November 2024

Memorandum in the context of Lisbon Addictions 2024

TOWARDS MODERN ADDICTION POLICIES IN EUROPE

A. Introduction

Estimates suggest that **over a fifth of the population suffers from addictions**. Whether it be drugs, alcohol, cigarettes, sugar, gambling, social media, or something else. When combining various forms of substance use disorders and behavioral addictions, and accounting for overlapping cases, the total proportion could be even higher. From a medical perspective, all addictions are viewed the same: a natural phenomenon that targets sensors in the brain.

Addiction is interconnected with a range of other serious health conditions. Cardiovascular diseases (CVDs), Europe's number one killer, is often driven by addictive behaviour. Illicit drugs, alcohol, smoking, but also the stress caused by gambling and digital addictions contribute to developing cardiovascular issues such as hypertension and heart disease. CVDs cost the EU €282 billion every year and represent 12% of the total burden of disease.

Individuals struggling with **addictions often face mental health challenges** such as depression and anxiety. The World Health Organization (WHO) reports[1] that up to 50% of people with substance use disorders suffer from a co-occurring mental health disorder. This finding is consistent with the situation encountered at the EU Member State level. For instance, in the Czech Republic, studies have found that 47%[2] of substance abusers also suffer from mental health issues. Breaking down per substance also shows a strong correlation between the two. Data from the US Centers for Disease Control and Prevention (CDC) indicates that over 30%[3] of smokers have serious mental health problems. The state of research and experience at the national level therefore shows that the **health burden of addiction extends far beyond the addiction itself, impacting physical health, mental well-being, and social functioning**.

B. State of EU Policies on Addiction

The use of psychoactive substances fulfills legitimate psychological and social functions and needs for which EU citizens are often disproportionately punished. **In the EU, the regulation of addictive and harmful substances lacks coherence**. On the one hand, alcohol, which is a drug with high addictive, toxic, carcinogenic, and teratogenic potential, is widely available. Nevertheless, in Europe, it performs the

[1] World Health Organization (WHO). (2022). Mental Health and Substance Use.
[2] National Monitoring Centre for Drugs and Addiction (Czech Republic). (2022). Annual Report on Drug Use and Health in the Czech Republic.
[3] Centers for Disease Control and Prevention (CDC). (2022). Vital Signs: Smoking and Mental Health.

function of a social drug, its use is tolerated, and its availability is protected by strict regulation. On the other hand, users of other psychoactive substances and people who deal with them, including people suffering from addiction, i.e. sick people, are subject to strict punishment and enforcement policies.

The **EU has adopted an approach based on the minimization of risks from consuming illicit drug** addiction, as highlighted by the 'EU Drugs Strategy 2021-2025'[4], but **does not apply this same approach across all substances**. For instance, the debates revolving around tobacco are much more ideological. The EU still relies on a 'quit or die' approach, while stigmatizing smokers who are either unwilling or unable to quit smoking. While it is true that the EU supports prevention, notably by means of awareness programs, their only aim is abstinence or cessation. However, as we have previously mentioned, addiction is a co-occurring phenomenon to mental health issues, which affects primarily people in situations of vulnerability. Willpower and the awareness of the harm caused by drugs cannot by themselves prevent all at-risk groups from ever consuming. For those who are **more at risk of developing addictions, the public health goal should be to minimize the risks** associated with the consumption of substances.

Evidence demonstrates that **harm reduction approaches are both effective and cost-efficient**. On the other hand, prohibition creates an illegal market, strengthens the influence of criminal organized groups and undemocratic regimes in the illegal offering of prohibited products, promotes corruption, and money laundering. Promoting the idea of a drug-free world increases spending on law enforcement and security which ultimately threatens the EU's principles and values.

C. Member States' Best Practices

Harm reduction approaches often require international cooperation and the sharing of best practices between countries. Addiction policies across the EU are fragmented from one Member State to another. However, two countries stand out when it comes to applying harm reduction principles to a comprehensive and pragmatic national policy on the regulation of addictive substances: Sweden and the Czech Republic.

Sweden is the only country in Europe to have achieved a 5,3% smoking prevalence, as reported by the latest official data from last November[5]. Indeed, **Sweden has adopted a comprehensive approach to licit addictive substances, including tobacco**. Sweden's approach relies on a well-designed taxation of tobacco and nicotine products based on their relative harm. In particular, snus, a smokeless pouch containing tobacco, is widely available, and is rather cheap in comparison to cigarettes thanks to low taxes. This encourages nicotine consumers to choose an alternative product that is much less harmful than cigarettes (since it does not generate smoke nor tar), which explains the occurrence of cancers below the European average[6].

[4] EU Drugs Strategy, 2021-2025, Council of the European Union, General Secretariat, 2021

[5] Tobacco and nicotine use (self-reported) by country of birth, sex and year. Folkhälsomyndigheten, November 2024

[6] Country Cancer Profile 2023 – Sweden, European Commission, OECD, 2023

The **Czech Republic has been a pioneer in putting forward rational, comprehensive policies** on addictive substances. This innovative approach is successful, as highlighted by the 2024 Eurobarometer survey. The smoking prevalence in the Czech Republic has reportedly dropped by 7% in only 4 years, from 30% in 2020 to 23% in 2024. The progress coincides with a substantial increase in the use of new nicotine products, such as vapes, e-cigarettes, and nicotine pouches. **The Czech Republic is a real-life example of the benefits of applying policies on addictive substances that focus on minimizing their adverse health, economic, and social impacts**. Such national experiences may constitute blueprints for EU policymakers to design rational regulations of addictive substances based on already implemented best practices.

D. Policy Recommendation

We, as representatives of academia, and independent experts on addictions and public health, gathered together in the context of the Lisbon Addictions 2024 Conference, believe that a future rational addiction policy in the EU must be based on the following actions:

- **Harm Reduction Focus**: Prioritize harm minimization in addiction strategies at national and European levels, moving away from prohibition. Regulate based on harm, and inform users to make health-conscious decisions.
- **Scientific Regulation**: Base substance regulations on data and research, not ideology or public pressure. Assess risks using the latest data and compare them with regulated substances.
- **Improved Prevention**: Ensure better funding and availability for voluntary addiction early intervention. Strengthen prevention, particularly for children, adolescents and high-risk groups.
- **Research Investment**: Increase funding for addiction research and adapt policies based on scientific findings. Regularly review and adjust regulations as needed.
- **Global Drug Policy Reform**: Push for international reform of drug policies, focusing on harm reduction and science-based regulation instead of prohibition. Make the EU a champion of this approach on the international scene.

We call upon the EU institutions as well as relevant Member States' representatives to consider the above points in their activities and future decision-making related to addiction policies in Europe. We truly believe that policymakers should implement rational, modern, and comprehensive strategies on addictions, for the benefit of all Europeans.

This Memorandum was prepared as an outcome of the event "Modern Addiction Policies in Europe", organised on 22nd October 2024 in Lisbon, on the margins of the Lisbon Addictions 2024 conference. The event was organised by the Institute for Rational Addiction Policies (IRAP) and hosted former policymakers, public health advocates, and stakeholders to exchange views and formulate policy solutions at the EU level.

IRAP is a multidisciplinary association of independent and prominent experts who address the issues of addiction from all angles - public and individual health, legislation and other legal implications, including security challenges, and economics including market modeling, tax, economic impacts on public budgets, education and prevention, social and sociological and political science. IRAP aims to influence public opinion and thereby model political attitudes, to influence strategic documents of a political and professional nature, including the professionally correct setting of legislation, on the other hand to influence strong industry to adopt basic ethical standards.