug plan and/or strategy that were prioritized during the 2014 – 2018 period; and
3. Additional information that the country deems relevant to bear in mind and that is not in the responses to the MEM Questionnaire.

(Nov 8, 2017)

² If your country has carried out a results evaluation on the national drug plan and/or strategy, please attach the corresponding document or web link.



OAS | **CICAD**



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**PROPOSED EVALUATOR'S MANUAL FOR THE
SEVENTH ROUND OF THE MULTILATERAL EVALUATION MECHANISM (MEM)**



OAS | CICAD



MULTILATERAL EVALUATION MECHANISM (MEM)

INTER-GOVERNMENTAL WORKING GROUP (IWG)

DRAFT EVALUATOR'S MANUAL

(November 8, 2017)

INTRODUCTION

This manual, approved by the Inter-American Drug Control Commission of the Organization of American States (OAS/CICAD) during its Sixty-Second Regular Session, is a guide to support the work of the Governmental Expert Group (GEG) that carries out the Seventh Round of the Multilateral Evaluation Mechanism (MEM).

This group's task is to assess the progress made by countries in the implementation of the guidelines issued in the Hemispheric Plan of Action on Drugs 2016-2020, benchmarking the principles of the CICAD Hemispheric Drug Strategy, identifying the objectives to meet and priority actions to achieve them.

Purpose and characteristics

Accordingly, the purpose of this manual is to assist experts in assessing the fulfillment level of each member state in implementing the objectives of the Plan of Action, 2016-2020, of the Hemispheric Drug Strategy.

This manual is a component of the evaluation process in addition to the Evaluation Questionnaire. The Questionnaire is the key instrument of the process, serving as the means to collect information and data that enable the experts in assessing the situation in each country. While taking into account their national reality, domestic legislation and the stage of development of the public policies that are carried out.

The Evaluation Manual, similarly to the Evaluation Questionnaire, mirrors the structure of the five areas outlined in the Plan of Action. Thus, the Manual includes the objectives for each area with its corresponding priority actions. For each priority action, interpretative notes were drafted with the main purpose of assisting experts in the drafting of an assessment on the level of achievement of each objective. The main purpose of drafting the interpretive notes for said actions was a way of assisting experts in assessing the fulfillment level of each objective.

Note that some priority actions were omitted, done selectively and without disregarding the essence of the objectives, also taking into account that the omitted actions are covered in other objectives or were omitted due to difficulties in evaluating those actions during the evaluation period 2014-2018.

Evaluation process documents

During the seventh evaluation round, along with the Evaluator's Manual, the following components are part of the process:

- a) Evaluation Questionnaire: This component is the key instrument of the evaluation process. It contains the questions that the countries must respond, providing the necessary information allowing the GEG to analyze the reality of the country in each of the areas that make up the

Hemispheric Drug Strategy and its Plan of Action 2016-2020. The evaluation period will cover the years 2014 to 2018.

- b) Procedural Manual: This Manual contains a description on the operational process of the Multilateral Evaluation Mechanism (MEM), the actors involved in the evaluation process and their respective roles, as well as the general aspects for the GEG's preparation of the reports.
- c) Calendar of Activities: This component outlines the activities for the evaluation process for the MEM Seventh Evaluation Round, including deadlines such as, information submitted by member states, GEG meetings, training activities and official publications.

The evaluation process

The assessment of the drug problem in each country is mainly based on analyzing the responses to the Evaluation Questionnaire by each country. Thus, the first stage of the process is drafting the narrative reports, prepared by the MEM Unit, seeking to organize and systematize the information sent by each country.

Based on this information, the MEM Expert Group should analyze and assess the situation in each country, while considering the interpretative notes of each priority action in this Manual, as well as the information included in the national reports from previous rounds of this Mechanism, as well as other relevant information sources.

The evaluator drafts the corresponding national reports for this round with the information that substantiates marked progress, setbacks and shortcomings in order to provide an objective panorama of the current situation in addressing the drug problem in each country. The evaluation process should access the different development stages of the drug phenomenon present in each country, in addition to the material, financial and human capabilities available to confront it.

After six evaluation rounds, the levels of development of drug strategies in the countries is widely diverse. Also, the manifestations of the phenomenon vary in each country. In some countries there is a higher incidence of demand reduction issues while in others it is more pressing to address the supply reduction shortcomings. Therefore, the evaluation should reflect such intricacies and included in a constructive assessment for countries and used to form national policy.

The evaluation must be comprehensive in the same way that the phenomenon is addressed. The objectives and its priority actions are a whole in its entirety and therefore the evaluation must show links between the responses to the different topics in the Questionnaire. Likewise, not all priority actions can be fulfilled simultaneously. For example, some actions are related to others and their fulfillment depends on the completion of previous steps. Such type of assessments will lead to conclusions that better depict the situation in each country.

National reports should highlight strengths and weaknesses, as well as progress and setbacks of drug plans and/or strategies in each member state in the Hemisphere. Therefore, it is highly important that such reports include assessments at the end of each strategic area, highlighting the necessary reinforcements and strengthening needed to address the drug problem in each country.

While considering the aforementioned, note that the Plan of Action 2016-2020 corresponds to the second period of the current Hemispheric Drug Strategy, and that a new strategy will have to be developed for the next decade.

Characteristics of the national reports

The main characteristics that should form part of each national report are:

- Be evaluative and objective.
- Be relevant to the country and, specifically, to the drug problem in each country.
- Be concise, including the information necessary to fulfill the two previous characteristics.
- Be readable and understandable without consulting other reference documents.
- Contain comparative analysis between the current situation and previous evaluations.
- Be realistic. This is a key criterion to meet the objectives with which the MEM was created.
- Be specific and technical, using clear language, and accurately reflecting information and data.

INSTITUTIONAL STRENGTHENING

INSTITUTIONAL STRENGTHENING

OBJECTIVE

1

ESTABLISH AND/OR STRENGTHEN NATIONAL DRUG AUTHORITIES, PLACING THEM AT A HIGH POLITICAL LEVEL AND PROVIDING THEM WITH THE NECESSARY CAPABILITIES AND COMPETENCIES TO COORDINATE NATIONAL DRUG POLICIES IN THE STAGES OF FORMULATION, IMPLEMENTATION, MONITORING, AND EVALUATION.

Priority Action 1.1: Place national drug authorities at a high political level. (Questions 1, 2)

Interpretive Note:

The country has a national drug authority¹ placed at a high political level, with the necessary legal/political authority to coordinate drug policies² among relevant agencies.

Priority Action 1.2: Provision of the national drug authorities with the capabilities to guide the formulation, implementation, monitoring and evaluation of the national drug policies and inter-agency coordination in this area. (Question 4)

Interpretive Note:

The legal basis that upholds the country's national drug authority includes the necessary capabilities to steer the development, implementation, monitoring and evaluation of national drug policies. Said capabilities should allow it to coordinate the work of the various agencies responsible in the matter in order to carry out the aforementioned activities.

¹ The national drug authority(ies) is(are) the central or national governmental body(ies) responsible for the design, coordination and follow-up of the implementation or execution of the national anti-drug plan/strategy.

² Inter-American Drug Abuse Control Commission (CICAD) guidelines for developing drug policies, notes that national drug bodies be firmly placed, therefore should be, "strong bodies with a legal basis, political will and have decision-making authority. Likewise, should have the necessary budget to sufficiently operate, staff the necessary personnel and implement policy. These national bodies should be the governing body on drugs, drafting drug policy, coordinating work among the various drug-related offices, outlining guidelines, guidance and advising governmental and non-governmental entities on the drug problem and the corresponding drug law enforcement, implementing programs and projects at the national, state, municipal and local levels, while monitoring/following-up on the processes and evaluating results and the impact of programs, projects and initiatives." *How to Develop a National Drug Policy: A Guide for Policymakers, Practitioners and Stakeholders*, (CICAD, 2012)

INSTITUTIONAL STRENGTHENING

Priority Action 1.3: Provision of the necessary resources (material, financial and human) for the effective functioning of the national drug authorities. (Question 3)

Interpretive Note:

The national drug authority of your country, in order to effectively operate, has a budget³ allowing it to finance the necessary human and material resources to implement national drug policies.

Priority Action 1.4: Design or optimize coordination and collaboration mechanisms among government institutions for the formulation, implementation, monitoring, evaluation and updating of evidence-based national drug policies and/or strategies. (Question 5)

Interpretive Note:

The country has an ongoing coordination and collaboration mechanism among government agencies, headed by the national drug authority, for the formulation, implementation, monitoring, evaluation and updating of the evidence-based national drug plan and/or strategy.

³ An annual budget for the national authority is one that facilitates the administration of its structure, functions, and obligations, as well as any operational activities that might be included in its mandate. This budget is not necessarily meant to cover the cost of specialized agencies in the areas of demand reduction, supply reduction, alternative development, and control measures, among others.

INSTITUTIONAL STRENGTHENING

OBJECTIVE

2

FORMULATE, IMPLEMENT, EVALUATE AND UPDATE NATIONAL DRUG POLICIES AND/OR STRATEGIES THAT WILL BE COMPREHENSIVE AND BALANCED, BASED ON EVIDENCE THAT INCLUDE A CROSS-CUTTING HUMAN RIGHTS PERSPECTIVE, CONSISTENT WITH OBLIGATIONS OF PARTIES UNDER INTERNATIONAL LAW⁴ WITH A FOCUS ON GENDER AND EMPHASIZING DEVELOPMENT WITH SOCIAL INCLUSION.

Priority Action 2.1: Collection and use of evidence as a basis for the formulation and updating of national drug policies and/or strategies. (Questions 6, 7)

Interpretive Note:

The country has mechanisms that allow the compiling and use of evidence as the basis for the developing and updating of the national drug plan and/or strategy. Said plan or strategy should include all the components of the comprehensive drug policy and approved at a governmental level.

Priority Action 2.2: Promotion and establishment, as appropriate, of collaborative relations with the scientific community, public policy experts, community and/or civil society actors that contribute to the development, implementation, evaluation and updating of national drug policies based on evidence. (Question 8)

Interpretive Note:

The country has agencies and/or mechanisms that foster collaborative relations among public institutions and non-governmental actors. Through this coordination, the academic sector, scientific, civil society, international organizations and other pertinent actors have an active role in the process of developing, implementing, evaluating and updating the drug plan and/or strategy.

Priority Action 2.3: Promotion of territorial/local management of drug policies and/or strategies through greater coordination and/or delegation of responsibilities, as appropriate, between sub-national and national agencies, where appropriate. (Questions 9, 10, 11, 12)

Interpretive Note:

The country develops actions geared to local strengthening and training in drug matters, delegating responsibilities and allow for coordination between national and sub-national agencies.

⁴ Full respect for international law and the Universal Declaration of Human Rights, observing the principles of sovereignty and the territorial integrity of States, nonintervention in the internal affairs of States, fundamental liberties, inherent human dignity, and equal rights and mutual respect among States.

INSTITUTIONAL STRENGTHENING

Priority Action 2.4: Formulation and/or the updating of national drug policies and/or strategies, taking into account the objectives of the 2030 Agenda for Sustainable Development. (Question 13)

Interpretive Note:

The country has a national drug authority that identifies the goals of the United Nations 2030 Agenda for Sustainable Development⁵ related to the world drug problem and includes them in the national drug plan and/or strategy.

Priority Action 2.5 Integration of a human rights perspective, a gender approach and development with social inclusion in the process of formulation, implementation and updating the national drug policies and/or strategies. (Questions 14, 15, 16)

Interpretive Note:

The country includes the human rights perspective⁶, gender approach⁷ and development with social inclusion in the process of developing, implementing and updating the national drug plan and/or strategy.⁸

⁵ Available at: <http://www.un.org/sustainabledevelopment/sustainable-development-goals/>

⁶ The Declaration of Antigua Guatemala, *For a Comprehensive Policy Against the World Drug Problem in the Americas* (June 2013), declares that “drug policies must have a crosscutting human rights perspective consistent with the obligations of parties under international law, including the American Convention on Human Rights and other applicable human rights instruments, as well as the American Declaration of the Rights and Duties of Man, in order to promote and achieve, inter alia, the well-being of individuals, their social inclusion, access to justice and health.”

⁷ The gender perspective entails recognizing that drug policies have a differential impact on women and men and if these differences are not specifically addressed they tend to amplify and deepen the existing inequalities in human development, product of an androcentric and patriarchal society. Inclusion of a gender perspective entails the actions undertaken within the drug policies framework contributing to closing the gender gap.

The UNGASS 2016 Resolution notes “Mainstream a gender perspective into and ensure the involvement of women in all stages of the development, implementation, monitoring and evaluation of drug policies and programmes, develop and disseminate gender-sensitive and age-appropriate measures that take into account the specific needs and circumstances faced by women and girls with regard to the world drug problem and, as States parties, implement the Convention on the Elimination of All Forms of Discrimination against Women.”

United Nations, Outcome Document of the thirtieth special session of the General Assembly, *Our Joint Commitment to Effectively Addressing and Countering the World Drug Problem* (New York, 2016).

⁸ Take into account UNGASS operational recommendations 2016 (Resolution A/S-30/L.1). “Operational recommendations on intersectoral matters: drugs and human rights, youth, children and women and communities. The drugs and human rights, youth, women, children, the vulnerable members of communities and society. Proportional policies and responses and efficient, such as legal guarantees and safeguarding that relate to the criminal proceeding and the justice sector.”

INSTITUTIONAL STRENGTHENING

OBJECTIVE

3

DESIGN AND COORDINATE NATIONAL DRUG POLICIES AND/OR STRATEGIES WITH OTHER PUBLIC POLICIES AND/OR STRATEGIES THAT ADDRESS FUNDAMENTAL CAUSES AND CONSEQUENCES OF THE DRUG PROBLEM.

Priority Action 3.1: Establishment of policy and technical coordination mechanisms, at the interagency and multisectoral levels, for a comprehensive, balanced, and multidisciplinary approach to the drug problem including all its causes and consequences. (Question 17)

Interpretive Note:

The country implements the necessary institutional structure to enable the establishment of permanent/periodic forums for multidisciplinary interinstitutional coordination among agencies responsible for the national drug plan/strategy with agencies responsible for other public policies and/or strategies. These areas have a designated entity responsible for channeling and coordinating the joint work among agencies.

Priority Action 3.2: Design, implementation and evaluation of multisectoral plans and programs aimed at preventing and countering the socioeconomic causes and consequences of the drug problem, from a human rights, public health and development perspective. (Question 18)

Interpretive Note:

From a human rights, public health, gender and development perspective, the country develops, implements and evaluates its plans and programs aimed at the drug problem⁹, on prevention as well as to address the socioeconomic causes and consequences of the drug problem.

⁹ Recognition that the complexity, dynamics and multi-causal nature of the world drug problem requires a comprehensive, balanced and multidisciplinary approach. Addressing this complexity requires a complementary approach among different public policies and establishing coordination mechanisms through the legal, health, education, law enforcement, social services and development programs, among others.

The Resolution approved on April 19, 2016 by the United Nations General Assembly notes, "We reaffirm the need to address the key causes and consequences of the world drug problem, including those in the health, social, human rights, economic, justice, public security and law enforcement fields, in line with the principle of common and shared responsibility, and recognize the value of comprehensive and balanced policy interventions, including those in the field of promotion of sustainable and viable livelihoods."

United Nations, Outcome Document of the thirtieth special session of the General Assembly, *Our joint commitment to effectively addressing and countering the world drug problem* (New York, 2016).

INSTITUTIONAL STRENGTHENING

Priority Action 3.3: Promotion of the cross-cutting measures that further comprehensive public policies in order to prevent crime, violence, victimization, social exclusion and corruption. (Question 19)

Interpretive Note:

The country facilitates periodic discussion forums among agencies that implement social policies for the integration of cross-cutting areas to prevent crime, violence, victimization, social exclusion and corruption, in the public policies.

Note: Priority actions 3.4 and 3.5 were omitted because they are covered in other objectives or due to difficulties in evaluating during the 2014-2018 period.

INSTITUTIONAL STRENGTHENING

OBJECTIVE

4

ESTABLISH AND/OR STRENGTHEN NATIONAL OBSERVATORIES ON DRUGS (OR SIMILAR TECHNICAL OFFICES) FOR THE DEVELOPMENT OF NATIONAL DRUG INFORMATION SYSTEMS AND FOSTERING SCIENTIFIC RESEARCH IN THIS AREA.

Priority Action 4.1: Provision of the national observatory on drugs (or similar technical office) with training, and financial, human and technological resources. (Questions 20, 21)

Interpretive Note:

The country has a national observatory on drugs or similar technical office with trained staff, technological resources and the budget necessary to carry out its functions.

Priority Action 4.2: Development, as appropriate, of national drug information systems in the areas of demand and supply reduction, as well as, related crimes. (Question 22)

Interpretive Note:

The country has an organized set of key elements (a national observatory on drugs and a national information network) that allow interactions between stakeholders in order to access, gather, store and transform data into relevant information in order to obtain an exhaustive overview of the drug situation in the country.¹⁰

¹⁰ According to the Manual for the Implementation of a National Observatory on Drugs that was drafted jointly by the European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) and Inter-American Drug Abuse Control Commission/Organization of American States (CICAD/OAS):

National Drug Observatory: organization whose purpose is to provide its country with factual, objective, reliable and comparable information on drugs, drug addiction and its consequences.

National Drug Information Network: integrates general and specialized sources of advanced information and know-how, as well as systematic monitoring programs and ad hoc studies on target groups.

National Information System on Drugs: organized set of elements that allow the interaction of stakeholders with the purpose of accessing, collecting, storing and transforming data into relevant information to obtain a comprehensive overview of the drug situation in the country, and consists of two fundamental components: a national data collection network and a national drug observatory.

INSTITUTIONAL STRENGTHENING

Priority Action 4.3: Development of national and/or regional drug studies and research on the drug problem on general, specific and hidden populations by the observatory and/or other similar technical agencies, encouraging disaggregation by gender and age, among others. (Questions 23, 24, 25)

Interpretive Note:

The country carries out national studies and investigations on the drug problem in selected populations, using scientific methods, with current, reliable and comparable data related to the drug problem on the basis of various indicators, taking into account gender and age, among other aspects. Among the priority demand reduction studies included: survey of secondary school students, national household survey and patient register of treatment centers. In the area of supply reduction and control measures, the following is the priority information available: drug supply indicators; number of drugs; number of drugs seized; number of persons charged and convicted for drug use, possession and trafficking; number of dismantled laboratories.

Priority Action 4.4: Strengthening the monitoring and evaluation of drug programs and/or interventions, through results and impact indicators, and tools for evidence-based analysis, in the areas of drug demand and supply reduction. (Question 26)

Interpretive Note:

The country has mechanisms to evaluate programs and/or interventions on drugs, both in the demand reduction and supply reduction areas. These mechanisms include a system of basic indicators (priority) and conducting evaluation studies or other scientific analysis tools that support planning, allowing for the evaluation of intervention results and impacts, and provide empirical evidence.

Note: Priority action 4.5 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

INSTITUTIONAL STRENGTHENING

OBJECTIVE

5

ENCOURAGE THE DESIGN, ADOPTION AND IMPLEMENTATION OF ALTERNATIVES TO INCARCERATION FOR LOW-LEVEL DRUG-RELATED OFFENSES, WHILE TAKING INTO ACCOUNT NATIONAL, CONSTITUTIONAL, LEGAL AND ADMINISTRATIVE SYSTEMS AND IN ACCORDANCE WITH RELEVANT INTERNATIONAL INSTRUMENTS.

Priority Action 5.1: Assess the feasibility of implementing alternative measures for low-level Drug related offenses to incarceration, where appropriate, safeguarding the sovereignty of States, preventing impunity and respecting human rights. (Question 27)

Interpretive Note:

The country has evaluated the feasibility of implementing alternative measures to incarceration¹¹ for low-level drug offenses¹² in accordance with the 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances, the Tokyo and Bangkok Rules¹³.

¹¹ The 2015 *CICAD Technical Report on Alternatives to Incarceration for Drug-related Offenses* defines alternatives to incarceration as:

“Any measure (whether legal reforms, strategies, programs or policies) intended to: i) reduce criminal prosecution, ii) limit the use of incarceration as a punishment, or iii) decrease the time of actual deprivation of liberty in the event of incarceration, for individuals who have committed drug-related offenses.”

In this regard, the Report notes:

“Alternatives to incarceration can be grouped into three broad categories according to the stage in judicial proceedings at which they occur. Accordingly, this report refers to: a) Measures taken prior to the opening of a criminal proceeding, and aimed at limiting entry into the criminal justice system; b) Measures applied during criminal proceedings, and aimed at either preventing the criminal case from resulting in incarceration, or making the incarceration proportional to the offense; and c) Measures for prison populations, aimed at providing for early release of convicted and imprisoned individuals along with social integration strategies.”

In order to recognize, review and foster alternatives to incarceration the States can assess suitability of implementation, foster and/or amend legislation, changes to drug polices or implement specific programs.

¹² Low-level offenses are referred to crimes punishable with a maximum sentencing up to a year of incarceration/imprisonment, or crimes punishable with a minimum sentencing of less than six months of incarceration/imprisonment. Notwithstanding those established by the respective legal systems of member states.

¹³ **Tokyo Rules:** United Nations Standard Minimum Rules for Non-custodial Measures. General Assembly Resolution 45/110. 14 December 1990. Available at:

https://www.unodc.org/pdf/criminal_justice/UN_Standard_Minimum_Rules_for_Non-custodial_Measures_Tokyo_Rules.pdf

Bangkok Rules: United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders. General Assembly Resolution 65/229. 21 December 2010. Available at:

https://www.unodc.org/documents/justice-and-prison-reform/Bangkok_Rules_ENG_22032015.pdf

INSTITUTIONAL STRENGTHENING

Priority Action 5.2: Develop mechanisms for the monitoring and evaluation of the various alternative measures to incarceration for low-level drug-related offenses in collaboration, as appropriate, with academic and research institutions. (Question 27)

Interpretive Note:

The country has developed mechanisms for monitoring and evaluation of the impact of the implementation of alternative measures to incarceration for low-level drug offenses, taking into account gender differences, in collaboration with academic and research institutions.

INSTITUTIONAL STRENGTHENING

OBJECTIVE

6

PROMOTE AND IMPLEMENT, AS APPROPRIATE, COMPREHENSIVE PROGRAMS THAT PROMOTE SOCIAL INCLUSION IN ACCORDANCE WITH THE POLICIES, LAWS AND NEEDS OF EACH COUNTRY, ESPECIALLY FOR THOSE VULNERABLE POPULATIONS, WITH DIFFERENT LEVELS AND FORMS OF INVOLVEMENT.

Priority Action 6.1: Design and implementation of, in accordance with the needs of each country, inter-agency and multisectoral programs that promote the social inclusion of individuals and populations affected by the drug problem, especially those in vulnerable situations. (Question 28)

Interpretive Note:

The country develops and implements interinstitutional and multisectoral programs that foster social inclusion¹⁴ of individuals affected by the drug problem, particularly those in vulnerable situations.¹⁵

¹⁴ Social integration in relation to the drug phenomenon means looking both at the processes used for individuals affected by drug abuse and at each of the contexts of intervention. By so doing, we attempt to achieve a consistent, complementary vision and approach to the various factors that determine or affect pathways for prevention, mitigation, and/or rehabilitation, influencing these factors in coordination with other institutions and helping individuals, families, and groups directly affected by the problem to achieve full inclusion with respect to their personal relationships and development and, in general, their life in society. Inter-American Drug Abuse Control Commission, Valdivia Declaration, *On Social Integration: Exclusion and Drug* (Valdivia, Chile, 2014). Available at:

http://www.cicad.oas.org/fortalecimiento_institucional/dtca/ai_dialog/documents/declaracionValdivia_ENG.pdf

¹⁵ The member states of the Organization of American States (OAS) adopted the *2010 Hemispheric Drug Strategy and its Plan of Action 2016-2020*, agreeing upon the fundamental principles that: "In addressing the world drug problem, its impact on poverty and exclusion must be given special emphasis while encouraging the implementation of policies and actions that foster social inclusion and a reduction in those vulnerabilities."

Given that CICAD adopted that the world drug problem as a complex, dynamic and multi-causal issue, it requires policies that foster inclusive social development. The social inclusion programs seek to strengthen social assets and resources of individuals and communities (access to material resources, employment, education, participation, social recognition, among others) in order to reduce vulnerability and/or vulnerability of rights. The concept of vulnerability refers to an impending, temporary and/or evolving condition that can stem from economic recessions, natural disasters, armed conflict and weakening democratic institutions and government, among others.

The Resolution approved on April 19, 2016 by the United Nations General Assembly approves the following measures, among others, aimed at improving the situation of affected and vulnerable populations:

"Continue to identify and address protective and risk factors, as well as the conditions that continue to make women and girls vulnerable to exploitation and participation in drug trafficking, including as couriers, with a view to preventing their involvement in drug-related crime." (UNGASS, 2016)

"Encourage the promotion of inclusive economic growth and support initiatives that contribute to poverty eradication and the sustainability of social and economic development, develop measures for rural development, improving infrastructure and social inclusion and protection, addressing the consequences of illicit crop cultivation and the manufacture and production of narcotic drugs and psychotropic substances on the environment, with the incorporation and participation of local communities, and consider taking voluntary measures to promote products

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Note: Priority action 6.2 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

stemming from alternative development, including preventive alternative development, as appropriate, to gain access to markets, consistent with applicable 24 multilateral trade rules and with national and international law, within the framework of comprehensive and balanced drug control strategies." (UNGASS,2016).

INSTITUTIONAL STRENGTHENING

OBJECTIVE

7

FOSTER PROPORTIONATE SENTENCING, WHERE APPROPRIATE, THAT ADDRESSES THE SERIOUSNESS OF DRUG OFFENSES AND SAFEGUARDING LEGAL PROCEEDINGS

Priority Action 7.1: Promotion, when appropriate, within the national drug policy framework, of the respect for the principle of proportionate sentencing for low-level drug-related offenses. (Questions 29, 30)

Interpretive Note:

The country adopts initiatives to foster, in the context of national drug policies, the implementation of a legal framework that includes proportionate sentencing¹⁶ for low-level drug-related offenses¹⁷.

¹⁶ Recognized by international law, the principle of proportionality requires a balance between the harm done and the punishment. Based on the concept that the States should safeguard the fundamental freedoms and rights, avoiding deprivation or excessive restriction, except for the protection of superior legal rights.

CICAD 2015 Technical Report on Alternatives to Incarceration for Drug-related Offenses, states that “The legal principle of proportionality in sentencing means that the punishment for a particular crime should reflect the degree of harm caused to society. This principle necessitates the creation of categories of offenses, of substances, and of offenders, and the assignment of a range of sentencing options applicable to each category. Some Member States are recognizing that their sentencing structures and policing practices do not sufficiently differentiate between such different types of offenses as use, minor supply, and major trafficking, and that reliance on incarceration for most offenses is problematic. Depriving an individual of liberty, especially for an extended period of time, imposes great costs on the individual, their families and communities, and society in general. By enhancing proportionality in criminal sentencing, Member States can ensure that these costs are only assumed when absolutely necessary. Resources saved by not incarcerating the large number of comparatively minor offenders, but imposing other punishments if appropriate, can in turn be re-invested in investigation and prosecution of the higher levels of organized crime, strengthening citizen security. Threshold levels can play a key role in the definition of categories of offenses and sanctions, as long as they are set at realistic levels. Levels may be defined with higher or lower degrees of precision (number of grams, or simply ‘small quantity’); whatever levels are chosen, the actors in the justice system should be flexible, addressing each case individually and remembering the intention behind the levels set.”

CICAD 2015 Technical Report on Alternatives to Incarceration for Drug-related Offenses, states that the proportional approach “incorporates consideration of the different harms to the individual or to society posed by the different substances, the amount of drugs linked to the offender and the behavior and role of the offender in the drug market, on a case by case basis. In particular, a more detailed consideration of the role and characteristics of the offender – such as gender, age, socio-economic status, national origin, lack of guidance as a youth, and physical and mental disabilities – can help authorities recognize and more effectively respond to certain such vulnerabilities, or aggravating circumstances (such as recidivist or violent behavior). The proportional approach should be taken into account at all stages of the judicial system. It may also recognize some criminal justice supervision during treatment or social reintegration programs that may result in the imposition of minor sanctions of short duration to encourage compliance.”

¹⁷ Low-level offenses are referred to crimes punishable with a maximum sentencing up to a year of incarceration/imprisonment, or crimes punishable with a minimum sentencing of less than six months of incarceration/imprisonment. Notwithstanding those established by the respective legal systems of member states.

INSTITUTIONAL STRENGTHENING

Note: Priority action 7.2 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

DEMAND REDUCTION

DEMAND REDUCTION

OBJECTIVE

1

ESTABLISH DEMAND REDUCTION POLICIES WITH A PUBLIC HEALTH FOCUS THAT ARE EVIDENCE-BASED, COMPREHENSIVE, MULTIDISCIPLINARY, MULTISECTORAL, AND RESPECTFUL OF HUMAN RIGHTS, CONSIDERING THE GUIDELINES AND/OR RECOMMENDATIONS OF SPECIALIZED INTERNATIONAL ORGANIZATIONS.

Priority Action 1.1: Establishment and/or update of programs in the areas of prevention, treatment, rehabilitation and social integration, taking into account gender, age and cultural relevance, as appropriate. (Questions 1, 2)

Interpretive Note:

The country establishes and/or updates evidence-based programs¹ in the areas of prevention, treatment² and social integration³ taking into account human rights, inter-cultural⁴, age difference⁵ and gender approaches.

Priority Action 1.2: Creation and/or strengthening of dissemination and access mechanisms for drug use related information and evidence and, on the prevention, treatment, rehabilitation and social integration services, for the general public and different target populations, with the participation of universities and research centers. (Question 3)

Interpretive Note:

The country creates or has mechanisms for dissemination and access to information⁶ and the evidence associated to drug abuse and on prevention, treatment, and social integration services for general and specific populations with the participation of universities and research centers.

¹ “A program should have the following minimum elements: objectives, activities, timeframe or work plan, identified and allocated resources, target or aimed population, setting location, space and implementation timetable.”

² High-quality treatment and tailored to the individual needs of each person that is either directly or indirectly affected by alcohol and other drug use, always using the inpatient modality as the last therapeutic recourse and when it is duly justified. It can be offered either by/or in coordination with community/neighborhood centers, primary care centers, detox centers and services, centers specialized in acute management and clinical stabilization, outpatient approach centers, halfway houses, low-threshold centers and inpatient facilities. Rehabilitation is a component of treatment.

³ Any social intervention with the aim of integrating former or current problem drug users into the community. The three ‘pillars’ of social reintegration are (1) housing, (2) education and (3) employment (including vocational training). May also be referred to as “social reintegration or social re-insertion.”

⁴ **Inter-cultural approach:** Including the cultural diversity and the needs related to it in designing health programs and services, while respecting, accompanying and valuing cultural differences in practice and from a viewpoint of community actors.

⁵ **Age difference approach:** refers to the needs during different life stages: childhood, adolescence, adulthood.

⁶ **Mechanisms for dissemination of and access to information:** Tools for the promotion and dissemination of prevention, treatment and social integration services. Examples of dissemination of and access to information mechanisms are: social networks, mass media publicity, brochures, toll-free phone lines, information published in governmental web portals, dissemination through publicity and communication campaigns.

DEMAND REDUCTION

Priority Action 1.3: Carry out processes and results-based evaluations of demand reduction programs. (Questions 4, 5, 6)

Interpretive Note:

The country carries out the monitoring and evaluation (process, intermediate outcome, impact),⁷ of demand reduction programs through different instruments⁸ respectful of the international standards.⁹ The monitoring includes continuous reports regarding the activities carried out, their products and results. The evaluation is carried out periodically to measure the progress made towards the goals and targets set for the demand reduction programs. The information generated is widely available to relevant actors, including those who design and implement programs.

Priority Action 1.4: Implementation, as appropriate, of coordination mechanisms with civil society and other social actors, academic and research institutions for the development and implementation of demand reduction programs. (Question 7)

Interpretive Note:

The country carries out coordination mechanisms for the development and implementation of demand reduction programs, which allow the participation of and engagement with civil society and other social stakeholders,¹⁰ academic and research institutions. These coordination mechanisms may be formal or informal provided that their use can be accredited on a regular basis.

⁷ **Process evaluation:** includes documenting each step of the design of a specific intervention, to determine its efficacy, efficiency and effectiveness. It seeks to determine whether the intervention efficiently meets its short term goals, has successfully reached the target population, and the materials used are appropriate.

Intermediate outcome evaluation: assesses the effectiveness of the program; that is, what the project is expected to change. The outcome may include changes in behavior, status, attitude or certification of the beneficiaries after receiving the program's goods or services. The importance of the intermediate outcome evaluation lies in the expectation that the results will drive the final outcome (impact) of the program or project.

Impact evaluation: This is an assessment of the final outcomes of key actions or inputs relative to what would have occurred in the absence of an intervention. These results indicate a change in the conditions of the target population directly attributable to these actions. In some instances it is difficult to carry out these measurements, due to the difficulty in isolating the effects of other external variables and/or because many of these effects are long term.

⁸ The instruments referred to are those of diagnostics, process, results and audits. The mode of collecting information could be quantitative and/or qualitative, for example: structured surveys, in-depth interviews, etc.

⁹ For example: For prevention: United Nations Office on Drugs and Crime (UNODC), *International Standards on Drug Use Prevention* (Sao Paulo, 2013). For treatment: United Nations Office on Drugs and Crime (UNODC)/World Health Organization (WHO), *International Standards for the Treatment of Drug Use Disorders* (Vienna, 2016).

¹⁰ **Other social stakeholders:** local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations).

DEMAND REDUCTION

Priority Action 1.5 Promotion, as appropriate, of national prevention, treatment, care, recovery, rehabilitation and social reintegration measures and programs, in the context of comprehensive and balanced drug demand reduction efforts, effective measures aimed at minimizing the adverse public health and social consequences of drug abuse. Promoting in that regard the use, as appropriate, of the technical guide for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users, issued by the World Health Organization, the United Nations Office on Drugs and Crime and the Joint United Nations Program on HIV/AIDS. (Question 8)

Interpretive Note:

The country promotes the implementation of effective measures which are evidence-based and respectful of human rights aimed at minimizing the adverse consequences of drug abuse for society and public health, promoting, as appropriate, a technical guide jointly published by the World Health Organization (WHO), the United Nations Office on Drugs and Crime (UNODC) and the Joint United Nations Program on HIV/AIDS (UNAIDS)¹¹ for countries to set targets for universal access to HIV prevention, treatment and care for injecting drug users.

¹¹ WHO, UNODC, UNAIDS, *Technical Guide for Countries to Set Targets for Universal Access to HIV Prevention, Treatment and Care for Injecting Drug Users* (2012 revision). Available at: http://www.who.int/hiv/pub/idu/targets_universal_access/en/.

DEMAND REDUCTION

OBJECTIVE 2

ESTABLISH AND/OR STRENGTHEN AN INTEGRATED SYSTEM OF UNIVERSAL, SELECTED AND INDICATED PREVENTION PROGRAMS ON DRUG USE, GIVING PRIORITY TO VULNERABLE AND AT-RISK POPULATIONS, EVIDENCE-BASED AND INCORPORATING A HUMAN RIGHTS, GENDER, AGE AND MULTICULTURAL APPROACH.

Priority Action 2.1: Development and implementation of evidence-based drug use prevention strategies and/or programs in the school, family, work, and community spheres. (Question 9)

Interpretive Note:

The country has drug abuse prevention (universal¹² and/or selective and/or indicated) strategies and/or programs targeting schools, families, work, communities and other specific population groups.

Note: Priority actions 2.2 and 2.3 were omitted because they are covered in other objectives or due to difficulties in evaluating during the 2014-2018 period.

Priority Action 2.4: Implementation of selective prevention programs aimed at boys and girls, adolescents and at-risk youth. (Question 9)

Interpretive Note:

The country implements evidence-based selective prevention programs¹³ aimed at children (boys and girls), adolescents and at-risk youth.

Priority Action 2.5: Development of indicated prevention programs aimed at individuals with problematic drug use. (Question 9)

Interpretive Note:

The country implements evidence-based indicated prevention programs¹⁴ aimed at individuals with problematic drug use.

¹² **Universal prevention:** Target the general population, such as all students in a school. This level of prevention strengthen values, attitudes, knowledge and abilities that allow the child or youth to lead a healthy and drug-free lifestyle. *CICAD Hemispheric Guidelines on School-Based Prevention* (Washington D.C., 2005).

¹³ **Selective prevention:** Target at-risk groups or subgroups of the general population, such as children of drug-users or poor school achievers. *CICAD Hemispheric Guidelines on School-Based Prevention* (Washington D.C., 2005).

¹⁴ **Indicated prevention:** Are designed for people who are already experimenting with drugs or who exhibit other risk-related behaviors. *CICAD Hemispheric Guidelines on School-Based Prevention* (Washington D.C., 2005).

DEMAND REDUCTION

OBJECTIVE

3

ESTABLISH AND STRENGTHEN, AS APPROPRIATE, A NATIONAL TREATMENT, REHABILITATION AND SOCIAL INCLUSION SYSTEM FOR PEOPLE WITH PROBLEMATIC DRUG USE, INCLUDING A HUMAN RIGHTS AND GENDER-BASED APPROACH, TAKING INTO ACCOUNT INTERNATIONALLY ACCEPTED QUALITY STANDARDS.

Priority Action 3.1: Implementation and strengthening of comprehensive care, treatment, rehabilitation, and social inclusion programs and services in the public health care network, and/or social protection, guaranteeing access-free of discrimination. (Question 10)

Interpretive Note:

The country has a comprehensive network of programs and comprehensive care treatment and social integration devices¹⁵ in the public health and/or social networks, ensuring non-discrimination, with a gender focus.

Priority Action 3.2: Monitor and evaluation of the results of the care, treatment, rehabilitation, social reintegration of programs and comprehensive facilities, taking into account, gender, age and cultural relevance, as appropriate. (Question 11, 12, 14)

Interpretive Note:

The country has mechanisms to continually monitor and evaluate the results of care, treatment and social integration programs, taking into account criteria of gender, culture and age group relevance, as appropriate.

Priority Action 3.3: Promotion of measures to protect the rights of the persons in treatment programs and services. (Question 13)

Interpretive Note:

The country has formally established mechanisms to ensure respect for the rights of people with problematic drug use who are receiving professional care, with a gender perspective.

Note: Priority action 3.4, 3.5 and 3.6 were omitted because they are covered in other objectives or due to difficulties in evaluating during the 2014-2018 period.

¹⁵ From a mental health perspective, the notion of devices refers to the idea of different assistance procedures. A device is one that is constructed in a cunning way and focuses actions to obtain measurable results, in order to reach a defined objective, in this case being the highest level of health and well-being, as possible.

DEMAND REDUCTION

OBJECTIVE

4

FOSTER ONGOING TRAINING AND CERTIFICATION OF HUMAN RESOURCES THAT PROVIDE PREVENTION, TREATMENT, REHABILITATION AND SOCIAL REINTEGRATION SERVICES.

Priority Action 4.1: Implementation of ongoing competency-based training mechanism, in collaboration with academic institutions and those specializing in the area. (Questions 16, 17, 18)

Interpretative Note:

The country offers ongoing competency-based training through recognized institutions/universities in the prevention, treatment and social integration areas.

Priority Action 4.2: Development of basic, intermediate and advance criteria for certification, by levels and human resources competencies, that provides prevention, treatment, rehabilitation and social reintegration. (Question 19)

Interpretative Note:

The country has developed criteria for the certification of personnel who provide prevention, treatment and social integration services. The country offers certification at the basic, intermediate and advance levels in these areas.

Priority Action 4.3: Conduct a situational diagnosis to identify the necessities for human resources training working in prevention, treatment, rehabilitation and social reintegration programs. (Question 15)

Interpretative Note:

The country conducts an assessment to determine the training needs of personnel working in the prevention, treatment and social integration programs.

DEMAND REDUCTION

OBJECTIVE 5

ESTABLISH AND/OR STRENGTHEN GOVERNMENTAL INSTITUTIONAL CAPACITIES TO REGULATE, ENABLE, ACCREDIT AND SUPERVISE PREVENTION PROGRAMS AND, CARE AND TREATMENT SERVICES.

Priority Action 5.1: Establishment and implementation of regulatory measures that include quality criteria for the accreditation of prevention programs and, care and treatment services. (Questions 20, 21)

Interpretive Note:

The country has and implements regulation measures for the accreditation of the prevention programs and, care and treatment services.

Priority Action 5.2: Establishment of supervisory mechanisms to ensure that the quality criteria of the prevention programs and, care and treatment services are met. (Question 22, 23)

Interpretive Note:

The country establishes supervisory mechanisms to ensure that the quality criteria of the prevention programs and, care and treatment services are met.

Priority Action 5.3: Development of assessments on national needs and, care and treatment services offered. (Question 24)

Interpretive Note:

The country conducts an assessment to determine the national needs regarding care and treatment services.

SUPPLY REDUCTION

SUPPLY REDUCTION

OBJECTIVE

1

DESIGN, IMPLEMENT AND STRENGTHEN COMPREHENSIVE AND BALANCED POLICIES AND PROGRAMS, AIMED AT PREVENTING AND DECREASING THE ILLICIT SUPPLY OF DRUGS, IN ACCORDANCE TO THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

Priority Action 1.1: Design, implementation, and update of, as appropriate, national policies and programs to prevent and decrease illicit cultivation and production of drugs. (Question 1)

Interpretive Note:

The country designs, implements and updates, as appropriate, the national policies and programs to prevent and decrease the illicit cultivation and production of drugs, in accordance with the legal provisions of each country.

Priority Action 1.2: Establishment of budgetary mechanisms to ensure the sufficient and predictable allocation of resources to illicit supply of drugs reduction programs. (Question 2)

Interpretive Note:

The country makes budgetary allocations to finance illicit supply of drugs reduction programs, while respecting human rights.

Priority Action 1.3: Promotion of illicit supply reduction measures that take due account of licit traditional uses, whenever there is historical evidence of such uses, as well as, environmental protection. (Question 3, 4)

Interpretive Note:

The country fosters measures to counter illicit supply of drugs respecting licit traditional uses, whenever there is historical evidence of such uses. These measures are made in coordination with the country's environmental policy.

Priority Action 1.4: Strengthening of interagency cooperation to provide a comprehensive response to the illicit production of drugs, in the framework of the responsibilities and mandates of each agency, including collaboration among the public and private sectors and the international community. (Question 5)

Interpretive Note:

The country has mechanisms for interinstitutional cooperation between the agencies responsible for dealing with illicit production of drugs including public and private sector collaboration and with the international community within the framework of shared responsibility in order to provide effective and comprehensive response to the illicit production of drugs.

SUPPLY REDUCTION

Priority Action 1.5: In cooperation with civil society, as appropriate, supplement supply reduction programs with crime prevention initiatives that address social and economic risk factors. (Question 6)

Interpretive Note:

The country carries out drug-related crime prevention initiatives to supplement its illicit supply reduction programs, in collaboration with civil society and other social actors¹ and with emphasis placed on social and economic risk factors.

Note: Priority action 1.6 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

¹ **Other social stakeholders:** local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations).

SUPPLY REDUCTION

OBJECTIVE 2

DEVELOP AND IMPLEMENT MECHANISMS TO COLLECT AND ANALYZE INFORMATION FOR THE DEVELOPMENT OF POLICIES AND ACTIONS AIMED AT DECREASING THE ILLICIT SUPPLY OF DRUGS.

Priority Action 2.1: Implementation, revision and update of mechanisms or systems used for collecting and analyzing information related to the illicit supply of drugs. (Question 7)

Interpretive Note:

The country has mechanisms or systems to collect and analyze information related to the illicit supply of drugs.

Priority Action 2.2: Conducting periodic studies and research that contributes to knowledge on the current situation of the illicit supply of drugs within national borders, such as, structural and socioeconomic factors, as appropriate. (Question 8)

Interpretive Note:

The country carries out periodic studies and research, as appropriate, on the structural and socioeconomic factors, including the gender perspective, that contribute to increased knowledge on the illicit supply of drugs within the national borders.

Priority Action 2.3: Preparation and update of, as appropriate, scientific studies and research on medicinal uses and other legal use of plants containing narcotic and psychotropic substances subject to the international control system. (Question 9)

Interpretive Note:

The country prepares or updates, according to its needs, studies and/or research on medicinal and scientific uses and other legal use of crops containing narcotic and psychotropic substances subject to the international control system.

Note: Priority action 2.4 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

SUPPLY REDUCTION

Priority Action 2.5: Promotion of the identification of chemical profiles and characteristics of drugs subject to the international control system, as well as, new psychoactive substances, enabling a better understanding of the dynamics of the supply of these substances. (Questions 10, 11)

Interpretive Note:

The country promotes and implements mechanisms for the identification of chemical profiles and characteristics of drugs² subject to the international control system, as well as, new psychoactive substances (NPS)³, in order to better understand the dynamics of the supply of these substances.

Priority Action 2.6: Promotion of standardized and comparable methodologies for the measurement of illicit crops and drug production, for the design and implementation of policies and programs, as appropriate. (Question 12)

Interpretive Note:

The country, in accordance to its needs, uses standardized and comparable methodologies⁴ to measure illicit crops and drug production.

² **Drug characterization and impurity profiling:** The use of scientific laboratory information in support of law enforcement operation work, and is aimed at establishing links between drug samples. It consists of the systematic collection and sharing, in a standardized form, of physical and chemical information on a drug seizure, including the analysis and use of trace impurities to link different drug samples.

³ **New psychoactive substances (NPS):** Substances of abuse, either in a pure form or a preparation, that are not controlled by the 1961 Single Convention on Narcotic Drugs or the 1971 Convention on Psychotropic Substances, but which may pose a public health threat. The term “new” does not necessarily refer to new inventions — several NPS were first synthesized 40 years ago — but to substances that have recently become available on the market. United Nations Office on Drugs and Crime (UNODC), *UNODC Early Warning Advisory (EWA) on New Psychoactive Substances*. Available at: <https://www.unodc.org/LSS/Page/NPS>

⁴ Such as satellite imagery, scientific studies of crop yields or efficiency of typical illicit drug laboratories, among others.

SUPPLY REDUCTION

OBJECTIVE

3

DESIGN, IMPLEMENT AND/OR STRENGTHEN LONG-TERM PROGRAMS WHICH ARE BROAD AND AIMED AT DEVELOPMENT THAT INCLUDES RURAL AND URBAN ALTERNATIVE, INTEGRAL AND SUSTAINABLE DEVELOPMENT PROGRAMS, AND, AS APPROPRIATE, PREVENTIVE ALTERNATIVE DEVELOPMENT, IN ACCORDANCE WITH THE POLICIES, LEGISLATIONS AND NEEDS OF EACH COUNTRY, AS APPROPRIATE.

Priority Action 3.1: Design and implementation of alternative, integral and sustainable development programs, including preventive alternative development, as appropriate. (Question 13)

Interpretive Note:

The country has designed and implemented alternative, integral and sustainable development programs, including preventive alternative development, as appropriate, as a component of strategies for the control and reduction of illicit crops.

Priority Action 3.2: Exchange experiences and best practices in the design and implementation of alternative, integral and sustainable development, including preventive alternative development, as appropriate. (Question 14)

Interpretive Note:

The country exchanges experiences and best practices with countries in the hemisphere on the design and implementation of alternative, integral and sustainable development programs, including preventive alternative development, as appropriate.

Note: Priority action 3.3 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

Priority Action 3.4: Design and/or continuous improvement for monitoring and evaluation systems for alternative, integral and sustainable development programs, among others, aimed at reducing illicit crops and improving the well-being of communities, through results, intermediate and outcome indicators, to measure the effectiveness they have in the medium and long term. (Question 15)

Interpretive Note:

The country uses intermediate and/or outcome results indicators to monitor and evaluate the effectiveness of alternative, integral and sustainable development programs, including preventive alternative development, as appropriate, in the medium and long term that support the measurement of the impact on the economic and social development of individuals and communities, as well as on reducing illicit crops.

SUPPLY REDUCTION

Priority Action 3.5: Strengthening of the presence of the state in areas affected or at-risk by the illicit cultivation in drug production, where it is implemented, consistent with the circumstances of each State, the alternative, integral and sustainable development strategy, including preventive development, as appropriate, with a focus on inclusive intervention that guarantees conditions allowing for sustainable legitimate economies. (Question 16)

Interpretive Note:

The country strengthens the presence of state agencies in zones affected or at risk of being affected by illicit crops containing narcotic and psychotropic substances, through the implementation of the alternative, integral and sustainable development strategy, including preventive development, as appropriate; and the activities that are carried out by the different governmental agencies in these zones.

Priority Action 3.6: Promotion, in accordance with the circumstances of each State, of the participation of local communities and relevant organizations in the alternative, integral and sustainable development strategy, in order to take their needs and capabilities into account. (Question 17)

Interpretive Note:

The country promotes the participation of communities and target groups⁵ in the design, implementation and supervision of alternative, integral and sustainable development projects and programs, including preventive development, as appropriate.

Priority Action 3.7: Design, as appropriate, of urban sustainable development initiatives for those affected by illicit drug-related activities to foster public participation in crime prevention, community cohesion, protection and safety, and to stimulate innovation, entrepreneurship and employment. (Question 18)

Interpretive Note:

The country promotes crime prevention,⁶ community cohesiveness, protection and security of urban populations affected by illicit activities on drug trafficking and related crimes, through sustainable urban development⁷ initiatives and the promotion of innovation, entrepreneurial spirit and employment.

⁵ Local stakeholders, neighborhood referents, social movements, community organizations, neighborhood meetings, non-governmental organizations (NGO) and other civil society associations (including women's organizations), as appropriate.

⁶ **Crime prevention:** comprises strategies and measures that seek to reduce the risk of crimes occurring, and their potential harmful effects on individuals and society, including fear of crime, by intervening to influence their multiple causes. United Nations Office on Drugs and Crime (UNODC), *Compendium of United Nations Standards and Norms in Crime Prevention and Criminal Justice*, page 294. Available at: https://www.unodc.org/pdf/criminal_justice/Compendium_UN_Standards_and_Norms_CP_and_CJ_English.pdf

⁷ **Sustainable urban development:** "a process of co-evolution and synergic integration between the three subsystems that make up the city: the economic, the social and the physical environment." *El Desarrollo Urbano Sostenible*. Available in Spanish only at: <https://dialnet.unirioja.es/servlet/articulo?codigo=65353>.

SUPPLY REDUCTION

Note: Priority actions 3.8 and 3.9 were omitted because they are covered in other objectives or due to difficulties in evaluating during the 2014-2018 period.

SUPPLY REDUCTION

OBJECTIVE

4

DESIGN AND IMPLEMENT PLANS AND/OR PROGRAMS TO MITIGATE AND REDUCE THE IMPACT OF ILLICIT CROPS AND DRUG PRODUCTION ON THE ENVIRONMENT, WITH THE INCORPORATION AND PARTICIPATION OF LOCAL COMMUNITIES, IN ACCORDANCE WITH THE NATIONAL POLICIES OF MEMBER STATES.

Priority Action 4.1: Conduct research and studies on the environmental impact of crop cultivation and illicit production of drugs. (Question 19)

Interpretive Note:

The country carries out research and studies to determine the characteristics and extent of the environmental impact caused by the illicit cultivation of crops and illicit drug production.

Priority Action 4.2: Design and implementation of specific plans which, based on the results obtained from research and studies, geared to mitigating and reducing the environmental impact of illicit crop cultivation and drug production, with the participation of local communities. (Question 20)

Interpretive Note:

The country develops and implements, based on the results of research and studies, specific plans to mitigate and reduce the negative environmental impact of the illicit cultivation of crops and illicit drug production, within the framework of the each country's environmental policies, which includes participation of local communities.

Note: Priority action 4.3 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

SUPPLY REDUCTION

OBJECTIVE 5

ESTABLISH, AS APPROPRIATE, AND BASED ON EVIDENCE THE EFFECTS CAUSED BY SMALL-SCALE DRUG TRAFFICKING ON PUBLIC HEALTH, THE ECONOMY, SOCIAL COHESION AND CITIZEN SECURITY.

Priority Action 5.1: Development of characterization methodologies with a territorial approach to the phenomena of micro-trafficking. (Question 21)

Interpretive Note: The country has developed characterization methodologies,⁸ with territorial and socio-economic approaches, for micro-drug trafficking or small-scale drug trafficking⁹ and the effects on public health, the economy, social cohesion and citizen security.

Priority Action 5.2: Promotion of the exchange of information to better understand the scope of the adverse effects of small-scale drug trafficking, including those on health, society, the economy, and security. (Question 22)

Interpretive Note: The country exchanges information on the adverse effects of small-scale drug trafficking or micro-drug trafficking on health, society, the economy and security.

⁸ **Characterization methodologies:** Research mechanisms that explain a given phenomenon, taking into account socio-economic variables (age, gender socio-economic level, educational level).

⁹ For the purposes of this objective, the terms “micro-trafficking” and “small-scale drug trafficking” are used interchangeably to refer to this phenomenon.

CONTROL MEASURES

CONTROL MEASURES

OBJECTIVE

1

ADOPT AND/OR STRENGTHEN COMPREHENSIVE AND BALANCED PROGRAMS AIMED AT PREVENTING AND REDUCING DRUG TRAFFICKING, IN ACCORDANCE WITH THE TERRITORIAL REALITIES OF EACH COUNTRY AND RESPECTING HUMAN RIGHTS.

Priority Action 1.1: Implementation of procedures and strengthening of human resources capabilities to detect, investigate, and dismantle laboratories or facilities for the illicit manufacture of drugs. (Question 1)

Interpretive Note:

The country has carried out structured, chronologically and sequentially organized, and coordinated activities among its authorities to recognize, examine, and, if appropriate, dismantle laboratories or facilities for the illicit processing or manufacture of drugs, employing effective security measures to prevent harms to human health derived from being exposed to different substances, including minimizing the negative impact on the environment. These activities are carried out with full respect for human rights.

Priority Action 1.2: Strengthening of the design, update and implementation of programs aimed at land, riverine, maritime and aerial interdiction, by the national authorities. (Question 2)

Interpretive Note:

Within their powers, the national authorities carry out ongoing interdiction activities via land, riverine, air and sea to detect and seize drugs; to continuously strengthen the contents of the current and/or existing programs and/or strategies to ensure its multidisciplinary and comprehensive approach.

Priority Action 1.3: Review and update, as appropriate, legal frameworks related to the use of specialized investigation tools and techniques. (Question 3)

Interpretive Note:

The country, as appropriate, reviews and updates the legal framework related to the use of specialized investigation tools and techniques.

Priority Action 1.4: Training of personnel involved in interdiction operations linked to regulations, processes and procedures related to drugs and related crimes, as well as, specialized investigative techniques and intelligence. (Question 4)

Interpretive Note:

The country implements or has training, programs, workshops, seminars, diploma programs or other similar activities on regulations, processes and procedures on drug trafficking and related crimes, including such issues as promotion and protection of human rights in order to

CONTROL MEASURES

improve the capacities of the stakeholders involved in interdiction operations and in specialized investigation and intelligence techniques.

Priority Action 1.5: Review and/or update, as appropriate, the follow-up mechanisms of the evolution of drug trafficking and related crimes, for the purpose of identifying new trends and threats. (Question 5)

Interpretive Note:

The country uses different means, methods, tools and technologies, in any link in the illicit supply chain of drugs and related offenses to identify new trends and patterns, modus operandi, and emerging threats of criminal organizations.

Priority Action 1.6: Definition and implementation of coordinated actions that make it possible to dismantle organized criminal groups involved in drug trafficking and related crimes. (Question 6)

Interpretive Note:

The country prepares and defines interinstitutional collaboration mechanisms and implements focused operations to identify, locate and dismantle criminal groups involved in drug trafficking and related crimes to weaken their structures. These activities carried out with full respect for human rights.

Priority Action 1.7: Enhancement of the capacity of forensic laboratories or similar entities to analyze chemical substances, precursors and pharmaceutical products, including the new psychoactive substances. (Question 7, 8)

Interpretive Note:

The country has a national authority with the appropriate infrastructure (forensic laboratories or similar entities), equipment and training in order to identify chemical substances, precursors and pharmaceutical products, including the new psychoactive substances¹.

¹ **New psychoactive substances (NPS):** Substances of abuse, either in a pure form or a preparation, that are not controlled by the 1961 Single Convention on Narcotic Drugs or the 1971 Convention on Psychotropic Substances, but which may pose a public health threat. The term “new” does not necessarily refer to new inventions — several NPS were first synthesized 40 years ago — but to substances that have recently become available on the market. United Nations Office on Drugs and Crime (UNODC), *UNODC Early Warning Advisory (EWA) on New Psychoactive Substances*. Available at: <https://www.unodc.org/LSS/Page/NPS>.

CONTROL MEASURES

OBJECTIVE

2

ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION OF CONTROLLED CHEMICAL SUBSTANCES TOWARDS ILLICIT ACTIVITIES.

Priority Action 2.1: Promotion of inter-agency coordination in order to improve cooperation with industry in preventing diversion of chemical substances. (Questions 9, 10, 11, 12)

Interpretive Note:

The country has a competent national authority that develops guides, codes of conduct or other instruments to inform the industry and users in general of controlled chemical substances. Said authority is responsible for coordinating control of domestic trade and to perform inspection and audit of establishments.

Priority Action 2.2: Conduct analyses, including the exchange of information through existing mechanisms, of substances, their analogs and precursors which pose a threat to public health in member states for expedited international control. (Question 13)

Interpretive Note:

The country implements expedited and timely monitoring and information exchange systems through existing mechanisms in the international field to detect controlled or not controlled substances, their analogs and precursors² which pose a threat to public health.

Priority Action 2.3: Strengthening of the existing control system to prevent the diversion of controlled chemical substances. (Question 14, 15, 16, 17)

Interpretive Note:

The country has strengthened its legislation by incorporating all the control measures in Article 12, Paragraphs 8, 9 and 10 of the 1988 United Nations Convention³ to prevent diversion of controlled chemical substances towards illicit activities.

Priority Action 2.4: Promote the participation, at the national level, in the pre-export notification system of controlled chemical substances. (Question 18)

Interpretive Note:

The country promotes participation in the pre export notification (International Narcotics Control Board's - INCB PEN Online) information system for controlled chemical substances.⁴

Priority Action 2.5: Training of relevant drug control personnel on the identification and handling of controlled chemical substances. (Question 19)

² All of the substances included in tables I and II of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

³ United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

⁴ As per paragraph 10, Article 12 of the United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (Vienna, 1988).

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Interpretive Note:

The country's drug control personnel received the necessary training to identify and handle controlled chemical substances, providing information on the training in this area and the institution providing the training.

CONTROL MEASURES

OBJECTIVE 3

ADOPT AND/OR STRENGTHEN CONTROL MEASURES TO PREVENT DIVERSION TOWARDS ILLICIT ACTIVITIES OF PHARMACEUTICAL PRODUCTS CONTAINING PRECURSOR SUBSTANCES OR THOSE CONTAINING NARCOTIC DRUGS AND/OR PSYCHOTROPIC SUBSTANCES, ENSURING THE ADEQUATE AVAILABILITY AND ACCESS SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES.

Priority Action 3.1: Implementation of measures to control pharmaceutical products that contain precursor substances, narcotics or psychoactive substances, in order to prevent their diversion to non-medical purposes. (Questions 20, 21, 22)

Interpretive Note:

The country implements measures for the control of pharmaceutical products containing precursor substances, narcotics or psychotropic substances, in order to prevent their diversion for non-medical purposes.

Priority Action 3.2: Update of existing regulations and control measures to prevent diversion of pharmaceutical products containing narcotic drugs and/or psychotropic substances. (Question 23)

Interpretive Note:

The country has effective regulations and control measures to prevent diversion of pharmaceutical products containing narcotic drugs or psychotropic substances.

CONTROL MEASURES

OBJECTIVE

4

ENSURE ADEQUATE AVAILABILITY AND ACCESSIBILITY OF SUBSTANCES SUBJECT TO INTERNATIONAL CONTROL SOLELY FOR MEDICAL AND SCIENTIFIC PURPOSES, PREVENTING THEIR DIVERSION.

Priority Action 4.1: Streamlining, in accordance with national legislation, the process for issuing import and export authorizations for controlled substances for medical and scientific purposes. (Questions 24, 25)

Interpretive Note:

The country has mechanisms, established in accordance with legislation to expedite the process for issuing import and export authorizations for controlled substances for medical and scientific purposes.

Priority Action 4.2: Adoption of measures, in accordance with national legislation, to provide capacity building for national competent authorities and health professionals, on the proper access to substances subject to international control solely for medical and scientific purposes. (Question 26)

Interpretive Note:

The country has training programs for competent authorities and health professionals, promote awareness among health practitioners and adequate access to controlled substances solely for medical and scientific purposes.

Priority Action 4.3: Improvement of access to controlled substances for medical and scientific purposes by appropriately addressing existing barriers, including those related to legislation, regulations and health care systems, among others, while preventing their diversion, abuse and trafficking. (Question 27)

Interpretive Note:

The country has established an effective regulatory framework, which promotes easy and timely access to controlled substances for medical and scientific purposes. As part of the regulatory framework, establish procedural and administrative guidelines⁵ that are not burdensome to the medical and scientific sector, while preventing their diversion, abuse and trafficking of controlled substances.

⁵ Procedural and administrative guidelines should be easily accessible and understood, and should not inexplicably or significantly delay the process.

CONTROL MEASURES

OBJECTIVE

5

STRENGTHEN NATIONAL MEASURES TO ADDRESS THE CHALLENGE OF NEW PSYCHOACTIVE SUBSTANCES AND THE THREAT OF AMPHETAMINE STIMULANTS.

Priority Action 5.1: Establishment and/or strengthening of an early warning system at the national level to promote, as appropriate, collaboration and the exchange of information with other existing regional or global systems. (Question 28)

Interpretive Note:

The country has established or strengthened an early warning system to identify and trace new psychoactive substances, amphetamine-type stimulants and other substances subject to international control, and shares with other regional or global systems.

Priority Action 5.2: Improvement of the capabilities to detect and analyze new psychoactive substances by making resources and tools available for those responsible in this area according to the possibilities of member states. (Question 30)

Interpretive Note:

The country takes measures to improve the ability to detect and analyze new psychoactive substances by making resources and tools available for the national entities responsible in this area within the possibilities of OAS member states.

Priority Action 5.3: Design and implementation of, when appropriate, of national regulatory tools to address the challenges at the onset of new psychoactive substances. (Question 29)

Interpretive Note:

The country designs and implements, when appropriate, regulations that effectively and timely address the challenges associated with the onset of new psychoactive substances and the threat of amphetamine type stimulants⁶.

⁶ **Amphetamine-type stimulants (ATS):** Group of substances comprised of synthetic stimulants, including amphetamine, methamphetamine, methcathinone, and ecstasy group substances (e.g. MDMA and its analogues). United Nation Office on Drugs and Crime (UNODC) – Inter-American Drug Abuse Control Commission (CICAD), Global SMART Programme, *Amphetamine-Type Stimulants in Latin America* (2014). Available at: http://www.cicad.oas.org/Smart/Reports/1_ENG.pdf.

CONTROL MEASURES

OBJECTIVE

6

ESTABLISH, UPDATE AND STRENGTHEN, AS APPROPRIATE, THE LEGISLATIVE AND INSTITUTIONAL FRAMEWORKS TO COUNTER MONEY LAUNDERING DERIVED FROM DRUG TRAFFICKING.

Priority Action 6.1: Review the legal, regulatory and operational frameworks in the areas of prevention, detection, investigation, prosecution and control of money laundering derived from drug trafficking. (Question 31)

Interpretive Note:

The country has and, as appropriate, periodically reviews its legal, regulatory and operational frameworks⁷ for the prevention, detection, investigation, prosecution and control of money laundering derived from drug trafficking.

Priority Action 6.2: Development and implementation of specialized ongoing training in areas of prevention, detection, investigation, prosecution and control of money laundering derived from drug trafficking. (Question 32)

Interpretive Note:

The country has an ongoing training program for the competent authorities and other vulnerable sectors⁸ (financial sector, non-financial) to prevent, detect, investigate, pursue and control money laundering derived from drug trafficking.

Priority Action 6.3: Design and implementation of protocols to permit the competent authorities to enable financial and asset investigations to be conducted, parallel to investigations related to drug trafficking. (Question 33)

Interpretive Note:

The country has and effectively implements protocols, manuals, guides and other official instruments that enable the authorities to conduct financial and asset investigations parallel to investigations related to drug trafficking.

Priority Action 6.4: Establishment and activation of mechanisms for interagency coordination and cooperation, including national anti-money laundering strategies, national coordinating committees, and the use of task forces. (Question 34)

Interpretive Note:

⁷ Money laundering is criminalized in accordance to the United Nations Convention against Illicit Traffic in Narcotic Drugs (Vienna, 1988) and the United Nations Convention against Transnational Organized Crime (Palermo, 2000).

⁸ **Vulnerable sectors:** Please refer to Recommendation 1 of the Financial Action Task Force (FATF): “Assessing risks & applying a risk-based approach.” Available at:

http://www.fatf-gafi.org/media/fatf/documents/recommendations/pdfs/FATF_Recommendations.pdf.

CONTROL MEASURES

The country has mechanisms to allow the inter-institutional coordination and cooperation in the area of preventing and controlling money laundering. These mechanisms include the private financial and non-financial sector as being vulnerable sectors.

Priority Action 6.5: Optimization of the information systems for the investigation and prosecution of money laundering from drug trafficking, including the use of financial intelligence. (Question 35)

Interpretive Note:

The competent authorities of the country have an information system aimed at the investigation and prosecution of money laundering in analyzing cases deriving from drug trafficking. The system allows for the crossover of information between financial intelligence and drug trafficking investigations (financial intelligence unit).⁹

Note: “financial intelligence unit” has been included, in accordance with question 35.

Priority Action 6.6: Identification and analysis of money laundering risks, for the purpose of mitigating said risks through public policies to strengthen the regime for preventing and countering this crime domestically, in accordance with international instruments. (Question 36)

Interpretive Note:

The country has mechanisms for the identification and analysis of money laundering risks. These mechanisms are in accordance with international instruments. The country has a structure or body that guarantees the updating, coordination and monitoring in the area of mitigating money laundering risks including the participation of the financial and non-financial sectors and other vulnerable activities.

⁹ **Financial intelligence unit:** Please refer to the Financial Action Task Force (FATF) recommendation 29: “Financial Intelligence Units.” Available at:

http://www.fatf-gafi.org/media/fatf/documents/recommendations/pdfs/FATF_Recommendations.pdf.

CONTROL MEASURES

OBJECTIVE

7

ESTABLISH AND/OR STRENGTHEN AGENCIES FOR THE ADMINISTRATION AND DISPOSITION OF SEIZED AND/OR FORFEITED ASSETS IN CASES OF DRUG TRAFFICKING, MONEY LAUNDERING AND OTHER RELATED CRIMES.

Priority Action 7.1: In accordance with each country's constitutional principles, apply legislative and regulatory measures to facilitate the seizure and forfeiture of assets, instruments, or products of illicit drug-related activities. (Question 37)

Interpretive Note:

The country has legislation, regulations and/or procedures as well as other specific measures in accordance with international conventions and treaties to facilitate the seizure and forfeiture of assets, instruments, or products deriving from drug trafficking and other related crimes.

Priority Action 7.2: Establishment of specialized agencies and appropriate mechanisms for the transparent administration of seized and forfeited assets, in accordance with international standards. (Questions 38, 39)

Interpretive Note:

The country has designated a competent authority with responsibility for the administration of seized and forfeited assets. The designated body should have the legal authority to take custody of, manage, maintain, and dispose of seized assets. The country has regulations to ensure that transparency and accountability are maintained in the administration of seized and/or forfeited assets.

Priority Action 7.3: Development and implementation of specialized, ongoing training programs, as appropriate, on the administration and disposition of seized and forfeited assets. (Question 40)

Interpretive Note:

The country offers or receives specialized training programs¹⁰ for the administration and disposition of seized and forfeited assets.

¹⁰ Specialized training programs may include workshops, seminars, degree courses, or refresher training in techniques and methodologies for the administration and disposition of seized and forfeited assets.

CONTROL MEASURES

OBJECTIVE 8

STRENGTHEN NATIONAL INFORMATION GATHERING SYSTEMS AND MECHANISMS FOR EXCHANGING INTELLIGENCE INFORMATION TO DETECT ROUTES AND METHODS USED BY CRIMINAL DRUG TRAFFICKING ORGANIZATIONS.

Priority Action 8.1: Enhancement of the capabilities of law enforcement agencies that control drug trafficking and related crimes, through ongoing training of the involved personnel. (Question 41)

Interpretive Note:

The country offers ongoing training programs for personnel involved in detecting routes and methods used by drug trafficking criminal organizations.

Priority Action 8.2: Strengthen cooperation and the exchange of information among the domestic law enforcement agencies. (Question 42)

Interpretive Note:

The country guarantees the existence and effective use of information exchange mechanisms among agencies responsible for law enforcement and drug trafficking control and its related crimes.

Priority Action 8.3: Promotion and strengthening of the exchange of information and intelligence on matters of interdiction and effective border control measures to prevent drug trafficking by air, land and sea. (Question 43)

Interpretive Note:

The country has mechanisms for the exchange of information and intelligence to enable competent authorities to enforce effective border control measures and prevent drug trafficking by air, land and sea. The information exchange mechanisms include law enforcement agencies (police, customs, air and sea border authorities), and the postal services.

Priority Action 8.4: Improvement to the information systems on drug trafficking and related crimes, including alerts on changing behaviors and modus operandi of criminal drug trafficking organizations. (Question 44)

Interpretive Note:

The country has a formal and effective national information system on drug trafficking and related crimes, including alerts on changing behaviors and modus operandi of criminal drug trafficking organizations. This system is a dynamic and rapid mechanism for regular information exchange between the agencies involved in the control of drug trafficking and related crimes.

INTERNATIONAL COOPERATION

INTERNATIONAL COOPERATION

OBJECTIVE

1

PROMOTE AND STRENGTHEN COOPERATION AND COORDINATION MECHANISMS TO FOSTER TECHNICAL ASSISTANCE, IMPROVE EXCHANGE OF INFORMATION AND EXPERIENCES, AND SHARE BEST PRACTICES AND LESSONS LEARNED ON DRUG POLICIES AND RELATED CRIMES.

Priority Action 1.1: Development and implementation of a set of activities for the promotion and strengthening of technical assistance and horizontal cooperation among member states, third States and with relevant international organizations. (Question 1)

Interpretive Note:

The country carries out activities to promote and strengthen technical assistance and horizontal cooperation among OAS member states, third States and with relevant international organizations.

Priority Action 1.2: Encourage the transfer of technology among countries on the systematization of regulation, studies, research, and bibliographic material produced by countries and international organizations. (Question 2)

Interpretive Note:

The country exchanges technology with foreign counterparts regarding the systematization of regulation, studies, research, and bibliographic material produced by countries and international organizations.

Priority Action 1.3: Promotion of the exchange of intelligence information on drug interdiction and control. (Question 3)

Interpretive Note:

The country has secure communication channels to facilitate the exchange of intelligence information on drug interdiction and control.

Priority Action 1.4: Promotion of the exchange of best practices on training, specialization and professional development of the staff responsible for implementing demand and supply reduction policies. (Question 4)

Interpretive Note:

The country promotes the exchange with foreign counterparts of best practices on ongoing training, specialization and professional development for the various personnel responsible for implementing the national drug plan and/or strategy.

Note: Priority actions 1.5, 1.6 and 1.7 were omitted because they are covered in other objectives or due to difficulties in evaluating during the 2014-2018 period.

INTERNATIONAL COOPERATION

Priority Action 1.8: Strengthening of regional coordination measures to prevent crimes related to drug trafficking, such as, firearms trafficking, extortion, kidnapping, money laundering and others. (Question 5, 6)

Interpretive Note:

The country participates in strengthening the regional coordination¹ measures and bilateral mechanisms to prevent drug trafficking and related crimes, such as, firearms trafficking, extortion, kidnapping, money laundering among others.

¹ Through existing inter-governmental information exchange networks, such as the United Nations, Interpol, and other organizations and when required, through diplomatic channels, among others.

INTERNATIONAL COOPERATION

OBJECTIVE

2

STRENGTHEN THE MULTILATERAL COOPERATION AND COORDINATION MECHANISMS IN THE AREA OF FORFEITURE AND MANAGEMENT OF ASSETS DERIVED FROM DRUG TRAFFICKING AND RELATED CRIMES.

Priority Action 2.1: Review and updating of, as appropriate, the normative frameworks and procedural rules on administrative and judicial cooperation on money laundering derived from drug trafficking and related crimes. (Questions 7, 8)

Interpretive Note:

The country has appropriate and updated regulatory and procedural frameworks for forfeiture and management of assets derived from drug trafficking and related crimes in accordance to the 1988 United Nations Convention on Illicit Traffic in Narcotic and Psychotropic Substances and the 2000 United Nations Convention on Transnational Organized Crime, as well as in line with the Financial Action Task Force on Money Laundering (FATF), in order to facilitate administrative and legal cooperation with foreign counterparts.

Priority Action 2.2: Creation and/or strengthening of mechanisms and processes to speed up handling of requests for mutual legal assistance on investigation and forfeiture of assets derived from drug trafficking and related crimes. (Question 9)

Interpretive Note:

The country has key authorities responsible for mutual legal assistance in criminal matters such as procedures and mechanisms that ensure swift handling of incoming requests for assistance, including investigation and asset forfeiture deriving from drug trafficking and related crimes.

Priority Action 2.3: Use, as appropriate, of information exchange networks in investigations on money laundering derived from drug trafficking, in a secure and rapid fashion among national authorities and competent international organizations. (Question 10)

Interpretive Note:

The country has relevant authorities with legal ability to exchange internally available information in order to facilitate the money laundering related investigations, including identification and tracking of the assets linked to this offense, and as appropriate with foreign counterparts through information exchange networks, such as, Interpol, Regional Asset Recovery Network of GAFILAT (RRAG), among others.

INTERNATIONAL COOPERATION

OBJECTIVE

3

SUPPORT THE MULTILATERAL EVALUATION MECHANISM (MEM) PROCESS, NOTING THE LEVEL OF PROGRESS AND COMPLIANCE OF THE COMMITMENTS UNDERTAKEN BY MEMBER STATES.

Priority Action 3.1: Systematic gathering of updated and quality information to observe the level of implementation of the MEM recommendations. (Question 11)

Interpretive Note:

The country has an appropriate authority that systematically gathers updated and quality² information to examine the implementation level of assigned MEM recommendations.

Priority Action 3.2: Active and timely participation in each of the activities that the MEM carries out, according to the agreed methodology. (Question 12)

Interpretive Note:

The country assigned authority(ies) and representative(s) to participate in each of the MEM-related activities. The aforementioned implies participation in MEM meetings, thematic discussions, and timely submission of information requested and assignments.

Priority Action 3.3: Dissemination of MEM Reports by member states, while adopting, as appropriate, corrective and proactive measures as necessary. (Question 13)

Interpretive Note:

The country disseminates the MEM reports and their recommendations to the general public and the competent authorities and adopts the corrective and proactive measures, as necessary.

Priority Action 3.4: Increase information sharing on hemispheric cooperation initiatives focused on addressing the world drug problem, to support the implementation of the MEM recommendations. (Question 14)

Interpretive Note:

The country is actively involved in information sharing on hemispheric cooperation initiatives³ focused on addressing the world drug problem, to support the implementation of the MEM process recommendations.

² Clear, accurate and concise information.

³ For example: Studies, questionnaires, surveys, discussions, among others.

INTERNATIONAL COOPERATION

OBJECTIVE

4

STRENGTHEN INTERNATIONAL COOPERATION AS DEFINED IN THE INTERNATIONAL LEGAL INSTRUMENTS RELATED TO THE WORLD DRUG PROBLEM, WITH RESPECT FOR HUMAN RIGHTS.

Priority Action 4.1: Enactment of national legislation and/or adoption of administrative measures and actions, as appropriate, to increase implementation of obligations set forth within these legal instruments. (Question 15)

Interpretive Note:

The country makes efforts to strengthen international cooperation as defined by international legal instruments related to the world drug problem, by enacting legislation and/or adopting administrative measures and actions, as appropriate, to improve implementation of obligations set forth within these legal instruments,⁴ and taking into account respect for human rights and gender equality.

Priority Action 4.2: Promotion of the accession, ratification and implementation, as appropriate, of the international legal instruments related to the world drug problem and related crimes. (Question 16)

Interpretive Note:

The country promotes the accession⁵, ratification and implementation, as appropriate, of the international legal instruments⁶ related to the world drug problem and related crimes.

⁴ United Nations Single Convention on Narcotic Drugs (1961), amended by the 1972 Protocol, the United Nations Convention on Psychotropic Substances (1971), the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), the United Nations Convention against Transnational Organized Crime (2000) and its three Protocols: against the Smuggling of Migrants by Land, Sea and Air; to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children and against the Illicit Manufacturing and Trafficking in Firearms, their Parts and Components and Ammunition; the United Nations Convention against Corruption (2003); the Inter-American Convention on Mutual Assistance in Criminal Matters (1992), the Inter-American Convention against Corruption (1996), and the Inter-American Convention against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives, and other Related Materials (CIFTA) (1997); UNGASS 2016 Outcome Document, CICAD 2010 Hemispheric Drug Strategy and its Plan of Action, 2016-2020; 2009 United Nations Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem; United Nations 2030 Agenda for Sustainable Development; Organization of American States (OAS) 2013 Declaration of Antigua, Guatemala, *For a Comprehensive Policy against the World Drug Problem in the Americas*; and 2014 OAS General Assembly Resolution, *Reflections and Guidelines to Formulate and Follow-up on Comprehensive Policies to Address the World Drug Problem in the Americas*.

⁵ **Accession:** Act whereby a state accepts the offer or the opportunity to become a party to a treaty already negotiated and signed by other states. It has the same legal effect as ratification. Accession usually occurs after the treaty has entered into force. United Nations Treaty Collection. Web link: https://treaties.un.org/Pages/Overview.aspx?path=overview/glossary/page1_en.xml.

⁶ United Nations Single Convention on Narcotic Drugs (1961), amended by the 1972 Protocol, the United Nations Convention on Psychotropic Substances (1971), the United Nations Convention Against Illicit Traffic in Narcotic Drugs and Psychotropic Substances (1988), the United Nations Convention against Transnational Organized Crime (2000) and its three Protocols: against the Smuggling of Migrants by Land, Sea and Air; to Prevent, Suppress and

INTERNATIONAL COOPERATION

OBJECTIVE

5

PROMOTE COMMON UNDERSTANDING OF NATIONAL LEGAL NORMS, REGULATIONS, AND INTERNAL PROCEDURES FOR THE IMPLEMENTATION OF HEMISPHERIC JUDICIAL COOPERATION MECHANISMS AND MUTUAL LEGAL OR JUDICIAL ASSISTANCE RELATED TO DRUG TRAFFICKING AND RELATED CRIMES.

Priority Action 5.1: Adoption, where appropriate, of international cooperation measures for the provision of broad mutual legal assistance on drug control activities among competent authorities. (Question 17, 18)

Interpretive Note:

The country has cooperation agreements, bilateral and/or regional, in mutual legal assistance to control drug trafficking and related crimes.

Note: Priority action 5.2 was omitted because it is covered in another objective or due to difficulties in evaluating during the 2014-2018 period.

Priority Action 5.3: Adoption of measures, where appropriate, to promote cooperation facilitating extraditions, in accordance with current legislation of each country. (Question 19)

Interpretive Note:

The country has laws or other legal provisions that permit extradition for committing offenses under Article 3, Paragraph 1 and other relevant provisions of the 1988 United Nations Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances. The foreign affairs and judicial authorities will establish communication with their counterparts in other countries to facilitate extradition.

Punish Trafficking in Persons, Especially Women and Children and against the Illicit Manufacturing and Trafficking in Firearms, their Parts and Components and Ammunition; the United Nations Convention against Corruption (2003); the Inter-American Convention on Mutual Assistance in Criminal Matters (1992), the Inter-American Convention against Corruption (1996), and the Inter-American Convention against the Illicit Manufacturing of and Trafficking in Firearms, Ammunition, Explosives, and other Related Materials (CIFTA) (1997); UNGASS 2016 Outcome Document, CICAD 2010 Hemispheric Drug Strategy and its Plan of Action, 2016-2020; 2009 United Nations Political Declaration and Plan of Action on International Cooperation Towards an Integrated and Balanced Strategy to Counter the World Drug Problem; United Nations 2030 Agenda for Sustainable Development; Organization of American States (OAS) 2013 Declaration of Antigua, Guatemala, *For a Comprehensive Policy against the World Drug Problem in the Americas*; and 2014 OAS General Assembly Resolution, *Reflections and Guidelines to Formulate and Follow-up on Comprehensive Policies to Address the World Drug Problem in the Americas*.



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**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION**

CICAD

**SIXTY-SECOND REGULAR SESSION
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Washington, D.C.**

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**PROPOSED PROCEDURAL MANUAL FOR THE
SEVENTH ROUND OF THE MULTILATERAL EVALUATION MECHANISM (MEM)**



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**MULTILATERAL EVALUATION MECHANISM (MEM)
INTER-GOVERNMENTAL WORKING GROUP (IWG)**

DRAFT PROCEDURAL MANUAL

(November 8, 2017)

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I. MULTILATERAL EVALUATION MECHANISM (MEM)

A. Background

The Multilateral Evaluation Mechanism (MEM) is an instrument designed to measure the progress of actions taken by the member states of the Organization of American States (OAS) to address the hemispheric drug problem and other related crimes.

The Heads of State and of Government at the 1998 Second Summit of the Americas in Chile, mandated the creation of a multilateral evaluation mechanism which would make periodic recommendations to member states to improve their capacity to control drug trafficking and abuse and enhance multilateral cooperation. Specifically, in the Santiago Plan of Action of the Second Summit of the Americas, Heads of State mandated countries to:

“...develop, within the framework of the Inter-American Drug Abuse Control Commission (CICAD-OAS), a singular and objective process of multilateral governmental evaluation in order to monitor the progress of their individual and collective efforts in the Hemisphere and of all the countries participating in the Summit, in dealing with the diverse manifestations of the problem.”

In 1998, the Declaration of CICAD on the MEM was approved in Montevideo, Uruguay, which highlighted the importance of the MEM process:

“3. Reaffirm the principles on which the Multilateral Evaluation Mechanism is based, that is, respect for the sovereignty, territorial jurisdiction, and domestic law of the states, as well as reciprocity, shared responsibility, and an integrated, balanced approach in dealing with the issue; the Anti-Drug Strategy in the Hemisphere; and the international agreements and instruments in effect.

4. Decide that the Multilateral Evaluation Mechanism will be applicable to all states, individually and collectively; that it will be governmental, singular and objective, with the participation of specialized representatives of the governments; that it will be transparent, impartial, and equitable so as to ensure objective evaluation; that it will ensure full, timely participation by the states, based on generally applied norms and procedures, established by mutual agreement in advance, in order to ensure an equitable evaluation process; that it will not contain sanctions of any nature; and that it will respect the confidentiality of deliberations and information administered by the states, in accordance with the norms and procedures established in advance.”

In 2010, as a principle of the Hemispheric Drug Strategy, CICAD stated that *“The MEM is the appropriate mechanism to monitor, evaluate and improve national and hemispheric policies and actions to address the world drug problem. Member states will actively participate in this Mechanism in order to keep it up to date by reviewing it periodically.”*

Subsequently, in 2013, the Antigua, Guatemala Declaration “For a Comprehensive Policy against the World Drug Problem in the Americas,” the member states in the OAS General Assembly declared:

“5. That they recognize the Multilateral Evaluation Mechanism (MEM) as the only valid hemispheric tool for evaluating drug control policies in the countries that make up the Inter-American system.

6. Recall that the evaluation of drug control policies must be a multilateral exercise.”

Likewise, the Hemispheric Plan of Action on Drugs 2016-2020, outlined among its objectives to “Support the Multilateral Evaluation Mechanism (MEM) process, noting the level of progress and compliance of the commitments undertaken by member states.”

For this purpose, the member states agreed to the following priority actions:

“3.1 Systematic gathering of updated and quality information to observe the level of implementation of the MEM recommendations.

3.2 Active and timely participation in each of the activities that the MEM carries out, according to the agreed methodology.

3.3 Dissemination of MEM Reports by member states, while adopting, as appropriate, corrective and proactive measures as necessary.

3.4 Increase information sharing on hemispheric cooperation initiatives focused on addressing the world drug problem, to support the implementation of the MEM recommendations.”

B. Principles

Pursuant to the Mandate of the Second Summit of the Americas, the process of multilateral evaluation is based upon the following principles:

1. Respect for sovereignty, territorial jurisdiction, and the domestic laws of States.
2. Reciprocity, shared responsibility and an integrated balanced approach to this issue.
3. The current Hemispheric Drug Strategy and its Plan of Action¹ and international agreements and instruments in force.

¹ Hemispheric Drug Strategy approved by CICAD during its forty-seventh regular session in Washington, D.C., May 3, 2010 and adopted by the OAS General Assembly during its fortieth regular session in Lima, Peru, June 2010. Plan of Action, 2016-2020 approved during the sixtieth regular session of CICAD, in Nassau, The Bahamas, November 2, 2016, and adopted by the OAS General Assembly during its forty-seventh regular session in Cancun, Mexico, in June 2017.

C. Objectives

The process of multilateral evaluation has the following objectives to:

1. Achieve full application of the Hemispheric Drug Strategy and its Plan of Action.
2. Strengthen mutual confidence, dialogue, and hemispheric cooperation in order to confront, with greater efficiency and efficacy, the diverse aspects of the world drug problem².
3. Follow-up on the progress of individual and collective efforts in the Hemisphere of all the countries participating in the Mechanism, indicating both results attained as well as obstacles faced by the countries.
4. Promote the following actions on the basis of the evaluation results and within the framework of CICAD:
 - a) To Support member states in the planning and execution of their national drug plans;
 - b) To contribute to the strengthening of member states' capacity to confront the drug problem; and
 - c) To stimulate the development of technical assistance and training programs, and the exchange of experiences and best practices according to the needs of each.
5. Produce and publish periodic reports on the situation of the drug problem in the countries and in the Hemisphere.
6. Strengthen multilateral cooperation as the way to ensure an objective evaluation of member states' efforts to confront the drug problem.
7. Promote through CICAD the strengthening of cooperation and coordination with other regions, the United Nations and other international entities.

D. Characteristics

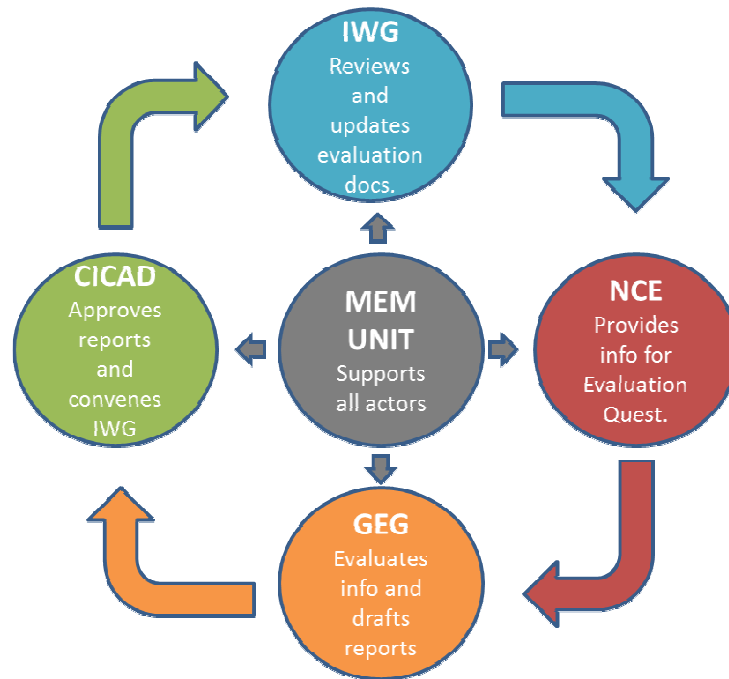
The multilateral evaluation process applicable to all member states, individually and collectively, has the following characteristics:

1. Governmental, singular and objective, with the participation of specialized representatives of the governments.
2. Transparent, impartial and equitable to assure an objective evaluation.
3. Full and timely participation of member states based upon mutually and previously established rules and procedures of general application to guarantee an equitable evaluation process.
4. Excludes sanctions of any kind.

² The illicit cultivation, production, manufacture, sale, demand, trafficking and distribution of narcotic drugs and psychotropic substances, including amphetamine-type stimulants, the diversion of precursors, and related criminal activities.

5. Respectful of the confidentiality of the deliberations and the information provided by member states, in accordance with established norms and procedures.
6. Only valid hemispheric tool for evaluating drug control policies in the countries that make up the Inter-American system³.

**MEM PROCESS OPERATION
AND STAKEHOLDERS INVOLVED**



The activities of the MEM process evaluation start when the Intergovernmental Working Group (IWG) reviews and updates the MEM basic documents to carry out the next evaluation round. The National Coordinating Entity (NCE) of each member state provides the information requested in the evaluation questionnaire, which is evaluated by the Governmental Expert Group (GEG) that drafts the country national reports and later the hemispheric report. The draft reports are approved by the CICAD Commission, which also convenes the next IWG. The MEM Unit of the CICAD Executive Secretariat provides support to the different actors involved in this process.

³ Commemorative Declaration of Nassau during the sixtieth regular session of CICAD in Nassau, The Bahamas, November, 2016 and the Declaration of Antigua, Guatemala "Towards a Comprehensive Policy on the World Drug Problem in the Americas," June 2013 at the forty-third regular session of the OAS General Assembly.

II. INTERGOVERNMENTAL WORKING GROUP (IWG)

The Intergovernmental Working Group (IWG) shall be comprised by the delegates of the member states to update and optimize the MEM process and its operational features, based on the current Hemispheric Drug Strategy and its Plan of Action. Each member state will fund the participation of their Expert to attend the IWG meetings.

The specific duties of the IWG include updating and revising the MEM evaluation instrument for the subsequent MEM Round, including the Evaluation Questionnaire, Procedural Manual, Evaluator's Manual and the MEM process Calendar of Activities, ensuring that the key topics related to the drug problem and new trends are incorporated, while eliminating topics that are no longer useful or have become obsolete.

A. Convocation

The CICAD Commissioners will convene the MEM Inter-Governmental Working Group (IWG) before each evaluation round. CICAD Commissioners can provide the IWG with any specific guidance concerning the new round that it particularly wants the IWG to focus upon/revise.

B. Chair and Vice-Chair

1. The CICAD Commission elects the IWG Chair, and the IWG elects the Vice-Chair, taking into account gender inclusion.
2. The IWG Chair and Vice-Chair have the following responsibilities:
 - a) Preside over all activities of the IWG;
 - b) Coordinate all Plenary meetings debates;
 - c) Assist the Executive Secretariat, especially the MEM Unit, in the coordination, organization and preparatory work for IWG meetings; and
 - d) In coordination with the MEM Unit, fulfill the IWG work plan.
3. The IWG Chair represents this Group and present reports and IWG recommendations to the respective CICAD regular sessions.
4. The IWG Vice-Chair replaces the IWG Chair in case of temporary/permanent absence and assist in the fulfillment of duties. These duties include coordinating with the Chair and the MEM Unit on specific action items. To this end, the Vice-Chair may enlist the support of other IWG members.
5. The IWG Chair and/or Vice-Chair liaise with the MEM Unit/CICAD Executive Secretariat to carry out the instructions of the IWG.

C. IWG Characteristics

1. The IWG delegates are designated by each member state, one per country. Delegates should have competencies in the design and/or formulation and/or

implementation and/or evaluation of strategies and/or programs on drugs and/or public policies in general. In addition, each member state designates one or more alternates that can assist or replace the principal delegates, as necessary.

2. Each member state adheres to the principle “one country, one voice.”

D. IWG Thematic Sub-Groups

1. The IWG can divide into thematic sub-groups, in accordance to the current CICAD Hemispheric Drug Strategy, in order to review and update the MEM evaluation instrument for the next round.
2. The thematic sub-groups elect a Coordinator and can elect a Sub-Coordinator to oversee the drafting work and represent these working sub-groups.
3. The thematic sub-group Coordinators, together with the IWG Chair and Vice-Chair draft the necessary guidelines to update and draft the evaluation instrument and the corresponding manuals.

E. CICAD Executive Secretariat

1. The various Units of the Executive Secretariat work to ensure that all instructions related to thematic areas, received from the IWG, are appropriately implemented.
2. The Units of the Executive Secretariat support and work directly with the IWG Chair and/or Vice-Chair or other IWG members, in their areas of expertise, as indicated by the work required.
3. The MEM Unit maintains direct contact with the IWG and provides technical, coordination and managerial support to all the activities of this Group.

F. IWG Operations

1. The IWG operates through virtual and in-person meetings. A country delegate from each country should be present at each of these meetings.
2. The IWG delegates actively and timely participate and collaborate in the meetings, as well as in the drafting work and improve the evaluation instrument and the corresponding manuals.
3. The IWG thematic sub-groups meet to review and draft the evaluation instrument and the corresponding manuals and thereafter the whole IWG meets in plenary session to approve the final proposal.

4. The quorum for IWG plenary meetings shall be one third of the representatives of the member states making up this body. The quorum for adopting decisions shall be a majority of the representatives of the member states making up this body⁴. IWG plenary decisions are taken by consensus and, when this is not possible, by a majority vote of the member state representatives⁵.
5. The quorum for IWG Thematic sub-group meetings shall be one third of the representatives of the member states making up this body. IWG Thematic sub-group decisions will be taken by consensus and, when this is not possible, by a majority vote of its members.
6. The IWG Chair or Vice-Chair works on behalf of the Group to reach consensus, with respect to specific proposals. This activity includes helping the Group reach compromises when consensus is difficult to reach.
7. The Chair, Vice-Chair, and any member of the IWG is encouraged to seek compromise as the preferred outcome to differences within the Group pertaining to the MEM as the desirable alternative to adopting Plenary decisions through a majority of the member states.

III. GOVERNMENTAL EXPERT GROUP (GEG)

The Governmental Expert Group (GEG) is composed of Experts from the diverse areas of the drug problem and designated by each of the member states. Each member state finances the participation of its Expert in the GEG meetings. Member states inform the Executive Secretariat of the name of their Expert, and provide his/her Curriculum Vitae and current contact information, in a timely manner, prior to the GEG meeting, to ensure proper coordination.

A. Characteristics of the Experts

1. The Government-appointed Experts have a:
 - a) Solid technical background and experience in one or more of the current Hemispheric Drug Strategy and Plan of Action thematic areas; and
 - b) Working knowledge of English and/or Spanish.
2. GEG Experts are selected for their technical expertise and work objectively to evaluate countries' progress on drug plans or strategies based on their national realities.
3. If possible, the Expert should not be the representative of the National Coordinating Entity (NCE).
4. Experts are designated with the authority to make autonomous judgments, and take appropriate and timely decisions.
5. Ensure stability and continued service of the experts throughout the evaluation process.

⁴ In accordance with the OAS Permanent Council Regulations, Article 44, August 16, 2017.

⁵ In accordance with the OAS Permanent Council Regulations, Article 57, August 16, 2017.

B. Composition of the GEG

1. The GEG consists of one main designated Expert per member state. The country designates one or more alternates who can attend meetings and working sub-groups, adhering to the principle “one country, one voice.”
2. The GEG is headed by a General Coordinator and a Deputy General Coordinator, taking into account gender inclusion.
3. The GEG may form working sub-groups, with each sub-group headed by a Working Sub-Group Coordinator and may designate a Deputy Coordinator.

C. Organization of the GEG

1. The GEG determines its internal organization and operation.
2. In terms of organization and methodology, the GEG:
 - a) Elects the General Coordinator and Deputy General Coordinator at the onset of each evaluation round; and
 - b) Forms working sub-groups to draft the national reports and a hemispheric report.
3. Election of the GEG General Coordinator and Deputy General Coordinator should consider the most experienced experts in drug-related topics and in the MEM process, together with their leadership skills and also take into account regional representation and gender inclusion.

D. Functions of the GEG

1. General Coordinator and Deputy General Coordinator

- a) The General Coordinator and Deputy General Coordinator have the following responsibilities:
 - i. Preside over all activities of the GEG;
 - ii. Coordinate all plenary meeting debates;
 - iii. Fully participate as Experts in their respective working sub-group meetings;
 - iv. Meet with the Working Sub-Group Coordinators to address issues arising during their debates and when drafting reports;
 - v. Carry out ongoing communication with Experts in between GEG sessions; and
 - vi. Ensure that the GEG work plan is carried out for the corresponding evaluation round.
- b) The GEG General Coordinator represents the GEG and presents reports at CICAD regular sessions.
- c) The Deputy General Coordinator replaces the General Coordinator in case of temporary/permanent absence and assists in the fulfilling duties. Should the

General Coordinator's absence be permanent, the GEG elects another member to carry out the duties of the Deputy General Coordinator.

- d) The GEG General Coordinator and Deputy General Coordinator fully participate in working sub-groups, but not function simultaneously as a Working Sub-Group Coordinators.

2. Working Sub-Group Coordinators

The Working Sub-Group Coordinators has the following responsibilities:

- a) Coordinate all meetings for their respective working sub-groups during the GEG evaluation round.
- b) Participate in all Coordinators' meetings to report on the progress of his/her respective working sub-group and address arising issues and/or suggest solutions.
- c) Fully report to their working sub-group on topics discussed at the Coordinators' meetings.
- d) Carry out ongoing communication with Experts in their capitals and with the General Coordinator and Deputy General Coordinator.
- e) Ensure that the draft reports are in accordance with established guidelines (Evaluator's Manual, Procedural Manual and agreements reached in plenary meetings and Sub-Group Coordinator's meetings).
- f) Present feedback from their respective working sub-groups.

3. Governmental Expert Group (GEG):

- a) Experts participate timely and actively in all the drafting exercises, during the GEG meetings as well as in his/her country.
- b) Experts are in constant communication with the respective Working Sub-Group Coordinator and the MEM Unit from their capitals.
- c) The GEG is responsible for evaluating countries, as well as drafting, reviewing and editing the national and hemispheric evaluation reports, and agree on a format and style for the reports.
- d) The GEG drafts the evaluation reports based on the narrative document prepared by the MEM Unit which will reflect accurately the information submitted by the country.
- e) The GEG prepares the final drafts of the evaluation reports for presentation, during the corresponding regular session, to the CICAD Commissioners for its approval.
- f) The Experts do not participate in the evaluation of their own country.
- g) Country experts may be consulted by the GEG, during their meetings, on information provided by their country's National Coordinating Entity (NCE) for

clarification purposes. Any other information requested by the GEG from the country will be conducted through the NCE.

- h) Experts are responsible for drafting reports, comparing the information with previous rounds, during the GEG meetings as well as assignments in their capitals.
- i) Experts complete their respective drafting assignments prior to the working sub-group meetings and review the draft reports prepared by other sub-group members.
- j) The Expert of each member state adheres to the principle “one country, one voice.”
- k) Experts and their alternates remain in the same working sub-groups during drafting meetings, save specific exceptions which will be resolved in the Plenary, according to its rules.
- l) When country’s Expert is elected GEG Coordinator or Deputy Coordinator of the GEG, the alternate may occupy the country’s seat at the Plenary, respecting point “j” above.
- m) The alternate Experts can provide technical opinions on their area of expertise during the GEG meetings.

E. GEG Operations

1. GEG Plenary

- a) The quorum for GEG plenary meetings shall be one third of the Experts making up this body. The quorum for adopting decisions shall be a majority of the Experts making up this body⁶. GEG plenary decisions are taken by consensus and, when this is not possible, by a majority vote of the Experts⁷.
- b) The Plenary timely reviews the text for each draft report, with all countries being evaluated with equal attention.
- c) The order in which country reports are reviewed by the Plenary is determined by the GEG General and Deputy Coordinators, based on working sub-groups, level of complexity, language and regional distribution.
- d) During the GEG Plenary, Experts contribute to reviewing all reports, except their own, with emphasis on their own areas of expertise.

2. Working Sub-Groups

- a) The working sub-group meetings operate with the presence of one third Experts (and/or their alternates) assigned to specific sub-groups, and which have been accredited for participation in the GEG. GEG working sub-group

⁶ In accordance with the OAS Permanent Council Regulations, Article 44, August 16. 2017.

⁷ In accordance with the OAS Permanent Council Regulations, Article 57, August 16. 2017.

decisions will be taken by consensus and, when this is not possible, by a majority vote of its members.

- b) Working sub-groups prepare, evaluate and review all assigned reports, based upon the same criteria and guidelines.
- c) The MEM Unit submits a proposal for assigning Experts to working sub-groups, based on professional background and experience.

F. CICAD Executive Secretariat

1. The Units of the Executive Secretariat support and work with the GEG, in their thematic areas, as appropriate.

IV. FINANCING OF EXPERT PARTICIPATION AT GEG MEETINGS

Each member state finances the participation of its Expert to the GEG meetings. However, countries may request assistance from CICAD when, due to exceptional circumstances, they are unable to finance their Expert's participation in the GEG meetings.

A. Procedures to request assistance

1. In order to request assistance, the country sends a letter to the CICAD Executive Secretariat, at least three weeks before the meeting, explaining the reason for its request. All communications are considered confidential. Assistance may be requested once per round.
2. The Executive Secretariat sends a response letter to the country on the type of assistance it will receive. The country receives assistance to cover a portion of its Expert's expenses in a meeting. The country needs to cover the difference.

B. Criteria for the approval of requests

The MEM Unit Chief reviews all country requests taking into account the following criteria:

1. The exceptional circumstance of the country (based on the letter submitted by the country).
2. Current availability of funds.
3. Strong commitment by the country to the MEM process.
4. Expert's experience.
5. Expert's active participation and fulfillment of responsibilities (during the GEG meetings and in their capitals).
6. Counterpart funding from the country to cover its Expert's participation.

V. NATIONAL COORDINATING ENTITY (NCE)

A. Functions of the NCE

The National Coordinating Entity (NCE) is appointed by each member state at the beginning of each evaluation round to provide its country information so the GEG may carry out the corresponding evaluation.

B. Responsibilities of the NCE

The NCE shall have the following responsibilities:

1. Compile information to submit responses to the MEM evaluation instrument (Questionnaire), and review and analyze this information to ensure accuracy and consistency.
2. Prepare and provide an introductory document supporting these responses, in order to contribute to the GEG's evaluation within the established timeframe.
3. Respond to the MEM evaluation instrument within the established timeframe.
4. Review the GEG's "notes to country" in the draft report and distribute them to the appropriate national institutions.
5. Timely review responses received from national institutions to the GEG's "notes to country," in addition to overall text in the draft report.
6. Clarify any information requested by the GEG or the MEM Unit.
7. Promote MEM reports in the country and share said activities with the MEM Unit.
8. Provide technical assistance jointly with the MEM Unit and raise awareness on the MEM process with all participating institutions in the country.

VI. MEM UNIT

A. Functions of the MEM Unit

The MEM Unit is under the Executive Secretariat of the Inter-American Drug Abuse Control Commission (CICAD) and provides technical, coordination and managerial support for those actors involved (IWG, GEG, NCEs) in the MEM process.

B. Responsibilities of the MEM Unit (MU)

The following are MU responsibilities:

1. Maintain continuous communication with the IWG, GEG and the NCEs.
2. Maintain communication with the CICAD Commissioners regarding the MEM process.

3. Verify that information received from the countries is complete.
4. Prepare the narrative document for all MEM country reports reflecting the information submitted by the country.
5. Support the GEG in organizing the working sub-groups and in plenaries and in drafting the national reports.
6. Provide relevant information to draft the hemispheric evaluation draft report and any additional data requested by the GEG.
7. Organize training/workshops, including online, for those actors involved in the MEM process.
8. Maintain an updated glossary of drug terminology.
9. Provide Experts with evaluation guidelines.
10. Provide NCE's with an operational manual.
11. Publish and distribute the MEM national and hemispheric reports, or other MEM-related reports, once they have been approved by the CICAD Commission.
12. Execute promotional activities on the MEM reports and raise awareness on the evaluation process, together with member states and/or regional organizations (i.e. CARICOM, SICA) process on a continuous basis.

VII. REPORTS

A. Evaluation Report

1. The national evaluation report of each OAS member state is concise and reflects the country's internal reality in implementing the Hemispheric Drug Strategy and its Plan of Action that outlines clearly challenges encountered, the strengths and the progress made in executing drug policies, as well as pending steps.
2. The thematic structure of the report is based on the CICAD Hemispheric Drug Strategy and its corresponding Plan of Action. Its main chapters are:
 - a) Introduction
 - b) Institutional Strengthening;
 - c) Demand Reduction;
 - d) Supply Reduction;
 - e) Control Measures;
 - f) International Cooperation;
 - g) Conclusion; and
 - h) Glossary.
3. The report is produced in accordance with the following stages:
 - a) Preparing the narrative document of each country by the MEM Unit, based on the responses received to the Evaluation Questionnaire and, as appropriate, on relevant information from previous rounds;

- b) Drafting the national reports by an expert and his/her alternate(s) is assigned by the Coordinator of his/her respective working sub-group. Alternates may also be consulted by other working sub-groups in matters of their particular expertise, as appropriate;
 - c) Analysis and evaluation of the information in each narrative document by the GEG, during their first drafting meeting, taking into account the interpretive notes in the evaluators' manual, as well as information from the national reports from previous rounds, incorporating conclusions, and finalizing one draft report per country;
 - d) Delivery of each country's draft report for its comments and data update through the "notes to country;"
 - e) Analysis by the GEG of comments and data updates submitted by the country, who modifies each country's draft report accordingly;
 - f) Delivery of final draft report to the country;
 - g) Approval of each country's final draft report by the CICAD Commission in its regular session; and
 - h) Presentation by the CICAD Executive Secretariat of the MEM reports to the OAS Permanent and Observer Missions, the Committee of Hemispheric Security, the Permanent Council and the OAS General Assembly.
4. The sources of information used for the production of the evaluation report are the following:
- a) The member states' responses to the Evaluation Questionnaire. Additionally, the introductory document can be used as reference;
 - b) The evaluation reports from prior MEM rounds;
 - c) Authorized external sources of information, such sources as official websites of national drug agencies/institutions, other official national websites, official national reports, documents from international entities, such as Organization of American States (OAS); United Nations Office on Drugs and Crime (UNODC); Financial Action Task Force (FATF); Caribbean Financial Action Task Force (CFATF); Financial Action Task Force of Latin America (GAFILAT); World Bank; International Monetary Fund (IMF), and other official sources as identified by the GEG;
 - d) The GEG consultations with the NCEs during the evaluation process are carried out to clarify, verify, and request more information; and
 - e) Consultations with the CICAD Executive Secretariat.

B. Hemispheric Report

- 1. The hemispheric evaluation report is concise and reflects the reality of member states in the Hemisphere as a whole regarding the drug problem, outlining clearly the challenges encountered, the strengths and the collective progress in implementing drug policies.

2. The thematic structure of the report is based on the CICAD Hemispheric Drug Strategy and its corresponding Plan of Action. Its main chapters are:
 - a) Introduction;
 - b) Institutional Strengthening;
 - c) Demand Reduction;
 - d) Supply Reduction;
 - e) Control Measures;
 - f) International Cooperation;
 - g) Conclusions; and
 - h) Glossary.

3. The hemispheric report is produced in the following stages:
 - a) Assignment of the GEG experts responsible for analyzing and drafting the hemispheric report, and their organization into thematic sub-groups in charge of the chapters of the report. Each sub-group has a main drafter and one or more secondary drafters;
 - b) Categorization and organization of information and statistics at the hemispheric level by the MEM Unit;
 - c) Analysis of the information in the national reports and other inputs provided by the MEM Unit, to produce an initial draft and evaluation of the hemispheric report chapters;
 - d) Review of the initial draft, and exchange of comments and proposed changes among the working sub-group;
 - e) Submission of the draft hemispheric report to CICAD commissioners for comments and edits;
 - f) Presentation of the final draft hemispheric report to CICAD by the GEG Coordinator; and
 - g) Presentation of the hemispheric report to the OAS Hemispheric Security Council, the Committee of Hemispheric Security, the Permanent Council and the OAS General Assembly.

4. The sources of information used for the production of the hemispheric report shall be the following:
 - a) The evaluation reports from the current MEM round and from previous rounds;
 - b) Authorized external sources of information, such sources as official websites of national drug agencies/institutions, other official national websites, official national reports, documents from international entities, such as Organization of American States (OAS); United Nations Office on Drugs and Crime (UNODC); Financial Action Task Force (FATF); Caribbean Financial Action Task Force

(CFATF); Financial Action Task Force of Latin America (GAFILAT); World Bank; International Monetary Fund (IMF), and other official sources as identified by the GEG;

- c) Consultations made by the GEG to the Executive Secretariat, and to experts on the issues covered by the hemispheric report, in order to clarify and verify the information received.



**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION**

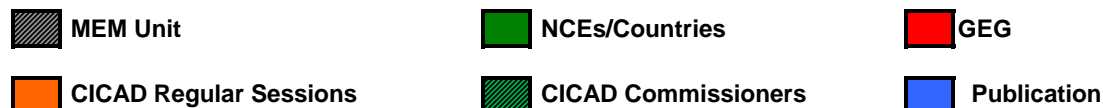
CICAD

**SIXTY-SECOND REGULAR SESSION
December 13 - 15 , 2017
Washington, D.C.**

**OEA/Ser.L/XIV.2.62
CICAD/doc.2328/17
8 November 2017
Original: English**

**PROPOSED CALENDAR OF ACTIVITIES FOR
THE SEVENTH ROUND OF THE MULTILATERAL EVALUATION MECHANISM (MEM)**

MEM - Calendar of Activities for the Seventh Evaluation Round (Draft)



Quarter / Month	Q4 2017			Q1 2018			Q2 2018			Q3 2018			Q4 2018			Q1 2019			Q2 2019			Q3 2019			Q4 2019			
	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
CICAD Commissioners																												
Countries designate their NCE for 7th Round																												
Countries designate their Expert for GEG 7th Round																												
Governmental Expert Group (GEG) / National Coordinating Entity (NCE)																												
Questionnaire is sent to countries																												
Countries collect and send information																												
NCE Training																												
MEM Unit organizes information																												
GEG Preparatory Meeting																												
Sub-group Coordinators' meeting																												
GEG Working Sub-groups (5) evaluate																												
1st Plenary drafting session of the GEG																												
MEM Unit organizes and translates information																												
Countries send comments																												
Sub-group Coordinators' meeting																												
GEG Working Sub-groups (5) evaluate																												
2nd Plenary drafting session of the GEG																												
MEM Unit organizes and translates information																												
CICAD 65 approves 7th round national reports																												
Nat. reports presented to OAS General Assembly																												
Publication of 7th Round Reports																												
GEG prepares draft Hemispheric Report																												
CICAD 66 approves Hemispheric Report																												
Publication of the Hemispheric Report																												

Publication Dates

Evaluation Reports: **June, 2019**
 Hemispheric Report: **December, 2019**

GEG Plenary sessions

First Plenary drafting session: **September, 2018**
 Second Plenary drafting session: **March, 2019**

Note: Meetings will be held virtually or in-person, depending on the availability of funds by donors.