

Evaluation Report of the Impact of 15 years of MedNET

Mediterranean cooperation network on drugs
and addictions of the Pompidou Group

POMPIDOU GROUP

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Evaluation Report of the Impact of 15 years of MedNET¹
**Mediterranean cooperation network on drugs and addictions
of the Pompidou Group.**

¹ site internet <https://www.coe.int/fr/web/pompidou/activities/MedNET>.

This independent evaluation report was prepared by an evaluation consultant, Professor Marie Claire Van Hout, PhD, LLM, Liverpool John Moore's University, UK.

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FOREWORD

2021 marks 15 years of the creation of MedNET, the Mediterranean network for co-operation on drugs and addictions of the Pompidou Group. This period saw not only the extension from 5 to 17 countries but also a wide development of exchange of knowledge and activities.

Therefore, time was ripe for an independent evaluation to measure the impact of MedNET and, to assess the lessons learned and to determinate possible new areas of work in the near future

To undertake this, the Secretariat took the initiative to commission an external consultant : Professor Marie Claire Van Hout from Liverpool John Moore's University who proceeded with a gender sensitive, participatory and inclusive methodology.

This exhaustive and inspiring report is the result of this evaluation and consultation with all the MedNET stakeholders and it gives interesting perspectives for the continuation of our network to be discussed at our next meeting.

EXECUTIVE SUMMARY

MedNET

MedNET is an integral part of the Pompidou Group's work programme. It is the Mediterranean network for co-operation on drugs and addictions of the Pompidou Group which aims to promote co-operation, exchange and mutual transfer of knowledge between countries from both sides of the Mediterranean, respecting human rights and gender equality.

It was created in 2006, after a feasibility study carried out at the initiative of France and the Netherlands. Since then, it has steadily expanded, geographically and thematically, contributing to the development of effective and appropriate responses.

The MedNET terms of reference are adopted within the framework of the Pompidou Group work programme. In 2017, MedNET adopted a consensus document (P-PG/Med (2017) 24 E) which was approved by the Pompidou Group Permanent Correspondents. The consensus document sets out the basic principles of this co-operation and defines common objectives. It is not intended to create legal rights or obligations for the participating countries.

The MedNET network currently consists of seventeen countries: ten Pompidou Group members (Cyprus, Croatia, France, Greece, Italy, Malta, Morocco, Portugal, Switzerland, Turkey) and seven non-members (Algeria, Egypt, Jordan, Lebanon, Palestine², Spain, Tunisia).

The EMCDDA³ and the European Commission attend meetings as observers.

²This designation shall not be construed as recognition of a State of Palestine and is without prejudice to the individual positions of Council of Europe member states on this issue.

Main objectives of the MedNET co-operation

The issue of addictive behaviours represents a major challenge for our societies and calls for a comprehensive, human-rights-based response that combines prevention, health, action against drug trafficking and law enforcement, as well as training and research. It is therefore crucial to develop dynamic co-operation, including with civil society, which reflects the commitment entered into by all members of the network.

The long-term objective of MedNET is to promote the development and delivery of coherent policies on drugs and addictive behaviours, based on scientifically validated knowledge. Participating countries undertake to submit projects where the network's involvement will provide genuine added value.

The MedNET network aims to promote interaction between policy, practice and science, by enabling project implementation to be adapted to conditions in different countries. Since 2006, MedNET countries have worked together to initiate and conduct ambitious projects, drawing on South-South, North-South and South-North co-operation to ensure their success.

All the projects are designed and implemented with a special focus on human rights and due regard to gender equality issues. They are demand driven: presented by the country representatives and reply to the needs of the countries.

Priorities

- Prevention of addictive behaviours;
- Promotion of the collection of reliable, objective and comparable data

³ European Monitoring Centre for Drugs and Drug Addiction

and creation of or support to national observatories;

- Development of well-balanced national strategies;
- Social support and health care for people with addictive behaviours, risk and harm reduction;
- Law enforcement and fight against drug trafficking;
- Training and research.

Target Groups

MedNET's target groups are professionals: medical personnel, social workers, representatives of NGOs⁴, researchers, officials responsible for prevention, health, research and law enforcement, and policy-makers.

Funding

The MedNET budget has a multi-source funding. MedNET participating countries commit to contribute to the network's budget, either financially or by making their resources available, in order to ensure the implementation of projects. Each project is funded in part by the requesting country and by a financial or in-kind contribution.

Purpose, scope and use of the 15 year evaluation

The purpose of the 15 year evaluation was to evaluate MedNET in terms of its impact and to assess the extent to which its core objectives (to promote co-operation, exchanges and mutual transfer of knowledge) have been fulfilled.

The geographic scope of the evaluation were the seventeen MedNET countries.

The results are intended for use by the Pompidou Group and the beneficiary MedNET countries. The EMCDDA and European Commission as observers can also take these results into account for their respective programmes. In particular, it will serve as a reference source for lessons learned and inform the

continuation/future development of the network and its programmes in this area.

Evaluation Approach

A gender-sensitive, participatory and inclusive methodology to evaluate MedNET was employed.

A mixed-methods approach using desk review, SWOT⁵ analysis and semi structured interviewing with key MedNET stakeholders consisted of three stages:

- Desk Review of MedNET Country reports (Algeria, Morocco, Tunisia, Lebanon, Jordan, Egypt, Palestine), MedNET annual regional activity reports (2012 to 2021), MedNET/MedSPAD publications, activities, research and situation assessment publications, and press releases.
- Collection of qualitative data through virtual semi structured interviews (via Blue Jeans) with a purposive selection of MedNET focal points, observers, consultants and the Pompidou Group itself.
- SWOT Analysis completed by MedNET correspondents, and used to identify strategies to leverage current and potential value added to the MedNET programmes and the Pompidou Group.

There was a strong focus on assessing gender and human rights throughout the analytical process, not limited to specific relevant questions but integral to the evaluation process.

Sample

Seventeen interviews (eight males/nine females) were conducted with sixteen MedNET countries (Algeria, Cyprus, Croatia, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Palestine, Portugal, Tunisia, Spain and Switzerland). Nine of the ten Pompidou Group members (Cyprus, Croatia, France, Greece, Italy, Malta, Morocco, Portugal, Switzerland) and all seven non-members (Algeria, Egypt, Jordan,

⁴ Non-governmental organisations

⁵ Strengths, weaknesses, opportunities and threats.

Lebanon, Palestine, Spain, Tunisia) partook in interviews. There was no participation from Turkey. Six interviews were conducted with the Pompidou Group Secretariat, MedSPAD consultants and the EMCDDA as observer (six females). No interviews were conducted with the European Commission which has observer status.

Nine SWOT assessments were returned on behalf of the MedNET countries (Egypt, Cyprus, Switzerland, Malta, Greece, Portugal, Palestine, Italy and Tunisia).

Triangulation of data

Special attention was paid to an unbiased and objective approach and the triangulation of sources, methods, data, and theories in the conclusive remarks. Secondary data sources from the desk review were cross-checked and triangulated through data retrieved from primary research methods. Furthermore, data analyses addressed assumptions made in the MedNET theory of change about how the regional and country programmes were intended to produce the intended results.

Evaluation Themes

The evaluation presents a series of broad themes representing MedNET's cooperation and programmatic activities regionally and at country level. Key themes centre on the role of MedNET in;

- raising awareness, development and implementation of a domestic drug policy;
- the potential changes of drug law;
- research, collection, analysis and interpretation of information, in the setting up, and support in the national drug observatory;
- prevention, treatment and care;
- human rights and access to treatment and care;

- integration of human rights and gender dimension in actions;
- law enforcement;
- South-South exchanges, North-South and in South-North exchanges.

It also assessed:

- cooperation with EMCDDA, the European Commission through the Council of Europe joint programmes, UNICRI⁶, WHO⁷ and regional NGOs such as MENAHRA⁸;
 - functioning, administration, management of the Network by the Pompidou Group Secretariat in serving the needs of the MedNET countries;
 - the impact of COVID-19 on the operations and actions of MedNET in the past two years;
- And identified;
- future directions of MedNET.

Evaluation Findings

Awareness raising and contribution to the development of coherent rights based domestic drug policies and efforts to stimulate legislative reform.

The evaluation underscores how the MedNET cooperation since inception has been instrumental in raising awareness, reducing stigma of drug use, and ultimately has supported the development of scientific evidence informed and human rights based drug policies and practice in the South Mediterranean countries and Mediterranean region.

The MedNET cooperation has overtime improved the situation for PWUD/PWID⁹ in the Mediterranean countries, based on supporting the development of a public health and human rights based approach to drug policy, law enforcement, research and data surveillance, professional training, prevention, treatment and reintegration.

⁶ United Nations Interregional Crime and Justice Research Institute

⁷ World Health Organization.

⁸ Middle East and North African Harm Reduction Association.

⁹ People who use drugs/People who inject drugs

Drug policy reforms, particularly in OAT¹⁰ provision and prevention in the South Mediterranean countries showcase the shift toward a public health approach to drug use with implementation of science based programmes and policies impacting strongly on the ground.

Key public health concepts and fundamental rights centre on a public health centred law enforcement approach, upholding the right to access drug treatment and appropriate care, and the implementation of good practice in prevention and treatment across all health strategies.

The network has evolved strongly over time, with substantial impact, and is especially successful in adapting such good practices and scientific evidence based interventions and research tools to the local legal, social and cultural environments of the MedNET countries. It has gained traction and acquired the capacity of organizing events with an increased frequency, and with strengthened relations between member states.

The role of MedNET in stimulating legislative reform is however time consuming and less effective, and at present centres on the development of Bills for consideration at Parliament. This is explained by the fact that MedNET is not a supranational organization but a network where ideas and good practices are exchanged without imposing any directives. Further, the Pompidou Group is not a standards setting body nor does it have legislative powers.

Law enforcement and Supply Reduction

The role of MedNET in law enforcement and supply reduction generally regards the stimulation of a public health approach to law enforcement, and the continued participation of MedNET member countries in the Pompidou

Group's law enforcement activities such as the Precursor Control network, the Airport and General Aviation Group and the Pompidou Group Working Group on Drug-related Cybercrime. Next to these Pompidou Group activities, in some countries: Algeria and Lebanon, specific law enforcement activities were held.

Research, collection, analysis and interpretation of information, in the setting up, support in the national drug observatory and operationalisation of MedSPAD.

The development and operationalisation of national drug observatories in Morocco, Lebanon and Egypt, and in the facilitation of countries to establish MedSPAD an adaptation of the European ESPAD school surveys in the Mediterranean context, were key achievements of MedNET itself, and represented a lasting foundation to inform the design and operationalisation of drug policies in the Mediterranean countries.

University student and general population surveys are identified by interview participants as potentially useful to inform future government policy and practical initiatives, not limited to children at school (MedSPAD). Prior to the evaluation these were not requested as activities by the country representatives to MedNET.

Burden of disease underpinned by the convergence of sex and drug risk taking and related vulnerabilities was identified. Bio-behavioural surveys (with focus on injecting drug use and sexual transmission of communicable disease such as HIV and viral hepatitis, among PWUD/PWID) and size estimates of PWUD/PWID are identified by interview participants as needed in MedNET countries. Prior to the evaluation these were not requested as activities by the country representatives to MedNET. New

¹⁰ Opioid Agonist Treatment

areas for MedNET development in terms of surveillance and professional training are identified by interview participants as including online drug markets, emerging psychoactive substances and key vulnerable PWUD/PWID such as men who have sex with men, parents, children, the elderly, victims of human trafficking and displacement, and those with dual diagnosis. Prior to the evaluation these topics were not requested as activities by the country representatives to MedNET.

Moving beyond school and treatment settings was indicated as a priority area for MedNET. There is little known with regard to substance use, prevention and support of people in prisons, immigration detention and humanitarian settings, with identified learning opportunities from CoE member states. These could complement existing efforts by UN agencies. Work on migrants is however being undertaken at the moment by the Pompidou Group and involves participation of MedNET countries. A recent suggestion by the Secretariat to move towards an activity on health and drugs in prison has been welcomed and could be further investigated in the next future.

This is further an identified need for investment to publish and showcase comparable data generated by MedNET over time, and efforts could be further expanded to include more research activities such as academic papers, policy and practice guidance outputs. The current practice by Pompidou Group /MedNET Secretariat is to publish the final reports of an activity on the MedNET website. To include more research, would need more time, more staff and funding.

Professional training and capacity building in drug prevention, treatment and reintegration

A substantial achievement was the role of MedNET in supporting evidence-based learning, in the training, professional certification and capacity building of dedicated addiction professionals involved in the prevention of drug overdoses, provision of drug treatment, rehabilitation and social reintegration, and allied health care.

There is significant impact of MedNET on professional standards and evidence based practice relating to drug prevention, treatment and care of PWUD/PWID, including a specific focus on human rights and women's needs.

Whilst training numbers are increasing over time within the MedNET cooperation and this potentially improves treatment service delivery, there is a lack of effective follow up in measuring training knowledge and attitude change. and need for regular KAP¹¹ surveys, and routine clinical auditing at service levels.

This would require more human resources both at the country level and Secretariat level.

Integration of human rights and gender dimension in all actions and particularly access to treatment and care

The MedNET cooperation has developed strongly over time and is underpinned by a strong focus on dissemination and debate to further develop the consideration of human rights and gender mainstreaming in addiction and treatment in the Mediterranean region, both for attention of decision makers, but also treatment providers and the broader public awareness. Fundamental rights include the right to health and right to access and availability of specific drug

¹¹ Knowledge, attitude and practice

treatment and rehabilitation in the community.

There is a concrete opportunity for MedNET countries in the South to learn from the Council of Europe' Pompidou Group's project "*Strengthening human rights-based responses to substance use disorders in prisons*" which has helped to further strengthen drug treatment systems in Eastern and South-East European prisons.

The 2020 publication on human rights and people who use drugs in the Mediterranean Region: MedNET situation in 17 MedNET countries was an important step, and should be repeated regularly. The Covid 19 pandemic prevented the 2020 steering committee discussion on human rights and PWUD. This discussion will take place in 2022.

Whilst human rights and gender equality are debated and discussed in the MedNET meetings, and mainstreamed into projects, activities and actions, a range of human rights and gender equality indicators could support and monitor this in reality and assess practice going forward.

South-South, North-South and South-North exchanges

MedNET has substantially facilitated the dialogue between Europe and its Southern Mediterranean neighbouring countries through co-operation, exchange and capacity building, fostering not only North-South and South-North exchanges, but also South-South co-operation.

The diverse and reciprocal nature of the MedNET network is evident in South-South, North-South, and South-North knowledge exchanges, sharing of good practices, innovations and cultural adaptability of evidence based interventions and methodologies, and mutual cooperation. Cross fertilization of

ideas and experiences, lessons learned and good practices occurred through meetings and study visits.

The network was described as incorporating a wider Mediterranean and international perspective, and has expanded over time, with new countries joining. The mobilisation of expertise from North and neighbouring South countries is supported by a strong dynamic and commitment in the group.

There is huge importance to focus on sustaining MedNET to allow it to evolve, with the country level discussion of ideas balanced with funds and priorities. It is imperative to maintain the operational nature of MedNET in order to stay alive not just its conceptual and political aspects. Whilst MedNET is functional as a concept or platform for institutional and financial supports, some interview participants observed that MedNET could be threatened by further expansion and a careful approach is warranted.

Whilst MedNET's target groups are professionals: medical personnel, social workers, representatives of NGO, researchers, officials responsible for prevention, health, research and law enforcement, and policy-makers, MedNET focal point representatives are largely medical professionals or law enforcement nominated by their Ministry in charge of drug policy and are in a position to represent their country.

Service user and civil society involvement is insufficiently developed. There is an identifiable need to expand on the networking to include social work experts, former PWUD/PWID with lived experience of drug use, service users and civil society organisations (ie from PWUD NGOs, including MENANPUD¹²). This could be examined on a case by case on each activity according to the country.

¹² The Middle East and North Africa Network of for People who use Drugs

Cooperation with international organisations and civil society at European, national and regional level

There is an observed need by some interview participants for less “closed” work (MedNET only) and more cooperation with other activities of the Pompidou Group, in order to profit more and gain more with the limited funds available, and greater cooperation with UNODC and WHO agencies to maximise impact and reduce duplication or fragmented efforts.

Whilst cooperation with EMCDDA in particular and the European Commission is strong, there were observed gaps in the cooperation with WHO Head Office in Geneva and the WHO EMRO¹³ office in Egypt, and similar deficits in cooperation with UNODC¹⁴ ROMENA¹⁵ in Egypt.

Engagement with the regional NGO MENAHRA¹⁶ and MENANPUD is currently nil, despite the history of engagement between 2009 and 2011, when MedNET cooperated with MENAHRA and funded their sub-regional knowledge hub for Algeria, Morocco and Tunisia for the provision of training activities on advocating the needs of drug injectors among NGO’s. However, none of the countries expressed the wish to reinforce the link with Menahra in the course of the years.

Functioning, administration, management of the Network by the PG/MedNET Secretariat in serving the needs of the MedNET countries.

MedNET countries are highly appreciative of the role of the Secretariat of the Pompidou Group in its responsibility for the implementation of the work, the smooth running of the network, management of the budget and in ensuring synergy between the work of

the Pompidou Group and other Council of Europe entities.

The MedNET Secretariat despite being a small team is systematically sufficient, reliable, supportive, and proactive in all the exchanges, preparation of meetings, facilitation of study visits, trainings, offering not only human resources support but also drafting all the contracts involving financial support to the countries proposals and in the first place raising funding from donors and from CoE and EU joint projects or from CoE neighbourhood strategy. The Secretariat has facilitated progress and change in the drugs and addictions’ field among Member countries.

The MedNET Secretariat is made up of one Permanent Staff funded by the Council of Europe. The contracts of the temporary staff are funded on the extra budgetary funding.

In 2021, there were delays in the funding disbursement of voluntary contributions made by the regular donors to MedNET due to the Council of Europe rules of imposing a signature of contract by the donor for each voluntary contribution. This resulted in voluntary contributions being blocked on a central account before being transferred to MedNET account and in very long time consuming discussions with the administration and the donors. Stable funding is required in order to implement the whole annual MedNET programme whilst it develops and increases its activity portfolio.

Threats and opportunities during COVID-19

MedNET has generated new technologies, new methodologies, identified new groups and new situations over time. This is particularly during COVID-19 with many useful for future

¹³ Regional Office for the Eastern Mediterranean

¹³ Regional Office Middle East and North Africa

¹⁴ United Nations Office on Drugs and Crime

¹⁶ Middle East and North Africa Harm Reduction Association

programmes and activities. Examples include COVID-19 Telemedicine, and actions and activities targeting and reaching homeless PWUD and providing OAT care (WhatsApp online counselling, mobile health units, and methadone dispensing machines).

Recommendations

The evaluation has yielded a series of distinct and concrete recommendations for further focus and development by the Pompidou Group and MedNET focal points.

The MedNET Network and its cooperation

It is recommended to conduct less “closed” work (MedNET only) and more cooperation with other activities of the Pompidou Group (this can only be done if the countries decide to cover their participation for example to pay for their travel and subsistence expenses in Pompidou Group activities , in order to profit more and gain more with the limited funds available, and engage in greater cooperation with UNODC (for example ROMENA) and WHO agencies (for example EMRO) to maximise impact and reduce duplication or fragmented efforts provided that these organisations are interested and willing to work with MedNET and share information with us.

It is recommended for MedNET to discuss a potential reinstated engagement with the regional NGO MENAHRA and MENANPUD to support MedNET in its cooperation, research and training activities and advocacy to inform policy and legislative reforms.

It is recommended (on a case by case basis) to create national networks at the country levels themselves, for example two representatives from each country to expand to represent all sectors, and including service users, former PWUD/PWID and civil society.

Operations

The small team at the Pompidou Group Secretariat should be extended. Stable and more funding is required, and the administrative requirements of the Council of Europe should allow the release of funds on calendar year month one.

Research and Surveillance

It is recommended to develop a regional MedNET drug observatory in the Southern Mediterranean countries which includes an early warning system similar to that in the EMCDDA Trend network and which could include a focus on online drug markets and new psychoactive substances (NPS). This would require an extended Secretariat, with larger funding, and requisite infrastructure.

It is recommended to expand the focus of MedNET beyond addiction to also include public health surveillance pertaining to blood borne virus data among PWIDS.

It is recommended to further develop, capacity build and operationalize national drug observatories to conduct general population and university student surveys, bio-behavioural surveys (with focus on communicable disease such as HIV and viral hepatitis and injecting drug use) and size estimates of PWUD and PWID in the Southern Mediterranean countries.

It is recommended to further expand wastewater analysis in determining the level of illicit drug use in MedNET countries.

It is recommended to further develop MedSPAD as the only available data in the Mediterranean to include screening of risk users, problematic cannabis use social media, gaming and gambling, and further expand and support the use of MedSPAD to inform selective and targeted prevention activities in schools.

It is recommended to further instigate MedNET joint publications, policy and

practice guidance outputs, and regularly repeat the human rights and gender equality publications. The 2022 second publication is welcomed.

Professional training and education

It is recommended to further develop and fund effective follow-up measures on professional training and education in the form of routine training knowledge and attitude change (for example KAP surveys), evaluation of the peer to peer training cascade and routine clinical audit at service levels.

It is recommended to expand on training (amongst others) to include behavioural addictions, OAT of pregnant women and neo-natal abstinence syndrome.

It is recommended to further develop MedNET training for stakeholders of the criminal justice sector, and in collaboration with key civil society organisations, former PWUD/PWID and service users.

Human Rights and Gender Equality

It is recommended to utilise a range of human rights and gender equality indicators to support and monitor human rights and gender equality mainstreaming into projects, activities and actions, and in practice going forward.

Target populations and future areas for consideration

It is recommended to devote a greater focus on rehabilitation and reinsertion programming in MedNET activities and actions, in collaboration with key civil society organisations and NGOs; with a targeted focus on PWUD (and including women who use drugs) in prisons, sex workers and men who have sex with men, victims of human trafficking and displacement, parents who use drugs, children, elderly, those with dual diagnosis; and a greater inclusion of civil society organisations and individuals/groups with lived experience of drug dependence.

It is recommended to develop MedNET actions in humanitarian or conflict settings given the displacement of people in the Southern Mediterranean countries as observed as a priority area.

It is recommended to develop MedNET programming in prisons (modelling on the Council of Europe's prison programme in South East Europe taking into account and adapting Pompidou Group expertise in this field), with regard to professional training and capacity building, harm reduction and drug treatment and rehabilitation/reinsertion programming for former prisoners on release.

COVID-19 Opportunities

It is recommended to further develop the treatment innovations and new ways of reaching and supporting PWUD/PWID created during COVID-19 (for example telemedicine, WhatsApp online counselling, mobile health units, and methadone dispensing machines).

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Abbreviations

AIDS: Acquired Immunodeficiency Syndrome
CICAD: Inter-American Drug Abuse Control Commission
CNR: National Research Council (Italian: Consiglio Nazionale delle Ricerche)
EDPQS: European Drug Prevention Quality Standards
EMCDDA: European Monitoring Centre for Drugs and Drug Addiction
ENP: European Neighbourhood Policy
ESPAD: European School Survey Project on Alcohol and Other Drugs
GSMHAT: General Secretariat of Mental Health and Addiction Treatment
HIV: Human Immunodeficiency Virus
IDPS: Internally Displaced Persons
INCB: International Narcotics Control Board
MedNET: Mediterranean cooperation network on drugs and addictions of the Pompidou Group.
MedSPAD: Mediterranean School Survey Project on Alcohol and other Drugs in Schools
MENAHRA – Middle East and North Africa Harm Reduction Association
NGO: Non-Governmental Organisations
NPS: New Psychoactive Substances
OAT: Opiate Agonist Treatment
OST: Opioid Substitution Therapy
PWUD: People Who Use Drugs
TDI: Treatment Demand Indicator
UNICRI: United Nations Interregional Crime and Justice Research Institute
WHO: World Health Organization

I. INTRODUCTION

Pompidou Group

The Pompidou Group provides a multi-disciplinary forum where policymakers, professionals and researchers from Greater Europe and beyond can share experiences and information on drug use and drug trafficking. Formed at the suggestion of the French President Georges Pompidou in 1971, it became a Council of Europe partial agreement in 1980. Today, in 2021, it encompasses 41 countries: 36 of the 47 member states of the Council of Europe, Mexico, Morocco and Israel, as well as the European Commission.

The Council of Europe's neighbourhood policy was adopted by foreign affairs ministers from the 47 member states in Istanbul on 11 May 2011. It is aimed at promoting dialogue and co-operation with countries and regions in the vicinity of Europe which request Council of Europe assistance, based on the common values of human rights, democracy and the rule of law.

In 2021, Pompidou Group adopted a new statute and extended its mandate to include addictive behaviours related to licit substances (such as alcohol and tobacco) and new forms of addiction (such as internet gambling and gaming) and put a strong focus on human rights. The Group changed its official name from the 'Cooperation Group to Combat Drug Abuse and Illicit Drug Trafficking' to the 'Council of Europe International Cooperation Group on Drugs and Addiction.'

MedNET

MedNET is an integral part of the Pompidou Group's work programme. It is the Mediterranean network for co-operation on drugs and addictions of the Pompidou Group and promotes co-operation, exchange and mutual transfer of knowledge between countries from both sides of the Mediterranean, respecting human rights and gender equality.

It was created in 2006, after a feasibility study carried out at the initiative of France and the Netherlands. It has steadily expanded, geographically and thematically, contributing to the development of effective and appropriate responses. Its terms of reference are adopted within the framework of the Pompidou Group work programme.

The network celebrated its 10 years in Rabat in 2016. In 2017, it adopted a consensus document (P-PG/Med (2017) 24 E) which was approved by the Pompidou Group Permanent Correspondents. The consensus document sets out the basic principles of this co-operation and defines common objectives. It is not intended to create legal rights or obligations for the participating countries.

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The EMCDDA¹⁸ and the European Commission attend meetings as observers.

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¹⁸ European Monitoring Centre for Drugs and Drug Addiction

Main objectives of the co-operation

The issue of addictive behaviours represents a major challenge for our societies and calls for a comprehensive, human-rights-based response that combines prevention, health, action against drug trafficking and law enforcement, as well as training and research. It is therefore crucial to develop dynamic co-operation, including with civil society, which reflects the commitment entered into by all members of the network.

The long-term objective of MedNET is to promote the development and delivery of coherent policies on drugs and addictive behaviours, based on scientifically validated knowledge. Participating countries undertake to submit projects where the network's involvement will provide genuine added value.

The MedNET network aims to promote interaction between policy, practice and science, by enabling project implementation to be adapted to conditions in different countries.

Since 2006, MedNET countries have worked together to initiate and conduct ambitious projects, drawing on South-South, North-South and South-North co-operation to ensure their success. All the projects have to be designed and implemented with a special focus on human rights and due regard to gender equality issues.

Priorities

Priority is given to the following topics:

- Prevention of addictive behaviours;
- Promotion of the collection of reliable, objective and comparable data and creation of or support to national observatories;
- Development of well-balanced national strategies;
- Social support and health care for people with addictive behaviours, risk and harm reduction;
- Law enforcement and fight against drug trafficking;
- Training and research.

Added value of the network

- Adaptation of the methodology and recognised tools to the cultural context of the Southern Mediterranean such as the MedSPAD¹⁹;
- Support for the launch of national MedSPAD school surveys;
- First assessment of the situation between the countries of the southern shore of the Mediterranean by MedSPAD;
- Support for the implementation and/or change of legislation by means of legal opinions;
- Training in the field of health;
- Supporting the setting up of treatment and care centres;
- Exchanging qualitative and quantitative information in various fields with a view to developing a comprehensive approach to the drug problem;
- Bridging role between the northern and southern shores of the Mediterranean;
- Exchange of experience between countries on the southern shore of the Mediterranean, and initial assessment of the situation in each country, in the context of MedSPAD;

¹⁹ Mediterranean School Survey Project on Alcohol and other Drugs in Schools

- Support for the introduction of different treatment and care modalities, including OAT²⁰;
- Taking account of needs expressed by stakeholders in the countries concerned when drawing up and implementing the work programme of activities;
- Gender mainstreaming in health care services: women's specific needs in accessing care ;
- Awareness raising and capacity building in the field of drugs through multi-agency meetings bringing together the prevention, treatment and care and law-enforcement sectors;
- Flexibility in implementing programmes to meet emerging needs;
- Evaluation of MedNET actions by stakeholders;
- Cost-effectiveness.

Target Groups

MedNET's target groups are professionals: medical personnel, social workers, representatives of NGO²¹, researchers, officials responsible for prevention, health, research and law enforcement, and policy-makers.

Participation

Accession to MedNET presupposes a voluntary commitment and a mutual interest. Any Mediterranean country and any other country interested in this co-operation can become a member. To join the network, the Minister responsible for drug policy sends a letter of commitment to the Pompidou Group's Executive Secretary and appoints a national representative with the authority to enter into commitments on behalf of his/her government.

Chair

The positions of Chair and Vice-Chair are held for a period of one year by a Northern Mediterranean country and a Southern Mediterranean country alternately. In order to ensure continuity in the work, the Vice-Chair is expected to take over the position of Chair the following year. Election is by consensus.

Secretariat

The Secretariat of the Pompidou Group secretariat is responsible for the implementation of the work programme and the smooth running of the network and seeks to ensure synergy between the work of the Pompidou Group and other Council of Europe entities. It manages the MedNET budget, made up of voluntary contributions from Pompidou Group member countries and other sources of funding (Council of Europe, European Commission, etc.).

Meetings

The Steering Committee made up of the representatives of the participating countries meets at least once a year to adopt the work programme based on projects submitted by each country, to review the implementation of on-going projects and to discuss future activities. The EMCDDA participates in the steering committee and shares its expertise, in particular as regards data collection and analysis and support for national observatories.

²⁰ Opioid agonist therapy

²¹ Non-governmental organisations

In 2020, the Steering Committee met just once online because of the COVID-19 pandemic. Communication continued throughout the year with all members of the network.

In 2021, the Steering Committee did not meet in Tunis on 16 and 17 November, and this was rescheduled to February 2022.

Working methods

MedNET provides a political decision mechanism, with the representatives of the Network countries' meeting once or twice a year to decide upon the work program, budget and external financial lines that can be subscribed, adopting an annual report and calling upon expertise and cooperation from countries that are members or non-members of the Pompidou Group.

MedNET facilitates the recognition, dissemination and appropriation of good practices and tried-and-tested approaches in partnership with other key national and international actors working in the region. Thus, participating countries, through their representatives, share their knowledge and know-how, providing the network with scientifically validated data in all relevant fields.

Participating countries undertake to alert their competent national authorities to any activities conducted by MedNET. The national and regional projects implemented are outlined in annual activity reports. All the work done by the MedNET network is subject to a regular and thorough evaluation.

Funding

The MedNET budget has a multi-source funding. MedNET participating countries commit to contribute to the network's budget, either financially or by making their resources available, in order to ensure the implementation of projects. Each project is funded in part by the requesting country and by a financial or in-kind contribution.

- **Voluntary contributions 2006-2021, notably from France, Italy and Spain**
- **South Programme I, II, III and IV: programme funded by the European Union and implemented by the Council of Europe (2012-2022)**
- **Direct funding of activities by countries**
- **Council of Europe Neighbourhood Partnership with Morocco and Tunisia (2016-2021) for the Morocco and Tunisia Action Plans;**
- **Pompidou Group's Ordinary Budget for MedNET Steering Committee meetings since 2019**

The Pompidou Group Secretariat has submitted project proposals for the next Council of Europe's neighbourhood partnerships with Morocco and Tunisia (2022-2025) which are currently being examined.

II. DESK REVIEW SUMMARY

This section presents the desk review summary of documents listed in Annex I. It firstly provides a summary from the Impact Evaluation conducted in 2016.

Key findings Impact Evaluation 2016

The Impact Evaluation of 2016²² revealed significant progress in how MedNET facilitated the dialogue between Europe and its Southern Mediterranean neighbouring countries through co-operation, exchange and capacity building, fostering not only North-South and South-North exchanges, but also South-South co-operation. In essence, the Mediterranean Network functioned based on the need of the countries concerned and the realisation of the donor countries that the issue at stake was and is at the core of what the Council of Europe values most, that of human rights, democracy and the rule of law.

The evaluation illustrated how MedNET operated by promoting awareness for coordinated policy strategies, sharing experiences and practices, training and technical support, fostering institutional design, agencies and stakeholders' cooperation and communication, and paving the way for the introduction of human rights based policies. The report illustrated how MedNET draws extensively from the classic "bridging" function of the Pompidou Group of the Council of Europe, which coordinates and manages the MedNET Network. It underscored how MedNET has pursued its objectives based on the core values of the Council of Europe; those of human rights, democracy and rule of law. The twelve member countries (Algeria, Cyprus, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Portugal and Tunisia) at the time were observed to exchange experience based on human rights, democracy and the rule of law in the development and implementation of drug policy, providing training for the development of treatment and care services respecting human rights.

The evaluation concluded that MedNET was meeting the needs of PWUD²³/PWID²⁴ and recognised the importance of understanding addiction as a healthcare issue, in order that people suffering from drug problems be treated as patients and not criminals. MedNET was observed to have been instrumental to all countries involved, in that in the South, it was active during the Arab Spring and for those countries on the northern rim it continued its actions during times of austerity.

The section secondly provides a descriptive summary of key thematic areas and achievements as indicated by the 2016 Impact evaluation (2006-2016), and subsequently further developed and spanning 1999 -2021 (see Figure Two).

See **Figure Two: Timeline 1999-2021** overleaf.

Detailed key achievements and activities of the seven MedNET South countries are subsequently presented in Table One.

²² Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2016). *"10 years and beyond" 10 years of co-operation in the Mediterranean Region on Drugs and Addiction: Evaluation among MedNET participants*. Council of Europe, Strasbourg.

²³ People who use drugs

²⁴ People who inject drugs

TIMELINE



2014

The MedNET countries take part in the Pompidou Group's "Co-operation Group of Drug Control Services at European Airports and in General Aviation". Establishment of the national observatory on drugs and drug addictions in Egypt. MedNET contributed to the Pompidou Group's study on the "gender dimension of non-medical use of prescription drugs in Europe and the Mediterranean Region".

2016

MedSPAD survey carried out in Algeria and Egypt. Algeria introduced opiate substitution treatment into its healthcare system. Launching of a national drug strategy by Tunisia and the Lebanon. MedNET 10 year anniversary, Rabat, 30 November : Algeria, Morocco, Cyprus, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Portugal, Tunisia along with other invited countries and international organisations celebrate the event. MedNET supports the Conférence TDOS : cinquième colloque international francophone sur le traitement de la dépendance aux opioïdes, Rabat (30 November- 2 December), first conference organized in a country of the Mediterranean Region. Accession of Palestine to MedNET.

2018

Croatia joined the MedSPAD committee. Switzerland joined MedNET in 2018 and attended meetings of the MedNET steering committee.

The MedSPAD II survey was published in 2018.

MedNET continued to take into account the gender dimension in its activities.

Training and accreditation for addiction counsellors, nurses working in the treatment of addictions was conducted in Egypt. Morocco completed Addictology courses; organised the Congress of the Moroccan Association of Addictology and published the second report of the Moroccan Observatory of Drugs and Addictions. Tunisia and Algeria participated in the European Drug Prevention Quality Standards (EDPQS) training in Cyprus and Tunisia participated in the Precursor Network. Palestine conducted a field visit on Evaluation of the Opioid Substitution Programme (OST) for Palestinian Authorities in Ramallah.

Jordan, Tunisia, Algeria and Morocco participated in the Pompidou Group Working Group on Drug-related Cybercrime, and the Airport Group meeting in France.

Lebanon disseminated the first report on Drugs Situation in Lebanon by The National Drugs and Addiction Observatory and participated with Tunisia in the working group for guiding principles on Opiate agonist treatment OAT.

2015

Croatia joined MedNET.

Several countries participated in the General Aviation meeting in Madrid, the Pompidou Group Airports seminar in France (Jordan, Lebanon, Tunisia), and the 12th EXASS Net meeting Refugees and Drugs: "Estimating needs, support practices, preventing risks" in Greece (Jordan, Lebanon, Algeria).

MedNET countries participated in a Rome seminar on "Women and Drugs: from policy to good practice". MedNET Countries contributed to the guidelines on substitution treatments (Lebanon, Algeria) along with international experts. Other MedNET Seminars included "Support to staff working in Opioid Substitution Treatment centers" and prevention tools.

2017

The MedSPAD committee published the first and only report on the prevalence of the use of drugs alcohol and tobacco by teenagers using data from nine countries. The MedNET countries took part in the Pompidou Group Precursors network. MedNET continued its partnership with the South Programme II "Towards strengthened democratic governance in the Southern Mediterranean". Round tables on the observatories in Egypt, Morocco and Tunisia. The Palestinian National Authority took part in the activities of the MedNET network. MedNET took part in the Pompidou Group seminar on women, drugs and violence, held in Rome.

Lebanon set up its National Drugs and Addiction Observatory and passed a Drug Law Amendment. Amendments were provided to the Drugs Bill in Tunisia regarding alternative sentencing for first time user of drugs.

2019

Spain officially acceded to MedNET and joined the MedSPAD committee. MedNET Secretariat participated as observer in the advisory committee meeting of the EU4 Monitoring Drugs which is funded by the EU and which is implemented by EMCDDA.

A MedSPAD regional report was produced in 2019 covering 13 countries. Lebanon and Egypt participated in the joint seminar Pompidou Group/CICAD on Drug Prevention Approaches that Make a Difference seminar in Iceland, and the International Seminar on "Refugees and Drugs: estimating needs, support practice, preventing risks" in Greece. There was a workshop in Jordan by a Moroccan expert on Prevention of drug use among children and youth.

Lebanon conducted a mapping of services for substance use disorders; developed accreditation standards; raised awareness on the use of articles 193 and 194 of the Drug Law among public prosecutors and law enforcement officers, engaged with connecting youth for drug awareness in schools and cooperated with UNICRI on the role of families in drug use prevention

2019 continued....

Morocco hosted a seminar on 10 years of opioid agonist treatments in Morocco, set up the Réseau Maroc Addicto Benad, provided Addictology courses, participated in the 34th Annual Meeting of the European Airport and General Aviation Drug Enforcement Services in France, and the International Seminar on "Refugees and drugs: needs assessment, practice support, risk prevention", in Greece (including Palestine and Algeria).

Algeria participated in a one-day training seminar for psychologists and the Annual meeting of the Pompidou Group International Precursor Control Network.

2020

The publication "Human rights and people who use drugs in the Mediterranean region: current situation in 17 MedNET countries was disseminated. MedNET supported the UNICRI project on the needs of families for preventing drug use among young people.

In 2020, the General Secretariat of Mental Health and Addiction Treatment (GSMHAT) in Egypt published an article on Plan for SUD in Covid-19 Pandemic.

Egypt continued the Development of a community-based model of care for substance abuse project; MedSPAD 2020, participated in Executive Training Module I in Norway; and extended the training and building capacity phase for the Development of Specialized Addiction Services for Pregnant Females.

In Jordan and Palestine, training workshops and study visits were postponed. Lebanon postponed the MedSPAD III survey due to COVID-19. Jordan, Tunisia, Palestine and Morocco participated in the AIRPORTS and GENERAL AVIATION meetings. Morocco published the National Guide and e-learning module for capacity building of civil societies in prevention interventions on psychoactive substances adapted to the Moroccan context, and launched MedSPAD IV.

2021

In 2021 due to the COVID-19 pandemic, only one MedNET steering committee meeting, instead of two, was held. The MedSPAD committee adopted new guidelines and rules for data sharing.

MedSPAD-ESPAD Bridge Project on the use of data in prevention was launched and is to be implemented by CNR. Morocco will conduct MedSPAD IV. Palestine participated for the first time in 2021 in the MedSPAD committee.

The 2021 series of training on motivational interviewing was attended by 12 Tunisian psychiatrists and 4 groups of 48 Algerian medical staff (psychiatrists and psychologists) in Paris.

Cyprus hosted an online study visit on emergency and intermediate care services date for an Egyptian delegation. Egypt developed a community-based model of care for substance abuse, a specific model of care for juveniles with substance abuse problems in correctional facilities and of model of care for patients with dual diagnosis. Italy will host an online study visit on dual diagnosis for an Egyptian Delegation in Autumn 2021.

The training workshop and Jordanian study visit on prevention have been postponed to 2022 due to the pandemic. Implementation of the drug law in Lebanon centred on the provision of posters in detention centers to highlight the role of law enforcement in respecting and promoting the rights of people under arrest especially in situations where they need them most.

Activities in Lebanon included launching 'Paving the way for evidence Informed Policies, needs of women with substance use disorders', a diploma training in Addictology and the 'Beirut en route'.

Morocco further developed Addictology courses in Casablanca, Rabat and Marrakech; the national guide and e-learning module for the reinforcement of capacity of civil societies in psychoactive substance use prevention interventions adapted to the Moroccan context.

Palestine and Tunisia participated in an Airport group meeting.

Within the framework of the addictology diplomas, the curricula in Tunis, Rabat, Casablanca and Marrakech included a new module on the prevention, treatment and care of women drug users. The new courses to be launched in 2021 in Sfax, Monastir and Beirut will also include such a module.

Figure Two: Timeline 1999-2021

Thematic Areas and Achievements in the time frame 1999-2021²⁵

The Pompidou Group launched its activities in the Mediterranean region in Malta in 1999 with a conference on *“Co-operation in the Mediterranean region on drug use”*. Following this conference, the scale of the drug problem was studied for the first time in the region by means of surveys carried out in Algeria, Morocco and Lebanon as part of MedSPAD. This project, which is an adaptation of the ESPAD²⁶ school surveys conducted in Europe, provides an insight into drug use and attitudes towards drugs in the Mediterranean region.

In 2006, at the initiative of France and the Netherlands, MedNET was set up with the participation of Algeria, Morocco, and Tunisia and with the involvement of the Pompidou Group in co-ordinating and managing the network. The network was set up initially for one year. An evaluation carried out at the end of that period highlighted the flexibility of its operation and the network has been active ever since.

The network has expanded regularly. Lebanon, Italy and Portugal joined in 2007, Tunisia in 2009, Jordan, Egypt and Cyprus in 2010, Greece in 2011 and Turkey in 2016. In 2015, the Palestinian National Authority participated in the network's activities. Some MedNET non-member countries also contribute to its activities: Belgium, Croatia, Czech Republic, Ireland, Norway, Switzerland and the United Kingdom. Croatia joined MedNET in 2017 and in 2018 joined the MedSPAD committee. Switzerland joined MedNET in 2018 and attended meetings of the MedNET steering committee. Spain then officially acceded to MedNET and joined the MedSPAD committee.

In 2020 and 2021 due to the COVID-19 pandemic, only one MedNET steering committee meeting, instead of two, was held. The MedSPAD committee held its meeting online on 21 April 2020 and adopted new guidelines and rules for data sharing. Palestine participated for the first time in 2021 in the MedSPAD committee. In 2021, the MedNET steering committee meeting originally set for 16 and 17 November in Tunis, was rescheduled to February 2022.

MedSPAD

Drug use among teenagers in the Mediterranean is recorded by the MedSPAD. From 2000 to 2006, Algeria, Morocco, France and consultants from the Netherlands and Malta developed the MedSPAD methodology. The official launch of the MedSPAD took place in Rabat in 2003 and was facilitated by the Moroccan Minister of Health. The validity and reliability of school surveys based on European ESPAD school surveys methodology was demonstrated and the first MedSPAD school surveys were conducted in 2005 in Rabat, Morocco and in Algiers, Algeria, indicating feasibility to conduct such activities in the Southern Mediterranean countries and exchange information.

MedSPAD guidelines have been developed progressively since first issued in 2011 and have been revised fully in 2021 with the view of reaching a common methodology and producing MedSPAD school surveys regional report based on a database containing clean and ready-for-analysis data.

MedSPAD surveys were conducted in Lebanon in 2008, in Morocco in 2009, 2013 and 2017 and in 2021 in Tunisia in 2013, 2017 and 2021, and in Algeria and Egypt in 2016 and 2020, demonstrating the importance of this instrument for recording the drug use of young people in school and their attitudes towards drug use.

²⁵ Kindly note this section contains direct citation from the above report.

²⁶ European School Survey Project on Alcohol and Other Drugs

The MedSPAD committee published a first report in 2015 on the prevalence of alcohol, tobacco and drug use among adolescents. This was a first step and a first attempt to present data from Europe, North Africa and the Middle East. The report presented data from nine countries: Cyprus, France, Greece, Italy, Lebanon, Morocco, Malta, Portugal and Tunisia.

The 2017 MedSPAD Prevalence of Alcohol, Tobacco and Drug use Among Adolescents in the Mediterranean Region was the second report on the prevalence of the use of alcohol, tobacco and drugs. Twelve countries provided prevalence estimates and the respective confidence intervals for the use of alcohol, tobacco, cannabis and medication with and without medical prescription. Six of the countries, Cyprus, Greece, France, Italy, Malta and Portugal, border the northern rim of the Mediterranean whereas the other six countries, namely, Algeria, Egypt, Israel, Lebanon, Morocco and Tunisia border the southern rim of the Mediterranean. Israel participates in the MedSPAD whereas this country has not joined MedNET.

The 2019 MedSPAD regional report provided an insight into the perceived availability, early onset, prevalence of substance use among adolescents and its socio economic and policy context in the Mediterranean Region and covers 13 countries. Thirteen countries provided the raw data from their national surveys: Algeria, Croatia, Cyprus, Egypt, France, Greece, Israel, Italy, Malta, Morocco, Portugal, Spain and Tunisia.

In 2020 Lebanon postponed the MedSPAD III survey due to COVID-19 which was carried out in 2021.

In 2021, Palestine joined MedSPAD.

The MedSPAD-ESPAD Bridge Project on the use of data in prevention was launched in 2021 and is to be implemented by the National Research Council of Italy (Italian: Consiglio Nazionale delle Ricerche, CNR). The project aims to investigate and assess the use of school survey data (ESPAD and MedSPAD mainly and other school surveys if possible) in the European and Mediterranean regions, and draft a report in 2022 on the actual and potential use of school surveys in policy and prevention planning and evaluation.

National Drug Observatories

MedNET's objective was defined as to promote co-operation and a two-way transfer of knowledge between European and Mediterranean countries (North-South and South-North exchanges) as well as within the Mediterranean region (South-South). The ultimate objective is to develop and implement coherent, balanced drug policies which respect human rights and address gender equality issues, based on evidence gathered by national observatories.

At a high-level conference in 2009, the MedNET countries committed themselves to setting up national observatories/resource centres on drugs and drug addiction in collaboration with the EMCDDA. In order to establish policies based on scientific evidence, a regional seminar was held in Rabat in 2010. Thereafter MedNET countries commenced the work to set up national observatories on drugs and addictions.

The first national observatory on drugs and drug addiction was set up in 2011 in Morocco. In the same year Morocco also became the first Council of Europe non-member country to join the Pompidou Group.

In 2014, Egypt established its national drug observatory. In 2015, MedNET held round tables in Egypt and Tunisia to support experience exchange and development work in

other MedNET countries for the setting up of national drug observatories. The Moroccan Observatory on Drugs and Addiction published its first report in 2015 and second in 2017.

Jordan introduced a methodology to collect treatment demand data in 2012, which became operational in 2016. One of the missions of the Office National de Lutte contre la Drogue et la Toxicomanie in Algeria, is to collect and analyse data and training was provided along the years to further develop its capacity to do so. In particular, in 2016, Algeria further enhanced its expertise by participating in training seminars on data collection, analysis, communication and use of research for designing policy. In Lebanon, in 2016, the national observatory on drugs and addiction was supported by the EMCDDA, to develop an information map based on separate drug related databases. The development of these activities has fostered research, either through the initiation of data collection in some countries or by consolidating data collection, collation and analyses. The results have provided policy makers with the necessary data and report analysis, enabling decision making to develop more effective drug policies.

The Egyptian Observatory on Drugs and Addiction developed a data collection system on treatment and published its first report in 2018. Lebanon set up its National Drugs and Addiction Observatory in 2017 and published its first report in 2018. The TDI²⁷ is also available in Arabic.

Several projects are being conducted by Tunisia over the period 2019-2021; Day care centre for women who use drugs, sensitization to prevention of peers (students, pupils) through the use of new technologies and analysis of used waters. In 2019 Egypt continued the training and capacity building of addiction nurses project, development of a parental training model for parents with substance use disorder project and along with Jordan and Lebanon participated in the joint seminar Pompidou Group/CICAD²⁸ on Drug Prevention Approaches that Make a Difference” seminar in Iceland, and the International Seminar on “Refugees and Drugs: estimating needs, support practice, preventing risks” in Greece. In 2019 Lebanon conducted a mapping of services for substance use disorders: prevention, treatment, rehabilitation, harm reduction, social re-integration.

In 2020 the publication *“Human rights and people who use drugs in the Mediterranean region: current situation in 17 MedNET countries”* was disseminated. In 2020, the General Secretariat of Mental Health and Addiction Treatment in Egypt published an article on Plan for SUD in COVID-19 Pandemic. Tunisia conducted wastewater analysis to determine the level of illicit drug use.

National drug policy and strategies

Legislation on drugs are evolving and national drug strategies are coming to the fore. The development of a national strategy in the fight against drugs is legally based on three United Nations Conventions: the Single Convention on Narcotic Drugs of 1961, modified by the Protocol of 1972; the Convention on Psychotropic Substances of 1971; and the Convention against Illicit Traffic in Narcotic Drugs and Psychotropic Substances of 1988. A national strategy stands for cross cutting areas of public policy and service delivery which brings together departments, agencies and the community and voluntary sectors to provide a collective response to tackling the drugs problem. It maximizes existing resources, prioritizes needs and defines clear lines of intervention.

²⁷ Treatment Demand Indicator

²⁸ Inter-American Drug Abuse Control Commission

MedNET activities aimed at improving public health and the implementation of drug policies in the region while respecting human rights and the needs expressed by countries. The action helps to reinforce the political and democratic process in the region by promoting the right to health of PWUD and supporting the necessary legislative reforms.

MedNET has been instrumental in supporting regional and national level activities targeting drug prevention and treatment of addiction. Impact centres on the building of capacity, knowledge exchange, establishing PWUD oriented treatment centres, providing OAT in Morocco, Lebanon and Algeria and prevention of HIV²⁹/ AIDS³⁰ among drug injecting users; and increasingly incorporating gender mainstreaming and gender dimensions in the operationalisation of drug treatment policy and systems. Targeted prevention activities are implemented.

MedNET countries have been shaping their national drug prevention systems based on scientific evidence. National drug prevention systems are now in place, with health-centred and scientific based prevention programmes.

In 2006, Algeria hosted the first MedNET international seminar on the role of research in the design of drug policies. Lebanon and Morocco were the first countries to introduce opioid substitution treatment, in 2009 and 2011 respectively. In 2012, Italy organised a conference on the promotion of drug national strategies and action plans in the Mediterranean region, with the participation of MedNET countries. Round tables on the role and functions of a national drug observatory and articulation amongst national structures to design and implement a national drug policy were held in 2013 and 2015 in Morocco, Tunisia and Egypt following that initiative. These round-tables replied to the needs and demand of those countries and were animated by experts from Greece, Italy, Malta and Portugal. In parallel, in 2014, country profiles on the “*drug situation and drug policy*” for Algeria, Egypt, Jordan, Lebanon, Morocco and Tunisia, were drafted in collaboration with MedNET correspondents.

In 2016, Algeria announced the introduction of OST³¹ into its healthcare system. A National Substance Use Strategy was launched in Lebanon in 2016 with the Pompidou Group’s support for its development and implementation in 2017. Tunisia started drafting a national drug strategy whose main directions were first discussed in 2012 during a national consultation conference with the participation of the Pompidou Group Secretariat along with representatives from France, Italy and Portugal, which took place just after the revolution. In 2017, Algeria developed its third drug strategy.

MedNET countries participated in a Rome seminar in 2017 on “*Women and Drugs: from policy to good practice*”. In 2017 Egypt further developed its National Drug Observatory and Gender Responsive Services for women who use drugs, developed care addiction services for adolescents and pregnant women who use drugs, the continuation of addiction treatment services for HIV positive patients. ”

Lebanon launched its National Substance Use Strategy, with the Pompidou Group’s support for its development and implementation in 2017 and passed a Drug Law Amendment. Amendments were also provided to the Drugs Bill in Tunisia in 2017 regarding alternative sentencing for first time user of drugs. In 2018 Lebanon participated with Tunisia in the working group for guiding principles on OST.

²⁹ Human immunodeficiency virus

³⁰ Acquired immunodeficiency syndrome

³¹ Opioid Substitution Treatment

In 2020 Egypt continued the development of a community-based model of care for substance abuse project; and extended the training and building capacity phase for the Development of Specialized Addiction Services for Pregnant Females. Tunisia conducted a project on the prevention and management of addiction among adolescents.

Implementation of the drug law in Lebanon in 2021 centred on the provision of posters in detention centres to highlight the role of law enforcement in respecting and promoting the rights of people under arrest especially in situations where they need them most. A prevention booklet was published in 2021 to assist the survivors of the Beirut explosion.

Law Enforcement and Supply Reduction

Cooperation in the field of law enforcement and supply reduction is growing and developing. MedNET countries are progressively participating in the Pompidou Group Law enforcement activities such as the Precursor network, and the Airport group. A balanced drug policy includes both the demand and supply reduction perspectives.

Regional seminars in Algeria and Lebanon on synthetic drugs and drug precursors have taken place as far back as from 2008. As part of the promotion of a comprehensive and balanced drug policy, law enforcement activities are carried out in the region through country specific activities in response to requests from countries concerned and through regional seminars: in Lebanon in 2010, on synthetic drugs, precursors and supply indicators, and in Strasbourg in 2012, on the fight against drug trafficking in airports.

Since 2014, MedNET countries have been part of the Pompidou Group's Airports Group and since 2015 also participate in the precursor network, thus joining the Pompidou Groups Law enforcement activities. MedNET countries also participated in the Pompidou Group Symposium on New Psychoactive Substances, hosted by Italy in 2016.

Several countries participated in the 2017 General Aviation meeting in Madrid and the Pompidou Group Airports seminar in France (Jordan, Lebanon, Tunisia).

In 2018 Jordan, Tunisia, Algeria and Morocco participated in the Pompidou Group Working Group on Drug-related Cybercrime, and the Airport Group meeting in France.

In 2018 Tunisia participated in the Precursor Network.

In 2019 Lebanon raised awareness on the use of articles 193 and 194 of the Drug Law among public prosecutors and law enforcement officers. In 2019 Morocco participated in the 34th Annual Meeting of the European Airport and General Aviation Drug Enforcement Services in France. Algeria participated in the Annual meeting of the Pompidou Group International Precursor Control Network. In 2020 Jordan, Tunisia, Palestine and Morocco participated in the Airport and General Aviation meetings. In 2021 Palestine and Tunisia participated in an Airports Group Meeting; and Algeria; and Palestine and Tunisia participated in a General Aviation Meeting.

Training and education

Capacity building is continuously expanding. Specialists are being trained, through university level courses on addictions created in Morocco and Tunisia, and training seminars in Algeria thereby increasing the number of qualified staff working in treatment centres, and as a consequence improving the quality of service delivery.

Morocco launched university courses in Addictology in 2009 in the Faculties of Medicine at Casablanca and Rabat. These courses have been regularly conducted and, as a result, the number of persons trained to work in treatment centres throughout Morocco has risen,

as well as the quality of service delivery. In 2013, Tunisia launched a course in addictology, following a pilot-phase.

Training and acquisition of expertise in the field has also been achieved within other MedNET activities due to the professional input of Pompidou Group Member countries outside MedNET. Study visits were indeed hosted in Pompidou Group current or former member countries such as Belgium, Cyprus, Czech Republic (online), Ireland, France, Norway, Malta, Portugal, Switzerland and the United Kingdom. Independent experts from other Pompidou Group current or former member countries such as Croatia, Ireland, Norway, Switzerland and the Netherlands, have also participated in regional seminars.

In 2017, Egypt has established a national board for accreditation and certification of addiction counsellors. It published its Training Accreditation & Certification Board for Addiction Counsellors Final Report PHASE II, and undertook a study visit to Cyprus on the EDPQS³². In 2017 Morocco hosted Addictology courses in Casablanca and Rabat and rehabilitation and gambling workshops. Several countries participated in the seminar 'Women and drugs: from policy to good practice' (Palestine, Morocco and Algeria). Tunisia hosted several seminars in harm reduction, addictions and policy choices, cognitive-behavioural therapies in cannabis addiction, the First National Addictology Congress and the University diploma in Addictology. Algeria hosted a seminar on Women and Drugs; 'Support to staff working in OST centres'. Several MedNET countries partook in the 12th EXASS³³ Net meeting Refugees and Drugs: "Estimating needs, support practices, preventing risks" in Greece (Jordan, Lebanon, Algeria).

In 2017 MedNET countries contributed to the guidelines on OST (Lebanon, Algeria) along with experts from Canada, Israel, Italy, Poland, Spain, United Kingdom, Algeria, Belgium, France, Greece, Lebanon, Lithuania, Morocco, Portugal, Slovenia, Switzerland, Tunisia and Turkey, and representatives of the EMCDDA and the WHO³⁴.

The Cyprus National Authority on Addictions, newly set up in 2018 adopted the new holistic approach in prevention and treatment of addictions including gambling addiction organised two study-visits on the EDPQS. Egypt conducted training and accreditation for addiction counsellors and nurses working in the treatment of addictions. Morocco completed Addictology courses in Casablanca and Rabat 2018-2019 and organised the Congress of the Moroccan Association of Addictology. In 2018 Tunisia and Algeria conducted a training visit to the EDPQS training in Cyprus. Palestine conducted a field visit on evaluation of the OST programme for Palestinian Authorities in Ramallah.

International seminars for professionals working in different fields from Council of Europe member states, Middle East and North Africa and other European and International organisations, the Drug Related Challenges for Migrants, Refugees and IDPS³⁵ project was included under the Pompidou Group 2019-2022 Work Programme. Capacity building seminars and support networks in addictions (health and social professionals) from migration/asylum services, law enforcement and civil society working with migrants/refugees were operationalised.

Several projects are being conducted by Tunisia over the period 2019-2021; Addictology diploma awarded by the Faculties of Medicine of Tunis, Monastir, and Sfax and Training on motivational interviewing and prevention of addiction among adolescents involved in

³² European Drug Prevention Quality Standards

³³ EXASS Net is a European network of partnerships between stakeholders at frontline level responding to drug problems providing experience and assistance for inter-sectoral cooperation

³⁴ World Health Organization

³⁵ Internally Displaced Persons

sport activities. In 2019 Jordan conducted a study visit to Morocco on Prevention of drug use among children and youth, and participated in a training workshop.

In 2019 Lebanon developed accreditation standards: residential substance use rehabilitation programmes and substance use online platform for data collection. Morocco hosted a seminar on 10 years of opioid agonist treatments in Morocco, set up the Réseau Maroc Addicto Remad, provided Addictology courses in Casablanca and Rabat 2019-2020, launched the university diploma in addictology in Marrakech for 15 students in 2019-2020. Morocco, Palestine and Algeria participated in the International Seminar on 'Refugees and drugs: needs assessment, practice support, risk prevention' in Greece. Palestine conducted a study visit for a medical team in Lebanon. Algeria participated in a one-day training seminar for psychologists.

In 2020 the project Drug Related Challenges for Migrants, Refugees and IDPS developed an internet-based platform for professionals. Egypt participated in Executive Training Module I in Norway. In Jordan and Palestine training workshops and study visits were postponed. Morocco published the National Guide and e-learning module for capacity building of civil societies in prevention interventions on psychoactive substances adapted to the Moroccan context. Tunisia conducted a Training in Addictology for trainers and medical staff at the University of Sfax, developed the University Diploma in Addictology by the Faculty of Medicine.

In 2021 a series of online training on motivational interviewing which was attended by twelve Tunisian psychiatrists and 4 groups of 48 Algerian medical staff (psychiatrists and psychologists) in Paris. Cyprus hosted an online study visit on emergency and intermediate care services date for an Egyptian delegation. Italy will host an online study visit on dual diagnosis for an Egyptian Delegation in Autumn 2021. The training workshop and Jordanian study visit on prevention have been postponed to 2022 due to the COVID-19 pandemic. Lebanon conducted activities by launching 'Paving the way for evidence Informed Policies, needs of women with substance use disorders' and '*Beirut en route*' and developed a diploma training in Addictology in Beirut.

In 2021 Morocco continued its work to develop Addictology courses in Casablanca, Rabat and Marrakech; created a national guide and e-learning module for the reinforcement of capacity of civil societies in psychoactive substance use prevention interventions adapted to the Moroccan context, further developed the "Réseau Maroc Addicto Remad", the first network of practitioners working in the addiction field Within the framework of the addictology diplomas, the curricula in Tunis, Rabat, Casablanca and Marrakech included a new module devoted to the prevention, treatment and care of women who use drugs. The new courses to be launched in 2021 in Sfax, Monastir and Beirut will also include such a module.

Cooperation with civil society and international organisations at national and regional level

Since 2009, the EMCDDA has taken part in all MedNET activities involving the establishment of national monitoring/resource centres on drugs and drug addiction and has been attending MedNET steering committee meetings as an observer. The MedNET secretariat participates as an observer in advisory committee meetings of the EU4 Monitoring Drugs³⁶ project which is being funded by the European Union and implemented by the EMCDDA. The objective of this project is to make the link between drug-related problems, security issues and health threats in the European Union and neighbouring

³⁶ www.emcdda.europa.eu/activities/eu4md_en

countries The project covers fifteen potential countries of the ENP³⁷ with a budget of €3 million over 3 years (2019-2021). Half of the potential countries are also Southern countries which belong to the MedNET network.

MedNET developed activities in partnership with other European and international organizations, namely the EMCDDA and the UNICRI³⁸ in particular in the field of gender with participation in the Drugs and Alcohol Women Network Project. MedNET is involved in the UNICRI project on the role of families in drug use prevention and in building pathways for resilience and rehabilitation among young people. MedNET supported the UNICRI project on the needs of families for preventing drug use among young people. The project aimed at identifying and exploring the priority aspects to support and consolidate the protective role of the family in the prevention of drug use among young people. The pilot project, based on a context-specific approach, has included research activities in three countries (Italy, Lebanon and Tunisia) involving families, government institutions, organizations of the civil society, national experts and other key stakeholders currently working in the field of prevention and treatment.

MedNET cooperates with the European Commission through the Council of Europe under the South Programme I to IV: Council of Europe/European Commission co-operation, and with UNICRI. The European Commission has participated in MedNET's annual committee meetings since 2015.

Cooperation with the WHO started with the MedNET meeting of November 2020 when WHO was invited to participate as an observer. Civil society also plays an active role in the Mediterranean region and participates in MedNET national and regional activities. In 2010, Jordan organised a regional seminar on data collection and Morocco organised a regional seminar on the setting up of national observatories. In 2012, Lebanon organised a regional seminar, in cooperation with the INCB³⁹ and the World Customs Organisation on airports trafficking.

Between 2009 and 2011, MedNET cooperated with the MENAHRA⁴⁰, a regional, not-for-profit non-governmental organisation, active in civil society's capacity building initiatives. Their sub-regional knowledge hub for Algeria, Morocco and Tunisia thus received funding from MedNET for the provision of training activities on advocating the needs of drug injectors among NGO's.

In 2019 Lebanon and Tunisia supported by MedNET engaged with connecting youth for drug awareness in schools and cooperated with UNICRI on the role of families in drug use prevention and in building pathways for resilience and rehabilitation among young people.

See **Table One Key Activities of South MedNET countries** overleaf

³⁷ European Neighbourhood Policy

³⁸ United Nations Interregional Crime and Justice Research Institute

³⁹ International Narcotics Control Board

⁴⁰ Middle East and North Africa Harm Reduction Association

Table One Key Activities of South MedNET countries since inception

	Algeria	Egypt	Jordan	Lebanon	Morocco	Tunisia	Pales tine
1999	Cooperation with Algeria began at the 'Conference on Cooperation in the Mediterranean Region on Drug Use: Networking in the Mediterranean Region' in 1999 in Malta.				Cooperation with Morocco began at the 'Conference on Cooperation in the Mediterranean Region on Drug Use: Networking in the Mediterranean Region' in 1999 in Malta.	Cooperation with Tunisia began at the 'Conference on Cooperation in the Mediterranean Region on Drug Use: Networking in the Mediterranean Region' in 1999 in Malta.	
2005	Algeria Participation of Algeria in MedSPAD with the realisation of a survey in Algiers in 2005.						
2006	<p>First cooperation activity by Algeria in the framework of MedNET The Conference on the role of research in drug policy-making: interpretation, communication and use of results, was organised in Algiers in partnership with the Algerian National Office for the Fight against Drugs and Drug Addiction. Experiences between the two sides of the Mediterranean on school surveys were exchanged.</p> <p>Participation of Algeria as an observer in the Ministerial Conference of the Pompidou Group.</p> <p>Participation of Algeria in the Amsterdam Conference establishing the Mediterranean Cooperation Network on Drugs and Drug Addiction.</p>			<p>Participation in the conference on the role of research in drug policy development: interpretation, communication and use of results, held in Algiers, 3-4 December.</p>	<p>Participation in the Conference on the role of research in the development of drug policies in Algiers with a presentation of the experience of the MedSPAD survey in Rabat.</p> <p>Participation of Morocco as an observer in the Ministerial Conference of the Pompidou Group.</p> <p>Participation of Morocco in the Amsterdam Conference establishing the Mediterranean Cooperation Network on Drugs and Drug Addiction.</p>	<p>Visit of a Pompidou Group delegation to Tunisia on the feasibility of a Mediterranean cooperation network on drugs and drug addiction (MedNET): meeting with the Ministry of Health and the National Narcotics Bureau.</p> <p>Representation of Tunisia at the international seminar on the role of research in the development of policies to combat drug addiction, in Algiers.</p> <p>Participation of Morocco in the Amsterdam Conference establishing the Mediterranean Cooperation Network on Drugs and Drug Addiction.</p>	
2007	Contribution of expertise for the preparation of the population survey in Algeria: between the OFDT (Office Français des Drogues et des Toxicomanies), the CENEAP (Centre National d'Etudes et d'Analyses pour la Population et le Développement) as well as the Office National de Lutte contre la Drogue et la Toxicomanie (National Office for the Fight against Drugs and			<p>Participation in Theoretical training in OST, Rabat, Morocco.</p> <p>Participation in practical training in OST, Paris-Bordeaux.</p> <p>Participation in National conference on the role of associations in the prevention of drug abuse, Algiers. Participation in Pompidou Group Conference on reaching families in prevention, Porto.</p>	<p>Theoretical training on opiate substitution treatment (OST), Rabat.</p> <p>Practical training on OST ,Paris-Bordeaux.</p> <p>Visit on OST for a delegation from the Moroccan Ministry of Health in France.</p> <p>Reflection day on the evaluation of the OST pilot programme in Morocco, Paris.</p>	<p>Participation of Tunisia in the Pompidou Group conference on the role of the family in prevention, in Porto.</p> <p>Participation of Tunisia in the MedNET meeting in Casablanca.</p>	

	Drug Addiction) and various European experts. Visit of an Algerian delegation to France to visit various organisations active in the fight against drug addiction. Theoretical training seminar on opiate substitution treatment in Morocco in March in Rabat with the participation of Algerian representatives. National conference on the role of the associative movement in the prevention of the scourge of drugs and drug addiction organised by the ONLDT with the participation of experts from the Pompidou Group. - Participation in the Pompidou Group Conference on the family and prevention, Porto.				Participation in the international seminar on the valorisation of school survey results in West Africa, organised by the UNODC Regional Office, Ouagadougou, Burkina Faso. Participation of Morocco in the conference on the role of the associative movement in the prevention of drug addiction, Algiers. Study visit on substitution treatment for Morocco to the Netherlands. Participation in the Pompidou Group Conference on Family and Prevention, Porto.		
2008	Four training seminars on the care of PWUD. Training of 154 people in Algeria total. These seminars in Algiers, Annaba and Oran are part of the national action plan for the treatment of drug addicts, which includes the creation of 15 detoxification treatment centres and 53 intermediate care centres for drug addicts. Bilingual French/Arabic documents can be obtained from the National Office for the Fight against Drugs and Drug Addiction. Study visit for an Algerian delegation to Lisbon. Seminar on the detection and repression of synthetic drugs, Algiers.			MedSPAD survey. MedSPAD Lebanon meeting, Paris. Regional training seminar on dealing with drug addiction, Annaba. Regional training seminar on dealing with drug addiction, Algiers. Regional training seminar on dealing with drug addiction, Oran. MedSPAD Lebanon meeting and MedSPAD Morocco meeting, Paris. Seminar on the detection of synthetic drugs, Algiers. "How can we better treat drug addiction? New scientific and clinical challenges for Europe". Paris. Participation of experts in the colloquy on drugs and different cultures, Paris.	Audience of the Pompidou Group Secretariat with Mrs. Yasmina Baddou, Minister of Health, in Rabat who confirms its commitment to the action plan of the Kingdom of Morocco in the framework of MedNET. MedNET support to a seminar on harm reduction organised by Menahra (Harm Reduction Association for the Middle East and North Africa). Participation of Moroccan experts in conferences in Paris on sociology and medicine, December.	Participation of Tunisia in the MedNET network and in the seminar on synthetic drugs in Algiers.	
2009	Training in project management for associative managers. Four training sessions with French and Algerian trainers in four regions of Algeria (Algiers, Batna, Mascara and Ghardaia) trained 150 association managers. Participation in the feasibility study on the creation of a Drug Addiction. This study Mediterranean observatory on demonstrated the wish of the drugs and drug addiction. Participation in the high-level conference of the Mediterranean Network of the Pompidou Group.	The co-operation with Egypt started with a visit in October to the Secretary General for Mental Health within the framework of a feasibility study carried out in four countries: Algeria, Lebanon, Morocco and Egypt about the creation of a Mediterranean Monitoring Centre on Drugs and Drug Addiction. This study demonstrated the wish of the countries to set up national monitoring centres.	Participation of Jordan took place in the high-level MedNET conference in Strasbourg.	Analysis and communication of the results of the MedSPAD Lebanon survey, Beirut. "Connections" project, entitled "Joining the dots: criminal justice, treatment and harm reduction", Krakow. Introduction to opiate substitution treatment with three training workshops, handbooks and guidelines. Participation in the seminar on the application of existing legislation, Algiers.	Creation of a diploma in addictology in the faculties of medicine of Casablanca and Rabat. MedNET's contribution to the training activities of the Amazi knowledge hub. Tripartite meeting NGOs, policy makers, researchers, Rabat. National MedSPAD survey. Participation of Morocco in the study on the creation of a Mediterranean Observatory on Drugs and Drug Addiction. Participation in the MedNET high level conference.	Audience of the Pompidou Group Secretariat at the Ministry of Health, Tunis. Letter from the Secretary of State to the Minister of Public Health indicating Tunisia's wish to join the MedNET network. Participation of Tunisia in the MedNET high level conference in Strasbourg.	

2010	National population-based survey on attitudes and drug use. National information and awareness seminar on precursors. Three regional seminars to train doctors and paramedical staff in the treatment and monitoring of PWUD in Algiers, Béchar and Ouargla. Three seminars on the application of the law on the prevention and repression of drugs and psychotropic substances in Algiers and Ghardaïa.	The regional seminar in Cairo on drug addiction treatment approaches and the first treatment demand indicator was the first seminar to take place in Egypt within the framework of the MedNET. In collaboration with the Mental Health Secretariat Egypt and the UNODC Regional Office from Cairo. Since then, several projects have been launched in Egypt. "Filling the Gap" project: meeting the needs in terms of treatment and care and treatment and care centres was inspired by a similar project carried out in Lebanon. It started with a study-visit of the Egyptian prosecutors, judges and psychiatrists working in the establishment of national addiction field conducted in UK to observe a judicial system and different treatment and care modalities. It continued with a nationwide needs assessment for addiction treatment and care and proposal of amendments and changes to the 1989 law regarding addiction.	Participation of Jordan in the regional seminar in Cairo on the treatment of addiction and the treatment demand indicator. Jordan became a member of the MedNET in May 2010 following a field visit to Jordan to identify the opportunities for co-operation with this country. Jordan hosted a regional seminar on the collection of data. Participation in the regional seminar in Beirut on supply indicators, synthetic drugs and precursors and in the seminar held in Morocco (November 2010) to prepare the Egyptian prosecutors, judges and foundations for the establishment of national observatories /resource centres.	A countrywide study assessing the needs of PWUD and of centres and institutions dealing with PWUD. Round tables to discuss the application of legislation among stakeholders. Study visit to observe a successful judicial system and the procedure with regard to referral for treatment and care in UK. Regional training seminar on synthetic drugs, precursors and supply indicators, Beirut, Lebanon. Participation in Regional seminar to prepare the way for setting up national observatories, Morocco.	Reduction of HIV and HCV risks among PWUD: advocacy and support workshop for NGOs on risk prevention among PWUD. Continuation of courses in addictology (Rabat and Casablanca). Production of prevention materials for users, their families and the community. Regional seminar to prepare the basis for the establishment of national observatories/resource centres on drugs 30 November - 2 December, Rabat.	Participation of Tunisia in the seminar on addiction treatment approaches and the first-time treatment demand indicator, in Cairo. Invitation of Tunisia to the Ministerial Conference of the Pompidou Group.
2011	Use of the results of the national population survey for the new national strategy to prevent and combat drugs and drug addiction.	This project aimed at meeting the needs of PWUD and recognised the importance of understanding addiction as a healthcare issue so that people addicted to drugs should be treated as such. The project continued with a second study visit, this time to Italy organized by the Italian Department for Anti-drugs policies (Presidency of the Council of Ministers). Visit of the French Monitoring Centre on Drugs and Drug Addiction and Egypt's participation in the EMCDDA Reitox meeting.	Jordan took part in a field visit to France in June on treatment and care centres. A two-week training course in occupational therapy at the University of Malta for four people: two from the Anti-Narcotics Department, the National Centre for Rehabilitation of PWUD. To optimise training and work on the collection of treatment demand data, the Director of the National Centre for Rehabilitation of PWUD visited the national drugs observatory in Malta.	Participation in the seminar on drug in prisons in South-East Europe, in Skopje. Participation in "Drugs, Alcohol, Women network", Conference, DAD NET), Rome.	On 1 July 2011, the Kingdom of Morocco formalises its membership of the Pompidou Group. Continuation of training in addictology in Rabat and Casablanca. Dissemination of prevention materials to users, their families and the community. End of the pilot phase of substitution treatment in the three centres in Rabat, Casablanca and Tangiers.	Workshop on raising awareness and promoting a risk and disease prevention health approach, Tunis. Workshop funded by MedNET in collaboration with Menahra ⁴¹ and organised by MANARA (supported by ATL MST/AIDS Tunis Chapter). Visit of the Executive Secretary of the Pompidou Group to the Ministry of Health.
2012	Participation of Algeria in the TDO symposium in Geneva on the treatment of opioid dependence. Algeria's participation in the Airports Seminar in Strasbourg	Two Egyptian representatives took part in the Pompidou Group seminar on "drugs in prisons in South-East Europe" in Skopje. The "filling the gap" project ended up with a conference to present the results of the assessment and the individuals undergoing treatment at a given time. The revised law still needed to be	Launch of a project on collecting information on the treatment demand to enable each treatment and care centre to manage its operations more effectively and supply data on the individuals undergoing treatment at a given time. Participation in the regional	Training in prevention as part of the National Strategy for the Prevention of Drug Addiction. Participation in MedNET regional seminar on the use of drug research in policies in the Mediterranean Region, Rabat. Participation in the 2 nd DAD NET	Inclusion of opiate substitution treatment in the 2012 national programme. Translation of prevention materials into Berber. Continuation of courses in addictology and placement of those trained in care centres.	First National Consultative Seminar on Drug Policy, 17-18 May. Introduction of a post-doctoral course in addictology at the Faculty of Medicine in Tunis. Study visit to the French Observatory on Drugs and Drug Addition and the Inter-

⁴¹ Menahra is a WHO, IHRA (International Harm Reduction Association) and Drosos Foundation project launched in 2007 with the aim of building a harm reduction network in the Near East and North Africa. In North Africa, the knowledge hub is in Morocco. It covers Morocco, Algeria, Libya and Tunisia and offers harm reduction actions. MedNET has funded some of these workshops since 2008.

		approved by the Congress after the election of the People's Assembly. A new project started with the aim of offering gender-oriented social and health services to better meet the specific needs of female drug users	seminar on the use of drug research in policies in the Mediterranean region, Rabat. Participation on regional seminar on airports, Strasbourg.	Participation in the « 3 ^{ème} colloque international francophone sur le traitement de la dépendance aux opioïdes » Geneva	Creation of the first National Observatory on Drugs and Drug Addiction.	Ministerial Mission on Drugs and Drug Addiction. Study visit to Lisbon focusing on the functioning of the Portuguese Observatory on Drugs and Drug Addiction.	
2013	Transition year, during which there were no activities in collaboration with MedNET	Gender Responsive Services for women who use drugs, A study-visit / training was held in Malta. This project had a significant impact on the awareness and two new units dedicated to the treatment and care of women became operational. Participation in the development of a drug policy and action plan. A round table was held in Cairo.	Follow-up of the project to collect data on treatment demand: elaboration of a first contact form.	Setting up of an information and counselling centre for young people in a high-risk area. Life skills programme in 11 State and private schools in the Chiyah district of Beirut.	Continuation of addictology courses in Casablanca and Rabat. Second MedSPAD survey.	First MedSPAD survey in Tunis. Continuation of the post-doctoral course in addictology. Study visit to Cyprus focusing on the functioning of the Observatory on Drugs and Drug Addiction. Round Table on Drug Policy Development and Implementation, Tunis, 16-17 April. Study visit to Morocco on OST	
2014	Development of a country profile on Algeria Launch of the MedSPAD survey and workshop in Paris	Setting up of an observatory on drugs and drug addiction. Study visit to Norway to the SIRUS National Institute for Alcohol and Drug Research and data collection started.	Participation in the workshop on the fight against drug trafficking in airports, Strasbourg.	Setting up of an information and counselling centre for young people in a high-risk area continued. Life skills programme in 11 State and private schools in the Chiyah district of Beirut continued. Training of staff working in the nightlife premises of Beirut in partnership with Portugal. Participation on MedNET workshop on combating drug trafficking in airports. Lebanon country profile.	Support for the operation of the Moroccan Observatory on Drugs and Drug Addiction. Addictology courses in Casablanca and Rabat. Hosting a study visit on low-threshold centres. Participation in regional activities. Workshop on combating trafficking at airports and participation in the annual meeting of the Pompidou Group airport group with 36 countries, Strasbourg, 18-20 June 2014. Participation in the MedSPAD Regional Committee. Participation in the third international symposium "excessive gambling", Neuchâtel, Switzerland. Participation in the fourth international francophone symposium on the treatment of opioid addiction, Brussels, Belgium, 18-19 December 2014.	Training in Addiction Medicine. Study visit to Morocco on low-threshold centres. Addiction Prevention Day, 26 June. Participation in the workshop on the fight against drug trafficking in airports, Strasbourg. Participation in the MedSPAD committee. Contribution to the publication "gender dimension of non-medical use of prescription drugs in Europe and the Mediterranean region."	
2015	Study visit on data collection and processing in Paris, Study visit on setting up a forum for consultants and accreditation associations in Paris. Participation in two MedSPADon addiction services for Paris committee meetings, adolescents with a study visit in Regional seminar on opiate substitution therapy, Algiers. Study visits on OST in Morocco, Belgium and Lebanon, Participation in the airport group, Strasbourg. Participation in the 'precursor network, Prague, Participation in the Pompidou Group project on recommendations on legislation regulating OST.	Development of a training programme for addiction consultants and accreditation system. Development of a project on addiction services for adolescents with a study visit in Ireland. Development of the National Drug Observatory Full automation and data collection process training and capacity building. Participation in the MedSPAD committee. MedSPAD pilot in Cairo. Round table in Cairo on the 'setting up of a national drug observatory in Egypt'. Participation in the regional seminar on OST, Algiers.	Participation in the Pompidou Group's international seminars. 30 th annual meeting of the cooperation group of drug control services at European Airports and in General Aviation, Strasbourg International network on control of precursors, annual meeting, Prague (Czech Republic)	Epidemiological study of substance abuse in Lebanon. Development of a national strategy on the prevention and treatment and care of alcohol and substance abuse. Participation in the regional seminar on OST, Algiers. Host of an Algerian delegation on Opiate Substitution Treatment. Participation in the 1 st European Conference treatment on Addictive Behaviours and Dependencies. Contribution to the publication on the situation in the Mediterranean region on the prevalence of alcohol, medical use of prescription drugs, tobacco and drug use among adolescents.	Support to the functioning of the Moroccan Observatory of Drugs and Drug Addiction in 2015. First report of the Observatory. Addictology course in Rabat. Addictology course in Casablanca. Training on "pathological gambling", Lausanne, Switzerland 26-28 November 2015. Participation in regional activities. Participation in the MedSPAD Committee. Contribution to the MedSPAD Committee report 'First overview of the situation in the Mediterranean region on the prevalence of alcohol, tobacco and drug use among adolescents.	University Diploma in Addictology (DU) Study visit to Malta on OST. Participation in the regional seminar on OST in Algiers. Participation in the MedSPAD committee and contribution to the publication "A first look at the prevalence of alcohol, tobacco and drugs among adolescents in the Mediterranean region" Participation in the work of the Pompidou Group on recommendations on legislation regulating OST Participation in the first European conference on addiction and addictive behaviour, Lisbon	

		Participation in the Pompidou Group's precursors network, Prague. Participation in the 1 st European Conference on Addictive Behaviours and Dependencies, Lisbon. Contribution to the publication on "Gender dimension of non-medical use of prescription drugs in Europe and the Mediterranean region". Participation in the seminar "Drugs, Women and violence" in Rome.		Participation in the seminar "Drugs, Women and violence" in Rome. Contribution to the draft recommendations on legislation regulating OST.	Participation in the Pompidou Group airport seminar, Strasbourg, 17-19 June 2015. Participation in the first European Conference on Addictive Behaviours and Dependencies, Lisbon.	Participation in the Airport Group, a consultation group of European airport and general aviation drug control services, Strasbourg. Participation in the Pompidou Group's 'precursor' network.	
2016	Seminar 'Introducing opiate substitution treatment in Algeria', 8-9 March 2016; MedSPAD survey at national level, April 2016; Participations in the MedSPAD committee, Paris in February and Lisbon in September; National seminar on the communication of the patients. MedSPAD school survey, 11 and 12 October 2016 in Algiers ; Training of ONLCDT staff in data collection, analysis and prevention, autumn 2016 in Lisbon; Workshop "prevention tools", autumn in Algiers ; Participation in the 5 th International Francophone Colloquium on the treatment of opioid dependence, Rabat, 30 November, 1 and 2 December 2016.	Development / extension of the National Drug Observatory. Development of services for care of adolescents. Development of specialised services for pregnant women who use drugs: study visit in Malta, September. Development of addiction services for HIV positive patients. Study visit for accreditation, training and certification of addiction counsellors. MedSPAD national survey. Participation in the MedSPAD committee. Participation to the « 5 th colloque international francophone sur le traitement de la dépendance aux opioïdes » Rabat, 30th, December 1st and 2nd 2016.	Participation in the Pompidou Group's international seminars: 31st annual meeting of the cooperation group of drug control services at European Airports and in General Aviation, Strasbourg. International network on control of precursors, annual meeting, Warsaw, (Poland), 10-14 October. Participation to the « 5 th colloque international francophone sur le traitement de la dépendance aux opioïdes », Rabat, November 30th, December 1st and 2nd 2016	Development of a national drug strategy with support of an international expert. Setting up of a national observatory with expertise from EMCDDA in capacity building. MedSPAD committee member. Participation in the « 5 th colloque international francophone sur le traitement de la dépendance aux opioïdes », Rabat, November 30 th , December 1st and 2nd 2016.	Addictology courses in Casablanca and Rabat between September 2016 and June 2017. Support to the functioning of the Moroccan. Observatory on Drugs and Drug Addiction. Prevention manual. MedSPAD III. Organisation of the 5th International Francophone Colloquium on the treatment of opioid dependence, Rabat, 30 November, 1 and 2 December 2016. Member of the MedSPAD committee.	University Diploma in Addictology, February-June 2016. University Diploma in Addictology, November 2016 - June 2017. Legal expertise on the draft law on drugs. Thematic day on 26 June on the national strategy. Specialised workshops for DU students, winter 2016. Addictology Days, October 2016. General population survey. Member of the MedSPAD committee. Participation in the 5th International Francophone Colloquium on the Treatment of Opioid Dependence, Rabat, 30 November, 1 and 2 December 2016.	Accession of Palestine to MedNET.
2017	Seminar on Women and Drugs, 8 March 2017, in Algeria; - Seminar 'Support to staff working in Opioid Substitution Treatment centres', 11-12 April 2017, in Algeria; - MedNET workshop on prevention tools, 23-25 May 2017, Algiers; Participation in the MedSPAD committee inservice development. Training Paris on 7 February and in Lisbon on 23 October; Annual meeting of the Cooperation Group on Drug Control Services at European Airports and General Aviation (Airports Group), Strasbourg, 6-8 June 2017; General Aviation Meeting, Madrid, 26-28 April 2017; MedNET and the guide lines on substitution	Development / extension of the National Drug Observatory. Development of care addiction services for adolescents. Development of specialised services for pregnant women who use drugs. Continuation of addiction treatment services for HIV positive patients. Training in Accreditation & Certification Board Report PHASE II. MedSPAD Group on Drug Control conducted in Egypt. Continuation of "Gender Responsive Services for women who use drugs". Continuation of the substance abuse disorders in Egypt with development of specialized	Participation to the General Aviation meeting, 26-28 April 2017, Madrid, Spain. Participation to the Pompidou Group Airports seminar, 6-8 June 2017, Strasbourg, France. 12th EXASS Net meeting Refugees and Drugs: Estimating needs, support practices, preventing risks, 30 October-1 November 2017, Athens, Greece.	Seminar "Support to staff working in Opioid Substitution Treatment centers" 11 and 12 April 2017 in Algeria. MedNET Workshop on prevention tools, 23-25 May 2017, in Algiers. Inter-ministerial substance use response strategy for Lebanon 2016-2021: Lebanon launched its National Substance Use Strategy in Beirut on 22 December 2016, with the Pompidou Group's support for its development and implementation in 2017. Setting up The National Drugs and Addiction Observatory. The Drug Law Amendment. Participation to the MedSPAD Committee.	Addictology courses in Casablanca and Rabat between September 2017 and June 2018. Annual report 2017 of the Moroccan Observatory of Drugs and Addictions. Rehabilitation workshop. Gambling workshop. Participation in the MedSPAD committee. Participation in the seminar "Women and drugs: from policy to good practice" in Rome. Lisbon Conference on Addictions, 24-26 October 2017, Lisbon, Portugal.	University Diploma in Addictology, November 2016 - June 2017. The Workshop, "Cognitive-behavioural therapies in cannabis addiction", 8-9 April 2017. Workshop, 'Harm reduction', 26-27 April 2017. Day of celebration on the occasion of the UN International Day on Drugs, 26 June 2017, focusing on women, violence and addiction in Tunisia. Seminar entitled 'Addictions and Policy Choices', 23 September 2017. First National Addictology Congress, 14-15 December 2017.	Seminar on "Women and Drugs: from policy to good practice", on 26-27 June 2017. Participation to the MedNET steering committee. Lisbon Conference on Addictions, 24-26 October 2017, Lisbon, Portugal.

	treatment; Participation in the 12th EXASS Net meeting 'Refugees and Drugs: Estimating needs, support practices, preventing risks', 30 October-1 November 2017, Athens, Greece; Participation in the 'Listen First' campaign, Listen First - Listening to children and youth is the first step to help them grow healthy and safe. EDQS Cyprus, 11-15 September 2017. Lisbon Conference on Addictions, 24-26 October 2017, Lisbon, Portugal.	addiction services for pregnant women who use drugs. Participation in the Listen First campaign, Listen First – Listening to children and youth is the first step to help them grow healthy and safe. Study visit by an Egyptian delegation on European Drug Prevention Quality Standards, 11-15 September 2017.		Contribution to the MedNET and the guidelines on substitution treatments. 12th EXASS Net meeting 'Refugees and Drugs: Estimating needs, support practices, preventing risks', 30 October-1 November 2017, Athens, Greece. Lisbon Conference on Addictions, 24-26 October 2017, Lisbon, Portugal.		The MedSPAD II survey conducted in October 2017. Participation in the MedSPAD committee. Amendments to the Drugs Bill - to allow the judge to give a sentence to avoid prison, under certain conditions, to the first-time user of drugs. Participation in MedNET and the guidelines on substitution treatment. Participation in the Pompidou Group Airport Seminar, Strasbourg, 6-8 June 2017. Participation in the General Aviation Meeting, Madrid, 26-28 April 2017. Lisbon Conference on Addictions, 24-26 October 2017, Lisbon, Portugal.	
2018	Standing Committee on Women; MedSPAD I Algeria; Participation in the MedSPAD Observatory: Full automation and data collection process training and capacity building. Development of approaches to addiction prevention", 20-21 October 2018, Algiers; International multidisciplinary symposium, excessive gambling: science, use drugs. Development of independence, transparency, 27-29 June 2018 in Fribourg, Switzerland; Annual meeting of the Concertation Group for Addiction European Airport and General Aviation Drug Control Services (Airport Group), 6-8 June 2018, Strasbourg, France; Study visit of the Algerian delegation on European quality standards in drug prevention, 18-19 June 2018 in Cyprus; Participation in the MedNET Steering Committee.	Continuation of the Development extension of the National Drugs Observatory: Full automation and data collection process training and capacity building. Development of addiction services for adolescents, to the Working group on cyber-criminality linked to drugs, 5th annual meeting, 18-19 April 2018, Dublin, Ireland. Participation to the Airport Group, 6-8 June 2018, Strasbourg, France.	International Multidisciplinary symposium: Gambling addiction: Science, Independence, Transparency, 27-29 June 2018. Participation in the Working group on cyber-criminality linked to drugs, 5th annual meeting, 18-19 April 2018, Dublin, Ireland. Participation to the Airport Group, 6-8 June 2018, Strasbourg, France.	Inter-ministerial substance use response strategy for Lebanon 2016-2021. Dissemination of the First Report on Drugs Situation in Lebanon by The National Drugs and Addiction Observatory, in June 2018. INTERNATIONAL MULTIDISCIPLINARY SYMPOSIUM: Gambling addiction: Science, Independence, Transparency, 27-29 June 2018 in Fribourg, Switzerland. International Seminar on 'Refugees and Drugs: estimating needs, support practice, preventing risks', 24-25 April 2018, Athens, Greece. Participation at the working group for guiding principles on Opiate agonist treatment OAT. MedSPAD Committee.	Addictology courses in Casablanca and Rabat 2018-2019. Organisation of the Congress of the Moroccan Association of Addictology. Publication of the second report of the Moroccan Observatory of Drugs and Addictions. Participation in the MedSPAD committee. Meeting of the Pompidou Group Working Group on Drug-related Cybercrime, 18-19 April 2018, Dublin, Ireland. Participation in the 4th International Multidisciplinary Symposium 'Gambling addiction: Science, Independence, Transparency' which took place in Fribourg, Switzerland on 27-29 June 2018. Participation in the Pompidou Group airport seminar, Strasbourg, 6-8 June 2018.	Visit to the European Drug Prevention Quality Standards (EDPQS) training in Cyprus, 14-16 May 2018. Celebrating the UN International Day against Drug Abuse and Trafficking on 26 June 2018 with an advocacy workshop on opioid agonist treatments. Participation in the MedSPAD committee. Participation in the International Multidisciplinary Symposium, Excessive gambling: science, independence, transparency, Fribourg, 27-29 June 2018. Participation in the Annual Meeting of the Consultation Group of European Airport and General Aviation Drug Control Services (Airport Group), Strasbourg 6-8 June 2018. Participation in the General Aviation Meeting, Marrakech, 17-18 October 2018. Participation in the Precursor Network, Strasbourg, 26-28 September 2018. MedNET and the guidelines on substitution treatment. Participation in the Executive training: Evaluation of the development, implementation and impact of a drug policy. Participation in the International Seminar on 'Refugees and Drugs: Needs Assessment, Practice Support, Risk Prevention', Athens, 24-25 April 2018.	Field Visit – Evaluation of the Opioid Substitution Programme for Palestinian Authorities, on 29-31 May 2018 in Ramallah. Participation to the MedNET steering committee.

2019	<p>One-day training seminar for psychologists, 26 June, Algiers; Participation in the MedSPAD Committee; Annual meeting of the Pompidou Group International Precursor Control Network, 1-3 October 2019, EMCDDA, Lisbon.</p> <p>International seminar on "Refugees and drugs: needs assessment, practice support, risk prevention", 7-8 October 2019, Athens, Greece</p>	<p>Continuation of Training and Capacity Building of Addiction Nurses project. Continuation of development of a parental training model for parents with substance use disorder project.</p> <p>Development of a community-based model of care for substance use. Development of specific models of care for juveniles with substance abuse problems in correctional facilities. Development of model of care for patients with dual diagnosis.</p> <p>Participation in the Tenth MedSPAD Committee. Participation in the joint seminar Pompidou Group/CICAD on Drug Prevention Approaches that Make a Difference" seminar, 25 – 26 September 2019, Reykjavik, Iceland. Participation in the International Seminar on "Refugees and Drugs: estimating needs, support practice, preventing risks", 7-8 October 2019, Athens, Greece</p>	<p>Training Workshop Prevention of drug use among children and youth, 3-4 March. Study visit - Prevention of drug use among children and youth, 25-29 November, Morocco.</p> <p>Participation to the international capacity building seminar "Drug Prevention Approaches that Make a Difference", 25 – 26 September 2019, Reykjavik, Iceland.</p> <p>International Seminar on "Refugees and Drugs: estimating needs, support practice, preventing risks", 7-8 October 2019, Athens, Greece.</p> <p>Lisbon Conference on Addictions, 23-25 October 2019, Lisbon, Portugal.</p>	<p>Mapping of services for substance use disorders: prevention, treatment, rehabilitation, harm reduction, social re-integration. Accreditation standards residential substance use rehabilitation programmes. The substance use online platform for data collection with main actors in Lebanon Drug Addiction Committee.</p> <p>Needs of women with substance use disorder. Implementation of the drug law in Lebanon: Increase the understanding and use of articles 193 and 194 of the Drug Law among public prosecutors and law enforcement officers.</p> <p>Connecting Youth for Drug Awareness in Schools. MedSPAD Committee Seminar on "Drug Prevention Approaches that Make a Difference", 25 – 26 September 2019, Reykjavik, Iceland.</p> <p>Participation to the MedNET steering committee. Co-operation with UNICRI (United Nations Interregional Crime and Justice Research Institute) on the role of families in drug use prevention and in building pathways for resilience and rehabilitation among young people.</p> <p>Lisbon Conference on Addictions, 23-25 October 2019, Lisbon, Portugal.</p>	<p>Seminar on 10 years of opioid agonist treatments in Morocco, Tangiers, 22-23 February.</p> <p>Setting up the Réseau Maroc Addictio Remad.</p> <p>Addictology courses in Casablanca and Rabat 2919-2020.</p> <p>Launch of the university diploma in addictology in Marrakech for 15 students in 2019-2020.</p> <p>Participation in the MedSPAD Committee.</p> <p>Participation in the 34th Annual Meeting of the European Airport and General Aviation Drug Enforcement Services, 19-20 June 2019, Strasbourg.</p> <p>Participation in the International Seminar on 'Refugees and drugs: needs assessment, practice support, risk prevention', 7-8 October 2019, Athens, Greece.</p> <p>International Conference on Cooperation to Align Drug Policies with the Sustainable Development Goals, 30-31 October 2019, Mexico.</p> <p>Lisbon Conference on Addictions, 23-25 October 2019, Lisbon, Portugal.</p>	<p>Several projects are being conducted by Tunisia over the period 2019-2021; Addictology diploma awarded by the Faculties of Medicine of Tunis, Monastir, and Sfax ; Training on motivational interview and prevention of addiction among adolescents involved in sports activities, Day care center for women who use drugs MedSPAD III And Sensitization to prevention of peers (students, pupils) through the use of new technologies and Analysis of used waters.</p> <p>The new 'Hope' centre for prevention and treatment of adolescents.</p> <p>Wastewater analysis to determine the level of illicit drug use.</p> <p>University Diploma in Addictology by the Faculty of Medicine.</p> <p>Training in Addictology for trainers and medical staff at the University of Sfax.</p> <p>Participation in the MedSPAD committee.</p> <p>Participation in the 34th Annual Meeting of the European Airport and General Aviation Drug Enforcement Services, Strasbourg, 19-20 June 2019.</p> <p>Participation in the 3rd Pompidou Group International Conference on General Aviation, 26-28 November 2019, Malta.</p> <p>Participation in the seminar "Drug prevention approaches that make a difference", 25-26 September 2019, Reykjavik, Iceland.</p> <p>Tunisian-led project on the prevention and management of addiction among adolescents.</p> <p>Lisbon Conference on Addictions, 23-25 October 2019, Lisbon, Portugal.</p>	<p>Study visit for a medical team in Lebanon, 28-30 May 2019.</p> <p>Participation to the MedNET steering committee.</p> <p>International Seminar on "Refugees and Drugs: estimating needs, support practice, preventing risks", 7-8 October 2019, Athens, Greece.</p> <p>Lisbon Conference on Addictions, 23-25 October 2019, Lisbon, Portugal.</p>
In 2020 the MedNET steering committee met online only due to the COVID-19 situation. The MedSPAD committee held its meeting online on 21 April 2020 and adopted new guidelines and rules for data sharing							
2020	<p>Participation in the MedSPAD Committee and participation in the MedNET Steering Committee</p>	<p>With the support of Pompidou Group; General Secretariat of Mental Health and Addiction Treatment (GSMHAT) has published an article on Plan for SUD in COVID-19 Pandemic in which: Series of awareness video messages has been published online delivered by psychiatric professionals,</p>	<p>Participation to the MedNET steering committee. The training workshop and study visit on prevention have been postponed until 2021.</p> <p>Participation to the AIRPORTS GROUP meeting, 8 September 2020, Videoconference.</p> <p>Participation to the GENERAL AVIATION meeting, 9 September 2020, Videoconference.</p>	<p>Participation to the MedSPAD Committee.</p> <p>Participation to the MedNET steering committee.</p> <p>MedSPAD III survey in Lebanon (postponed to 2021 due to COVID-19 pandemic).</p>	<p>Publication of the National Guide and e-learning module for capacity building of civil societies in prevention interventions on psychoactive substances adapted to the Moroccan context.</p> <p>Morocco Addictio Remad Network.</p> <p>University diploma in addictology in Casablanca, Rabat and Marrakech.</p> <p>Launch of MedSPAD IV.</p>	<p>Participation in the MedSPAD committee and the MedNET steering committee and chairing of the MedNET steering committee in 2020.</p> <p>Wastewater analysis to determine the level of illicit drug use.</p> <p>University Diploma in Addictology by the Faculty of Medicine.</p>	<p>Training sessions on addictology and prevention, cancelled due to COVID-19 pandemic.</p> <p>AIRPORTS GROUP MEETING of the Pompidou Group, 8 September 2020, Videoconference.</p> <p>GENERAL AVIATION MEETING, 9 September 2020, Videoconference.</p>

		<p>Hotline service launched since September 2020, to offer psycho-social support for public and patients 24/7, Protocol regarding patients with SUD implemented by the GSMHAT includes prevention on physical distance, capacity of admission and aftercare program (YouTube channel), GSMHAT plans to deliver medications to patients via our community unit, offer online service via zoom application and WhatsApp number receiving any consultation. Continuation of Development of a community-based model of care for substance abuse project. Continuation of Development of a specific model of care for juveniles with substance abuse problems in correctional facilities project. Preparation and the implementation of MedSPAD 2020 in Egypt. Participation in Executive Training Module I - 28-31 January 2020 – Oslo, Norway. Extension training and building capacity phase for the Development of Specialized Addiction Services for Pregnant Females. Participation in the Eleventh meeting committee. MedSPAD meeting committee. Video Conference.</p>	September 2020, Videoconference		<p>Participation in the MedSPAD committee. Participation in the meeting of the Pompidou Group Airports, 8 September, videoconference. Publication 'Human rights and people who use drugs in the Mediterranean region: current situation in 17 MedNET countries.</p>	<p>Training in Addictology for trainers and medical staff at the University of Sfax. Participation in the international MedSPAD working group to prepare the launch of MedSPAD III in spring 2021. Participation in the General Aviation Meeting - 9 September 2020 (Videoconference). Tunisian-led project on the prevention and management of addiction among adolescents.</p>	Participation to the MedNET steering committee.
In 2021, the MedNET steering committee had to postpone its meeting planned on 16 and 17 November in Tunis. In 2021 to 2022., in order to adapt to the sanitary situation and to reply to emerging needs, some activities could not be held and were postponed or replaced by others.							
2021	<p>Participation in the MedSPAD Committee and training in motivational interviewing for 50 Algerian health professionals. Training in opioid substitution treatment (postponed) Participated in a General Aviation meeting.</p>	<p>Participation in the MedSPAD committee. In 2021, Egypt continued on-going projects and started new ones. Egypt developed a community-based model of care for substance abuse, a specific model of care for juveniles with substance abuse problems in correctional facilities and of model of care for patients with dual diagnosis. A study visit to Italy which was due to take place in June 2020 took place on line in 2021.</p>	<p>The training workshop and study visit on prevention have been postponed to 2022 due to the pandemic.</p>	<p>Participation in the MedSPAD committee Lebanon also conducted activities by launching Paving the way for evidence Informed Policies, s, Beirut en route was launched, Lebanon carried out a second MedSPAD survey, and developed a diploma training in Addictology in Beirut. A prevention booklet was published in 2021 to assist the survivors of the Beirut explosion.</p>	<p>Participation in the MedSPAD committee; conducted MedSPAD IV, developed Addictology courses in Casablanca, Rabat and Marrakech. created a national guide and e-learning module for the reinforcement of capacity of civil societies in psychoactive substance use prevention interventions adapted to the Moroccan context, created the "Réseau Maroc Addicto Remad", the first network of practitioners working in the addiction field.</p>	<p>Addiction prevention project for adolescents involved in sports inactivities. Creation of a day centre for women who use drugs. Assessment of illicit drug use through wastewater analysis phase II. Online training (France) for psychiatrist trainers in motivational interviewing. MedSPAD III. Tunisia participated in a Airports Group meeting – 15 June 2021.</p>	<p>Participation for the first time in 2021 in the MedSPAD committee. Training sessions on addictology and prevention in Palestine were postponed due to COVID-19, and two projects started : Equipment for Substance Use Disorders in facilities with two methadone dispenser machines and Support to the implementation of Harm Reduction programme.</p>

Budget and operational support of the Network

In 15 years MedNET raised € 4 512 034 to implement its annual work programmes based on the demands of its participating countries. Expertise and participating countries hosting study visits represent valuable contributions, as well as the administration and coordination support given by the Pompidou Group' Secretariat funded by Pompidou Group ordinary budget⁴² MedNET activities also benefit from the South Program I, II and III a program funded by the European Union and implemented by the Council of Europe's South Program to strengthen "democratic reform in the Southern Neighbourhood". In 2016, MedNET also benefited from the Council of Europe neighbourhood policy for Morocco and Tunisia. In 2016, too, one study visit was funded by TAEX. Other than funds' donated, valuable contributions include expertise from MedNET and other countries hosting study visits, as well as the administration and coordination support given by the Pompidou Group' Secretariat funded by Pompidou Group ordinary budget. See Table Two.

Voluntary contributions received since 2006^{43*}

	Cyprus	Spain	France	Italy	Netherlands	Portugal	Switzerland	Total
2006			20 000			10 000		30 000
2007		100 000	100 000	50 000	30 000	5 000		285 000
2008			200 000			5 000		205 000
2009			200 000	50 000		5 000		255 000
2010	5 000		200 000	62 579				267 579
2011	5 000		140 000	22 500				167 500
2012			140 000	117 579				257 579
2013			140 000	80 000				220 000
2014			140 000	40 000				180 000
2015			150 000	40 000				190 000
2016			150 000	60 000				210 000
2017			140 000	120 000				260 000
2018			140 000	120 000		10 000	65 479	335.479
2019			140 000	120 000				260 000
2020		200 000	120 000	120 000				440 000
2021				120 000			10 000	130 000
Total	10 000	300 000	2 120 000	1 122.658	30 000	35 000	75 479	3 693 137

South Programme I, II, III and IV funding allocated-(2012-2022)

South Programme I (2012-2014),	161 939
South Programme II (2015-2017)	268 319
South Programme III (2018-2019)	50 000
Total SP I, II and III	430 258

⁴² Only the MedNET coordinator, who is a permanent Council of Europe Staff member is funded by PG Ordinary budget, the temporary staff is funded by the raised funding).

⁴³ The voluntary contributions received from member states are subject to an administrative fee levied directly by the Administration (since 2014 this levy has represented 7 % of the amount received).

^{**} For some MedNET activities, the host country makes a partial contribution for the event.

**Council of Europe Neighbourhood Partnership with Morocco and Tunisia (2016-2021):
Funding allocated**

Action Plan 2016 - 2017: Activities and staff	106 950
Action Plan 2019 - 2021: Activities and staff	193 000
Total	299 950

Activities by PG Ordinary Budget in 2021: funding estimated

Contribution to ESPAD MedSPAD project	25 814
MedNET Evaluation	8 100
Total	33 914

Total amount of budget allocated to MedNET (2006-2021)

Voluntary contributions including 2021	3 683 137
South Programme I (2012-2014)	161 939
South Programme II (2015-2017)	268 319
South Programme III (2018-2019)	50 000
Neighbourhood Policy Programme 2016-2017	106 950
Neighbourhood Policy Programme 2019-2021	193 000
PG Ordinary Budget 2019	52 175
PG Ordinary Budget 2020	2 600
PG Ordinary Budget 2021	33 914
Total extra-ordinary budget and PG ordinary budget	4 512 034

Direct funding of activities by countries **

Portugal		
2015	Lisbon Addictions Conference: registration fees for 8 participants	3 200
2017	Lisbon Addictions Conference: registration fees for 16 participants	6 400
2018	MedSPAD 9 Lisbon, 8 June (room, coffee breaks & lunch)	1 650
2019	Lisbon Addictions Conference: registration fees for 14 participants	8 400
Cyprus		
2017	Hosting a study visit and EDPQS training for an Egyptian delegation (Sept. 2017)	3 000
2018	Organisation of 2 study visits & EDPQS training for Algerian, Lebanese, Moroccan, Tunisian and Palestinian delegations (May & June 2018)	6 000
TOTAL		28 650

Table Two MedNET Budget and Expenditure.

Human Rights

PWUD are no longer viewed as criminals but rather as patients in need of treatment. As a result of this change of approach, countries have started to revise their legislation and national policy concerning PWUD. This situation mainly concerns Mediterranean countries which are not part of the European Union.

Access to care for all PWUD is being extended and the human rights and gender dimension is gradually being integrated into drug policy. As far back as 2008, MedNET countries initiated concrete initiatives that promote PWUD's health and address theirs and their families' social issues, leading to innovative solutions adapted to cultural traditions.

Concerning OAT, MedNET has played an important role and today, many southern MedNET countries have adopted such treatments after joining MedNET. These include Morocco, , Lebanon and Algeria. In Egypt, the projects supported the introduction of women's treatment special services, supplemented by a follow-up project proposing specific care directed to pregnant women who use drugs. In addition, other projects have aided the development of services specific for adolescents and, in 2016, a specific project directed at HIV patients who use drugs was put in place. MedNET has helped some countries to develop new strategies for the treatment and care of PWUD.

Key Principles underpin that the human rights approach for PWUD should concern every single dimension related to drug use:

- Health approach at the policy level: drug use must be considered rightly as a medical condition to be taken care of by qualified health professionals;
- Treatment must be available, accessible, affordable and science-based, with the best practices;
- Prevention must be based on science, facts and best practices;
- Data collection must be considered as a part of the right to access information for the community and the professionals;
- Rehabilitation and social reintegration must be provided;
- Access to treatment and care for specific populations must be available: PWUD in prisons, sex workers, pregnant women, women, non-binary people, children of parents who use drugs, migrants, refugees, elderly, etc.;
- Fight against stigma and raising awareness in the society as a whole is needed;
- The adaptation of the law to the human rights approach especially for minors and non-trafficking users;
- Promoting the right of PWUD to create their own NGOs and self-help groups;
- Promoting the right to access treatment for all the consequences of drug use;
- Promoting every strategy aiming at reducing the health, economic, social and legal consequences of drug use.

In 2020, the document on human rights and people who use drugs in the Mediterranean Region: MedNET situation in 17 MedNET countries (Algeria, Croatia, Cyprus, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Palestine, Portugal, Spain, Switzerland, Tunisia and Turkey) was published⁴⁴. For the first time, the MedNET discussed human rights in terms of the consideration of drug use as a disease for developing drug policy, the right to access to care and treatment as a fundamental right for PWUD, the implementation of evidence-based prevention practices and health strategies, the fight against stigma and the needed adaptation of the law to a human rights approach.

Gender Dimension in Drug Policy and Practice

The gender dimension is gradually being integrated into drug policy and practice. Specific needs of women are taken into account regarding approaches to drug addiction especially for issues such as drug policies, treatment and prevention, and the way in which PWUD were viewed. In 2015, MedNET countries participated at the Pompidou Group Seminar on Women, Violence and Drugs, in Italy, raising even further the awareness on gender issues and the need for integrating a gender dimension into their drug policies. At the initiative of

⁴⁴ Pompidou Group & Council of Europe. (2020). Human Rights and People Who Use Drugs In The Mediterranean Region: Current Situation In 17 MedNET Countries. Pompidou Group & Council of Europe.

Italy, MedNET was involved in the following activities supporting the integration of a gender dimension in drug policies :

- **Nine MedNET countries contributed to the 2015 publication on the gender dimension of non-medical use of prescription drugs (Cyprus, Egypt, France, Greece, Italy, Lebanon, Malta, Morocco and Tunisia).**
- **MedNET countries participated in a seminar on drugs, women and violence held in Rome in 2015, and in 2016 in a survey on date-rape drugs.**
- **In 2017, MedNET countries participated in a Rome seminar on “Women and Drugs: from policy to good practice.”**

From 2018 to 2021, MedNET countries continued to include a strong gender dimension in their activities, especially in the following projects :

- **Lebanese project to identify the needs of women with substance use disorders**
- **Tunisian project on prevention and treatment of addiction in adolescents**
- **Egyptian project focusing on a model of care for patients with dual diagnosis**
- **Egyptian project to help juveniles in correctional facilities**
- **Tunis project on a specific treatment center for women?**
- **Within the framework of the addictology diplomas, the curricula in Tunis (Tunisia), Rabat, Casablanca and Marrakech (Morocco) include a module devoted to the prevention, treatment and care of women who use drugs. The new courses to be launched in 2021 in Sfax, Monastir in Tunisia and Beirut in Lebanon will also include such a module.**

COVID-19

Several constraints were identified in the desk review as consequence of the COVID-19 pandemic. These constraints relate to:

- **the freezing of the demand for care in relation to the fear of contamination with COVID-19 when presenting to care structures, the difficulties of moving to these structures caused by restrictive curfews, the redirection of most carers to the COVID-19 centres in over-saturation, and due to quarantine/self-isolation measures.**
- **the aggravation of isolation caused by the need for physical distance, which increases the interruption of the supply of psychoactive substances, itself caused by the closure of borders and the extreme limitation of international and national sea, air and land transport.**

The rediscovery of virtual communication with PWUD during the confinement of COVID-19 has finally allowed us to take on the COVID-19 pandemic, no longer as an additional constraint, but rather as an opportunity to develop innovative ways to support them.

III. EVALUATION METHODOLOGY

Purpose, scope and use of the 15 year evaluation

The purpose of the 15 year evaluation was to evaluate MedNET in terms of its impact and to assess the extent to which its core objectives (to promote co-operation, exchanges and mutual transfer of knowledge) have been fulfilled.

The geographic scope of the evaluation were the seventeen MedNET countries.

The results are intended for use by the Pompidou Group and the beneficiary MedNET countries. The EMCDDA and the European Commission as observers can also take these results into account for their respective programmes. In particular, it will serve as a reference source for lessons learned and inform the continuation/future development of the network and its programmes in this area.

Evaluation Approach

A gender-sensitive, participatory and inclusive methodology to evaluate MedNET was employed.

A mixed-methods approach using desk review, SWOT⁴⁵ analysis and semi structured interviewing with key MedNET stakeholders consisted of three stages:

- Desk Review of MedNET Country reports (Algeria, Morocco, Tunisia, Lebanon, Jordan, Egypt, Palestine), MedNET annual regional activity reports (2012 to 2021), MedNET/MedSPAD publications, activities, research and situation assessment publications, and press releases.
- Collection of qualitative data through virtual semi structured interviews (via Blue Jeans) with a purposive selection of MedNET Country representatives, observers, consultants and the Pompidou Group itself.
- SWOT Analysis completed by MedNET Country representatives, and used to identify strategies to leverage current and potential value added to the MedNET programmes and the Pompidou Group.

There was a strong focus on assessing gender and human rights throughout the analytical process, not limited to specific relevant questions but integral to the evaluation process.

Sample

Seventeen interviews (eight males/nine females) were conducted with sixteen MedNET countries (Algeria, Cyprus, Croatia, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Palestine, Portugal, Tunisia, Spain and Switzerland). Nine of the ten Pompidou Group members (Cyprus, Croatia, France, Greece, Italy, Malta, Morocco, Portugal, Switzerland) and all seven non-members (Algeria, Egypt, Jordan, Lebanon, Palestine, Spain, Tunisia) partook in interviews. There was no participation from Turkey. Six interviews were conducted with the Pompidou Group Secretariat, MedSPAD consultants and the EMCDDA as observer (six females). No interviews were conducted with the European Commission which has observer status.

Nine SWOT assessments were returned on behalf of the MedNET countries (Egypt, Cyprus, Switzerland, Malta, Greece, Portugal, Palestine, Italy and Tunisia).

Triangulation of data

Special attention was paid to an unbiased and objective approach and the triangulation of sources, methods, data, and theories in the conclusive remarks. Secondary data sources

⁴⁵ Strengths, weaknesses, opportunities and threats.

from the desk review were cross-checked and triangulated through data retrieved from primary research methods. Furthermore, data analyses addressed assumptions made in the MedNET theory of change about how the regional and country programmes were intended to produce the intended results.

Evaluation Themes

The evaluation presents a series of broad themes representing MedNET' s cooperation and programmatic activities regionally and at country level. Key themes centre on the role of MedNET in;

- raising awareness, development and implementation of a domestic drug policy;
- the potential changes of drug law;
- research, collection, analysis and interpretation of information, in the setting up, and support in the national drug observatory;
- prevention, treatment and care;
- human rights and access to treatment and care;
- integration of human rights and gender dimension in actions;
- law enforcement;
- South-South exchanges, North-South and in South-North exchanges.

It also assessed:

- cooperation with EMCDDA, the European Commission through the Council of Europe joint programmes, UNICRI, WHO and regional NGOs such as MENAHRA;
- functioning, administration, management of the Network by the Pompidou Group Secretariat in serving the needs of the MedNET countries;
- the impact of COVID-19 on the operations and actions of MedNET in the past two years;

And identified;

- future directions of MedNET.

IV. EVALUATION FINDINGS

Awareness raising and contribution to the development of coherent rights based domestic drug policies and efforts to stimulate legislative reform.

The evaluation underscores how the MedNET cooperation since inception has been instrumental in raising awareness, reducing stigma of drug use, and ultimately has supported the development of scientific evidence informed and human rights based drug policies and practice in the South Mediterranean countries and Mediterranean region.

The MedNET cooperation has overtime improved the situation for PWUD/PWID in the Mediterranean countries, based on supporting the development of a public health and human rights based approach to drug policy, law enforcement, research and data surveillance, professional training, prevention, treatment and reintegration.

“MedNET has been a window to know the situation of the fight against drugs in other countries, first the member countries but also in other countries. This awareness of the drug situation in the world has enabled us to make a number of choices and to orient our policy according to what we have learned.”

Drug policy reforms, particularly in OAT provision and prevention in the South Mediterranean countries showcase the shift toward a public health approach to drug use with implementation of evidence- based programmes and policies impacting strongly on the ground.

Key public health concepts and fundamental rights centre on a public health centred law enforcement approach, upholding the right to access drug treatment and appropriate care, and the implementation of good practice in prevention and treatment across all health strategies.

Participants described an impressive evolution of MedNET based on commitment and belief. The network has evolved strongly over time, with substantial impact, and is especially successful in adapting such good practices and scientific evidence based interventions and research tools to the local legal, social and cultural environments of the MedNET countries. It has gained traction and acquired the capacity of organizing events with an increased frequency, and with strengthened relations between member states.

The network has steadily expanded geographically and per topics covered, informing national strategies and action plans, with the added value of the network changing drug policy and promoting a patient centered approach. Regional impact is very strong in terms of treatment, strategic planning and capacity building of professionals. There was a tangible improvement on national and regional reports over time, and in the transfer of knowledge policy, practice and science.

Many interview participants observed and appreciated the absolute attention and dedication shown by the participants that attended meetings and events;

“This helped us realise that what we were doing in that moment was having a positive, meaningful impact”.

Interviews with representatives of MedNET countries, both as Pompidou Group members and non-members revealed how the MedNET cooperation incurred substantial impact in various ways;

- by promoting awareness for scientific evidence,
- mutual knowledge transfer and sharing of lessons learnt, good practices and ideas

- around cultural adaptation,
- generation of coordinated policy strategies,
- professional training, field exchanges and technical support, and
- in the contextually appropriate debate around rule of law and integration of human rights and gender equality in policies, treatment practices and activities.

A host of regional and country level activities (conferences, round tables, seminars, research, national observatories, working groups for guiding principles on OAT, drafting of country profiles on drug situation and drug policy for Algeria, Egypt, Jordan, Lebanon, Morocco and Tunisia) were mentioned which informed the debate around and the design of new drug policies (Algeria, Lebanon, Morocco, Tunisia, Italy, Egypt). National substance use strategies were developed in Tunisia (2012), Lebanon (2016) and Algeria (2017). OST as a particular achievement was mentioned by many participants with regard to Lebanon (2009) Morocco (2011) and Algeria (2016).

Evolution of the law was deemed a goal of MedNET particularly regarding important changes in concept away from the repressive. Whilst the impact of MedNET was deemed very strong in changes of drug policy, due to the complexities and time involved in drafting and approving Bills it was not so fast or effective in terms of changing legislation despite the provision of legal opinions. Participants observed the role of MedNET in stimulating legislative reform, regarding the development of Bills for consideration at Parliament and recognized that this was a lengthy process. There was an observed difference whereby legislation in the EU is based on EU harmonization, whereas in contrast MedNET countries are all very individual and with different laws. This is explained by the fact that MedNET is not a supranational organization but a network where ideas and good practices are exchanged without imposing any directives. Further, the Pompidou Group is not a standards setting body nor does it have legislative powers.

Drug Law Amendments were referred to by participants in 2017 in Lebanon and in Tunisia where efforts to encourage a reform of Tunisian law, which whilst it was not passed through parliament resulted in the authorisation for judges to consider mitigating circumstances.

“In the area of legislation, for example, we have moved towards a reform of Tunisian law, which is known to be very repressive, since it systematically sentences anyone who consumes or holds drugs to one year’s imprisonment and a fine of between 1 and 3 million. After three years, the law was reformed to consider addiction as a chronic disease. We have moved from the concept of a crime to a disease, which is very important in the conception of things for decision-makers. “

Some participants mentioned the new drug law in Lebanon in 2021 which centred on the role of law enforcement in respecting the rights of PWUD in detention.

Law enforcement and Supply Reduction

Only some participants were able to provide insight into the role of MedNET in law enforcement and supply reduction, generally with regard to the stimulation of a public health approach to law enforcement, and the continued participation of MedNET member countries in the Pompidou Group’s law enforcement activities or in such as the Precursor Control network, the Airport and General Aviation Group and the Pompidou Group Working Group on Drug-related Cybercrime or in regional seminars in Algeria and Lebanon in the 2010’s. Next to these Pompidou Group activities, in some countries: Algeria and Lebanon, specific law enforcement activities were held.

Research, collection, analysis and interpretation of information, in the setting up, support in the national drug observatory and operationalisation of MedSPAD.

Data is deemed by participants as crucial to inform policy and practice. Prior to MedNET, data gathered in South countries was scant and restricted to occasional survey in the medical field, and complicated by the view of *“addictology as a taboo subject”*.

Participants all agreed that the development and operationalisation of national drug observatories in Morocco, Lebanon and Egypt, and in the facilitation of countries to establish MedSPAD an adaptation of the European ESPAD school surveys in the Mediterranean context, were key achievements of MedNET itself, and represented a lasting foundation to inform the design and operationalisation of drug policies in the South Mediterranean countries.

Many participants referred to the first national observatory on drugs and drug addiction set up in 2011 in Morocco, followed by Egypt in 2012 and Lebanon in 2018; and the subsequent publications. Efforts also included methodologies to collect treatment demand data in Jordan (2012), capacity building trainings in Algeria (2016), the development of an information map based on separate drug related databases in Lebanon (2016), a system of data collection in Egypt (2018).

Participants in the South Mediterranean countries observed how these efforts and surveys were crucial to create a collective awareness at the Ministry of Health, Ministry of Interior and other key stakeholders of the importance of collective good quality data to monitor trends. Study visits for the implementation of the MedSPAD survey was deemed very important in order to create sufficient expertise and capacity in operating the national drug observatories.

“Our appreciation must go to the Moroccan, Egyptian and Lebanese colleagues for the incredible work done in the improvement of data collection methodologies and reports.”

EMCDDA REITOX network focal points were described as examples of good practice. The data was not only deemed important at the domestic and regional levels, but useful for the EMCDDA itself and the African Union. According to several participants, a MedNET regional observatory is missing and could be developed. Others advocated for the development of an early warning system similar to EMCDDA Trend network. Of note is that Tunisia conducted wastewater analysis to determine the level of illicit drug use, an action which could be expanded to other countries.

All participants described the substantial exchange of experience between Mediterranean countries, and initial assessment of the situation in each country, in the context of MedSPAD. They described the importance of this initiative in terms of the development of the MedSPAD methodology (Algeria, Morocco, France and consultants from the Netherlands and Malta), followed by the implementation of the survey and the progressive development of the MedSPAD since 2011. There were some observed postponements of MedSPAD due to COVID-19 (for example Lebanon). Exciting developments in 2021 included Palestine joining MedSPAD, and the launch of the MedSPAD-ESPAD Bridge Project on the use of data in prevention (National Research Council of Italy (Italian: Consiglio Nazionale delle Ricerche, CNR). This new project was described by several participants as responding to the gap in use of MedSPAD to inform selective and targeted prevention activities in schools. Several proposed that as MedSPAD is the only available data in the Mediterranean this could be expanded to also include screening of risk users, problematic cannabis use social media, gaming and gambling.

University student and general population surveys are identified by participants as required to inform government policy and practical initiatives, not limited to children at school (MedSPAD). Prior to the evaluation these were not requested as activities by the country representatives to MedNET.

Burden of disease underpinned by the convergence of sex and drug risk taking and related vulnerabilities was identified. Bio-behavioural surveys (with focus on injecting drug use and sexual transmission of communicable disease such as HIV and viral hepatitis, among PWUD/PWID) and size estimates of PWUD/PWID are needed in MedNET countries. Prior to the evaluation these were not requested as activities by the country representatives to MedNET.

New areas for MedNET development in terms of surveillance and professional training could include online drug markets, emerging psychoactive substances and key vulnerable PWUD/PWID such as men who have sex with men, parents, children, the elderly, victims of human trafficking and displacement, and those with dual diagnosis. Prior to the evaluation these were not requested as activities by the country representatives to MedNET.

Moving beyond school and treatment settings was indicated as a priority area for MedNET. There is little known with regard to substance use, prevention and support of people in prisons, immigration detention and humanitarian settings, with identified learning opportunities from CoE member states. These could complement existing efforts by UN agencies. Work on migrants is however being undertaken at the moment by the Pompidou Group and involves participation of MedNET countries. A recent suggestion by the Secretariat to move towards an activity on health and drugs in prison has been welcomed and could be further investigated in the next future.

There is a concrete opportunity for MedNET countries in the South to learn from the Pompidou Group's project *"Strengthening human rights-based responses to substance use disorders in prisons"* which has helped to further strengthen drug treatment systems in Eastern and South-East European prisons.

There is further an identified need for investment to publish and showcase comparable data generated by MedNET over time, and efforts could be further expanded to include more research activities such as academic papers, policy and practice guidance outputs. The current practice by Pompidou Group /MedNET Secretariat is to publish the final reports of an activity on the MedNET website. To include more research, would need more time, more staff and funding.

Professional training and capacity building in drug prevention, treatment and reintegration

A substantial achievement was the role of MedNET in supporting evidence based learning, in the training, professional certification and capacity building of dedicated addiction professionals involved in the prevention of drug overdoses, provision of drug treatment, rehabilitation and social reintegration, and allied health care.

Participants observed the significant impact of MedNET on professional standards and evidence based practice relating to drug prevention, treatment and care of PWUD/PWID, including a specific focus on human rights and women's needs.

University courses in Addictology in Morocco and Tunisia, and the establishment of the Egyptian national board for accreditation and certification of addiction counsellors, the generation of OAT guidelines in 2017 with experts and representatives of the EMCDDA

and the WHO, and the Lebanese accreditation standards were deemed to be flagships of success for MedNET.

“Before Tunisia's involvement in MedNET, addictology did not exist, patients were treated by psychiatrists who treated them whenever they wanted with psychotropic drugs. With Tunisia's involvement in MedNET and as part of the promotion of care, we started to create addictology training in three medical faculties.”

A key example of the success of MedNET capacity building was the enabling of countries to introduce different treatment and care modalities, including OAT into their health systems. There was however an observed gap by some participants, with regard to the expansion of OAT into prisons.

“The adoption of OAT took a while in Algeria because we had to sensitise the public authorities for its adoption and then implement it; MedNET was involved in both stages. It helped us to organise awareness seminars for the various stakeholders and the public authorities, especially the Ministry of Health. After the principle was adopted, it had to be implemented and doctors had to be trained. MedNET took care of the issue very well, we have trained about 60 doctors so far. MedNET's help has been invaluable and decisive.”

Study visits to Pompidou Group member countries, international seminars and visits by experts, regional meetings (for example refugees and drugs), workshops on various topics (women who use drugs, harm reduction, motivational interviewing, CBT for cannabis dependence, gambling, EDPQS; training and capacity building of addiction nurses, parental training model for parents with substance use disorder) and site visits in southern Mediterranean countries (for example Cyprus, Palestine, Lebanon) were deemed invaluable.

Jordan and Lebanon participated in the joint seminar Pompidou Group/CICAD on “Drug Prevention Approaches that Make a Difference” seminar in Iceland. Useful training also included the Executive Training in Norway, the development of online learning platforms and modules for professionals in 2020 (“Drug Related Challenges for Migrants, Refugees and IDPS”; Moroccan capacity building of civil societies in prevention interventions on psychoactive substances, and prevention, treatment and care of women who use drugs, dual diagnosis). All of these activities were viewed as beneficial to North and South MedNET partners in the form of shared learning around social and cultural adaptation of evidence based practices, and garnering an enhanced understanding of the drug and socio-political challenges particular to the Mediterranean region.

“Training events gave us a better perspective on the challenges related to drugs, helping us to develop a more comprehensive approach to the issue”.

Training workshops and study visits were postponed during COVID-19. However, in 2021, in order not to slow down the projects conducted in Egypt, 3 study visits took place on line and were hosted by Cyprus, Czech Republic and Italy. In 2020, the General Secretariat of Mental Health and Addiction Treatment (GSMHAT) in Egypt published an article on Plan for SUD in COVID-19 Pandemic. A prevention booklet was published in 2021 to assist the survivors of the Beirut explosion.

Whilst awareness raising, training and capacity building was operationalised through multi-agency meetings bringing together the prevention, treatment and care and law-

enforcement sectors, many indicated that training could further focus on stakeholders of the criminal justice sector, and in collaboration with key civil society organisations. Training could also be expanded to include behavioural addictions. This could not be done until the change of Pompidou Group mission which is now extended to all addictions.

Whilst training numbers are increasing over time within the MedNET cooperation and this potentially improves treatment service delivery, several participants observed the lack of effective follow up in measuring training knowledge and attitude change, and need for regular KAP⁴⁶ surveys, and routine clinical auditing at service levels. This would require more human resources both at the country level and Secretariat level.

Cultural and infrastructural barriers may exist at the local levels, and there are observed gaps in some countries with regard to full adoption of training gains and cascaded peer to peer training.

Integration of human rights and gender dimension in all actions and particularly access to treatment and care

Participants observed how the MedNET cooperation has developed strongly over time and is underpinned by a strong focus on dissemination and debate to further develop the consideration of human rights and gender mainstreaming in addiction and treatment in the Mediterranean region, both for attention of decision makers, but also treatment providers and the broader public awareness. Fundamental rights include the right to health and right to access and availability of specific drug treatment and rehabilitation in the community.

“The training courses held in the MedNET framework helped us to better understand the issues and challenges in the developments of drug policies, especially for what concerns, with a special stress on the respect on human rights, such as the right to health, and to the access to treatment, in our country as well as in the Mediterranean region. “

There were several comments around the lack of operationalization of these key rule of law concepts in prisons and other closed settings, and also room for improvement with regard to humanitarian settings in the Mediterranean countries. There is a concrete opportunity for MedNET countries in the South to learn from the Pompidou Group project “Strengthening human rights-based responses to substance use disorders in prisons” which has helped to further strengthen drug treatment systems in Eastern and South-East European prisons.

“The idea with “health in prison” would enhance this issue.”

With regard to several of the key principles underpinning the human rights approach for PWUD concerning every single dimension related to drug use; there were some identified gaps for further consideration. These included a need for greater focus on rehabilitation and reinsertion programming, in collaboration with key civil society organisations; a greater focus on PWUD (and including women who use drugs) in prisons, sex workers and sexual minorities, elderly, those with dual diagnosis; and a greater inclusion of civil society organisations and individuals/groups with lived experience of drug dependence.

Whilst human rights and gender equality are debated and discussed in the MedNET meetings, and mainstreamed into projects, activities and actions, a range of human rights and gender equality indicators could support and monitor this in reality and assess practice going forward.

⁴⁶ Knowledge, attitude and practice

All participants referred to the 2020 publication on human rights and people who use drugs in the Mediterranean Region: MedNET situation in 17 MedNET countries as an important step. Some participants proposed the regular repeat of human rights and gender equality publications. The Covid 19 pandemic prevented the 2020 steering committee discussion on human rights and PWUD. This discussion will take place in 2022.

Key debates and initiatives cognizant of the unique needs of women were considered and operationalized both in terms of research and publications on the needs of women (including pregnant women who use drugs), and in the operationalities of gender oriented approaches to drug treatment. This was deemed by many as not only useful for Mediterranean countries but also as opportunity for shared learning and benefit to countries in the North. Many participants reported increased awareness around the importance of considering the issues women who use drugs face in their countries, and the creation of specific sub committee to explore and respond to the issues. Many described the 2017 seminar in Rome on *“Women and Drugs: from policy to good practice”*.

“We have, since last year, started a project with MedNET to set up a day hospital for women with substance use disorders so that they have a place which, until then, did not exist in Tunisia. There was only one place run by civil society where women could go for harm reduction, but for the moment there is no dedicated service for treatment. This is very important for us because it is very difficult for women to seek care, particularly in Arab-Muslim society.”

MedNET countries participated in a seminar on drugs, women and violence held in Rome in 2015, and in 2016 in a survey on date-rape drugs. Particular training and service developments focused on women who use drugs, including pregnant women, young adolescents and those who are HIV positive (Egypt, Lebanon, Tunisia). Only one programme focused on closed settings (Egypt). New training modules on prevention, treatment and care of women who use drugs are to be launched in 2021 (Morocco, Tunisia, Lebanon).

“In Algeria, we organised a seminar in 2018 where we invited the actors of the criminal chain (justice and police sectors) and the actors of the health sector, which enabled us to take stock of the situation, to know the extent of the phenomenon and to raise the awareness of the different actors on the particularity of women and the importance of taking this particularity into account, especially in our society where it is more difficult for a woman to ask for care than elsewhere.”

Many mentioned the 2015 publication *“The gender dimension of non-medical use of prescription drugs in Europe and the Mediterranean region”*. Nine MedNET countries had contributed (Cyprus, Egypt, France, Greece, Italy, Lebanon, Malta, Morocco and Tunisia). Further developments were proposed to focus on the substitution treatment of pregnant women and neo-natal abstinence syndrome.

““The Pompidou Group is doing an excellent job in promoting awareness. I am not only talking about an approach that takes into account physiological differences between men and women, since this has often been the only way to approach the issue, but also the specific needs of women, since they always represent a minority of the people in treatment, and general approaches might therefore not take this element into consideration. Indeed, a comprehensive gender approach should take into consideration specific fears or prejudices that might prevent

women from seeking treatment, the stigma that might be associated to the condition of being a mother and a drug user, past trauma or traumatic experiences that might need to be addressed and so on”.

“The Pompidou Group is really one of those organizations leading the way on this issue, and the MedNET is receiving this lesson. The Network is making noticeable efforts on this subject, promoting the gender dimension of drug policies in the Mediterranean Region, while paying the due attention to the local social and cultural environment.”

South-South, North-South and South-North exchanges

MedNET was observed by participants as having substantially facilitated the dialogue between Europe and its Southern Mediterranean neighbouring countries through co-operation, exchange and capacity building, fostering not only North-South and South-North exchanges, but also South-South co-operation.

MedNET's objective was defined as to promote co-operation and a two-way transfer of knowledge between European and Mediterranean countries (North-South and South-North exchanges) as well as within the Mediterranean region (South-South). The network was described as incorporating a wider Mediterranean and international perspective, and has expanded over time, with new countries joining. The mobilisation of expertise from North and neighbouring South countries is supported by a strong dynamic and commitment in the group.

Interviews revealed the diverse and reciprocal nature of the MedNET network in South-South, North-South, and South-North knowledge exchanges, sharing of good practices, innovations and cultural adaptability of evidence based interventions and methodologies, and mutual cooperation. Cross fertilization of ideas and experiences, lessons learned and good practices occurred through meetings and study visits.

“MedNET brings together Mediterranean countries from the South and North to exchange knowledge and good practices. A recent example was an online training Cyprus offered to Egypt on harm reduction and how the drugs treatment system works, the human right to access different types of treatment tailored to the person needs, the treatment digital record, procedures, pharmacology, interventions, and different settings.”

In terms of North-South one way direction of cooperation, observations and perspectives were based on the provision of expertise and technical guidance from more experience Northern countries with longstanding histories and capacity in tackling drug use, and in the treatment and reintegration of former drug users to countries in the Mediterranean in need of assistance. The North was described by many as having lengthy experience in tackling and treating heroin use, in the technical experience of providing OAT models of care. Particular successes included the exchanges in the framework of training provided by different European countries such as Portugal, France, Belgium, Switzerland.

“It is much more the experience of countries that started the fight long before us, that adopted good practices that we try to apply in Algeria while taking into account our situation. The MedNET is a real hub, mobilising expertise according to our requests and according to what we ask for.”

“The diplomas that are organised in Tunisia in the faculties regularly invite lecturers from European countries who have more experience than us, precisely to improve the knowledge of the candidates.”

In terms of South-South, participants described a range of formal and informal connectivity between MedNET countries in the sharing of experiences and technical know how when designing, and culturally adapting existing gold standard/evidence based programmes, and when training medical professionals and prevention officers. Networking between South and South are viewed by some interview participants as parallel to REITOX network in Europe.

“This South/South cooperation benefits from being developed for the benefit of the countries of the South, and it will certainly be done with a better understanding of each other's capacities. “

“Within the framework of the South-South exchange, we also invite lecturers from Morocco and Lebanon to pass on their experience and show that these practices and principles implemented in Europe can also be accomplished on the southern shore of the Mediterranean.”

South-North exchanges were equally important as benefit of the cooperation, with many participants from the North describing rich learning experiences and thought provoking debates on many aspects of drug policy and practice, human rights and gender mainstreaming. North learnt a lot in terms of culture and background.

“The North has learnt about South and offered its expertise and lengthy experience. In term of South South, countries have similar cultural contexts, and conditions, views, practices, technologies and methodologies, with the Mediterranean border acting as a bridge between different realities.”

“We also have south-north exchanges, in particular with Brussels civil society, with exchanges where our colleagues from Brussels came to Tunisia, lived our experience and even gained from our experience because they saw that in Tunisian civil society people are encouraged to learn a job while they are in harm reduction centres so that they can go out and find an occupation that keeps them away from consumption.”

“We, the trainers, the teachers, could learn much from the people that we were training. Indeed, it often happened that those professionals that we were training, coming from different social and cultural backgrounds were used to confront situations that we had not encountered in our personal experience and that maybe we would not have been prepared to handle if we were in their shoes. So, I would definitively call it a great experience.”

Some participants observed new opportunities for close cooperation on MedNET in health in prisons, based on lessons learnt and expertise from the East Europe and South East Europe network and its work on prisons.

There is huge importance to focus on sustaining MedNET to allow it to evolve, with the country level discussion of ideas balanced with funds and priorities. It is imperative to maintain the operational nature of MedNET in order to stay alive not just its conceptual and political aspects. Whilst MedNET is functional as a concept or platform for institutional and financial supports, some interview participants observed that MedNET could be threatened by further expansion and a careful approach is warranted. Some participants

cautioned against admitting new countries in terms of the resource implications, and some observed their willingness to join Pompidou Group as a full member-state when currently being a MedNET representative (for example Tunisia).

Many observed the need to create national networks at the country level themselves, this is currently under developed. Two representatives from each country are needed to expand to joint representation from Ministries of Health and Interior/Justice.

Whilst MedNET's target groups are professionals: medical personnel, social workers, representatives of NGO, researchers, officials responsible for prevention, health, research and law enforcement, and policy-makers, MedNET focal point representatives are largely medical professionals or law enforcement nominated by their Ministry in charge of drug policy and are in a position to represent their country.

Service user and civil society involvement is insufficiently developed. There is an identifiable need to expand on the national networking to include social work experts, former PWUD/PWID with lived experience of drug use, service users and civil society organisations (ie from PWUD NGOs, including MENANPUD⁴⁷). This could be examined on a case by case on each activity according to the country.

Cooperation with international organisations and civil society at European, national and regional level

Participants observed that MedNET cooperation with EMCDDA (attending as observer) and the European Commission through the Council of Europe joint programmes and UNICRI as research institute was strong. Since 2009, the EMCDDA has taken part in all MedNET activities involving the establishment of national monitoring/resource centres on drugs and drug addiction and has been attending MedNET steering committee meetings as an observer. The MedNET Secretariat participates as an observer in advisory committee meetings of the EU4 Monitoring Drugs⁴⁸ project which is being funded by the European Union and implemented by the EMCDDA. The EU4MD project supports national and regional readiness to identify and respond to drug-related health and security threats (preparedness, threat assessment and strategic understanding) in the European Union and neighbouring countries Half are also Southern countries which belong to the MedNET network.

Some described how MedNET developed activities in partnership with EMCDDA and UNICRI in the field of gender, and referred to the UNICRI project on the role of families in drug use prevention and in building pathways for resilience and rehabilitation among young people (Italy, Lebanon and Tunisia).

Whilst there was no interview with a representative of the European Commission, many participants referred to the MedNET cooperation with the European Commission through the Council of Europe under the South Programme I to IV: Council of Europe/European Commission co-operation, the UNICRI, and that the European Commission has participated in MedNET's annual committee meetings since 2015 and to a lesser extent within the past 4 years.

There is an observed need for less "closed" work (MedNET only) and more cooperation with other activities of the Pompidou Group, in order to profit more and gain more with the

⁴⁷ The Middle East and North Africa Network off for People who use Drugs

⁴⁸ www.emcdda.europa.eu/activities/eu4md_en

limited funds available, and greater cooperation with UNODC and WHO agencies to maximise impact and reduce duplication or fragmented efforts.

With regard to the cooperation with the WHO which commenced in 2020 as an observer, there were observed gaps in the cooperation with WHO Head Office in Geneva and the WHO EMRO⁴⁹ office in Egypt, and similar deficits in cooperation with UNODC⁵⁰ ROMENA⁵¹ in Egypt.

Engagement with the regional NGO MENAHRA and MENANPUD is currently nil, despite the history of engagement between 2009 and 2011, when MedNET cooperated with MENAHRA and funded their sub-regional knowledge hub for Algeria, Morocco and Tunisia for the provision of training activities on advocating the needs of drug injectors among NGO's. None of the countries expressed the wish to reinforce the link with Menahra in the course of the years.

Functioning, administration, management of the Network by the PG/MedNET Secretariat in serving the needs of the MedNET countries.

The evaluation underscores how MedNET draws extensively from the classic “bridging” function of the Pompidou Group of the Council of Europe, which coordinates and manages the MedNET Network. MedNET countries are highly appreciative of the role of the Secretariat of the Pompidou Group in its responsibility for the implementation of the work, the smooth running of the network, management of the budget and in ensuring synergy between the work of the Pompidou Group and other Council of Europe entities.

“The small team at PG have achieved great things”

Participants were unanimous in that the MedNET Secretariat despite being a small team is systematically sufficient, reliable, supportive, and proactive in all the exchanges, preparation of meetings, facilitation of study visits, trainings, offering not only human resources support but also drafting all the contracts involving financial support to the countries proposals and in the first place raising funding from donors and from CoE and EU joint projects or from CoE neighbourhood strategy. The Secretariat has facilitated progress and change in the drugs and addictions’ field among Member countries.

“The professionalism of MedNET Secretariat is the reason of the closed-knit group MedNET is today, with a mutual respect and sharing a common vision and goals towards the development of a human rights approach in drug strategies”.

“Yes, I seriously think so with all the contacts, I had with the members of the Secretariat to organise events, activities (the contact was either by email or by phone). We always exchanged very easily. Our needs were always taken care of to the maximum.”

The MedNET Secretariat is made up of one Permanent Staff funded by the Council of Europe. The contracts of the temporary staff are funded on the extra budgetary funding.

In 2021, there were delays in the funding disbursement of voluntary contributions made by the regular donors to MedNET due to the Council of Europe rules of imposing a signature of contract by the donor for each voluntary contribution. This resulted in voluntary contributions being blocked on a central account before being transferred to MedNET account and in very long time consuming discussions with the administration and

⁴⁹ Regional Office for the Eastern Mediterranean

⁵⁰ United Nations Office on Drugs and Crime

⁵¹ Regional Office Middle East and North Africa

the donors. Stable funding is required in order to implement the whole annual MedNET programme whilst it develops and increases its activity portfolio.

Threats and opportunities during COVID-19

COVID-19 was described by all participants as affecting the MedNET programme due to reduced face to face meetings, less opportunity to interact, discuss and support each other, and diverted capacities. Steering Committee meetings were also disrupted during COVID-19. Communication continued throughout the year with all members of the network. Nevertheless, the commitment and energy was maintained and the groups still met online, held study visits at a distance and published together. Some projects were delayed or halted.

“Yes, no physical meetings, less interaction, as all were busy elsewhere and priorities had shifted to the pandemic.”

“Meetings were carried out online which in effect led to fewer discussions, shorter exchanges, delay in projects and study visits, since services were not operating as usual, and onsite visits were not allowed due to public health safety measures. However, it has proven to be feasible, maintain an open channel of communication between the members of the group, even if not ideal.”

MedNET has generated new technologies, new methodologies, identified new groups and new situations over time. This is particularly during COVID-19 with many useful for future programmes and activities. Examples include COVID-19 Telemedicine, and actions and activities targeting and reaching homeless PWUD and providing OAT care (WhatsApp online counselling, mobile health units, and methadone dispensing machines).

See **Figure Three** overleaf for the SWOT diagram which provides a concise listing of identified strengths, weaknesses, opportunities and threats of MedNET.

Figure Three SWOT

<p>STRENGTHS</p> <ul style="list-style-type: none"> Unlimited support by the Secretariat. Longstanding network based on knowledge exchange of ideas, methodologies and good practices Exchange of experiences and mutual transfer of knowledge as a solid base for the development of evidence-based drug policies Excellent collaboration and unique platform of cooperation in the Mediterranean region Active, interested and dynamic group and little funds needed for big impact Expertise of country representatives, led and implemented by psychiatry and addiction treatment professionals. Addresses the need of countries that are in need of development through technology transfer and capacity building Facilitation of MEDSPAD and National Drug Observatories and facilitation of the development of national drug strategies in the south region Ensuring the balance of reduction in supply and reduction in demand in national drug policy. Opportunity to assist other countries and support regional knowledge sharing and duplication. 	<p>WEAKNESSES</p> <ul style="list-style-type: none"> Narrow focus on addiction treatment activities excluding mental health and psychiatric services Predominance of projects in some countries Risk of an imbalance between the two sides of drug policy (reduction in supply / reduction in demand) in relation to the political instability Lack of involvement of the Ministries of justice of the member countries in this network Need for greater openness to actions in prisons and to reform of laws relating to narcotics North- north interaction not as strong as north-south and south- south interaction The communication strategy and weak policy impact Different level of commitment and budgetary involvement of the participating countries to impact on joint projects Diversity in terms of legislation, practice and drugs situation among the 17 participating countries Unbalanced transposition of human rights-based approach and respect of gender dimension in national drug policies Capacity of the National Drug Observatories and the lack of financing of important projects such as "general population" and bio-behavioural surveys, and PWUD size estimates High turnover of staff at service levels and need for continuous support of <u>MedNET</u> countries Huge differences in urban-rural areas, hierarchical structures making decisions difficult and slow, and need for additional local funding to add to professional "ownership" Insufficient funding
<p>THREATS</p> <ul style="list-style-type: none"> COVID-19 pandemic affects personal interaction. e.g. Study visits and meetings Compatibility of different addiction treatment approaches with other MedNET countries, taking into consideration the social, legal, financial and cultural constraints Focus more to criminal law issues instead of human rights and public health aspects in drug policy constitution Predominance of projects in some countries, political agendas threatens group cohesion Time constraints and shortages in funding impacting on scope and sustainability Lack of commitment from participating countries Hesitancy in continuing participation and political instability in the region Inappropriate strategic choices and implementation with no accurate preparation and lack of similar environmental resources. Change of personnel engaged might lead to drop in interest in the project. Government changes and ideology versus scientific knowledge 	<p>OPPORTUNITIES</p> <ul style="list-style-type: none"> Further exchange of knowledge, experiences and practices based on common cultures and characteristics between <u>MedNet</u> countries Further research and practice opportunities Methodology development in research, practice (treatment care and prevention, legislative reform) and policy. New areas to implement drug policy: gender, criminal law, care in prisons and closed settings, focus to special vulnerabilities (parents who use drugs, migrants and refugees, unaccompanied children, human trafficking) Evidence base documentation through standards development, guidelines systemization for practice and adequate requirements for building effective intervention Discussing recent developments in cannabis policies Openness for new approaches and ideas, and further possibility to learn from other countries' experiences, lessons learnt and good practices Information and exchange easily feasible/accessible while project is ongoing and adaptations possible. Expansion of Diploma courses in addictology for health professionals

V CONCLUSION AND FUTURE DIRECTIONS OF MEDNET

MedNET has contributed to an improved situation for PWUD/PWID in the Mediterranean countries, based on supporting the development of a public health and human rights based approach to drug policy, law enforcement, research and data surveillance, professional training, prevention, treatment and reintegration. The cooperation has developed strongly over time with the underpinning of integration of human rights and gender dimension in discussions and debates, activities and initiatives. There was a strong focus on the consideration of human rights and gender mainstreaming in addiction and treatment in the Mediterranean region, both for attention of decision makers, but also treatment providers and the broader public awareness. Key concepts centre on a public health centred law enforcement approach, upholding the right to access drug treatment and appropriate care, and the implementation of good practice in prevention and treatment strategies.

The MedNET cooperation has been instrumental in raising awareness, reducing stigma of drug use and addictions, and ultimately has supported the development of scientific evidence informed and human rights based drug policies and practice in the Mediterranean countries and region. Flagships include the data comparability, gathering and monitoring in MedSPAD, the national drug observatories and assessments of situation in countries of the South, the professional training, education and accreditation, leveraging of scientific evidence informing a shift in drug policies, and the development of draft Bills of Amendment to stimulate legislative reforms. There is substantial impact of MedNET on professional standards and evidence based practice relating to drug prevention, treatment and care of PWUD, including a specific focus on human rights and women's needs.

MedNET was described by all as based on a democratic policy with equal cooperation, and consideration of country achievements and needs. The interaction between MedNET countries (North-South, South-South, South-North) was observed to operate in a flexible manner and used to support the consideration of various needs of stakeholders, mutual learning and knowledge sharing, and the exchange of qualitative and quantitative information which promoted the cultural adaptation of policy, scientific evidence, policy and practice. Multi-disciplinary knowledge sharing and skills acquisition was enacted through active participation and debate, meetings, round table discussions, study visits and communications around promoting the human rights and gender dimension of drug policies in the Mediterranean Region, emerging challenges and issues faced by all neighbouring countries and publications. The network has evolved strongly over time, with substantial impact, and is especially successful in adapting good practices and scientific evidence based interventions and research tools to the local legal, social and cultural environments of the MedNET countries.

There is huge importance to focus on sustaining MedNET to allow it to evolve, with the country level discussion of ideas balanced with funds and priorities. The MedNET Secretariat alongside country presidency can further contribute towards future activity proposals with seminars and trainings and development of regional projects. Close relationships formed between the Secretariat and the country representatives over the years underpins the success of MedNET in terms of cooperation and impact in the Mediterranean region. It is imperative to maintain the operational nature of MedNET in order to stay alive, not just its conceptual and political aspects. Further expansion warrants a careful approach.

The current mix of law enforcement, academics and psychiatrist/medical officials, could expand to include greater representation from regional harm reduction NGOs operating in the Mediterranean region, for example MENAPUD, MENAHRA and other civil societies at national levels, and the inclusion of those with lived experience of drug use at the discussion tables.

The evaluation has yielded a series of distinct and concrete recommendations for further focus and development by the Pompidou Group and MedNET focal points.

The MedNET Network and its cooperation

It is recommended to conduct less “closed” work (MedNET only) and more cooperation with other activities of the Pompidou Group (this can only be done if the countries decide to cover their participation for example to pay for their travel and subsistence expenses in Pompidou Group activities), in order to profit more and gain more with the limited funds available, and engage in greater cooperation with UNODC (for example ROMENA) and WHO agencies (for example EMRO) to maximise impact and reduce duplication or fragmented efforts provided that these organisations are interested and willing to work with MedNET and share information with us.

It is recommended for MedNET to discuss a potential reinstated engagement with the regional NGO MENAHRA and MENANPUD to support MedNET in its cooperation, research and training activities and advocacy to inform policy and legislative reforms.

It is recommended (on a case by case basis) to create national networks at the country levels themselves, for example two representatives from each country to expand to represent all sectors, and including service users, former PWUD/PWID and civil society.

Operations

The small team at the Pompidou Group Secretariat should be extended. Stable and more funding is required, and the administrative requirements of the Council of Europe should allow the release of funds on calendar year month one.

Research and Surveillance

It is recommended to develop a regional MedNET drug observatory in the Southern Mediterranean countries which includes an early warning system similar to that in the EMCDDA Trend network and which could include a focus on online drug markets and new psychoactive substances (NPS). This would require an extended Secretariat, with larger funding, and requisite infrastructure.

It is recommended to expand the focus of MedNET beyond addiction to also include public health surveillance pertaining to blood borne virus data among PWIDS.

It is recommended to further develop, capacity build and operationalize national drug observatories to conduct general population and university student surveys, bio-behavioural surveys (with focus on communicable disease such as HIV and viral hepatitis and injecting drug use) and size estimates of PWUD and PWID in the Southern Mediterranean countries.

It is recommended to further expand wastewater analysis in determining the level of illicit drug use in MedNET countries.

It is recommended to further develop MedSPAD as the only available data in the Mediterranean to include screening of risk users, problematic cannabis use social media, gaming and gambling, and further expand and support the use of MedSPAD to inform selective and targeted prevention activities in schools.

It is recommended to further instigate MedNET joint publications, policy and practice guidance outputs, and regularly repeat the human rights and gender equality publications. The 2022 second publication is welcomed.

Professional training and education

It is recommended to further develop and fund effective follow-up measures on professional training and education in the form of routine training knowledge and attitude change (for example KAP surveys), evaluation of the peer to peer training cascade and routine clinical audit at service levels.

It is recommended to expand on training (amongst others) to include behavioural addictions, OAT of pregnant women and neo-natal abstinence syndrome.

It is recommended to further develop MedNET training for stakeholders of the criminal justice sector, and in collaboration with key civil society organisations, former PWUD/PWID and service users.

Human Rights and Gender Equality

It is recommended to utilise a range of human rights and gender equality indicators to support and monitor human rights and gender equality mainstreaming into projects, activities and actions, and in practice going forward.

Target populations and future areas for consideration

It is recommended to devote a greater focus on rehabilitation and reinsertion programming in MedNET activities and actions, in collaboration with key civil society organisations and NGOs; with a targeted focus on PWUD (and including women who use drugs) in prisons, sex workers and men who have sex with men, victims of human trafficking and displacement, parents who use drugs, children, elderly, those with dual diagnosis; and a greater inclusion of civil society organisations and individuals/groups with lived experience of drug dependence.

It is recommended to develop MedNET actions in humanitarian or conflict settings given the displacement of people in the Southern Mediterranean countries as observed as a priority area.

It is recommended to develop MedNET programming in prisons (modelling on the Council of Europe's prison programme in South East Europe), with regard to professional training and capacity building, harm reduction and drug treatment and rehabilitation/reinsertion programming for former prisoners on release.

COVID-19 Opportunities

It is recommended to further develop the treatment innovations and new ways of reaching and supporting PWUD/PWID created during COVID-19 (for example telemedicine, WhatsApp online counselling, mobile health units, and methadone dispensing machines).

ANNEX I. DESK REVIEW LIST

	Document – name
2004	Bless, R. & Muscat, R. (2004). Validity and reliability of school surveys based on the European ESPAD methodology in Algeria, Libya and Morocco (MEDSPAD pilot school survey project). Pompidou Group & Council of Europe. Strasbourg.
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2011	Skoun Lebanese Addictions Center et al. (2011) Situational Needs Assessment in Lebanon, as part of the 'Filling the Gap' project. Pompidou Group & Council of Europe.
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2014	El Omari, F., Sabir, M. & Toufiq, J. (2014). School Survey 2013 : Drug use amongst Moroccan student (22). MedSPAD Morocco.
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2016	Egypt and MedNET. (2016). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.
2016	Jordan and MedNET. (2016). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.

2016	Lebanon and MedNET. (2016). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.
2016	Morocco and MedNET. (2016). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.
2016	Tunisia and MedNET. (2016). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.
2016	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2016). "10 years and beyond" 10 years of co-operation in the Mediterranean Region on Drugs and Addiction: Evaluation among MedNET participants. Council of Europe, Strasbourg
2016	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2016). "10 years and beyond" 10 years of co-operation in the Mediterranean Region on Drugs and Addiction: Timeline. Council of Europe, Strasbourg.
2016	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2016). "10 years and beyond" 10 years of co-operation in the Mediterranean Region on Drugs and Addiction: Impact of MedNET. Council of Europe, Strasbourg.
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2016	Republic of Lebanon Ministry of Public Health. (2016). Inter-Ministerial Substance Use Response Strategy for Lebanon 2016-2021: Prevention, Treatment, Rehabilitation, Harm Reduction, Social Re-integration and Supply Reduction. Ministry of Public Health.
2016	Pompidou Group. (2016). Final report for adolescent addiction service development (21). Pompidou Group.
2016	Sabry, N. (2016). Gender Responsive Services for Women with Substance Abuse Disorders in Egypt: Final Report (24).
2017	Muscat, R., Molinaro, S. & Benedetti, E. (2017). MedSPAD Committee Regional Report: Prevalence of Alcohol, Tobacco and Drug use Among Adolescents in the Mediterranean Region. Pompidou Group & Council of Europe.
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2017	MedSPAD Tunisia (2017) Results of the national MedSPAD II survey (41). MedSPAD Tunisia.
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2019	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2019). MedNET 2019 Activity Report (9). Pompidou Group & Council of Europe.
2019	Benedetti, E., Resce, G. & Molinaro, S. (2019). MedSPAD Committee Regional Report: An insight into alcohol, tobacco and other drugs in the Mediterranean Region: Socio-economic, policy context and patterns of use among adolescents. Pompidou Group & Council of Europe.
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2019	Lebanese Republic Ministry of Public Health National Mental Health Programme. (2019).Needs Of Women With Substance Use Disorders Qualitative Research Report 2019. Ministry of Public Health
2019	Lebanese Republic Ministry of Public Health National Mental Health Programme (2019) Accreditation Standards: RESIDENTIAL SUBSTANCE USE REHABILITATION PROGRAMMES. Ministry of Public Health

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2020	Skoun Lebanese Addictions Center. (2020). Final Narrative Report: Connecting Youth For Drug Awareness In Schools (2). Pompidou Group & Council of Europe.
2021	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET) (2021) MedNET 2021 Activity Report. Pompidou Group & Council of Europe.
2021	Jordan and MedNET. (2021). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region (17). Council of Europe, Strasbourg.
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2021	Algeria and MedNET.(2021).MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region (20). Council of Europe, Strasbourg.
2021	Lebanon and MedNET. (2021). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region (19). Council of Europe, Strasbourg.
2021	Morocco and MedNET. (2021). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region. Council of Europe, Strasbourg.
2021	Tunisia and MedNET. (2021). MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region (21). Council of Europe, Strasbourg.
2021	Palestine and MedNET (2021) MedNET: the Pompidou Group's co-operation network on drugs and drug addiction in the Mediterranean region (24). Council of Europe, Strasbourg.
2021	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2021). MedNET 2021 Activity Report (DRAFT). Pompidou Group & Council of Europe.
2021	Pompidou Group Activities : MedNET (Accessed 25/08/2021)
2021	Pompidou Group. (2021). MedSPAD Survey : Guidelines 2020-2021 (17th March 2021). Pompidou Group & Council of Europe.
2021	Mediterranean Network for Co-operation on Drugs and Addictions (MedNET). (2021). Developing a model of care for juveniles with substance use problems in corrective facilities in Egypt (4). Pompidou Group & Council of Europe.
2021	Prevention following the Beirut Explosion.

ANNEX II EVALUATION TOOLS: INTERVIEW GUIDES AND SWOT TEMPLATE

Semi-structured interview guides MedNET Focal Points and Observers

Hello. Thank you so much for accepting to speak with me today. My name is Marie Claire Van Hout and I am the evaluation consultant contracted by the Pompidou Group to evaluate MedNET in the past 15 years.

This evaluation builds on the 2016 impact evaluation of MedNET's actions in the Mediterranean region. The purpose of this 15 year evaluation is to evaluate MedNET in terms of its impact and to assess the extent to which its core objectives – to promote co-operation, exchanges and mutual transfer of knowledge – have been fulfilled. Specific evaluation objectives relate to the role of MedNET in

- awareness raising, development and implementation of drug policies,**
- contributing to law enforcement and drug legislation changes,**
- contributing to research, data collection and analysis, interpretation of information and in the establishment and implementation in the national drug observatory,**
- prevention, treatment and care,**
- ensuring that human rights are upheld regarding access to treatment and care, and**
- in South-South exchanges and North-South and South-North exchanges.**

The geographic scope of the evaluation are the seventeen MedNET countries: Algeria, Cyprus, Croatia, Egypt, France, Greece, Italy, Jordan, Lebanon, Malta, Morocco, Palestine⁵², Portugal, Tunisia, Turkey and since 2019 Spain and Switzerland.

The results are intended for use by the Pompidou Group and the beneficiary MedNET countries. It could be of use for the observers too : the EU Commission and EMCDDA. In particular, it will serve as a reference source for lessons learned and inform the continuation/future development of the network and its programmes in this area.

I will be asking you some questions about your opinions and experiences with the MedNET cooperation and its programmes. I will be taking notes as we talk. I hope it is okay for me to audio-record our conversation so that I can be sure to capture everything you say. Please feel free to let me know if you do not want to be audio-recorded. Be rest assured that all the information you provide today will be treated confidentially.

The interview will last for about 60-90 minutes. Do you have any question or concerns? Do you agree to participate in the evaluation?

Thank you for your willingness to participate in the evaluation. I will now ask you questions we prepared for this evaluation. Let us get started.

Can you describe the role of MedNET in raising awareness, development and implementation of a drug policy in your country/the MedNET region?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in the potential changes of drug law? Can you give some examples where MedNET activity stimulated reform?

⁵²This designation shall not be construed as recognition of a State of Palestine and is without prejudice to the individual positions of Council of Europe member states on this issue.

Can you describe the role of MedNET in research, collection, analysis and interpretation of information, in the setting up, support in the national drug observatory in your country/the MedNET region?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in the development of prevention, treatment and care in your country/the MedNET region?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in supporting human rights assurances and access to treatment and care?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in supporting the integration of human rights and gender dimension in actions?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in law enforcement?

Probe How has this evolved over time since you became involved?

Can you describe the role of MedNET in South-South exchanges?

Can you describe the role of MedNET in North-South and South-North exchanges?

Can you describe how MedNET cooperates with EMCDDA, the European Commission through the Council of Europe joint projects (only applicable to Morocco and Tunisia which benefit from the programme), not the other countries , UNICRI (it was only for Tunisia and Lebanon) , WHO and regional NGOs such as MENAHRA (regional and Lebanon) ?

Do you think the functioning, administration, management of the Network by the PG/MedNET Secretariat is sufficient in serving your needs as MedNET country?

Probe Can you identify any improvement(s) to propose?

How has COVID-19 impacted on the operations and actions of MedNET in the past two years?

Do you have any thoughts on how MedNET can further improve its work going forward?

Do you have anything you would like to add to today's interview?

Semi-structured interview guides MedSPAD Consultants

Please tell me about your role in MedSPAD

What is the impact of the survey and how has it evolved over time among the MedSPAD countries?

How does MedSPAD contribute to scientific evidence and monitoring of trends at country and MedNET region levels ?

In terms of scientific knowledge, can you describe applying the revised medspad methodology?

How does MedSPAD inform health and drug policy and practice at country and MedNET region levels ?

How does MedSPAD inform prevention initiatives targeting young people

Have you any recommendations for future MedSPAD work?

SWOT Analysis Template

Please identify the three main strengths, there main weaknesses, three main opportunities and three main threats facing MedNET

3 main strengths

3 main weaknesses

3 main opportunities

3 main threats

ANNEX III. LIST OF STAKEHOLDERS

ALGERIA

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General Secretariat of Mental Health and
Addiction Treatment
Ministry of Health and Population
CAIRO

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Mme Laura D'ARRIGO
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Faculty for Social Wellbeing

University of Malta

MSc Addiction Studies Course Coordinator

Master of Psychology in Forensic Psychology Course Coordinator

President - Malta Chamber of Psychologists

MSIDA

MOROCCO

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Director of the Ar-razi University Psychiatric Hospital & the National Center on Drug Abuse Prevention, Treatment and Research

Director of the National Observatory on Drugs and Addictions

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Division of International Affairs International Drug Policy

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The Council of Europe is the continent's leading human rights organisation. It comprises 46 member states, including all members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.

