

# ORGANIZATION OF AMERICAN STATES



INTER-AMERICAN DRUG ABUSE CONTROL COMMISSION

cicad

**THIRTY-THIRD REGULAR SESSION**  
**29 April – 2 May, 2003**  
**Washington, D.C.**

**OEA/Ser.L/XIV.2.33**  
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**17 April 2003**  
**Original: Spanish**

**MULTILATERAL EVALUATION MECHANISM (MEM)**

**FORM**

**FOLLOW-UP RECOMMENDATIONS**

**(Proposal)**

**EIGHTH MEETING OF THE INTERGOVERNMENTAL  
WORKING GROUP ON THE MULTILATERAL  
EVALUATION MECHANISM (IWG-MEM)  
March 24-28, 2003  
Panama City, Panama**

**OEA/Ser.L/XIV.4.8  
CICAD/MEM/doc.9/03  
19 March 2003  
Original: Spanish**

**MULTILATERAL EVALUATION MECHANISM (MEM)**

**FORM**

**FOLLOW-UP RECOMMENDATIONS**

**(Proposal)**

**COUNTRY NAME**

<u>Recommendation X:</u>
Publication date:
Reiteration date:

**A. STATUS OF IMPLEMENTATION OF THIS RECOMMENDATION:****1. COMPLETE \_\_\_\_**

Please indicate what actions were taken to fulfill the recommendation.

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**2. IN PROGRESS <sup>(1)</sup> \_\_\_\_**

a. Please indicate what has your country done to date to complete the recommendation.

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b. Please indicate what steps are left in order to complete the implementation of the recommendation:

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c. Please inform about the chronological plan <sup>(2)</sup> for the completion of the recommendation

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d. Please indicate any substantial <sup>(3)</sup> problems encountered in its implementation:

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**3. NOT STARTED \_\_\_\_\_**

- a. Please indicate a chronological plan to fully implement the recommendation.

- b. Please indicate the measures that will be taken to fully implement the recommendation <sup>(4)</sup>:

- c. Please indicate the reasons why your country has not started to implement this recommendation:

**B. REITERATED RECOMMENDATION:**

Please indicate the reasons why this recommendation has not been implemented:

**C. REQUIRED ASSISTANCE:**

- 1. Please indicate if any assistance is required for the implementation of this recommendation <sup>(5)</sup>:

Yes \_\_\_\_\_

No \_\_\_\_\_

**2. Type of assistance required:**

- a. Technical: \_\_\_\_\_
- b. Financial: \_\_\_\_\_
- c. Equipment: \_\_\_\_\_
- d. Training: \_\_\_\_\_
- e. Other: \_\_\_\_\_

Please specify:

**3. Please indicate if any assistance has been sought:**

Yes \_\_\_\_\_  
No \_\_\_\_\_

**4. Please indicate if the assistance sought was obtained, from whom and if so, the amount received:****5. Country contribution <sup>(6)</sup> to implement this recommendation:****D. Observations:<sup>(7)</sup>**

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## Notes and Definitions

<sup>(1)</sup> **In progress:** means the implementation is being executed. Please do not include in this category those recommendations where there is only a designed project or an approved plan.

<sup>(2)</sup> **Chronological plan** is a series of steps in sequential order indicating an approximate date for the completion of the recommendation. For some recommendations this could require a year or more. If a longer timeframe is foreseen, please provide an estimate.

<sup>(3)</sup> As used here **substantial** could refer to whatever obstacle materially impeded the implementation. It refers to whatever the country believes constituted this condition, whether or not the recommendation is reported as completely implemented.

<sup>(4)</sup> This space is intended to permit a full account in cases of greater complexity or where the country believes a more detailed description would be justified or be useful to others facing similar conditions.

<sup>(5)</sup> This is provided so that countries, where national resources are inadequate, can specify what assistance may be needed: technical or material.

<sup>(6)</sup> Contributions from the country can be financial, technical, in the form of equipment, training or other.

<sup>(7)</sup> Beyond the information already provided, this area enables the responding country to include information of any kind, which it considers essential to understanding the response to the recommendation.