Federal Association for Accepting Drug Support Services and Humane Drug Policy

Contribution of akzept for the Expert Group off the CND 2026

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Akzept is an interdisciplinary umbrella organisation established in 1990 to promote accepting drug support services and humane drug policy in Germany; it is organised nationwide and comprises around 60 drug, AIDS and addiction support services, self-help groups and other associations. Its key objectives are to promote non-judgemental drug work – that is, support services focused on harm reduction and assisting drug users, rather than on paternalism or the exclusive demand for abstinence; the decriminalisation and regulation of drug use; health promotion and prevention, particularly amongst at-risk groups; and research and support for self-help initiatives.

The term 'drug policy' generally refers only to 'illegal' substances and how they are dealt with, whilst alcohol policy is largely confined to inconsequential 'recommendations' from the World Health Organisation (WHO). Drug policy is by no means confined to the 'political sphere'; rather, it has a direct impact on the lives of people who use psychoactive substances and whose use is subject to state restrictions or even bans. This applies to so-called 'illegal' drugs, but also to alcohol. Drug policy also sets the framework for the structures and realities of care and treatment for people who use drugs or are dependent on them.

The legalisation of cannabis must be promoted worldwide, as in those countries where this has been implemented (such as Uruguay, Canada, a number of US states and Germany), consumption has not – as was predicted – increased. Nevertheless, effective preventative measures are necessary to avoid mental health and physical health problems.

Advances in support services have significantly improved the chances of survival for people with addiction, whilst at the same time posing a challenge for the support system. Society is changing: both nationally and internationally. What challenges need to be addressed in relation to changing patterns of use, routes of access to psychotropic substances and the major differences in addiction and drug policy? What positive and negative developments are evident in this regard?

Worldwide, there is a vast supply of psychoactive substances on the illicit markets, and demand for them remains high. International drug control conventions and relevant UN resolutions have done little to change this situation. The current focus on criminal prosecution of the manufacture and distribution of these substances is not working. It is therefore a major step forward that the United Nations Special Session on the World Drug Problem, held in New York in April 2016, adopted a resolution (UNODC 2016) which clearly prioritises public health policy, as well as calling for low-threshold access to treatment and respect for human rights. International standards for the treatment of drug dependence have been established by the WHO and the UNODC (WHO/UNODC 2020), and their implementation is a global task.

The abolition of the death penalty for drug-related offences must be enshrined in law, as this form of punishment is incompatible with the standards of the Universal Declaration of Human Rights. Health policy measures must take centre stage, alongside support for harm reduction initiatives, a strong commitment to human rights, and explicitly proportionate penalties. New challenges such as new psychoactive substances, particularly those traded online, as well as the resurgence in the distribution and consumption of cocaine and crack, must be tackled through public health measures – not through criminal prosecution – and through research into medication-assisted treatment.

We must call for an end to the 'war on drugs', because it is a war against people. The focus must be on prevention and treatment, not on law enforcement.

But what form should a reorientation of addiction and drugs policy take today? There are several key points to consider. An illegal drugs market offers no consumer protection. Damage to health and life-threatening risks are inevitable. There are therefore a number of necessary measures that need to be implemented: drug testing – that is, the early and up-to-date analysis of drug substances for dangerous compositions – can help to significantly reduce the risks associated with drug use. The implementation of such analytical methods must be carried out discreetly, anonymously and effectively to protect consumers; the provision of take-home naloxone to manage drug emergencies (overdoses) and reduce mortality among drug users should be made widely available – for people with high-risk opiate use; Medication-assisted treatment with diamorphine (synthetic heroin as a medicinal product) and other substances such as methadone and buprenorphine is effective; however, in many countries, it is nowhere near sufficiently available; Addiction support and prevention require a stable foundation and must be expanded, not cut back; risky alcohol and tobacco use must be reduced, as the potential for dependence on these widely used substances is high, and they cause enormous health and social harm.

A so-called 'war on drugs' is not the right way out of the illegal drug economy. However, the international drug control regime has not yet been called into question. International efforts to strengthen development-oriented approaches in drug policy are important, as alternative development tackles the root causes of the illegal cultivation of drug crops. However, this will not be effective without a change in the framework conditions. Furthermore, there has long

been a debate about the co-funding of measures to assist those affected by drug abuse and addiction by the alcohol and tobacco industries – which are partly responsible for the problem – for example through an earmarked levy from alcohol and tobacco duties or from funds recovered from money laundering.

Societies' approach to the use of psychoactive substances is complex; effective mechanisms are needed to manage wider societal trends in substance use and the treatment of addiction. The ideal of a drug-free society is of no help here, as people do not (always) act rationally – and therefore in the interests of their own mental and physical health.

Literature u.a.:

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