Drug Policy workbook

2024

FRANCE

Contributors

Cristina Diaz Gomez

2024 National report (2023 data) to the EUDA by the French Reitox National Focal Point

Supervision: Guillaume Airagnes

Coordination: Marianna Perebenesiuk

Contribution to the workbooks

- 1. *Drug policy*: Cristina Díaz Gómez
- 2. Legal framework: Caroline Protais
- 3. Drugs: Olivier Le Nézet, Clément Gérome, Sabrina Cherki, Eric Janssen
- 4. Prevention: Carine Mutatayi
- 5. Treatement: Sophie Véron, Cindy Feng, Cristina Diaz Gomez
- 6. Best practice: Valérie Ulrich, Carine Mutatayi
- 7. Harms and Harm Reduction: Cindy Feng, Sophie Véron, Eric Janssen, Cristina Díaz-Gómez
- 8. *Drug market and crime*: Yasmine Salhi , Caroline Protais, Clément Gérome, Sabrina Cherki, Ivana Obradovic
- 9. Prison: Caroline Protais, Melchior Simioni, Sophie Veron, Cindy Feng
- 10. Research: Maitena Milhet, Isabelle Michot

Proofreading (French version): Guillaume Airagnes, Ivana Obradovic, Valérie Ulrich, Stanislas Spilka, Nicolas Prisse, president of the Interministerial Mission for Combating Drugs and Addictive Behaviours, and the project managers of the MILDECA.

Proofreading (English version): Anne de l'Eprevier, Marianna Perebenesiuk

Bibliographic references: Isabelle Michot

Legal references: Anne de l'Eprevier

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T0. Summary

Please provide a 1,250 word (i.e. 5 by 250 word paragraphs) summary of the workbook: T1.1 national drug strategies (250 words); section T1.2 evaluation of national drug strategies (250 words); T1.3 drug policy coordination (250 words); T1.4 drug related public expenditure (250 words); new developments (250 words). The answers should include the following points:

Summary of T1.1.1

Describe the current national drug strategy document (date approved, ministries responsible, timeframe, overview
of main principles, priorities, objectives, actions, the main substances and addictions it is focused on, its structure,
e.g. pillars and cross-cutting themes)

Summary of T.1.2

 Describe the latest drug strategy evaluation (title, time to complete it, the evaluation criteria, the evaluation team, the scope, the type of data used, conclusions and recommendations)

Summary of T.1.3

 Describe the main drug policy coordination mechanisms at the inter-ministerial; national, regional and local strategic and operational levels.

Summary of T1.4

 Please comment on the existence of annual drug-related budgets; their relation with other instruments of drug policy (strategy/action plans); annual value of total public expenditure and of supply and demand. If possible, annual value by class of policy intervention (prevention, harm reduction, treatment, social reintegration, police, law courts, prisons) and time trend.

Summary of T1.1 national drug strategies (250 words)

In March 2023, the French government adopted the "Interministerial Strategy for Mobilisation against Addictive Behaviours 2023-2027" (SIMCA) which establishes the new strategic framework for public action for combating drugs and addictions over the next five years.

The new strategy proposes the activation of all levers and courses of action in aid of coordinated action, implemented across the country. It places particular emphasis on the development of psychosocial skills and knowledge of risks based on scientific data to allow citizens to make informed choices and protect the most vulnerable (minors, prisoners, etc.). It defines 10 priorities, structured around prevention objectives, education, and the "denormalisation" of use (restriction of advertising, compliance with bans on sale, etc.), by proposing the creation of more protective environments, and reinforcing public action against the attractiveness, availability, and accessibility of products.

To respond to the growing threat of trafficking, the Government is continuing its action within the framework of Plan national de lutte contre les stupéfiants of 17 September 2019 [National anti-Narcotics Plan], in conjunction with the Inter-ministerial Strategy for Mobilisation against Addictive Behaviours. Currently being drafted, the second National anti-Narcotics Plan for Fighting Traffics will soon be adopted.

SIMCA is supplemented by operational, national and local plans and programmes, drawn up in consultation with professionals, elected officials and local partners. The regional and departmental prefectures - project managers for the Interministerial Mission for Combating Drugs and Addictive Behaviours (MILDECA) - are responsible for developing regional road maps, and departmental action plans for the implementation of the SIMCA, in partnership with local actors (Public Prosecutors, Regional health agencies, National Education authorities, etc.).

As of 2024, 10 metropolitan areas (of the 13 regions in mainland France) and three overseas territories (Guadeloupe, Réunion, and Mayotte) are equipped with a regional road map for combating drugs and addictions for 2023-2027. The remaining regions will go without in 2024, but all departments, except for French Guiana and Martinique, have their departmental-level action plans. Saint-Martin and Saint-Barthélemy (Overseas collectivities) have also drafted a local action plan for the implementation of the interministerial strategy.

Summary of T1.2 evaluation of national drug strategies (250 words)

In 2023, The MILDECA led the evaluation of the 2018-2022 National Plan for Mobilisation against Addictions as part of an internal evaluation process. This evaluation had a dual purpose: to establish an assessment of territorial dynamics and to design operational proposals that support the 2023-2027 SIMCA. The methodological approach was twofold, qualitative and quantitative. Its qualitative aspect was based on work and exchanges with State services involved in the fight against drugs and addictive behaviours, in two regions that are representative of the territorial dynamics underway: Occitanie and Normandy. Regional and departmental prefectures, regional health agencies, public prosecutors and education authorities were also involved. This initial evaluation exercise was completed by the monitoring of quantitative indicators, together with targets to be achieved by the end of the plan. Data indicators were updated on a yearly basis by the OFDT to monitor trends.

Summary of T1.3 drug policy coordination (250 words)

The directions of public policy in combatting drugs and preventing addictive behaviours are defined by the "Interministerial Committee for Combatting Drugs and Addictive Behaviours", under the authority of the Prime Minister. Prior to this stage, MILDECA is responsible for drafting the decisions of the interministerial committee, then coordinating French government policy for combatting drugs and addictive behaviours, and for ensuring that the decisions of the interministerial committee are implemented. On the authority of the Prime Minister, its scope of action includes prevention, treatment, harm reduction measures, integration, trafficking, law enforcement and research, monitoring and training of staff involved in activities to reduce supply and demand. At regional and departmental level, the MILDECA's project managers (generally the senior local government officers of the offices of departmental and regional prefects) are responsible for leading at local level and coordinating decentralised government action.

Since 1st January 2020, the Anti-Narcotics Office (OFAST) - a service attached to the General Directorate of the National Police (DGPN) - has been designated as the lead agency for the internal security forces, Customs officers and the national navy, as well as the judicial authority in the fight against trafficking. The OFAST is responsible for coordinating the National anti-Narcotics Plan in conjunction with the Interministerial Strategy for Mobilisation against Addictive Behaviours.

Summary of T1.4 drug related public expenditure (250 words)

In 2022, public spending on the fight against drugs and addictive behaviour is estimated at 3.198 billion euros (against 2,837 billion euros in 2021), representing 0.12% of the gross domestic product (GDP) in France. This estimate is based on State expenditure contributing to the inter-ministerial policy to combat drugs and addictive behaviour, and that of National Health Insurance devoted to the management of addictions (mainly comprising the cost of the medico-social addictology system, expenses traceable to hospitals and the amounts reimbursed by all health insurance schemes for opiate substitution drugs dispensed within the community). Only part of this estimate is based on credits identified as such in public accounting documents, which represent 30.7% of the total, with non-earmarked expenditure accounting for the majority (69.2%).

External estimates of the social cost of drugs are periodically carried out in France by researchers. This cost has been estimated four times, in 1996, 2003, 2010 and 2019 under the coordination of the OFDT. The last estimate carried out was made within the framework of financing from the Fund for Combatting Addiction (FLCA). Relying on last existing data, this new study estimates the social cost of illicit drugs at 7.7 billion euros, a far cry from the amount estimated for alcohol (156 billion euros) and for tobacco (102 billion euros). The results of this last estimate confirm that the social cost of drugs remains much higher than the resulting tax revenue.

Summary of new developments (250 words)

Four important topics in terms of public policy in France should be highlighted over the period 2023-2024:

- 2024 publication of the latest cocaine use data in the general population in France in 2023, and publication of a comprehensive overview of the 2000-2022 decades, consolidating available supply and demand indicators (seizures, price, visits to hospital emergency rooms, requests for treatment for cocaine use, etc.) which confirm the need to enhance vigilance among public authorities and professionals to develop increasingly targeted responses, in terms of supply reduction, prevention, support, harm reduction measures, health care, and support for research.
- Promotion of local initiatives by actors working with vulnerable populations (children, young people/students, people in precarious situations, prisoners, etc.) designed to create protective environments, a major issue at the heart of current interministerial policy on prevention and addictive behaviours.
- Establishment of a committee of inquiry within the Senate on the "impact of drug trafficking in France and measures to address it" which, in May 2024, supported by over 150 hearings and visits, laid out three main recommendations and a set of proposals for implementing a "comprehensive and ambitious strategy to combat trafficking more effectively".
- Mission of assessing the societal and health issues associated with screen exposure among young people, entrusted to a committee of experts appointed by the President of the Republic in 2024. Among the 29 recommendations from members of the commission from civil society are key measures aimed at protecting children and preparing young people to have the power to act, alongside those aimed at training, equipping, and supporting the adults around them. The committee's report also concludes the need to implement an ambitious governance arrangement to better define, steer, and support key actors and inform citizens on progress and difficulties encountered.

T1. National profile

T1.1. National drugs strategies

The purpose of this section is to summarise the main characteristics of your national drug strategy(ies). Where there is no national strategy, and regional strategies take the place of a national strategy, please summarise the characteristics of these.

Please structure your answers around the following questions.

T1.1.1. List the titles and dates of all past national drug strategies and supporting action plans in your country in the following table, adding rows as needed.

Timeframe	Title and web link	Scope (main substances / addictions addressed)
Introduced on 2 February 1983 (implementation period not specified)	Programme de 25 actions [A 25-action program]	illicit drugs
Introduced on 17 September 1985 (implementation period not specified)	31 mesures de lutte contre la toxicomanie [31 measures to combat drug abuse]	illicit drugs
Introduced on 9 May 1990 (implementation period not specified)	Programme d'actions de 42 mesures de lutte contre la drogue [Action programme of 42 measures to combat drugs]	illicit drugs
Introduced on 21 September 1993 (implementation period not specified)	Plan gouvernemental de lutte contre la drogue et la toxicomanie [Government plan to combat drugs and drug addiction]	illicit drugs
Introduced on 14 September 1995 (implementation period not specified)	Programme gouvernemental de lutte contre la drogue et la toxicomanie de 22 mesures [22-measure government program to combat drugs and drug addiction]	illicit drugs
Introduced on 16 June 1999. Initially for a period of 3 years (1999-2001) but it remained in force until the next plan in 2004	Plan triennal de lutte contre la drogue et de prévention des dépendances (1999-2000-2001) https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=62725 Summary in English Triennial action plan against drugs and for the prevention of dependencies 1999-2000-2001 https://bdoc.ofdt.fr/doc_num.php?explnum_id=21032	Alcohol, tobacco, psychotropic drugs and illicit drugs
Introduced on 30 July 2004 for 4 years (2004-2008)	Plan gouvernemental de lutte contre les drogues illicites, le tabac et l'alcool (2004-2008) https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=56924 (No English version)	Alcohol, tobacco, and illicit drugs
2008-2011	Plan gouvernemental de lutte contre les drogues et les toxicomanies 2008-2011 https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=52448 English version: Combating drugs and drug addiction: Government action plan 2008-2011 https://bdoc.ofdt.fr/doc_num.php?explnum_id=18359	Alcohol, tobacco, diverted psychotropic drugs, doping and illicit drugs

		Scope (main
Timeframe	Title and web link	substances /
		addictions addressed)
2013-2017	Plan gouvernemental de lutte contre les drogues et les	Alcohol, tobacco,
	conduites addictives 2013-2017	psychotropic drugs,
	https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=73185	screens, Internet,
	English version: Government plan for combating drugs	gaming, doping and
	and addictive behaviours 2013-2017	illicit drugs
	https://bdoc.ofdt.fr/doc_num.php?explnum_id=34973	
2018-2022	Plan national de mobilisation contre les addictions 2018-	Alcohol, tobacco,
	2022	psychotropic drugs,
	https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=81178	screens, Internet,
	English version: Alcohol, tobacco, drugs, screens:	gaming, doping and
	National plan for mobilisation against addictions 2018-	illicit drugs
	2022	
	https://bdoc.ofdt.fr/doc_num.php?explnum_id=28786	
Introduced on 17	Plan national de lutte contre les stupéfiants	Psychotropic drugs
September 2019 for a	[National anti-Narcotics Plan]	
period of 3 years ¹	https://www.interieur.gouv.fr/Archives/Archives-des-	
	dossiers/Plan-national-de-lutte-contre-les-stupefiants	
	A Second Plan has been drafted: National anti-Narcotics	
	Plan for Fighting Traffics	
2023-2027	Stratégie interministérielle de mobilisation contre les	Addiction to
	conduites addictives 2023-2027	psychoactive
	https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=85775	substances
	English version: Interministerial Strategy for Mobilisation	(alcohol, tobacco,
	against Addictive Behaviour 2023-2027	illicit drugs,
	https://bdoc.ofdt.fr/doc_num.php?explnum_id=34029	psychotropic drugs)
		and non-substance
		addictions
		(gambling and
		video games)

T1.1.2. Please summarise your <u>current national drugs strategy</u> document.

Information relevant to this answer includes:

- time frame,
- responsible ministries,
- overview of its main principles, priorities, objectives and actions,
- its structure (i.e. pillars and cross-cutting themes),
- the main substances and addictions addressed.
- Whether annual progress implementation reports are developed or not (if they are and are public documents, please provide a weblink). Please also briefly comment on the current status of strategy and action plan implementation.
- If your current national drugs strategy's stated timeframe has expired, please confirm whether or not it
 has the status of remaining in force pending the development and approval of a new one. Please also
 outline by when a new strategy is expected to be developed and approved.

The year 2023 marked the entry into a new cycle for the policy against drugs and addictive behaviour, with the adoption by the Government, in March 2023, of the new Inter-ministerial Strategy for Mobilisation against Addictive Behaviours (SIMCA) for the period 2023-2027 (MILDECA 2023a).

¹ A new plan to combat drug trafficking is expected in conjunction with the new inter-ministerial strategy for mobilisation against addictive behaviour 2023-2027.

The new plan aims to act equally and simultaneously to supply and demand, whether at local, national or international level. In the new government strategy, all public stakeholders have a role to play in the fight against drugs and addictive behaviour, and the emphasis is placed on the need to include their respective interventions in a common strategic framework, in order to ensure the coherence and effectiveness of comprehensive public action.

The Strategy covers **addictive behaviours with and without substances** (in particular, gambling, games of chance and video/screen games), and looks at both licit drugs (alcohol, tobacco, medicines) and illicit drugs (narcotics).

Coordinated and led by MILDECA (Interministerial Mission for Combating Drugs and Addictive Behaviours, placed under the authority of the Prime minister), the implementation of the Interministerial strategy is articulated with other national and regional plans and programmes, such as the 2023-2027 National Tobacco Control Programme (Ministère de la Santé et de la Prévention 2023a), the second National anti-Narcotics Plan for Fighting Traffics (upcoming), the future 2024-2027 National Crime Prevention Strategy, along with regional health plans drafted by Regional health agencies to prevent and combat addictive behaviours.

Additionally, regional and departmental prefectures are responsible for leading MILDECA's local policy and developing regional road maps and departmental action plans. Those implement, through operational objectives and local actions, the strategic guidelines of the SIMCA and other public action programming, in support of the policy for preventing and combating addictions.

The Strategy for 2023 sets out about a dozen strategic goals.

- The first priority stipulated is to provide citizens with the freedom to choose. It emphasises the need to strengthen psychosocial skills in order to avoid risky behaviour. It aims to provide precise and clear information on risks, based on scientific knowledge and removed from ideological stances and financial interests. It also underlines the will of the public authorities to act beyond the dissemination of knowledge, by applying lessons in behavioural sciences (social marketing, denormalisation, etc.) to promote changes in behaviour that are more beneficial to health.
- The protection of minors constitutes another central strategic axis of the inter-ministerial policy. To achieve this, the strategy sets the objective of reinforcing the key role of the family domain, by raising awareness within the family environment of the risks to which children are exposed and by highlighting the resources available in terms of advice and support allowing them to develop parenting skills and promote environments conducive to the development and growth of children.
- The Strategy also pays particular attention to those people facing challenges with their consumption. In this perspective, it emphasises the need to offer **appropriate and quality care**, **accessible to all**. Each user must be able to be directed to the appropriate professionals, regardless of the vector of inputs of the socio-health system initially used.
- In the workplace and in places of education and training as well as in institutions dealing with those in the hands of the judicial system, the Inter-ministerial Strategy sets as a priority the denormalisation of the consumption of substances, by contributing **to making living environments more protective.**
- The 2023-2027 plan also highlights the need to respond to the attractiveness of the supply and availability of products, by proposing a stricter framework for advertising and by strengthening compliance with prohibitions on sales to minors. It also advocates the benefits of a sustained price increase policy for tobacco products as well as the effectiveness of specific measures aimed at restricting the accessibility of alcoholic beverages (prohibition of sale during certain time slots, during sport events, etc.). With a view to gambling operators, it proposes to revise the regulatory framework for rewards and commercial incentives targeting players. With regard to the supply of illicit drugs, and in particular with regard to the current situation concerning the threat generated by drug trafficking, the Inter-ministerial Strategy reaffirms the Government's desire to focus the coordination of its action on the OFAST (the French Home Affairs Department's Anti-Narcotics Office) in the framework of a new plan dedicated to combating drug trafficking.
- Finally, the last strategic orientation for the 2023-2027 period concerns data and scientific
 knowledge informing the decision of the public authorities to better act in the face of the complexity
 of the issues related to substances and uses, which are constantly evolving. Three key issues are
 defined:
 - Consolidation of the systems aimed at observing the supply and demand of psychoactive products as well as non-substance addictive behaviours in France and abroad;

- Structuring research in the field of addictions, thanks in particular to the support of the National Fund for Combatting Addiction, paying particular attention to the development of applied research on the illicit supply of narcotics and to clinical research to develop effective new treatments:
- Promoting evaluation within the framework of specific experimental programmes in order to base action on conclusive actions
- T1.1.3. Is there another national strategy/action plan on policing, public security, law enforcement, etc. that is not specific to drugs but also defines drug supply reduction/drug-related law enforcement in your country? Please insert its title, a link to the PDF and a short summary.

Title: National Crime Prevention Strategy 2020-2024, supported by the Inter-ministerial Committee on Crime and Radicalisation Prevention (future strategy for the 2024-2027 period currently being drawn up, to be announced).

Link to PDF document: https://www.cipdr.gouv.fr/strategie-prevention-delinguance-20202024/

Summary: This national strategy is a continuation of the successive plans adopted by the Government within the framework of the law of 5 March 2007 on the prevention of delinquency. Developed within the framework of a wide consultation of stakeholders, the 2020-2024 strategy mobilises State services, local authorities and associative networks. Its founding principles are intended to apply throughout the national territory, while highlighting local initiatives and the right to experiment. The new strategy sets priority actions for the next five years in relation to four shared objectives:

- Intervening with minors before the age of 12 by more systematically mobilising families and implementing awareness-raising and educational actions to counter new forms of delinquency.
- Protecting vulnerable people as early as possible (the elderly, people with disabilities, female victims of violence, minors, etc.)
- Involving the population and civil society in the prevention of delinquency and the creation of a peaceful society.
- Ensuring renewed governance through adaptation to each territory and coordination between the different actors (prefects, judicial authorities, mayors and presidents of inter-municipal authorities).

This 2020-2024 strategy defines 40 measures to boost crime prevention (volume 1) and provides a toolbox proposing actions to be chosen by the territories (volume 2). Measure no. 3 targets new forms of delinquency and specifically targets drug trafficking in the context of preventing entry into or maintenance of organised delinquency (Premier ministre 2022).

T1.1.4. Does your country have additional national strategy or action plan documents for other substances and addictions? If so, please complete the table below with their titles and links to PDFs. If possible, please include a short description of each.

	Additional national strategy documents for other substances and addictions				
Alcohol					
Strategy title	No specific strategy. It should be noted that, as part of the 2021-2025 roadmap resulting from the 2021-2030 ten-year cancer control strategy, it is planned to set up a national "alcohol" risk prevention programme which would mobilise the following levers in particular: research, regulation (marketing, accessibility of supply, etc.), reinforcement of information (public discourse and benchmarks for lower-risk consumption) with particular attention paid to young people. INSERM's collective expert report (French National Institute for Health and Medical Research) on reducing alcohol-related harm, published in May 2021, will feed into this work (INSERM 2021). Link of the English version: https://www.inserm.fr/wp-content/uploads/inserm-expertisecollective-alcool2021-syntheseva.pdf [accessed 13/05/2024]				
Web address	https://sante.gouv.fr/IMG/pdf/feuille_de_routestrategie_decennale_de_lutte_contre_les_cancers.pdf [accessed 13/05/2024]				

	Additional national strategy documents for other substances and addictions
Tobacco	
Strategy	 National Tobacco Control Program (PNLT) 2023-2027. New National Anti-Smoking Plan 2023-2027 responding to two major challenges: 1. Young people with the reaffirmed objective of a tobacco-free generation in 2032 by mobilising all the levers: primary prevention, development of psychosocial skills, detrimentalisation of tobacco, respect for the protective ban and protecting young people from the incentives of the products developed by the "addiction industrialists".
	 Reducing social inequalities in health by activating all the levers in order to engage as closely as possible with the populations concerned.
Web address	https://sante.gouv.fr/IMG/pdf/dp_plan_lutte_tabac.pdf [accessed 13/05/2024]
Tobacco	
Strategy title	2023-2025 Tobacco plan to combat tobacco trafficking. This new 2023-2025 action plan aims to adapt the response of French customs services to the scale of the illegal tobacco market. The tobacco plan mobilises all the levers available to the public authorities in the fight against fraud. It provides for customs interventions to be reinforced throughout the territory, in partnership with the police, in order to intervene more effectively with traffickers and dealers and dismantle organised networks. To punish traffickers, this plan sets itself the objective of launching with the ministry of Justice a reflection on how to impose stricter criminal penalties. The additional penalty of prohibition from French territory will be extended to customs traffic, in particular tobacco. This plan also provides for increased prison sentences for the fraudulent production or manufacture of manufactured tobacco, and for retail sale by those without retailer status.
Web address	https://www.douane.gouv.fr/sites/default/files/2022-12/05/DP_Plan_Tabac_2023- 2025.pdf?v=1674133827 [accessed 13/05/2024]
Image an	d performance enhancing drugs
Strategy title	Plan national de prévention du dopage et des conduites dopantes dans les activités physiques et sportives 2020-2024 [National Plan for the Prevention of Doping and Doping-Related Behaviour in Physical and Sports Activities 2019-2024]
Web address	https://www.sports.gouv.fr/sites/default/files/2022-12/plan-national-de-pr-vention-du-dopage-et-des-conduites-dopantes-2020-2024-doc-en-pi-ce-jointe-minist-re-des-sports-2020-2833.pdf [accessed 13/05/2024]
Gambling	
Strategy title	National Gambling Authority (ANJ) Strategic Plan 2021-2023 The new ANJ road map advocates a suitable compromise between openness and protection. It is structured around three fundamental pillars. The first pillar responds to public health issues and aims to reduce the proportion and number of problem gamblers within the gambling market. Combating illegal gambling is the second major axis of the regulator's actions and ultimately, their desire to provide effective economic solutions to changes in the sector.
Web address	https://anj.fr/sites/default/files/2024-01/Plan%20strat%C3%A9gique%20de%20l%27ANJ%202024-2026.pdf [accessed 13/05/2024]
Gaming	
Strategy title	No specific strategy
Web address	

	Additional national strategy documents for other substances and addictions
Internet	
Strategy title	No specific strategy Whilst France does not have a specific plan dedicated to preventing at-risk behaviours in the digital space, the President of the Republic wanted to establish a committee of experts from civil society, in mid-January 2024, to assess the issues associated with screen exposure among children and make recommendations. This committee was co-chaired by a neurologist and an addiction psychiatrist. The committee published its report in April 2024. For more information, see T3 on "New developments".
Web address	https://www.elysee.fr/admin/upload/default/0001/16/fbec6abe9d9cc1bff3043d87b9f7951e62779b09.pdf [accessed 13/05/2024]
Other ad	dictions
Strategy title	Preventing and Responding to Opioid Overdose : 2019-2022 roadmap
Web address	https://sante.gouv.fr/IMG/pdf/strategie_prevention_des_surdoses_opioides-juillet_2019.pdf
Strategy title	2024-2028 roadmap for the health policy for inmates (being drafted). See the Prison Workbook.
Web address	
*please in	clude extra lines as necessary

T1.1.5. Are there drug strategies/action plans also at the regional level? If yes, please specify at which level they exist (e.g. Länder, autonomous communities, counties) and complete the overview table below adding lines as necessary.

The government policy is divided into local actions and projects set out in regional road maps and departmental action plans. MILDECA specifies the framework for preparing these programme documents in their instruction for project managers², of 28 March 2023 pertaining to the "Implementation of the Interministerial Strategy for Mobilisation against Addictive Behaviours 2023-2027 in the territories".

- Under the leadership of the departmental project manager, an action plan for combating addictive behaviours will be developed. The departmental action plan transforms government strategic guidelines into actions, by responding to local needs.
- The regional project manager drafts the regional framework of the road map and ensures the coherence of all departmental plans.

As set out in the instruction of 28 March 2023, the project managers in regional and departmental prefectures have taken action in order to implement government guidelines at regional and departmental level in accordance with the priorities of each territory, in the form of a regional "road map" and/or departmental action plans. Programme documents were scheduled to be presented in Autumn 2023. As of 2024, it appears that:

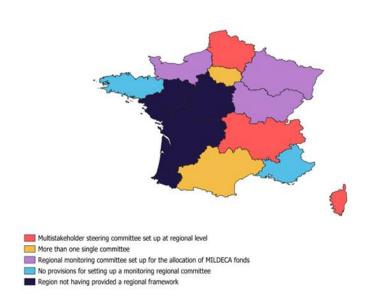
 10 regions in mainland France (of the 13 metropolitan areas) and three overseas territories (Guadeloupe, Réunion, and Mayotte) are equipped with a regional road map for combating drugs and addictions for 2023-2027. Depending on the region, some road maps were drafted and formally co-signed with Regional health agencies (ARS) or co-developed with other government agencies or departments

Appointed within the prefectural team, the MILDECA project manager is responsible for leading the inter-ministerial policy to combat drugs and addictive behaviour at regional and departmental level. This remit is generally entrusted to the Chief of Staff of the Prefect³ It is the 2018-2022 Government plan which established regional road maps implementing the national guidelines of the mobilisation plan on addictions, in light of local needs.

(Education authority, judicial youth protection, prison authorities, etc.). Many regions involved the the civil society and local authorities.

- Governance arrangements also vary by region. Some territories have established a dedicated regional steering committee which meets once a year; while other regions consider coordination methods which rely on more than one monitoring committee and/or thematic working groups. In many regions, the regional steering committee meets when calls for tenders for the allocation of MILDECA credits are published (see map below).
- Of the regions which did not submit a territorial framework for the implementation of the SIMCA, (three in metropolitan France and two in overseas territories) only French Guiana and Martinique are lacking actions plans, as all the departments within the other three regions are equipped with a departmental plan.
- In metropolitan France, almost half of the regions have drafted departmental actions plans for all the departments within the territory (Corsica, Brittany, Hauts-de-France, Île-de-France, Normandy, and Provence-Alpes-Côte d'Azur). Among the remaining regions, the coverage rate appears to be fairly satisfactory (ranging from 60% to 80% for the vast majority of them).
- Saint-Martin and Saint-Barthélemy (Overseas collectivities) have also drafted a local action plan for the implementation of the interministerial strategy.

Governance arrangements outlined in regional road maps 2023-2027



Source: OFDT's own draft based on 2023-2027 regional road maps identified by MILDECA on 01/06/2024. Metropolitan France.

For more information:

- Guidelines of 28 March 2023 from the MILDECA to the prefects relating to the implementation in the territories of the Inter-ministerial Strategy for Mobilisation against Addictive Behaviour. https://www.drogues.gouv.fr/sites/default/files/2023-04/MILDECA_instruction_SIMCA_28_mars_2023.pdf
- Circular of 14 December 2023 by MILDECA which places regional and departmental prefectures at the heart of the implementation of the strategic guidelines of the new 2023-2027 Interministerial Strategy for Mobilisation against Addictive Behaviours.

The regional roadmaps available for the 2023-2027 period are listed below.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Auvergne- Rhône-Alpes	2023-2027	Auvergne-Rhône-Alpes Regional roadmap (2023-2027) https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87086	Alcohol, tobacco, illicit substances, screens, gambling	Within the implementation of the SIMCA and the EU Strategy and action plan 2021-2025, the road map is set out in line with the operational objectives of population and thematic health pathways defined by the Regional Health Agency, as part of the Regional health plan (PRS) 2018-2028. It highlights prevention and places particular emphasis on children and adolescents who are more vulnerable to the effects of psychoactive substances. It comprises the following 5 strategic objectives: 1/ Prevent addictive behaviours among young people, as a health pledge. 2/ Eliminate and control access to addictive substances. 3/ Adapt and take preventive action in new party venue and events. 4/ Involve business and public services in the prevention of addictive behaviours in the workplace. 5/ Educate, engage, and support local councillors across all territories.
Bourgogne- Franche- Comté	2024-2027	2024-2027 Regional mobilisation plan against addictive behaviours https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87072	Alcohol, tobacco, illicit substances, screens, gambling	This plan is structured around 6 objectives and 8 shared actions which reflect the issues related to the addictive behaviours in the region: 1/ Give everyone the freedom of choice by enhancing psychosocial skills. 2/ Ensure that every user receives suitable treatment. 3/ Reduce the availability and accessibility of narcotic substances. 4/ Make living environments more protective. 5/ Use fairs and large-scale events as engagement opportunities. 6/ Combat the sale of alcohol and tobacco to minors.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Bretagne	2023-2027	Regional roadmap https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87073	Alcohol, tobacco, illicit substances, screens, gambling	The road map defines 5 main guidelines: 1/ Support children and parents to better prevent and treat addictive behaviours: prevention of addictive behaviours from an early age through offering support and resources to families to recognise and treat these problems. 2/ Identify users in order to offer them appropriate and targeted support: development of mechanisms to quickly identify individuals facing drug use-related problems and offer tailored solutions. 3/ Take action to reduce accessibility to licit and illicit substances and improve safety for all: implementation of measures to limit accessibility to addictive substances, particularly through awareness-raising activities, stricter regulations, and preventive mechanisms to reduce the availability of these substances. 4/ Prevent the harm associated with gambling and new technologies by implementing awareness and prevention measures: implementation of awareness and prevention ampaigns to advise on the dangers of gambling and emerging technologies, particularly among young people. 5/ Establish effective governance to coordinate and implement these actions optimally: development of comprehensive strategies and consistent implementation of prevention policies between territories.
Corse	2023-2027	2023-2027 MILDECA roadmap: Corse Region https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87074	Alcohol, tobacco, illicit substances, screens, gambling	Five strategic axes defined: 1/ Support the development of harm reduction programmes: actions in party settings. 2/ Continue to enhance prevention and take action in the early stages of drug use: give everyone the freedom of choice. 3/ Combat social media addiction and problem screen use. 4/ Ensure better compliance with the law and the ban on sale to minors, and strictly regulate advertising for risky products. 5/ Support the implementation of addiction awareness and training programmes.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Grand Est	2024-2027	2024-2027 Regional roadmap for the fight against addictive behaviours in the Grand Est https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87076	Alcohol, tobacco, illicit substances, behavioural addictions (screens, social networks, video games, gambling)	Definition of five axes aimed at covering both thematics and priority audiences (women of reproductive age up to the perinatal period and those around the child born or to be born, children/young people and those around them, professionals, vulnerable populations). It comprises the following axes: 1/ Inform, train, and communicate to educate the general public and support professionals. 2/ Protect young people and prevent them from developing addictive behaviours. 3/ Prevent and reduce harm in party settings, and at large-scale events. 4/ Enhance actions targeted towards vulnerable populations. 5/ Reduce exposure to substances.
Guadeloupe	2023-2027	Mobilising against addictions in Guadeloupe. Regional roadmap 2023-2027 https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87077	Alcohol, tobacco, illicit substances, behavioural addictions (screens, video games, gambling)	The road map is divided into 4 strategic objectives, each of which concern priority audiences and all addictions. These objectives form part of the MILDECA 2023-2027 Interministerial strategy for mobilisation against addictive behaviours. Axis 1/ Addiction mapping in Guadeloupe: Increase collective awareness and engage local actors using reliable data and objective elements; Axis 2/ Early stages of drug use: Take action in the early stages of drug use, by means of effective awareness programmes and specific training for actors in the field of addiction. Axis 3/ Enhancing prevention: Enhance the health promotion and prevention policy with regard to addictive behaviours. Axis 4/ Public safety aspect: Contribute to public peace and safety by enhancing the coordination and effectiveness of interventions, through leveraging available resources and means: administrative closures, Departmental Anti-Fraud Operational Committee (CODAF), Local Council for Security and Crime Prevention (CLSPD), and Directorate of the Environment, Planning, and Housing (DEAL).

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Hauts-de- France	2024-2027	2024-2027 Roadmap against addiction in the Hauts-de-France region https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87078	Alcohol, tobacco, illicit substances (cannabis, nitrous oxide, poppers, CBS), gambling	 The road map defines 4 priority axes divided into strategic objectives: Axis 1 - Pursue the prevention of addictive behaviours among young people. Objective 1 - Protect minors by enforcing bans on the sale of tobacco, alcohol, and nitrous oxide. Objective 2 - Give everyone the freedom of choice with a particular emphasis on children within the child welfare service and the PJJ Judicial Youth Protection Service. Objective 3 - Strengthen the role of the family sphere. Axis 2 - Organise fairs and large-scale events as prevention opportunities. Objective 1 - Involve students and universities in prevention, particularly in party settings. Objective 2 - Use sporting events as opportunities to prevent addictive behaviours. Objective 3 - Enhance training of sporting and party event organisers and engage partners. Axis 3 - A better response to the impacts of addictions. Objective 1 - Protect unborn children. Objective 2 - Reduce harm for people in contact with the criminal justice system. Objective 3 - Engage workplaces in the prevention of addictive behaviours. Axis 4 - Combat the crimes and liabilities arising from drug trafficking.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Île-de- France	2023-2027	2023-2027 MILDECA Roadmap: Îlede-France Region https://bdoc.ofdt.fr/index.php?lvl=notice_display&id=87071	Alcohol, tobacco, illicit substances (nitrous oxide, crack), behavioural addictions (screens, gambling).	In Île-de-France, the regional road map is a multiannual programme document pursuing the following two main objectives: - develop a long-term strategy responding to the territory's needs; - share common objectives. In light of SIMCA guidelines, the 2023-2028 Health Plan (PRS), and Île-de-France's territorial diagnosis, MILDECA project managers from departments in Île-de-France have chosen to prioritise the development of the following 4 axes: Axis 1: prevent and avoid the development of traditional and emerging forms of drug use among vulnerable populations. Axis 2: reduce harm associated with the abuse of psychoactive substances, particularly crack cocaine, the use of which affects all territories within Île-de-France. Axis 3: educate partygoers and local actors within the party scene on the harm associated with the heavy use of substances during parties and limit risky alcohol use. Axis 4: seize the opportunity presented by large-scale sporting events to promote prevention and change perceptions of addictive behaviour.
La Réunion	2023-2027	Conjuguons nos forces pour La Réunion [Joining forces for Reunion] - 2023-2027 MILDECA roadmap https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87080	Alcohol, tobacco, illicit substances (including local specific products such as Zammal (cannabis), screens	Réunion's 2023-2027 territorial action plan is based on 3 strategic pillars, aligned with the priorities of the 2023-2033 Regional Health Plan. Axis 1: Promote a coordinated policy to prevent and combat addictions. Axis 2: Prioritise the enhancement of addiction prevention, and awareness among young people. Axis 3: Develop actions to combat addictions and drugs, particularly via the regulatory and legal routes.
Mayotte	2024-2027	2023-2027 MILDECA roadmap for Mayotte https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87081	Alcohol, tobacco, illicit substances (including local specific products such as bangué (cannabis), « chimique » (mix of synthetic products), tibakou (chewing tobacco) or tremblou (palm wine), gambling	In line with the 2023-2028 Health Plan, and the National Health Strategy, three strategic axes have been assigned: Axis 1/ Take action to develop the skills of professionals working on addiction prevention. Axis 2 / Prioritise the enhancement of addiction prevention, and awareness among young people. Axis 3/ Develop actions to combat addictions and drugs, particularly via the regulatory and legal routes.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Normandie	2023-2027	Normandie regional roadmap https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87082	Alcohol, tobacco, vaping products, illicit substances (including cocaine, nitrous oxide and diverted medications), screens, gambling	Normandy's road map identifies many priorities which departmental plans must respond to at local level. - Enhancement of prevention and pursuit of effective programmes targeted towards young people, particularly in the departments of Calvados, Manche, and Orne; - Roll-out of early detection and intervention programme; - Prevention in the workplace; - Actions adapted to populations in precarious situations; - Greater recognition of rural territories and suburbs; - Development of coordinated prevention and harm reduction interventions in party settings, particularly through the establishment of departmental and regional coordinating bodies; - A particular emphasis on female populations, especially young people.
Occitanie	2023-2027	2023-2027 Occitanie regional roadmap https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87084	Addictions with or without products	In line with the SIMCA and the 2023- 2028 Health Plan (PRS), the road map highlights prevention and harm reduction associated with addictive practices in different living environments (professional, party, sporting) through consolidated regional governance. It defines 5 priority axes for intervention: Axis 1: Strengthen partnerships, knowledge, and coordination between different actors. Axis 2: Prevent addictive behaviours among young people. Axis 3: Prevent and reduce harm in different living environments. Axis 4: Enhance actions targeted towards vulnerable populations. Axis 5: Pursue tobacco control, in line with national guidelines.

Region	Year	Title and web link	Scope (main substances / addictions addressed	Pillars / action areas
Provence- Alpes-Côte d'Azur (PACA)	2023-2027	2023-2027 PACA regional roadmap https://bdoc.ofdt.fr/index.php?lvl=not ice_display&id=87085	Alcohol, tobacco and other psychoactive substances, gambling	Of the strategic objectives defined in the SIMCA, eight of them have been prioritised at regional level in the Provence-Alpes-Côte d'Azur region, to structure all actions to be cofinanced by MILDECA in the period 2023-2027: 1. Give everyone the freedom of choice. 2. Strengthen the key role of the family sphere. 3. Ensure that every user receives suitable treatment. 4. Strictly regulate the advertising and sale of risky products. 5. Reduce the availability and accessibility of narcotic substances. 6. Enjoy life together without psychoactive substances. 7. Make living environments more protective. 8. Create opportunities from fairs and large-scale events.

Note: Three metropolitan areas (Centre-Val de Loire, Nouvelle-Aquitaine, and Pays de la Loire) and two overseas territories (French Guiana and Martinique) were lacking this territorial document at the time of drafting. However, the departments within the regions in question, except for French Guiana and Martinique, have their departmental-level action plans.

T1.1.6. Does the capital city of your country have a drug strategy/action plan? If yes, please state its full reference, website address and a short description of its scope (main substances / addictions addressed) and pillars/action areas and the main objectives addressed). If there is none and the national strategy or another strategy or key reports address the capital city's drug policy please describe that instead.

Over a three-year period, the City of Paris, the prefecture of the Île-de-France region, the Paris police headquarters, the Île-de-France Regional health agency, and MILDECA established a coordinated mobilisation plan to combat the crack cocaine problem in Paris, in 2019. The 2019 plan was allocated 3 million euros, financed by the government and the City of Paris, to ensure stricter regulation in public spaces, in line with a coordinated harm reduction policy in support of crack cocaine users and polydrug users living on the streets.

The cooperation between government and health and medico-social sector actors continues to this day, with partners of the crack cocaine plan having decided to adopt new measures in order to respond to the expectations of neighbourhood populations and the needs of users more effectively. The reduction of street use, medico-social support for those affected, and the appearsment of public spaces remain the three priorities of the second stage of the crack cocaine plan for 2024 (https://www.paris.fr/pages/lutte-contre-le-crack-unplan-d-actions-2019-2021-6843). From this perspective, the overall strategy for combating crack cocaine use (https://www.iledefrance.ars.sante.fr/system/files/2019-05/crack-plan-2019-2021-33-Île-de-France mesures.pdf) was included in regional health plan III for the period 2023-2028 (https://www.iledefrance.ars.sante.fr/media/116122/download?inline).

The Paris City Council and the Seine-Saint-Denis Departmental Council have a service in charge of the metropolitan policy for the prevention of risk behaviours (MMPCR). Created in July 2013, the MMPCR is attached to the Public Health Department of the City of Paris and the Solidarity Unit of the Department of Seine-Saint-Denis. It is a resource for the two regions that intervenes at the crossroads of the fields of social cohesion, education, health, integration, and justice, to promote the prevention of risk behaviours (https://mmpcr.fr/).

T1.1.7. What elements of content (objectives, priorities, actions) of the EU Drugs Strategy 2021-25 and of the EU Drugs Action plan 2021-25 or the previous 2013-20 EU Drugs Strategy and it's two action plans were directly reflected in your most recent national drug strategy or action plan?

The new Inter-ministerial Strategy for Mobilisation against Addictive Behaviour 2023-2027 places its action within the common strategic framework defined by European drug policy, guided by a balanced approach to reducing supply and demand, and transversally oriented in the fight against the consequences linked to psychoactive substances.

In line with the 2021-2025 EU strategy, the French strategy aims to ensure a high level of protection for populations against the health, social, security and economic consequences linked to the consumption and trafficking of illicit products, by paying special attention to vulnerable populations. In accordance with the fundamental principles of the European strategy, it aims to develop global, coordinated and coherent action based on solid knowledge which is both participatory and fully understood by all partners, users and the general public.

T1.1.8. **Optional**. Please provide any additional information you feel is important to understand the governance of drug issues within your country.

T1.2. Evaluation of national drugs strategies

The purpose of this section is to

- Summarise the most recent national drug strategy evaluation.
- Where none has been completed, please summarise any available strategy review process.
- T1.2.1. List the titles and timeframes of recent national drug strategy and action plan evaluations, and/or issue specific evaluations of initiatives that are considered as official representative assessments of the national drug strategy measures, providing links to PDFs.

The first evaluation conducted in France on government policy focused on the 1999-2000-2001 three-year plan (Setbon *et al.* 2003). The following 2004-2008, 2008-2011 and 2013-2017 plans also included evaluations but in the form of the monitoring of key indicators (PDF not available online). In addition, an external team from the academic world was asked to evaluate four actions in the 2013-2017 plan (Bergeron *et al.* 2018). The most recent evaluation exercise concerns the mobilisation plan against addictions 2018-2022 which gave rise to a final assessment (MILDECA 2022).

T1.2.2. Please summarise the results of the latest strategy evaluation describing:

- The evaluation team (internal / external / mixed evaluation team);
- Its timing (before, during, after the timeframe of the current strategy);
- Its scope (whole strategy or certain pillars, issues, or actions);
- The assessment criteria (e.g. relevance, implementation, outcome etc.)
- The method (qualitative / quantitative / mixed);
- The main findings and limitations;
- The recommendations and how they were or will be used in drug strategy revision.

The 2018-2022 national plan was the subject of overall monitoring, the results of which were made public in March 2023 (MILDECA 2022) during the official adoption of the new mobilisation strategy for the 2023-2027 period. The evaluation exercise was piloted by the MILDECA as part of an internal evaluation. Conducted upon expiry of the plan, the purpose of the evaluation was to take stock of the evolution of the dynamics advocated and the components facing challenges in order to come up with prospects for action with a view to the new strategy.

The methodological approach was twofold, qualitative and quantitative. Its qualitative aspect was based on work and exchanges with State services involved in the fight against drugs and addictive behaviours, in two regions that are representative of the territorial dynamics underway: Occitanie and Normandy. Regional and departmental prefectures, regional health agencies, public prosecutors and education authorities were also involved. This initial evaluation exercise was completed by the monitoring of quantitative indicators, together with targets to be achieved by the end of the plan. As the periodic surveys from which the indicators are taken are carried out, the OFDT has reported the results of the defined dashboard, in order to monitor trends.

With regard to the main results of this evaluation, the assessment identified several major advances in the policy conducted over the last five years (2018-2022):

- In the field of information, the emphasis has been placed on large-scale communication campaigns and social marketing operations on the risks associated with the use of licit drugs (tobacco and alcohol) and illicit drugs (cannabis, MDMA, nitrous oxide, GHB and cocaine). Special attention has been paid to children and adolescents, resulting in the accelerated roll-out of life skills programmes and the identification of problematic uses of screens (including video games). A priority area for prevention was also the workplace, which was disrupted by the Covid-19 public health crisis and where the risk of addictive behaviour has increased for some employees. The mobilisation of professional actors around the prevention of addictive behaviours has gone hand in hand with that of primary care professionals to identify, in the greatest number of patients, possible risky behaviours, and to support people in difficulty, by directing them if necessary to specialised structures and services.
- In terms of risk reduction, the experiment with lower-risk consumption rooms (DCR) has come to an end. The evaluation of the Paris and Strasbourg DCR conducted by INSERM confirmed the interest of these schemes in improving the health of users, avoiding significant medical costs and limiting nuisances for local residents (in particular, the reduction in the number of injections and syringes left in the public domain). The positive results of the evaluation allowed the system to be renewed under the title "Addiction care drop-offs" (Haltes soins addictions/HSA) for three years. The health crisis linked to Covid-19 has accelerated the deployment of so-called « reaching out » approaches and facilitated better consideration of the problems linked to addiction suffered by the most vulnerable groups.
- In the field of coordination of public action at a regional level, the assessment shows the efforts made in recent years to strengthen its support for regional actors to achieve effective action. The topics for which coordination was successful are varied, reflecting the scope of this policy: forming an educational alliance to reinforce the psycho-social skills of children and adolescents; creating protective environments around them (observance on the ban on sales to minors, setting up of trusted places and family protection); reinforced coordination between the forces involved in the fight against drug trafficking under the aegis of the new OFAST branches; regulating local party settings, whether regular, in certain streets or neighbourhoods, or occasional (festivals, celebrations); coordinating health care providers to facilitate the inclusion of patients in clear health care pathways, with a strong remote support dimension; supporting vulnerable people (e.g. crack users in Paris; disseminating harm reduction practices in reception and accommodation facilities; experimenting with regional schemes to prevent young people from becoming involved in drug trafficking).
- With regard to festive gatherings, it is emphasised that prefectures have mobilised local players to reduce the risky use of psychoactive substances and the associated health and social damage (violence, disturbance of public order and peace). The resumption of the festive life in the summer of 2021 required particular vigilance.
- The Government's commitment to combating drug trafficking has resulted in a comprehensive and ambitious anti-trafficking plan, adopted in September 2019 (Ministère de la Justice et al. 2019) which should give rise to a new plan for the next five years, currently under development. The two major advances highlighted were the deployment of the fixed criminal fine (AFD) in the area of narcotics and the multiplication of operations to destabilise drug dealing locations, based on an inventory of these locations, now also thanks to the ability of citizens to report these locations online from the websites (https://www.plus.transformation.gouv.fr/experiences/3260185_mon-commissariat-en-ligne).
- More generally, and in the very particular context of the Covid-19 epidemic (marked by the destabilisation
 of traffic and the interruption of flows), the initiative action of the internal security forces was maintained in
 2020 with an acceleration since the second half of 2021, extended into 2022, of seizures of products and
 seizures of criminal assets. On 18 May 2021 and 3 March 2022, the Prime Minister chaired inter-ministerial
 committees to combat narcotics, thus reinforcing the Government's commitment in this area.
- Significant investments were highlighted in the field of research, notably through the Fund for Combating Addictions. An annual budget of 10 M€ allocated over the period 2019-2022 to the National Institute for Health and Medical Research (INSERM) and the National Cancer Institute in partnership for financing research projects in the field of the addictions illustrates such efforts. In particular, the evaluation of the drug consumption room experiment by INSERM and the INSERM collective expertise on alcohol constitute a solid new basis of knowledge for directing public action in these areas.

With regard to international action, the assessment highlights the institutional position of the French
authorities, who continue to promote a global and balanced approach to the fight against drugs, based on
the defence of human rights, in international bodies (in particular the United Nations Commission on
Narcotic Drugs, INTERPOL, WHO and UNODC) and European bodies (in particular EUROPOL,
FRONTEX and OSCE), and to increase cooperation actions, in particular by rolling out expert missions to
train internal security forces in partner countries on all aspects of the fight against drug trafficking.

The assessment also highlights the main challenges identified and the progress to be made, which will guide the next government strategy.

- A major concern is vulnerable sections of the population. For the general public, the protection of minors
 is highlighted as a key priority for the coming years. Emphasis is placed on the urgent need to identify new
 forms of action to put an end to the massive non-compliance with the ban on the sale of alcohol, tobacco
 and gambling to minors, and the need to provide appropriate responses for vulnerable people (people with
 disabilities, detained persons, etc.).
- Another key area highlighted by the assessment report concerns the restructuring of addiction services (review of missions, associated costs and budgets; better coordination between the health and medicosocial sectors, etc.), which has been partially undertaken over the last five years and which represents a major challenge for the coming period.
- Finally, the mobilisation of local authorities has mainly concerned municipalities and departmental
 councils. Regional councils have not been asked to take a more systematic account of the problem of
 addictive behaviours in the support provided to people covered by the training and employment policies
 managed at this level: job seekers, apprentices, vocational trainees in various branches of industry, etc. It
 would also be useful to give local missions more tools.

In addition to the evaluation carried out by MILDECA at the end of the government strategy, the monitoring scheme was based on a table of indicators that made it possible to monitor developments in around fifteen priority objectives. This monitoring table was filled in periodically by the OFDT, as and when the surveys from which the indicators are derived were carried out, and communicated to the MILDECA to enable it to guide public action on drugs.

A variety of sources were used:

- representative surveys (EROPP survey on French people's representations, opinions and perceptions, data from the *Santé publique France* Health Barometer on drug use among adults, or surveys of young people, such as ESCAPAD or EnCLASS on the age of first use, uses, access to products, etc.);
- additional surveys carried out in certain environments (RECAP system in health care centres, the Ena-CAARUD survey in harm reduction facilities, in the workplace, etc.) or among specific populations (pregnant women on drug use during pregnancy and recommendations received by health professionals to prevent it, the incidence of HIV among injecting drug users, victims of violence, etc.);
- health insurance data (patients who have received a brief intervention, beneficiaries of opioid substitution treatment, etc.) and data from existing registers (road accidents, fatal overdoses, etc.);
- statistics on the fight against trafficking (seizures of drugs, criminal assets, number of criminal organisations impeded, number of people charged with drug offences, etc.).

However, the data collected does not allow for a satisfactory measurement of changes in addictive behaviour over the duration of the plan (2018-2022). By mobilising the available data, however, the following can be noted:

- Contrasting trends in the use of psychoactive substances in the general population.
- A significant drop in experimentation and consumption among adolescents.
- High accessibility of products perceived by adolescents.
- Strong growth in sales of smoking cessation treatments but stable demand from patients for support as part of a brief intervention-based approach for their consumption of alcohol or tobacco.
- A decrease in fatal accidents on the road caused by alcohol and narcotics.
- A redoubling of efforts to combat narcotics.
- The unavailability of recent data on violence committed by perpetrators under the influence of alcohol or drugs.

T1.2.3. Are there any evaluations planned, e.g. annual progress reviews, mid-term, or final evaluations of the current national strategy? If yes, please specify the type of evaluation that is planned.

The new Strategy of Mobilization against Addictive Behaviour 2023-2027 does not highlight the evaluation mechanism planned to assess its priorities for action or its concrete achievements over the next five years. However, the strategy for 2023-2027 sets the objective of promoting evaluation within the framework of specific experimental programmes (Strategic orientation n°. 10 "Observe, enlighten and evaluate for improved performance").

Two funding levers are mobilised:

- Credits from the MILDECA to support the initiatives of the ministries and to experiment, on a few sites
 and for a limited period, with innovative mechanisms for prevention, health and social care, law
 enforcement and the fight against trafficking which may be taken over by the ministries if they prove
 to be relevant following assessment.
- Credits from the Fund for Combatting Addiction as part of the civil society mobilisation call for projects and the IreSP's "Research" call for projects focusing on the addictions component.

For example, the 2023-2027 strategy refers to the following assessments:

- The evaluation of programmes to strengthen psychosocial skills such as the "Good Behaviour Game" (GBG) tested in the Nice academy since 2016, and the PRIMAVERA programme deployed in the academies of Paris and Amiens.
- That carried out by INSERM on the DCRs, which enabled the drafting of new specifications for the future addiction treatment centres (HSA).
- Experimental programmes to prevent the involvement of young people in drug trafficking (LIMIT'S programme) which, since their initiation, have been accompanied by an external assessment.
- The problem-solving Justice mechanism will also be evaluated from the end of 2022.

Moreover, as part of annual monitoring, MILDECA relies on responses provided by departmental and regional project managers, who are responsible for leading government policy at local level, to evaluate territorial action in implementing national guidelines (MILDECA 2023b, c). The first monitoring elements pertaining to the implementation of public action on combating addictions for the period 2023-2027 will be made available at the end of 2024, based on 2023 activity reports.

T1.3. Drug policy coordination

The purpose of this section is to

- Provide a brief summary of the coordination structure involved in drug policy in your country
- Describe the main characteristics of each coordination body
- T1.3.1. Describe your national drug policy coordination bodies. Explain their level and role (e.g. the interministerial, national, regional and local, strategic and operational, hierarchical relationships, and the ministries they are attached to. Please include a summary graphic.

Founded in 1982 and reporting to the Prime Minister since 2008, the MILDECA prepares, leads and coordinates government strategy to combat drugs and addictive behaviour. Under the authority of the Prime Minister, the Inter-ministerial Committee for the Fight against Drugs and Addictive Behaviour is responsible for approving the government strategy. It is made up of ministers and state secretaries and is the government's decision-making body in the area of drugs.

At regional and departmental level, MILDECA project managers lead inter-ministerial policy. The MILDECA circular of 12 December 2022 specifies the role of project managers. They are responsible for mobilising all decentralised State services and improving the implementation of sectoral policies (Regional Health Agency, Local Education Authority, Public Prosecutor's Office, in particular) on the one hand, and supporting the local network by consulting and by associating all the institutional partners and the associative actors on the other hand. They are designated within the prefectural team. With a few exceptions, it is the director of the Prefect's cabinet who is in contact with the MILDECA project manager.

In direct collaboration with the Prefect, the director of the cabinet is the permanent correspondent of the ministerial cabinets. He/she endeavours to promote State policy by maintaining close relations with the media, elected officials and socio-economic representatives. He is more particularly specialised in security and assists the Prefect directly to lead and coordinate the action of the services responsible for respecting public order and the protection of people and property (police, gendarmerie and emergency services). He/she particularly follows crime prevention policies, road safety issues, litigation for acts of terrorism or attacks, etc.

More specifically, the regional project managers steer the exercise of developing and monitoring the regional roadmap³-in application of the inter-ministerial strategic orientations - and are responsible for ensuring the local network leading the response to needs, regional coordination of allocated intervention credits and to provide methodological support to departmental project managers. The departmental project managers are directly responsible for the operational implementation of the axes defined by the annual guidelines provided by the MILDECA and the axes of the regional roadmap. The instruction of 28 March 2023 highlights the leadership of public action on combating addictions at departmental level, which is structured around a departmental action plan and a steering committee, which differs from the funders' committee associated with MILDECA credits. In 2023, almost all the departments drafted and sent their departmental action plans for the period 2023-2027 to MILDECA.

Each year, the MILDECA sends its project managers guidelines on the use of the credits delegated to them at the local level, in order to give them the means to promote local actions to prevent and combat addictive behaviours (see T1.1.5.). The amounts delegated to prefectures for 2024 stands at 8.6 million euros (MILDECA circular of 14 December 2023). The drafting of multi-year agreements on objectives with institutional actors (prosecutors, local education authorities, Regional health agencies (ARS)...), the voluntary sector, and territorial partners is encouraged.

In addition to the intervention credits allocated by the MILDECA and the funds from the Interministerial Fund for Crime Prevention (FIPD), project managers can participate in decisions on the allocation of intervention credits delegated to the Regional Health Agencies (ARS), from the Regional intervention fund (FIR) and the Fund for Combatting Addiction (FLCA) which make it possible to support, generally within the framework of calls for projects, local actions in line with their regional health project and their regional programme to reduce smoking.

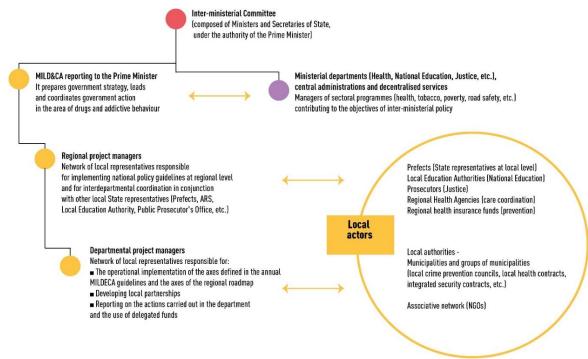
As well as the delegation of MILDECA credits to prefectures, MILDECA directly funds local projects as part of a national call for proposals aimed at territorial communities who want to get involved, together with the government, in the construction of an action plan that contributes to the implementation of government policy at territorial level. Five national calls for proposals have been published by MILDECA since 2018⁴ (MILDECA circular of 14 December 2023). Following exchanges with councillors and associations of councillors, in 2024, MILDECA has selected the prevention of the development of drug trafficking as the theme of their annual call for proposals⁵. From this perspective, municipalities and intercommunalities have therefore been encouraged to get involved in local projects aimed at limiting the appeal of trafficking, preventing adolescent participation in these criminal activities, and detecting or supporting those in the transition phase more effectively.

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³ It is the 2018-2022 Government plan which established regional road maps implementing the national guidelines of the mobilisation plan on addictions, in light of local needs.

⁴ Allocated with 1 to 2 million euros each time from the "Narcotics" support fund.

⁵ MILDECA Call for proposals specification



Source: OFDT

T1.4. Drug related public expenditure

The purpose of this section is to outline what is known about drug related public expenditure.

T1.4.1. Report on drug-related expenditure: the procedure followed to approve drug-related expenditure; drug budgets attached to national policy documents and provide a brief summary of recent estimates.

The State budget is prepared by the Government and voted by Parliament as part of the drafting of the finance law, following a programmatic rationale. As the "drugs" policy falls within the inter-ministerial remit, a dedicated transversal policy document (DPT) is used to present the budgetary programmes contributing to the inter-ministerial policy to combat drugs and the related tax expenditures. It is annexed to the finance law. It sets out the objectives of the transversal policy and the means implemented to achieve them within the inter-ministerial framework. The DPT devoted to the policy to combat drugs and addiction is prepared by the MILDECA - ministerial responsible- in collaboration with the ministries contributing to the implementation of State action in this area. It presents the main expenditures related to all programmes contributing to government policy (execution N-2, voted appropriations N-1 and proposed appropriations for year N). Noncalculable expenses and those whose cost is insignificant are excluded. The list of expenses for the actions of the programmes concerned is proposed by the Budget Department at MILDECA. The ministerial responsible for each programme must ensure that an overview of all financial contributions from public administrations to cross-cutting policy is provided, including, where possible, expenditure incurred outside of the field of administration alone, and particularly, credits included in the Health insurance funding act, to support the hospital sector in health care for addictions⁶, the medico-social system specialised in addiction⁷, and the reimbursement of medicinal products.

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⁶ The supply of hospital care for addictions is funded primarily through regional donations from MIGAC (Missions of General Interest and Support to Contracting) for healthcare institutions. The circular of 26 September 2008 pertaining to the Hospital addiction treatment sector defines its structure. The sector, composed of one or more healthcare institutions, is spread over 3 levels (local, referral across a territory, and regional referral). More recently, credits to support hospital-based Addiction liaison and treatment teams (ELSA) have been transferred to the regional intervention fund (FIR), managed by regional health agencies.

⁷ Credits from the national objective for medico-social health insurance expenditure (ONDAM) are delegated to Regional health agencies to finance addiction care facilities, which propose specialised treatment for people suffering from addictions (CSAPA specialised drug treatment centres and CJC Youth Addiction Outpatient Services, CAARUD harm reduction facilities, therapeutic communities).

The most recent estimate, concerning credits for the year 2022, (Première ministre 2023) calculates government expenditure to have been 2.230 billion euros in 2022, which is added to Health insurance donations valued at 968 million euros.

In addition, since 2019, the health insurance branch of the Health insurance funding act has included a new donation to be used to finance the "Fund for Combating Addiction". Created by the Social Security Financing Act for 2019 (law 2018-1203 of 22 December 2018), the Fund for Combating Addiction has succeeded the Fund for Tobacco Control in order to finance substance-related addiction programmes, particularly for tobacco, alcohol, and cannabis. It has also covered behavioural addictions since 2022. In particular, it finances prevention and research actions at local, national, regional and international level⁸. The MILDECA is a member of the governance bodies of the FLCA, alongside the Ministry in charge of Health and Health Insurance. The Select Committee issues an annual opinion on the actions to be financed by the Fund for the current year from among the priority actions proposed by the Strategic Orientation Council. In 2022, the Fund for Combating Addiction was allocated 97 million euros (Decree of 7 December 2022 modifying the list of recipients and the amounts allocated to the Fund for Combating Addiction). Around €32 million was paid into the regional intervention fund (FIR) to finance the regional roll-out of priority national actions, and the delivery of regional smoking reduction programmes (Ministère de la Santé et de la Prévention 2023b).

In 2022, the contribution from the Government and the Health Insurance system reached €3.198 billion euros (representing 0.12% of the gross domestic product (GDP) in France).

External evaluations focusing more broadly on the social cost of drugs are periodically carried out by specialised researchers. The social cost of drugs in France was estimated in 1996, 2003, 2010 (Kopp 2015; Kopp and Fenoglio 2004, 2006) and more recently in 2019 (Kopp 2023). The latest estimate has been carried out with the support of the Fund for Combatting Addiction under the coordination of the OFDT. This study assesses the social cost of illicit drugs at 7.7 billion euros, a far cry from the amount estimated for alcohol (156 billion euros) and for tobacco (102 billion euros). The results of the study confirm a social cost of drugs that is much higher than the resulting tax revenue.

T1.4.2. **Optional.** Breakdown the estimates of drug related public expenditure.

Use the Standard Table on public expenditure or Table IV to report data and break the information down according to supply, demand and transversal initiatives. Additionally, whenever possible use the COFOG classification, the Reuters classification or where not possible the classification applied in your country (with an explanation). Report also if estimates are based on Labelled or Unlabelled data. Last but not least, report Total expenditure.

In 2022, the contribution from the Government and Health Insurance reached €3.198 billion euros (representing 0.12% of the gross domestic product (GDP) in France (Eurostat 2024)). Credits identified as such in public accounting documents represent 30.7% of the total, while unmarked expenditure represents 69.2% of tracked resources (Eurostat 2024).

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⁸ Over the period 2019-2022, it helped to support actions at national level, particularly "smoke-free workplaces" and psychosocial skills development programmes: through financing the enhancement of communications operations among the general public (social marketing), led by *Santé publique France* (SpF) on psychoactive substances (tobacco, alcohol, and illicit drugs), with a specific scheme focused on gambling; implementing innovative actions carried out by civil society in particular (via calls for proposals and calls for expressions of interest), with the aim of contributing to combating the excessive consumption and addictive behaviours associated with them; and providing its financial support to research carried out by INCa (National Cancer Institute) and IReSP (Institute for Public Health Research), as well as studies, surveys, and monitoring work conducted by the French Monitoring Centre for Drugs and Drug Addiction (OFDT). At territorial level, the Fund for Combating Addiction has been used to finance projects spearheaded by Regional health agencies (ARS) and those led by the Public Health Insurance Fund and the Health Insurance Fund for Agricultural workers' and farmers offices. The fund has also financed international actions, particularly France's participation in the WHO Framework Convention on Tobacco Control, and the construction of a "French-speaking knowledge hub" aimed at promoting the transfer of knowledge and skills between international actors involved in tobacco control.

Table IV. Break-down of drug related public expenditure

Expenditure	Year	COFOG Classification	National accounting classification	Trace (Labelled, Unlabelled)	Name of the programme
15 218 715	2022	01.3 - General services	129	Labelled	Coordination of government activities
9 331 347	2022	01.3 - General services	209	Unlabelled	Solidarity with developing countries
2 975 502	2022	01.3 - General services	105	Unlabelled	Action by France in Europe and throughout the world
842 026	2022	01.3 - General services	354	Unlabelled	Territorial administration (change in wording in 2019)
5 940 786	2022	09.1 - Pre-primary and primary education	140	Unlabelled	Primary State school education
143 631 896	2022	09.2 - Secondary Education	141	Unlabelled	Secondary State school education
9 850 144	2022	09.2 - Secondary Education	143	Unlabelled	Technical agricultural training
229 434 062	2022	09.2 - Secondary Education	230	Unlabelled	Student life
9 877 839	2022	09.8 - Education n.e.c.	207	Unlabelled	Road safety and education
11 510 123	2022	09.8 - Education n.e.c.	147	Unlabelled	Urban policy
250 000	2022	09.4 - Tertiary Education	142	Unlabelled	Agricultural higher education and research
3 280 000	2022	07.4 - Public Health services	204	Unlabelled	Prevention, health safety and health care delivery
12 018 918	2022	07.4 - Public Health services	219	Unlabelled	Sport
30 000	2022	07.4 - Public Health services	123	Labelled	Overseas living conditions
85 600 000	2022	07.4 - Public Health services	Social security Budget	Labelled	Fund for Combatting Addiction (FLCA in French)
518 350 000	2022	07.4 - Public Health services	Social security Budget	Labelled	Specialised healthcare expenditure
72 644 626	2022	0.7.1 - Medical products, appliances and equipment	Social security Budget	Labelled	Reimbursement for opioid substitution medication
279 863 000	2022	07.3 - Hospital services	Social security Budget	Labelled	Hospital healthcare expenditure
75 000	2022	10.4 - Family and Children	304	Unlabelled	Social inclusion and protection of individuals (change in wording in 2016)
739 158 120	2022	03.1 - Police services	176	Unlabelled	National police force
4 330 759	2022	03.3 - Law courts	182	Unlabelled	Judicial youth protection service
112 796 606	2022		166		Legal justice
9 020 627	2022	03.4 - Prisons	107	Unlabelled	Prison authorities
684 714 301	2022	03.6 - Public order and safety n.e.c.	302	Unlabelled	Facilitation and safeguarding of exchanges
224 656 834	2022	02.2 - Civil defence	152	Unlabelled	National Gendarmerie
443 445	2022	02.2 - Civil defence	178	Unlabelled	Preparation and use of forces
520 000	2022	07.5 – Research Traffic	"Narcotics" support fund managed by MILDECA	Labelled	PIRALAD
11 400 000	2022	07.5 – Research Health	Fund for Combatting Addiction (FLCA) of the National Health Insurance Fund	Labelled	INSERM/Iresp/INCA Addictive Behaviours Research Program

Source: drafted by OFDT based on:

- the Initial Budget Act for 2024 (Première ministre 2023),
- the Medic'AM 2022 Health insurance system database⁹,
- the instructions of 19 April 2022 and 2 November 2022 pertaining to the budget campaign for medico-social facilities¹⁰,
- and the 2022 budget and tariff circulars for healthcare institutions¹¹ (of 15 April 2022, 31 October 2022, and 23 December 2022) drafted as part of law no. 2021-1754 of 23 December 2021 on the Social Security Financing Act for 2022.

T2. Trends. Not applicable for this workbook

T3. New developments

The purpose of this section is to provide information on any notable or topical developments observed in drug policy in your country **since your last report**. T1 is used to establish the baseline of the topic in your country. Please focus on any new developments here.

If information on recent notable developments have been included as part of the baseline information for your country, please make reference to that section here. It is not necessary to repeat the information.

T3.1. Please report notable new drug policy developments since last report (e.g. cannabis policy, crack cocaine and/or methamphetamine problems and responses (e.g. targeted strategies, measures), open drug scenes, NPS specific strategies, the changing policy context of national drug strategy, etc.).

Recently, a number of topics gained special attention in the public domain in France:

Cocaine: convergence of health and safety signals prompting increased vigilance among public authorities and professionals in the field

The 2023-2024 period was characterised by the publication of numerous works and surveys by the French Monitoring Centre for Drugs and Drug Addiction (OFDT) and Santé publique France (SpF) which revealed the considerable buoyancy of the cocaine market between 2000 and 2022, and the growing development of use and health signals. In 2023, the OFDT's new survey in the general population confirmed the widespread distribution of cocaine in French society (see below). The developments observed have reinforced the sense of concern among the authorities and the need to engage all actors within the field in order to develop increasingly targeted responses, in terms of both supply reduction (international cooperation and combating trafficking), and prevention, support, harm reduction measures, health care, and support for research.

Published in March 2023, a collective overview was carried out by the OFDT, in collaboration with its institutional and scientific partners (particularly ministerial administrations, SpF, and the addictovigilance network). Based on all available data, this overview tracks the development of cocaine supply, its use, and its health impacts for the 2000-2022 period. In particular, it shows the widespread accessibility of the product, associated with the dynamism of trafficking via social media, and the development of home deliveries. Use trends are also apparent, irrespective of the form of cocaine (in the hydrochloride powder form, or in the form of base cocaine: rock, crack cocaine), as well as the diversification of user profiles. As for health-related harm, the data analysed draws out many converging signals: a threefold increase in emergency department visits for cocaine use between 2010 and 2022, and an increase in both hospitalisations and treatment requests for cocaine use (OFDT 2023; Santé publique France 2023).

⁹ Total opioid substitution medication reimbursements by all health insurance schemes for community pharmacy deliveries during 2022 (excluding medications delivered to hospital inpatients).

¹⁰ Delegation of credits to medico-social facilities and services (ESMS) for 2022 to support centres for the reduction of drug-related harms (CAARUD) and treatment and prevention centres for addiction (CSAPA).

¹¹ Donations to the hospital addiction care sector for 2022.

To find out more:

- https://www.ofdt.fr/BDD/publications/docs/epcxet2d3.pdf to access the press release,
- https://www.ofdt.fr/publications/collections/thema/la-cocaine-un-marche-en-essor-evolutionset-tendances-en-france-thema/ to access the report directly
- https://en.ofdt.fr/en/cocaine-and-crack-cocaine-overview-2147 for an overview (in English)
 on cocaine-related data

In 2023, with the support of the Fund for Combating Addiction and at the initiative of MILDECA and other health care partners, the OFDT released a new survey on drug use in France, in order to provide updated and representative prevalence data on the general population. The EROPP survey sample has been resized, in order to address the need for public policymakers to have access to recent data on trends observed. Published in June 2024 (https://www.ofdt.fr/actualite/les-niveaux-d-usage-des-drogues-illicites-en-france-en-2023-2123), the results of the 2023 EROPP survey confirm an upward development in the lifetime use and regular use of cocaine. Its growth dynamic has been gaining momentum since 2019. After cannabis, cocaine stands out as being the most used illicit substance.

To find out more (in French):

https://www.ofdt.fr/communique-de-presse/les-niveaux-d-usage-des-drogues-illicites-en-france-en-2023-2124 to access the press release, and https://www.ofdt.fr/sites/ofdt/files/2024-06/tendances_164_eropp.pdf to access *Tendances* no. 164 directly.

The 2023-2027 Interministerial Strategy and the new plan for combating drug trafficking are oriented towards a strong engagement from all actors, aimed at enhancing public authority action on both the supply and demand of cocaine.

The dissemination of knowledge to the general public and prevention are major levers of government policy. In this regard, in 2023, MILDECA created digital campaigns on the harm associated with cocaine use. Health care for cocaine users is flagged as a major issue, which calls for the development of professional practices in terms of user tracking. Another issue concerns the need for research on effective drug treatments, pursuant to the recommendations of the French National Authority for Health (HAS). Faced with the expansion of the cocaine market, law enforcement actors are intensifying their actions in terms of international cooperation and combating trafficking.

Enhancement of initiatives aimed at creating a protective environment for vulnerable populations

Enhancing cooperation between local actors (professionals in the addiction, social emergency, and accommodation sectors, child protection, national education, and legal actors, etc.) involved with specific populations, such as minors, students, and precarious populations and prisoners, is one of the priorities of current interministerial policy in terms of preventing addictive behaviours. Through public support for local initiatives, public actors agree on the need to create a protective environment by engaging territorial actors. Support is shown through the funding of territorial initiatives as part of Calls for expressions of interest, the development and distribution of companion guides, and the organisation of cross-training between stakeholders:

- New synergies, encouraged by the Interministerial Delegation for Accommodation and Access to Housing (DIHAL), and by the Ministry of Health, have been developed between the addiction, social emergency, and accommodation sectors, to take account of the addiction needs of accommodated populations (CHU), and those on the streets (addiction/psychiatry/precariousness multidisciplinary mobile teams).
- In order to support projects by operators of child protection institutions and services, a call for expressions of interest was launched in 2023. This initiative was jointly managed by MILDECA, the Fund for Combating Addiction, and the General directorate for social policy (DGCS). The call for expressions was aimed at sustainably integrating the prevention of addictive behaviours into the ongoing missions of child protection institutions and services, for the benefit of the children and young adults they treat, and also the professionals working with them. In addition, for children entrusted to judicial youth protection, the Judicial youth protection directorate (DPJJ) with the backing of the Narcotics Support fund pursued an initiative, in 2023, aimed at leveraging trials conducted by numerous interregional directorates on the prevention of addictive behaviours in order to build a national reference framework, in partnership with the FNES (French National Federation for Health Education and Promotion).

- In 2023, the cooperation between MILDECA and the Ministry of Education and Research led to a further call for expressions of interest to higher education institutions, in order to encourage harm reduction approaches among students, to prevent both the health and social harm (violence, disturbances of public order and peace) associated with use, particularly during party gatherings. In addition, in 2023, new "prevention" credits were allocated to university and inter-university student health services (see Prevention WB T1.2.2).
- The fourth call for proposals was published by MILDECA to municipalities and intercommunalities, at the start of 2023. In this regard, new collectivities are committed to developing and implementing a local policy project, divided into operational actions, with a view to prevent the development of local trafficking among young people.
- In terms of cooperation between professionals from different sectors for preventing addictive behaviours, in 2023, the French National School of the magistrature also pursued its training activities, by proposing cross-training for all partners, to actors involved in the creation of a problem-solving jurisdiction: magistrates, prison authority and judicial youth protection actors, regional health agencies, caregivers (doctors, nurses, psychologists).

Increase and expansion of drug trafficking: proposals from the upper house of the French Parliament to address it

At the initiative of the Republicans party (French right-wing political grouping), a senate committee of inquiry¹² on the "impact of drug trafficking and measures to address it" was created at the end of 2023.

The works carried out aimed to highlight new issues associated with drug trafficking and question the means deployed to combat it. Visits and over 150 hearings were conducted to shed light on numerous questions, among which are: the latest trends in the development of drug entry routes in France, the deployment of trafficking in medium-sized towns and rural municipalities, the role played by digital tools in the structuring of trafficking in France, new operating procedures for trafficking networks, etc.

After six months of works and reflections, the commission released its report and conclusions (https://www.senat.fr/rap/r23-588-1/r23-588-1.html). The parliamentary report presented by the Senators of the committee of inquiry provides an alarming overview of the threat posed by drug trafficking (rapid reactivity of trafficking networks when adapting to action of law enforcement services, insufficient resources, corruption of public officials, territorial expansion of trafficking, violence associated with trafficking, etc.) in France and at international level, and proposes a series of recommendations to combat the phenomenon more effectively, as part of a "comprehensive and ambitious strategy".

- 1 Treat drug trafficking as a threat to France's fundamental interests.
 - Put intelligence in its proper place when combating drug trafficking.
 - Place the means at the level of the threat, with a viable contingency plan for committees of inquiry and jurisdictions.
 - Provide means of security in overseas territories, which are currently forgone, and in port and airport infrastructures.
 - Curb the corruption associated with drug trafficking, particularly the erroneously branded "low-level" corruption, by characterising violations of probity, and creating conditions for incorruptibility in both the public and private spheres.
- 2- Hit the "upper end of the spectrum" and do not limit the fight to public order operations.
 - Place penal procedure at the level of the issues by creating a "secure" folder, and by facilitating the use of special investigative techniques.
 - Facilitating the use of "informants", securing the processing of sources through inquiry services, and creating a new "civil" infiltration.
 - Relentlessly combat all types of laundering.
 - "Hit the wallets of traffickers" by systematising asset investigations, imposing a judicial freeze on their assets, and creating a non-conviction based forfeiture.

¹² A long-established tradition, committees of inquiry are tools available to parliamentary assemblies to gather information and control government action, through the specific investigative powers which are granted to them (art. 6 of ordinance of 17 November 1958).

- 3- Structure the action of services combating drug trafficking.
 - Establish the Home Affairs Department's Anti-Narcotics Office as a real "French DEA", by giving it full authority over field services combating drug trafficking (police, gendarmerie, and customs).
 - Create a national anti-narcotics public prosecutor's office to specialise and embody the fight against drug trafficking in the legal sphere.
 - Develop a viable national strategy by elevating the ambitions of the National anti-Narcotics Plan for Fighting Traffics in press.

To find out more:

https://www.senat.fr/travaux-parlementaires/structures-temporaires/commissions-denquete/commission-denquete-sur-limpact-du-narcotrafic-en-france-et-les-mesures-a-prendre-pour-y-remedier.html

Children and screens: a growing societal concern

The President of the Republic created a committee of experts, in mid-January 2024, to assess the issues associated with screen exposure among children and make recommendations. The ten key specialists in the field released their report in April 2024. The works of the committee are based on the analysis of over 60 hearings and contributions received from institution representatives and civil society actors (list of bodies and members of the committee available within the report) (Bousquet-Bérard and Pascal 2024).

Through this report, the committee examines the impact of screen exposure on the health and personal integrity of children and young people, and reports on the societal and health issues affecting their families. The report evaluates control measures implemented to protect the youngest populations and, particularly, examines the European and national corpus juris, as well as the means and tools deployed (awareness messages, support tools aimed at families and educators, monitoring and reporting tools, digital technology reference framework, etc.). It emphasises problem areas identified such as, "poor governance from all actors, due to a lack of structural, collective, and interministerial strategy", or commercial strategies among economic actors "which are mirrored in the shifting of responsibility to parents".

The report proposes 29 guiding proposals divided into further operational measures. Of the proposed axes of action, the experts particularly recommend:

- Axis no. 1: Address, ban, the addictive concepts of some digital services in order to give young people choice.
- Axis no. 2: Protect children, rather than control them: a battle that must be fought and can be won by economic actors.
- Axis no. 3: Adopt and organise a progressive use of screens and digital technologies among children according to their age.
- Axis no. 4: Seriously prepare young people for their independence with screens, give them the
 power to take action and, at the same time, give children and young people their rightful place in
 community life.
- Axis no. 5: Better equip, train on digital technologies, and support parents, teachers, educators, and all those who work with children, creating a society which puts screens and digital technologies back in their proper place.
- Axis no. 6: Implement an ambitious government arrangement to allow public authorities to define a strategy, have steering capabilities, better support actors who work with young people and families, and inform citizens.

T4. Additional information

The purpose of this section is to provide additional information important to drug policy in your country that has not been provided elsewhere.

T4.1. **Optional**. Describe additional important drug policy information, studies or data, providing references and/or links.

- T.4.2. **Optional**. Please describe any other important aspect of drug policy or public expenditure that has not been covered in the specific questions above. This may be additional information or new areas of specific importance for your country
- T.4.3. **Optional**. Are you aware of any national estimate of the contribution of illicit drug market activity to the National Accounts? Please describe any sources of information, specific studies or data on the contribution of illicit drug activity to national accounts. Where possible, please provide references and/or links.

T5. Sources and methodology

The purpose of this section is to collect sources and bibliography for the information provided above, including brief descriptions of studies and their methodology where appropriate.

- T5.1. Please list notable sources for the information provided above.
 - Bergeron, H., Hassenteufel, P., Lartigot-Hervier, L. and Roa Bastos, F. (2018). <u>Evaluation de quatre actions du Plan gouvernemental de lutte contre les conduites addictives (2013-2017)</u>. SciencesPo, Paris. Available: https://hal-sciencespo.archives-ouvertes.fr/hal-01915043/ [accessed 03/06/2024].
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- MILDECA (2023b). Rapport d'activité : L'action de la MILDECA dans les territoires en 2022. L'essentiel par région. MILDECA, Paris. Available: https://www.drogues.gouv.fr/sites/default/files/2023-10/Rapport%202022_synth%C3%A8se%20r%C3%A9gionale.pdf [accessed 03/06/2024].
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The following sources were used to identify healthcare expenditure included in the Social Security Funding Act (LFSS), in particular the authorised budget to fund the activities of hospital-based Addiction liaison and treatment teams, specialised treatment centres and new measures under national plans:

- Interministerial instruction of 19 April 2022 pertaining to the 2022 budget campaign for medicosocial facilities and services for people facing specific problems and Interministerial instruction of 2 November 2022 complementing Interministerial instruction of 19 April 2022.
- The 2022 budget and tariff circulars for healthcare institutions of 15 April 2022, 31 October 2022, and 23 December 2022.

To track the cost of the medico-social addiction system (CAARUD, CSAPA and therapeutic communities), the priority source is the Transversal policy document "Policy agains drugs and addictive behaviour" (DPT) (Première ministre 2023). Although this expenditure does not directly fall within the scope of the Budget Act, annual Social Security payments (funds disbursed) can be traced to specialised addiction medicine facilities for their annual operations, from the annexes of successive DPT. This information is sourced from the regional health agencies directly responsible for the financial and accounting management of the subsidies paid.

Reimbursement amounts for opioid substitution medications (OSM) were extracted from the Medic'AM-CNAM-TS database (https://assurance-maladie.ameli.fr/etudes-et-donnees/open-medic-depenses-beneficiaires-medicaments). This source provides the amounts reimbursed by the National Health Insurance Fund based on the medication retail price.

T5.2. Where studies or surveys have been used please list them and where appropriate describe the methodology?

Estimate of public expenditure for drug policy produced by the OFDT, 2021 data (point T1.4.2)

Only a portion of drug-related spending is identified as such in public accounting documents ("earmarked spending"), and the vast majority of credits are assessed based on estimates. Since 2008, the appropriations contributing to the programmed actions are presented in an appendix to the finance law, the transversal policy document for the fight against drugs and addictive behaviour (DPT). It tracks the most significant expenses, excluding those that cannot be quantified or expenses whose cost is insignificant. In order to give as complete a picture as possible, the DPT mentions the main health insurance expenditure devoted to addictive behaviour. These include the financing of specialised centres providing care and risk reduction services and implementing prevention, treatment and social reintegration activities (CAARUD, CSAPA and therapeutic communities in particular) and expenditure relating to the financing of medico-social structures specialising in addictology which are provided directly by the Regional Health Agencies (ARS) on the basis of credits executed. The hospital sector completes the health care component for those suffering from addictions thanks to additional funding from health insurance for Hospital-based Addiction Liaison and Treatment Team (ELSA) and hospital addiction consultancies.

The circulars relating to the tariff and budgetary campaigns of health establishments constitute another additional source for tracking the new measures authorised by the Government within the framework of the health insurance financing law.

The last source used was Médic'AM, which makes it possible to extract the amounts reimbursed by all the health insurance schemes for opioids substitution drugs dispensed in the community. However, this source is incomplete as of 2018. The reimbursement amounts valued in section T1.4.2 are therefore underestimated (Ndiaye 2023). Following the change in the method of remuneration for pharmacists, the amounts reimbursed for opioid substitution drugs that can be extracted from the health insurance database do not include dispensing fees paid to pharmacists. They include a packaging fee (per box), and a prescription fee for prescriptions containing at least 5 medicines. In 2017, they amounted to nearly 24.5 million euros per year (latest known data).