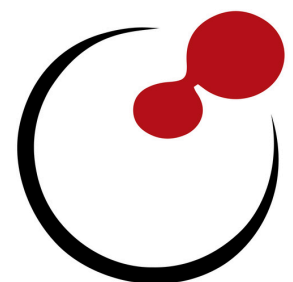


2026 - 2029

INTERFEDERAL STRATEGY
FOR A COMPREHENSIVE
AND INTEGRATED DRUGS
POLICY

GENERAL DRUG POLICY CELL

March 2026



FOREWORD

The “Interfederal Strategy for a Global and Integrated Drugs Policy 2026–2029” is the result of an intensive work process. This document is far more than a technical plan. It reflects our shared vision of a healthy, safe and resilient society. It forms the foundation of our approach to the drugs phenomenon, which is constantly evolving and continues to present new challenges.

The roots of our approach lie in the late 1990s. During that period, we made a fundamental choice: not a one-sided approach, but a balanced approach combining prevention, care, harm reduction and enforcement. We deliberately chose not to focus solely on the “substance”, but also on the person and their environment. This integral vision remains our guiding principle to this day.

In this process, the General Drugs Policy Cell (GDPC) plays an indispensable role in ensuring alignment and maintaining our common direction. As an interfederal coordination body, the GDPC serves as the glue between the various policy sectors and as a bridge between the different levels of competence. Through this horizontal and vertical coordination, we prevent fragmentation of drugs policy and achieve an integral and integrated approach capable of responding to the complexity of the drugs phenomenon.

In recent years, we have taken important steps to further strengthen this foundation. One of our key achievements is the structural embedding of an evidence-informed approach. With the establishment of the advisory panel, we have created a unique forum. For the first time, researchers, practitioners and people with lived experience are structurally represented at the same table. Bringing these diverse perspectives together is essential: figures and statistics tell us a great deal, but the reality on the streets and in practice tells the full story.

We are profoundly grateful to everyone who contributed to the development of this strategy. In particular, we extend our sincere thanks to the members of the General Drugs Policy Cell for their tireless commitment and to the members of the advisory panel for their valuable insights.

In the years ahead, we will continue to carry these principles forward together. We have no illusions: the challenges within the drugs field are significant. None of these challenges can be addressed solely through care or solely through enforcement. That is precisely why a balanced and integrated approach is not a choice, but a necessity. We are firmly convinced that by upholding our integral and integrated vision, and by continuing to learn from one another, we can make a meaningful difference for a healthier, safer and more resilient society.

The following ministers endorse the Interfederal Drug Strategy:

- M. Bart De Wever, Prime Minister
- Mr. David Clarinval, Deputy Prime Minister and Minister of Employment, Economy and Agriculture
- Mr. Maxime Prévot, Deputy Prime Minister and Minister of Foreign Affairs, European Affairs and Development Cooperation
- Mr. Frank Vandenbroucke, Deputy Prime Minister and Minister of Social Affairs and Public Health, responsible for Poverty Reduction
- Mr. Vincent Van Peteghem, Deputy Prime Minister and Minister of the Budget, responsible for Administrative Simplification
- Mr. Jan Jambon, Deputy Prime Minister and Minister of Finance and Pensions, responsible for the National Lottery and the Federal Cultural Institutions
- Mr. Jean-Luc Crucke, Minister of Mobility, Climate and Ecological Transition
- Ms. Annelies Verlinden, Minister of Justice, responsible for the North Sea
- Mr. Bernard Quintin, Minister of Security and Home Affairs, responsible for Beliris
- Mr. Rob Beenders, Minister of Consumer Protection, Social Fraud Prevention, Persons with Disabilities and Equal Opportunities
- Mr. Matthias Diependaele, Minister-President of the Flemish Government and Flemish Minister of Economy, Innovation and Industry, Foreign Affairs, Digitalisation and Facilities Management
- Ms. Hilde Crevits, Deputy Minister-President of the Flemish Government and Flemish Minister of Home Affairs, Urban and Rural Policy, Community Life, Integration and Civic Integration, Public Governance, Social Economy and Sea Fisheries
- Ms. Melissa Depraetere, Deputy Minister-President of the Flemish Government and Flemish Minister of Housing, Energy and Climate, Tourism and Youth
- Mr. Ben Weyts, Deputy Minister-President of the Flemish Government and Flemish Minister of Budget and Finance, the Flemish Periphery, Immovable Heritage and Animal Welfare
- Ms. Zuhail Demir, Flemish Minister of Education, Justice and Work
- Ms. Annick De Ridder, Flemish Minister of Mobility, Public Works, Ports and Sport
- Ms. Caroline Gennez, Flemish Minister of Welfare and Poverty Reduction, Culture and Equal Opportunities
- Mr. Adrien Dolimont, Minister-President of the Walloon Government
- Mr. Yves Coppieters, Walloon Minister of Public Health, Environment, Solidarity and Social Economy
- Mr. François Desquesnes, Deputy Minister-President of the Walloon Government and Minister of Road Safety
- Ms. Valérie Lescrenier, Vice-President and Minister of Childhood, Youth, Youth Welfare and Houses of Justice

- Mr. Boris Dilliès, Minister-President of the Brussels-Capital Government, responsible for Scientific Research, Tourism, Foreign Relations, Foreign Trade and Bicultural Affairs of Regional Interest
- Mr. Ahmed Laaouej, Minister of the Brussels-Capital Government, responsible for Social Action and Solidarity, competent for Local Authorities, Equal Opportunities and School Support of the Brussels-Capital Region; Member of the United College of the Joint Community Commission (GGC), responsible for Health and Welfare
- Mr. Dirk De Smedt, Minister of the Brussels-Capital Government, responsible for Finance, Budget, Public Service, Administrative Simplification and Digitalisation of the Brussels-Capital Region; Member of the United College of the Joint Community Commission (GGC), responsible for Health and Welfare
- Ms. Karine Lalieux, State Secretary of the Brussels-Capital Government, responsible for Housing, the Taxi Sector and Sports Infrastructure; Member of the College of the French Community Commission (COCOF), responsible for Health Promotion, Family, Budget and Public Service
- Ms. Lydia Klinkenberg, Minister of Family Affairs, Social Affairs, Housing and Health of the German-speaking Community

All information about the General Drug Policy Cell and the Thematic Meeting on Drugs is available at www.drugpolicy.be.

2 March 2026

Prof. Dr. Charlotte Colman, Interfederal Drug Coordinator
Dr. Pablo Nicaise, Deputy Interfederal Drug Coordinator

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I. INTRODUCTION

There is an urgent need for a coordinated and aligned intergovernmental drugs and addiction policy in Belgium.

Looking at recent drug trends in Belgium, it is clear that the drugs market is more diverse than ever. The types of psychoactive substances that are legally and illegally available in our society are numerous and diverse. The market for illegal drugs is a dynamic market that quickly adapts to the way in which psychoactive substances are supplied and distributed or to the introduction of new substances. If we look at the supply side as it exists in Belgium, we can observe not only local production (of cannabis, synthetic drugs and illegal tobacco products), but also imports, transit and exports taking place via our extensive logistics and digital infrastructure in Belgium. This often involves related secondary crime phenomena, such as drug-related violence, corruption, arms trafficking and money laundering.

With regard to the use of drugs and addictive behaviour, it is important to emphasise that the majority of the Belgian population does not use illegal drugs. We can also observe a number of positive developments, such as a decrease in the day-to-day consumption of alcohol and a decrease in the number of daily smokers (of conventional cigarettes). As far as illegal substances are concerned, this downward trend has not manifested itself as yet, except with regard to the use of cannabis between the ages of 15 and 18.

In the analysis of trends, it is also apparent that our understanding of the drugs phenomenon is continuing to evolve: whereas in the past, attention was primarily directed at the products themselves, there is now an increased focus on the problem of addiction in the broad sense, with an emphasis on recovery and referring people who use drugs to appropriate care. That is the reason why drugs policy has been expanded to include other forms of addiction, such as gambling and gaming addiction.

To respond to the changes within the drugs phenomenon on both the supply and demand sides, an integrated and comprehensive approach is crucial¹:

- The drugs phenomenon is a multidimensional one that concerns aspects of physical and mental health, as well as economic (and socio-economic), safety, environmental and international aspects. A drugs policy therefore aims to set objectives that will help to address, i.e. reduce, both the demand and supply side, while devoting attention to the triangle Person, Substance, Environment. Four pillars² play a key role in this regard: 1) prevention; 2) treatment, care, risk reduction and (re-)integration; 3) repression, and 4) monitoring, evaluation and scientific research.
- An integrated approach requires the cooperation, coordination and collaboration of all relevant actors and services representing the various sectors. This will involve both horizontal coordination between sectors and vertical coordination between all levels of competence at the federal level, the level of communities and regions, and the local level.
- Prevention is better than cure. An effective drugs policy seeks to curb and prevent the phenomenon of legal and illegal drugs.
- Repression forms part of the drugs strategy with regard to the importation, production, transportation and possession of illegal drugs in quantities exceeding the concept of 'possession for personal use'. However, in order to be effective as far as persons struggling with addiction are concerned, a differentiated criminal justice policy must focus on measures that emphasise care and support.

The intergovernmental drugs policy took shape in the late 1990s³ and was translated into the *Federal Drugs Note* of 2001 and subsequently confirmed in the *Communal Declaration* of 2010. Moreover, the *Cooperation Agreement for a Comprehensive and Integrated Drugs Policy* (2002) was signed in 2002. The cooperation agreement led to the creation of the intergovernmental cooperation structures in 2008, specifically the *Thematic Meeting on Drugs of the Interministerial Conference* (IMC) on Public Health⁴ and the General Drugs Policy Cell⁵. These bodies are responsible for coordinating that comprehensive and integrated policy at intergovernmental level.

In response to the increase in drug-related violence, the National Drugs Office was additionally established⁶ (Act of 7 April 2023) and was assigned a coordinating role in relation to drug-related crime.

The new Intergovernmental strategy for a Comprehensive and Integrated Drugs Policy 2024 – 2025 was approved in December 2023. The adoption of this strategic framework marked the beginning of a new approach – the establishment of a common vision and of strategic goals and priorities for a demarcated period of time.

The Intergovernmental Drugs Strategy for the period 2026-2029 builds on this: the vision, strategic objectives and priorities were amended to reflect recent trends and the results of an exercise on the future of the drugs phenomenon. The strategy will also be translated into associated action plans and a defined monitoring and evaluation strategy (expected by December 2026).

With respect to existing intergovernmental plans or plans developed within the sole competency of a minister at federal and regional levels, this strategy will function as an overarching, cross-cutting strategy that respects the division of authority. With regard to the intergovernmental strategies concerning the “harmful use of alcohol” and a “smoke-free generation” for the period 2023-2028, these plans and their specific actions, in accordance with the coalition agreement of the federal government in so far as federal competences are concerned, are continually being implemented, evaluated and adjusted where necessary. Consequently, the vision and specific objectives established in this "Intergovernmental Strategy for a Comprehensive and Integrated Drugs Policy 2026-2029" do not modify in any way the objectives and actions for alcohol and tobacco delineated previously, with the exception of the measures included in the federal coalition agreement.

II. SCOPE

This policy document reflects the overarching vision of both the Federal State, the Communities, the Common Community Commission, the French Community Commission and the Regions with regard to the drugs phenomenon. The reality of the Belgian institutional context is taken into account in this regard, due to the fact that, in accordance with the State reform, the competences for the various components of drug policy are distributed amongst various Federal, Community and Regional ministers.

The strategy encompasses **all aspects of the effort to tackle the drugs phenomenon**, from preventing and limiting the risks and harms associated with drug use and potentially addictive forms of behaviour to the range of assistance and treatment services available and the suppression of drug-related crime and disruption.

Within the scope of this Interfederal Drugs Strategy 2026 – 2029, **products or behaviours** are included **that have been proven addictive or potentially addictive and may have a harmful effect if used incorrectly or once exposure exceeds a certain level**, specifically:

- Legal drugs (alcohol, tobacco and similar products including vapes)
- Illegal drugs, including New Psychoactive Substances
- Psychoactive medication
- Other substances with potentially addictive effects (e.g. doping products, nitrous oxide)
- Behaviours with potentially addictive effects, with particular emphasis on gambling (offline and online) and gaming

The Interfederal Drugs Strategy 2026-2029 targets all individuals using, possessing, trading in or producing these products and services without discrimination, pursuant to the articles on non-discrimination laid down in the international treaties ratified by Belgium⁷.

III. MISSION & VISION

By implementing this strategy, we are aiming **to protect and strengthen a society that is healthy, safe and prosperous for all**, by implementing a balanced, comprehensive and integrated, intersectoral and evidence-informed drugs policy focusing on reducing demand and driving down the supply.

In this regard, we are striving to:

- Prevent use (where relevant).
- Delay the age of first use.
- Reduce addiction, on the one hand, by detecting potentially risky or problematic use at an early stage and, on the other hand, by offering help in a timely manner (early intervention, treatment, prevention of relapse).
- Monitor the quality of care (and after-care), guidance and well-being and the personal recovery for the individuals concerned and their environment.
- Strengthen targeted and proportional enforcement with the aim of reducing the production, trafficking and distribution of illegal drugs, and dismantling the criminal networks hiding behind them.
- Develop a supported and fact-based view of the issues.
- Reduce the economic clout of criminal organisations that profit from drug trafficking and make our legal, logistical, economic and financial infrastructures resilient to undermining and instrumentalisation by criminal networks.
- Prevent participation in drug-related crime.
- Reduce the risks and harm to individuals, to children and young people growing up in an environment where drugs are present, to families, to communities and to the wider society.

We intend to achieve this by:

- coordinating policies from a comprehensive and integrated perspective;
- systematically collecting, analysing and sharing data, in collaboration with relevant partners, in order to provide a consistent and up-to-date understanding of the issues;
- dismantling the criminal business model of organised drug related crime (follow-the-money);
- strengthening enforcement by means of an integrated and targeted approach ranging from local to international dimensions of the drug problem;
- working to ensure health promotion and healthy lifestyles overall, and focusing on a preventative health policy consisting of four strands (education, interventions in the environment, agreements and rules, and care and guidance) in a variety of settings;
- working to ensure early detection and focusing on early intervention by front-line actors from the prevention, health and welfare sectors so that individuals involved in high-risk or problematic substance use or displaying (problematic) gambling behaviour are identified as soon as possible and are encouraged and supported to change their behaviour.
- focusing on providing an inclusive, non-stigmatising care policy and on pursuing policies that reduce harm and focus upon personal recovery, whilst recognising that there will always be groups who use addictive substances (recreationally or problematically);
- respecting human rights and human dignity and pursuing a rationale of proportional universalism, taking into account the specific needs of identified vulnerable groups⁸ and with a particular focus on social inequality and gender inequality;
- focusing on providing a tailored preventive and judicial response to deal with (organised) drug-related crime by prioritising a target group-oriented policy that includes proportionate measures;

- strengthening cooperation between public and private partners, monitoring at-risk sectors and integrating resilience measures into economic, logistical and financial processes, especially logistics hubs.
- providing sufficient scope for the development and testing of innovative measures.

The strategy focuses on the current challenges posed by the drugs phenomenon in Belgium, but also casts an eye towards future developments. This is supported by observations based on data analysis, scientific findings and information derived from practical experience.

IV. STRATEGIC OBJECTIVES

SO. 1 To promote and protect health and well-being

The 'prevention' pillar focuses on encouraging healthy behaviour and a healthy environment, on reducing risk factors and on enhancing protective factors.

Its aim is to discourage and prevent the use of addictive substances, to delay the first use for as long as possible and to reduce the risks and harms caused by the use of addictive substances.

This strategy seeks to play its part in ensuring that substances are used responsibly. That means either not using them at all, or, if substances are nevertheless used, ensuring that appropriate measures are taken to minimise their harmful effects to the greatest possible extent. These measures will vary, depending on the drug, the context and the individual. The goal is to prevent or minimise harm to the person, his/her surroundings and society as a whole.

Taking health determinants such as socio-economic factors, the physical environment and individual characteristics and behaviours of individuals into account is crucial in that regard.

The vision underlying a comprehensive approach needs to be focused on four areas:

- education (tailored to individuals and professionals)
- interventions in the environment
- agreements and rules
- care and support

For an effective approach, it is necessary:

- to address different forms of use, namely both occasional and risky use, chronic use and long-term excessive use;
- to focus on differentiated strategies, depending on the objective and target group;
- for special attention to be directed at vulnerable groups identified (e.g. young people, young parents and parents with substance use problems, the children of parents with a substance use problem, ethno-cultural minorities, inmates, persons from a migration background, persons included within the various categories of homelessness);
- for sufficient effort to be devoted to measures combating stigma and exclusion;
- for broadly focused effort to be devoted to physical and mental well-being;
- for attention to be paid to the role of experts by experience and peer support.
- to take account of the results and recommendations of scientific research, amongst other elements.

Specific objectives:

- 1.1 To reduce access to and the availability of addictive substances. There needs to be a specific focus on strengthening controls and if it is found that the regulations are being misunderstood or are ineffective, the legislation will need to be clarified or amended with a view to raising the barriers to these substances. However, access to controlled substances for proper use (such as for medical, technical and scientific purposes, for example) is guaranteed.
- 1.2 To strengthen, implement and further develop evidence-informed, universal, selective and recommended prevention measures and strategies that are appropriate to the phenomenon, the target group and the environment. We strive to improve health across the entire population by adopting the health (and mental health) in all policies principle at all policy levels.

- 1.3 To ensure the dissemination of clear, evidence-based scientific information about the risks of addictive substances and behaviours amongst the general public.
- 1.4 To combat the spread of disinformation and information trivialising the consumption of addictive substances, including in the media and in audiovisual productions from public services.
- 1.5 To strengthen risk-reduction and harm reduction measures aimed at reducing the prevalence and incidence of drug-related infectious diseases, fatal and non-fatal overdoses and other negative consequences for the individual, the immediate environment and society in general, including addressing the issue of stigmatisation and social exclusion of individuals who use drugs.
- 1.6 To boost knowledge, education and the fostering of expertise amongst professionals who come into contact with persons with (or at risk of co-morbid) drug and addiction problems so that impartial information can be shared, problems can be detected early, support can be provided and the person referred onwards if needed. To devote particular attention to personnel in specific settings, such as prison staff, teaching staff, staff in reception centres, front-line psychologists, mobile teams and outreach care providers, family doctors, occupational and sports physicians and police forces.
- 1.7 To strengthen and develop prevention measures and strategies to combat driving under the influence.

SO. 2 To organise integrated, multidisciplinary and care and assistance with a focus on recovery

The purpose of this pillar is to organise the necessary range of assistance offered to people who need care, treatment or support on account of a (co-morbid) addiction problem and to reduce gaps in the provision of treatment.

In both the short and long term, addiction can lead to avoidable social and health-related risks for both the individual and those around them.

To reduce the risks associated with addiction, priority should be given to an integrated and multidisciplinary approach (if appropriate), based on a model that promotes recovery. This means an approach that allows the person and those around them to live a dignified and independent life in their own environment, and to be meaningfully involved in social and/or educational/professional contexts, despite the difficulties that accompany addiction.

Particular attention needs to be paid to identified vulnerable groups or groups with more specific care needs, such as children and young people, the elderly, people with mental health and/or intellectual disabilities, LGBTQIA+ people, people with poly-drug use, parents who use drugs, people with disabilities, ethno-cultural minorities, refugees, sex workers, people who are homeless, parties subject to judicial sentences and persons in contact with the judiciary on account of drug use or behavioural addiction.

Continued attention also needs to be devoted to the role of experts by experience, the family and the immediate environment in the care and recovery process of an individual with addiction problems.

Specific objectives:

- 2.1 To improve access to care and assistance for any person needing support. This includes the provision of a high-quality, multidisciplinary (where necessary) and diverse offering with a focus on ease of access, outreach and risk mitigation, that adequately takes into account the specific needs of the person in question and their context. There also needs to be a sufficient focus on an aftercare pathway that aims for recovery and integration as much as possible.
- 2.2 To further strengthen and/or optimise the care and assistance offering for identified vulnerable groups and groups with complex or specific care needs.
- 2.3 To promote continuity of care by strengthening coordination mechanisms and information-sharing mechanisms.
- 2.4 To further support the family and immediate environment of a person in need of help.
- 2.5 To continue to develop and provide access to support and alternative sentencing options at all levels of the criminal justice system for persons who come into contact with the police and the judiciary in connection with drug use or behavioural addiction. Without prejudice to existing provisions under criminal law, work will be carried out in conjunction with the Board of Procurators General to direct people who use drugs towards assistance when their case is being handled by the prosecutor's office, even before they are prosecuted (within defined cooperation frameworks). Whenever individuals from this group of people end up in detention, adequate efforts also need to be made to strengthen the correctional care and assistance provided, both during and after a period of detention.

SO. 3 To pursue strengthened repressive policies aimed at addressing risks and harms resulting from markets in illegal drugs

This pillar focuses on tackling the markets for illegal drugs. The focus here is on four factors: ensuring resilience, disruption, punishment and protection (including aftercare).

At federal level, an immediate and differentiated sanctions policy will be implemented that will enable swift action to be taken to combat drug trafficking. The system that enables an immediate amicable settlement for users and ensures harsher penalties for repeat users, is being strengthened.

In the case of individuals involved in drug-related crime purely for the pursuit of profit, appropriate and proportionate enforcement policies are crucial. The motive of this group of people is to generate wealth by means of criminal activity. That criminal wealth is then injected into the legal and illegal economy in a wide variety of ways, undermining prosperity and the rule of law. Special attention is therefore being given to disrupting the revenue model underlying the creation and maintenance of the illegal market.

We also need to focus on raising awareness amongst and protecting actors (such as the police, magistrates, mayors, port workers and journalists) who, owing to their profession, are at risk of threats and corruption. When doing so, it is appropriate to focus both on preventing inflow through targeted preventative measures and on developing substantiated pathways that support outflow.

Finally, there is a need for a more intensive approach in the case of young people who are (at risk of becoming) involved in the criminal drug scene. A layered approach is appropriate here: first, by proactively informing them from an early age and warning them unequivocally of the risks and illusions of fast money-making within criminal drug environments; secondly, by detecting young people at risk of temptation in a timely manner, confronting them and actively guiding them towards other choices; and finally, by dealing with young people who have allowed themselves to get carried away, making them accountable for the consequences of their actions, and –where possible – guiding them towards a lawful and sustainable future.

The National Drug Office (CNDC) is tasked with addressing international and national drug production and trafficking in all its facets and is a key contributor to the continued implementation of this strategic objective. Within this framework and in addition to the other missions assigned to the CNDC, it is responsible for developing an action plan for the matters within its remit by the end of June 2026.

Specific objectives:

- 3.1 To intensify the efforts to tackle the cultivation and production of illegal drugs, including the substances, precursors and pre-precursors, hardware, glassware and other materials, platforms and sites used to facilitate these activities. This involves facilitating a comprehensive and integrated approach consisting not only of a criminal justice focus, but also of an administrative and financial approach and more intensive public-private partnerships.
- 3.2 To intensify efforts to address the trafficking of illegal drugs, with a focus on on-site and online platforms and points of importation, transit and export. This involves facilitating a comprehensive and integrated approach consisting not only of a criminal justice focus, but also of an administrative and financial approach and more intensive public-private partnerships.
- 3.3 To strengthen the conceptualisation and approach used in order to combat the environmental impact of drug cultivation, drug production and trafficking.

- 3.4 To promote a reinforced local effort to address drug cultivation, production and trafficking in a way that involves all relevant actors and focuses on information sharing and coordination within and between local, regional and federal actors. Particular attention is being paid to clarifying roles and tasks and to clearing and simplifying procedures relating to the dismantling of facilities, the removal and destruction of materials, drugs and waste, especially toxic waste, and the tracking, requisitioning and verification of private operators. In this case, due attention is also being paid to the aspect of aftercare.
- 3.5 To prevent, disrupt and tackle forms of drug-related crime, such as violence and the laundering of criminal proceeds. This includes an enhanced focus on preventing drug-related crime by addressing underlying factors, including the economic, logistical and financial processes that are abused by criminal networks. There is also a focus on young people who, through ignorance of the true risks and consequences, including the apparent attractiveness of making money fast, may be susceptible to recruitment by criminal circles. Furthermore, the rule of law must be safeguarded, including individuals who are at risk of threats on account of their profession.
- 3.6 To focus on disseminating accurate and targeted information and scientifically based communication to citizens. In doing so, we want to focus on targeted awareness-raising amongst citizens so that they can contribute towards preventing and addressing the cultivation, production and trafficking of illegal drugs. In this case, specific groups come into mind, such as property owners, DIY stores and farmers. We are also combating the spreading of disinformation and of information that portrays drug production and trafficking in a positive light.

- 3.7 To (continue to) develop and implement integrity and anti-corruption policies within integrity and corruption-sensitive domains and sectors linked to (tackling) the cultivation, production and trafficking of drugs. This includes raising the awareness of actors in these domains and sectors with regard to the integrity risks.
- 3.8 To intensify cooperation with the police, customs and the judiciary in neighbouring countries, source countries and sales markets, including countries known to be destinations for the laundering of the proceeds from drug-related criminality, so that such collaboration becomes firmly established as a means of combating cross-border drug crime more efficiently, data are shared as much as possible and requests for mutual legal assistance, etc. are adequately followed up and executed.
- 3.9 To strengthen the security of all our gateways and logistical hubs (seaports, inland ports, airports and railway stations) by working with public and private partners to develop and implement integrated security plans for each node, with a particular focus on prevention, detection and response to infiltration and abuse.
- 3.10 To reduce the supply of illegal drugs in prisons by preventing and tackling the channels and modus operandi that facilitate the supply of drugs in prisons.

SO. 4 To address the risks and damage related to legal markets

This pillar focuses on addressing illegal supply within legal markets, in particular with regard to alcohol, tobacco and similar products, psychoactive medication and gambling.

For the well-being and health of the public, the production and supply of alcohol, tobacco and similar products, psychoactive medication and gambling are strictly regulated and controlled. As far as psychoactive medication is concerned, this is a matter of combating counterfeiting or falsification and of addressing products being diverted from legal distribution channels.

Specific objectives:

- 4.1 To reduce access to and the availability of alcohol, tobacco and similar products, psychoactive medication and gambling on the illegal market. This involves strengthening controls and – where necessary and within the agreements of the coalition agreements in force – clarifying and amending legislation.
- 4.2 To tackle the illegal production and trafficking in alcohol, tobacco and similar products and psychoactive medication, and the provision of illegal (unlicensed) gambling.
- 4.3 To prevent, disrupt and combat forms of criminality, such as violence and money laundering, committed by criminal gangs operating within the legal drugs market and the unlicensed gambling market. This could include enhanced focus on preventing this type of criminality by addressing underlying factors.

SO. 5 To provide a high-quality monitoring strategy for the implementation of a comprehensive and integrated drugs policy

A scientifically based understanding of substance use and behavioural addictions (including the influencing factors and the needs of those involved) is a prerequisite for evidence-informed policy-making.

This means that the policy must be based on reliable data gathering, analysis and reporting. This includes both continuous and periodic data gathering and ad hoc scientific research using both qualitative and quantitative methods, in which data from various departments and operators are cross-matched.

To gain an effective understanding of the comprehensive and integrated approach as a whole, all aspects of drugs policy need to be monitored, not only data relating to health and well-being and the demand side of the drugs phenomenon, but also data concerning gambling and gaming and the legal and illegal markets and their supply sides.

Specific objectives:

5.1 To strengthen scientifically based information collection and analysis in order to ensure the availability of factual, objective, reliable and comparable information about all aspects of the drugs phenomenon and of behavioural addictions. Particular attention must be given to strengthening real-time monitoring systems and strengthening integrated and digital recording systems, where possible in coordination with partners in the field. In order to anticipate and respond more effectively to new drugs-related phenomena, efforts should be made to establish a robust and efficient system that enables rapid information sharing across domains and the rapid assessment of the impact or risk, including an aligned communication strategy.

- 5.2 To strengthen the development, optimisation and implementation of quantitative and qualitative indicators as a means of monitoring and evaluating the policy measures and initiatives implemented in the field, in relation to all aspects of the drugs phenomenon, in consultation with persons with practical expertise and experts by experience. This can include trend projections, health impact assessment studies and foresight studies.
- 5.3 To strengthen the dissemination and use of monitoring and research results for the purpose of better informing policy makers and professionals involved in the drugs phenomenon and the field of behavioural addictions, amongst others.
- 5.4 To create sufficient scope to develop innovative scientific research into the drugs phenomenon and behavioural addictions and to ensure the ongoing implementation of the outcomes.

SO. 6 To further strengthen national and international coordination and alignment, to ensure a comprehensive and integrated drugs policy

Coordination and alignment are crucial to the development and implementation of a comprehensive and integrated drug policy.

The drugs phenomenon is multidimensional and therefore requires measures in a variety of areas, namely health, the economic (and socio-economic) domain, security and international relations. All relevant actors and services, both horizontally (the different policy sectors) and vertically (federal, regional, provincial and local), involved in the drugs phenomenon and addiction care therefore need to be brought into contact with each other for the purpose of sharing information and coordinating policy.

In 2002, the Thematic Meeting on Drugs (TMD) and the General Drugs Policy Cell (GDPC) were set up in order to translate this comprehensive and integrated approach into policy and practice.

An additional point to consider is the fact that the drugs phenomenon does not stop at national borders. Trends and developments in Belgium are inextricably linked to the trends and developments on an international level and in neighbouring countries, source countries, transit countries and foreign markets. In order to pursue Belgium's approach towards the drugs and addiction situation, international cooperation on a multilateral, regional and bilateral level is essential.

Specific objectives:

- 6.1 To optimise the existing coordination mechanisms with a view to both facilitate synergies, coherence and consistency in policy across products and/or addictions, and to facilitate stronger substantive linking of safety and enforcement policies with health and well-being policies. Effective information sharing and coordination between the various coordination mechanisms (formal and informal consultation platforms and coordinating functions) at all levels of government are crucial in this regard. Particular attention is being paid to the role of the General Drugs Policy Cell and the Thematic Meeting on Drugs of the Interministerial Conference on Public Health and the National Drugs Office, with a focus on combating the illegal drugs market.
- 6.2 To ensure the efficient and sustainable implementation of the strategy, in collaboration and coordination with all relevant actors at the different levels of government (international, European, federal, community, regional, provincial and local), by translating the strategy into coordinated operational policy documents that provide clarity with regard to responsibilities, timing and budgets.
- 6.3 To promote information sharing and collaborations between all sectors and levels of competence involved in the drugs phenomenon and addiction problems, within the frameworks of (shared) professional secrecy, for policy alignment purposes.
- 6.4 To promote and, where possible, formalise collaborative partnerships between the police, the judiciary and customs with neighbouring countries, source countries, transit countries and foreign markets, including countries known to be destinations for the laundering of the proceeds from drug-related crime, as a means of tackling cross-border drug crime more effectively.

6.5 To focus on international coordination mechanisms, treaties and policies by actively contributing to international agenda setting and to the strengthening of – and, where necessary, the organisation of – coordination, cooperation and information-sharing on a multilateral, regional and bilateral level. This coordination needs to be organised both at governmental level and – where applicable – at the level of (national or international) private organisations.

ENDNOTES

¹ Recommendations from the Parliamentary Working Group on Drugs within the Chamber of Representatives (1996-1997), which form the basis of Belgium's drugs policy as we know it today.

² Federal drugs note, 2001, p.7

³ The recommendations of the Parliamentary Working Group on Drugs within the Chamber of Representatives (1996-1997)

⁴ This body monitors the comprehensive and integrated nature of the interfederal drug policy: it brings together all competent ministers (at all levels) and addresses all themes included within the identified pillars of Belgian drugs policy.

⁵ The General Drugs Policy Cell also prepares the decisions of the Thematic Meeting on Drugs. It is made up of the cabinets and administrations of all competent ministers and is presided over by an independent chair and deputy chair.

⁶ The remit of the National Drugs Office is the comprehensive and cross-cutting coordination of the approach towards drug-related crime, namely the illegal national and international production and trafficking of drugs in all its facets, its undermining impact and related violence.

⁷ Articles 2 and 7 of the Universal Declaration of Human Rights (1948), Articles 2 and 26 of the International Covenant on Civil and Political Rights (1966), Articles 2 and 3 of the International Covenant on Economic, Social and Cultural Rights (1966), Article 2 of the Convention on the Elimination of all Forms of Discrimination Against Women, (1979) and Article 2 of the United Nations Convention on the Right of the Child (1989), Article 14 of the European Convention of Human Rights concerning the prohibition of discrimination.

⁸ Vulnerable groups have yet to be defined and quantified.