Written Contribution to the Expert Panel established pursuant to CND Resolution 68/6

Europe for Action on Drugs (EURAD)
Brussels, the 29 of October 2026

A. EURAD's expertise and experience relevant to the Expert Panel's mandate
Europe for Action on Drugs (EURAD) is a European, non-profit network bringing together civil-society organizations that promote drug prevention, treatment, recovery and drug policy in national, EU and United Nations policy forums.

EURAD's vision is a society free from non-medical use of drugs. Its mission is to reduce the burden of non-medical drugs on individuals, families and societies, through policies that prevent drug use and provide early intervention, treatment and recovery support. EURAD's expertise encompasses drug prevention, demand and supply reduction, treatment, recovery and social reintegration, as well as the implementation of international drug control policies.

EURAD has a longstanding record of engagement with the United Nations drug-policy process. We have organized, or co-organized, a number of events at the annual meetings of the Commission on Narcotic Drugs, on topics such as cannabis and its effects on young people, alternative development, barriers to treatment and recovery for women, and stigma and barriers to recovery and social reintegration. These activities demonstrate EURAD's engagement with prevention, treatment, access and recovery support for service providers and affected individuals.

EURAD has also contributed to international discussions on drug regulation. EURAD represented Western Europe in the global Civil Society Task Force leading up to the 2016 UNGASS and again in preparation for the 2019 CND Ministerial Segment. In 2022, we took part in an International Narcotics Control Board consultation on the monitoring and reporting of narcotics for medical and scientific purposes. Its contribution addressed evidence requirements for cannabinoid medicines, independent research, potential conflicts of interest and regulatory oversight.

B. Challenges, barriers and opportunities in implementing the international drug control conventions and international drug policy commitments
EURAD considers the central challenge facing international drug policy to be implementation. In particular, the international community has commitments to protect health and welfare, prevent drug-related harms, ensure access to treatment, and address the illicit production and supply of controlled substances. Yet the implementation of these commitments remains uneven, and significant gaps persist.

- **Prevention remains underprioritized:** Prevention should be the first and most important intervention in drug policy. However, both investment and political attention are often concentrated on addressing problems after they have emerged. Effective prevention requires sustained investment in evidence-based interventions, particularly for children, young people and other groups exposed to greater risk. It also requires attention to wider protective factors, including supportive families and schools, social inclusion, meaningful leisure opportunities, and opportunities for education and employment. A major opportunity for the international control system is therefore to strengthen prevention as a core component of implementation rather than treating it as an ancillary activity.

- **The global treatment gap:** People experiencing drug use disorders must have access to evidence-based treatment and recovery support. This remains a major implementation gap. UNODC's *World Drug Report 2025* identifies science-based treatment as an essential component of an effective response to drug use disorders, while also highlighting the substantial unmet need for treatment globally. The Expert Panel should therefore consider how international commitments can be translated into greater treatment coverage, continuity of care, and long-term recovery support.
- **The need to balance harm reduction with prevention and recovery:** Evidence-based harm reduction is an essential part of a comprehensive public health response. Measures that prevent overdose deaths, infectious diseases, and other serious consequences can save lives and provide important contact with health services. At the same time, harm reduction should not become a substitute for prevention, treatment, and recovery. International implementation should support countries in providing a full continuum of responses rather than presenting these approaches as alternatives.
- **Preventing normalization and commercialization:** Preventing the normalization and commercialization of non-medical drugs is an important public-health objective. The international drug control conventions provide governments with tools to limit the availability of controlled substances for non-medical purposes. The emergence of commercial markets in controlled drugs is likely to lead to increased consumption in the population, which again leads to increased harms. Commercial actors have an inherent economic interest in increasing consumption. The experience of alcohol and tobacco demonstrates the tension between commercial incentives to expand consumption and public health objectives to reduce it.

C. Examples of policies, practices and approaches considered effective

EURAD considers the following approaches particularly relevant to the Panel's assessment:

- **Evidence-based prevention:** Prevention is most effective when it is based on established evidence, rather than on deterrence messaging. Prevention should begin early, strengthen protective factors, and be sustained over time. UNODC's recent evidence supports early prevention as a key component of an effective response and identifies evidence-based interventions as capable of reducing initiation and progression towards harmful patterns of use. EURAD considers continued investment in evidence-based prevention to be an effective implementation of the international commitment to prevent drug use and associated harms.
- **Evidence-based treatment and recovery:** Voluntary, person-centered, and evidence-based treatment is an essential component of effective drug policy. Treatment should address not only drug use, but also the health, psychological, and social circumstances that contribute to or result from problematic use. Recovery-oriented approaches should extend beyond the period of formal treatment. Housing, education, employment, mental health support, and social connections can be decisive for sustained recovery. The low global coverage of treatment for drug use disorders demonstrates that this area requires substantially greater implementation.
- **Harm reduction:** Evidence-based harm reduction measures such as overdose prevention, naloxone provision and measures to prevent infectious diseases are effective in reducing preventable deaths and other serious health consequences. EURAD supports these interventions as part of a comprehensive drug policy. However, they should be part of a continuum of care, alongside prevention, treatment, and recovery rather than replacing them.

Examples of policies, practices and approaches which EURAD considers ineffective:

- **Legalization and commercialization:** The creation of commercial markets for non-medical drugs should be avoided. Evidence from jurisdictions that have legalized cannabis provides important lessons. EURAD has for example documented increases in cannabis use following legalization in several U.S. states and in Canada. These experiences do not demonstrate that legalization alone causes every observed change, nor can they automatically be generalized to

all jurisdictions. However, they do demonstrate that legalization cannot be presented as a policy that will reduce drug use or drug-related harm.

In jurisdictions that have legalized cannabis, the effects of legalization should be assessed systematically, including its impact on prevalence and frequency of use, age of initiation, problematic use, treatment demand, health outcomes, inequalities, and the development of commercial markets.

EURAD supports proportionate and health-oriented responses to people who use drugs. People experiencing dependence should be offered help rather than being defined primarily by punitive responses.

D. Practical, evidence-informed and actionable recommendations

EURAD recommends that the Expert Panel considers the following actions when developing recommendations for strengthening implementation of the international drug control conventions and related commitments:

1. **Make prevention a core pillar of implementation:** Encourage Member States to increase sustained investment in evidence-based prevention, with particular attention to children, young people and others identified as risk groups.

2. **Establish prevention as a measurable policy objective:** Encourage governments to evaluate prevention policies against outcomes such as age of initiation, prevalence of use, progression to harmful use and other relevant health and social indicators.

3. **Close the global treatment gap:** Strengthen international commitments to accessible, voluntary and evidence-based treatment for drug use disorders, and ensure adequate resources for treatment and long-term recovery support.

4. **Support evidence-based harm reduction:** Promote measures that prevent overdose deaths, infectious diseases and other serious health consequences and ensure that harm-reduction services are connected to treatment and recovery pathways.

5. **Maintain the capacity to control availability:** Recognize the role of supply controls in limiting the availability of controlled drugs and in preventing the normalization and commercialization of drug use.

6. **Protect drug policy from commercial interests:** Ensure that the development and implementation of drug policy remain guided by public-health objectives and independent evidence rather than by commercial incentives to increase consumption.

7. **Strengthen evidence and international knowledge exchange:** Support independent research, systematic evaluation and sharing of effective practices between Member States, while ensuring that policy decisions are based on the best available evidence rather than ideological assumptions.

The international drug control system should remain capable of adapting to new evidence and emerging challenges. EURAD considers that its implementation should be judged primarily

by its contribution to preventing drug-related problems, reducing harm, supporting recovery, and protecting the health and welfare of individuals and societies.