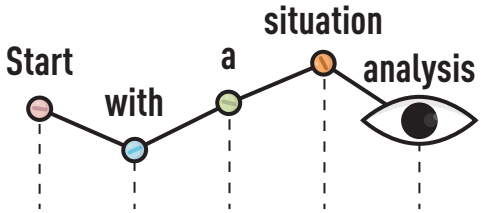
1. DEVELOP A NEW DRUG STRATEGY AND DRUG ACTION PLAN

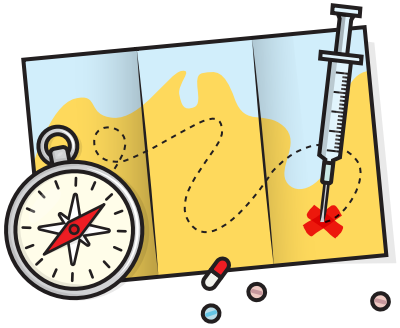
HOW?

PERIOD OF 5 YEARS





STATE OF THE ART AND VIEW ON THE FUTURE



INCLUDE GUIDELINES
regarding the evaluation of the Drug Strategy

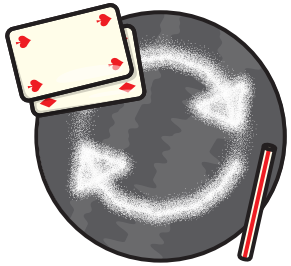
WHO?

First draft by General Drug Policy Cell, in co-creation with practitioners, academics, civil society and people with lived experiences



Endorsement by IMC Public Health, Thematic Meeting on Drugs

FOUR IMPORTANT ELEMENTS FOR THE NEW DRUG STRATEGY AND DRUG ACTION PLAN



Be consistent and coherent



Evidence-informed based on personal experiences, practice-based knowledge and scientific research



Secure a clear budget to implement policy priorities



Define SMART objectives, actions and outcomes

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2. INSTALL AN EXPERT ADVISORY PANEL TO SUPPORT THE GENERAL DRUG POLICY CELL

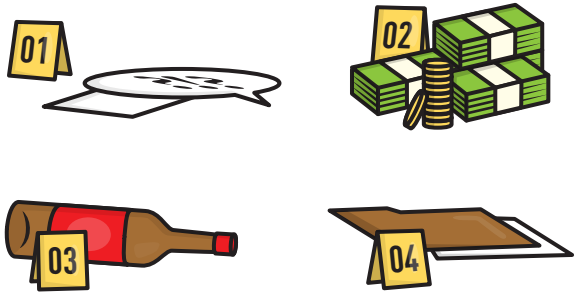
WHAT?

A PANEL that provides expert advice to the General Drug Policy Cell on (existing) policy initiatives or approaches to the drug phenomenon



WHY?

Stimulate an evidence-informed drug policy





WHO SHOULD BE INVOLVED?



Academics



Practitioners



Civil society



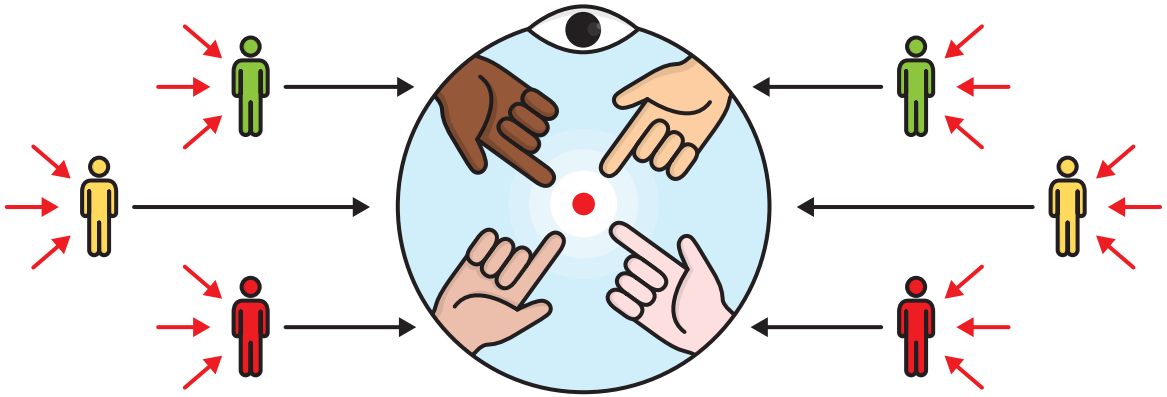
People with lived experiences

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3. INSTALL SPOC IN EACH ADMINISTRATION AND REUNITE THEM IN AN INTER-ADMINISTRATION WORKING GROUP TO SUPPORT THE GENERAL DRUG POLICY CELL

WHAT?

Implement a Single Point Of Contact (SPOC) in each administration (in each policy domain and on all policy levels) and reunite them in an inter-administration working group

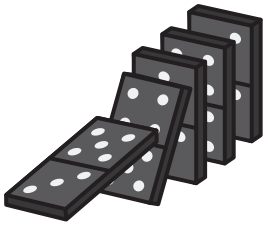


WHO?

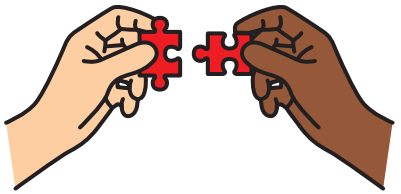


All SPOC in each administration at federal and regional level

WHY?



To allow for specialisation and follow up on the implementation of the Drug Strategy and Action plan



To stimulate an integral and integrated drug policy

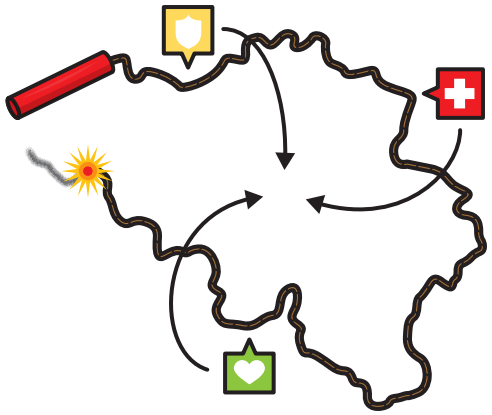


Could also act as the secretariat of the General Drug Policy Cell

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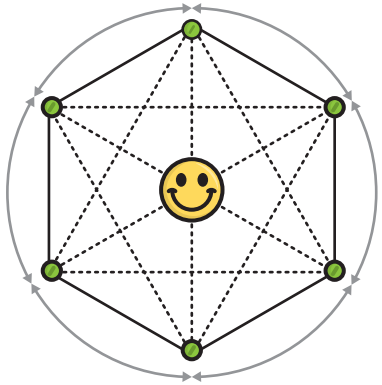
4. STIMULATE INTEGRAL AND INTEGRATED COOPERATION WITHIN A COMPLEX STATE STRUCTURE

The Belgian drug policy should involve all relevant policy domains and all policy levels. Cooperation and harmonisation are preconditions



WHY?

The drug phenomenon has multiple dimensions. Only by applying the drug policy to all these dimensions, the drug phenomenon is handled in its entirety



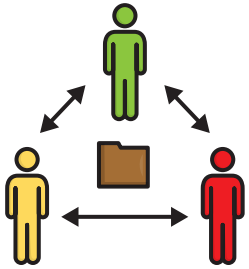
HOW?



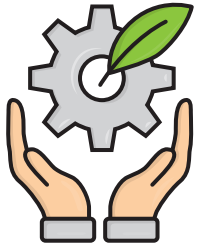
Develop a shared Drug Strategy and Drug Action Plan



Implement a Single Point Of Contact (SPOC) in each administration



Implement an inter-administration working group



Support the development of structural and sustainable forms of cooperation by guaranteeing continuity

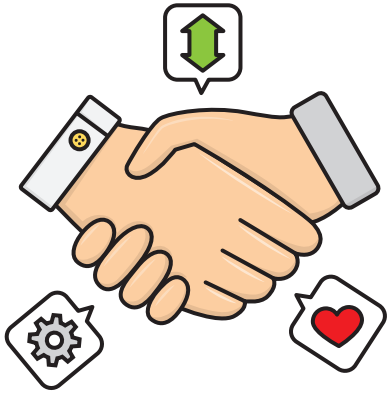
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5. THE PRESIDENT OF THE GENERAL DRUG POLICY CELL SHOULD BE BOTH A COORDINATOR, A LIAISON, AND AN INITIATOR TO THE BELGIAN DRUG POLICY



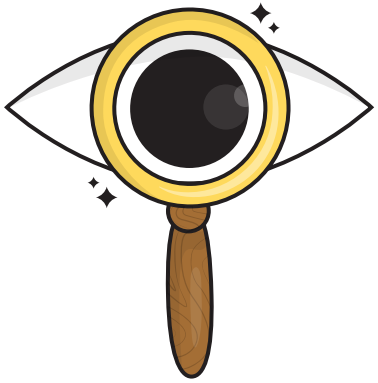
COORDINATOR

Prioritise central issues in need of coordination and guard consistency and transparancy in the drug policy initiatives



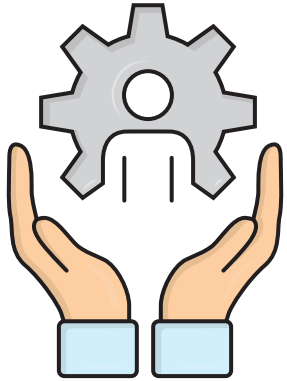
LIAISON

Facilitate contact between different policy domains and policy levels and mediate between parties to seek consensus and cross-departmental support



INITIATOR

Further develop and coordinate the Belgian drug policy. The president also has a symbolic value to create visibility to the drug phenomenon



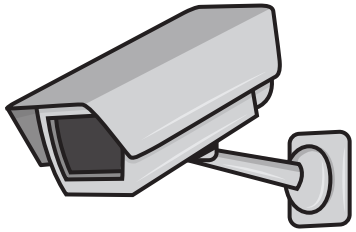
SUPPORTED BY A CO-PRESIDENT

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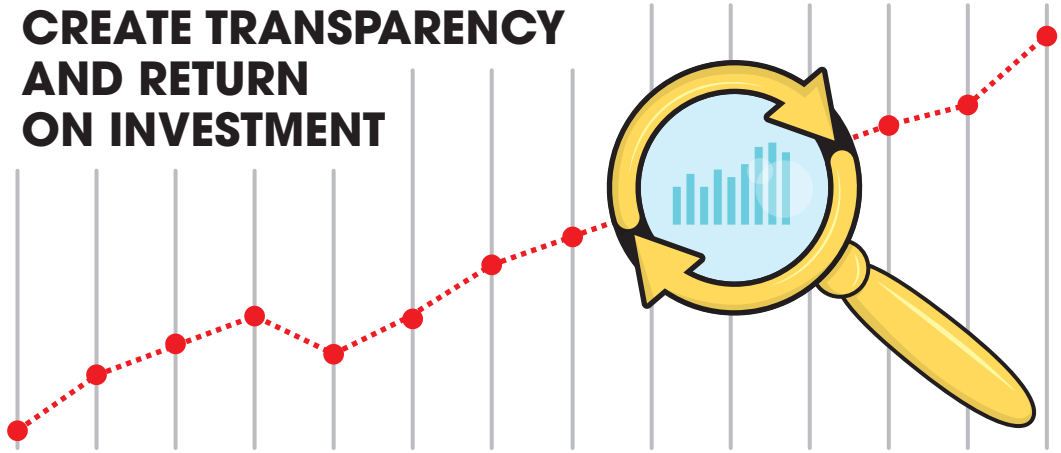
6. STRENGTHEN MONITORING AND REGISTRATION

STRENGTHEN MONITORING OF ALL INDICATORS (demand and supply):

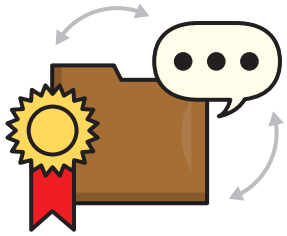
This involves both collecting additional indicators and further strengthening the existing ones



CREATE TRANSPARENCY AND RETURN ON INVESTMENT



CREATE A WIN-WIN WITH PEOPLE ENSURING REGISTRATION:



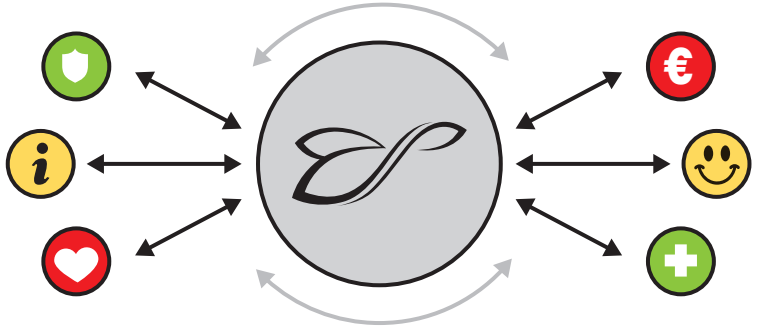
Encourage willingness for registration, e.g. by showing the added value



Reserve a specific budget for registration and monitoring tasks

WHO IS RESPONSIBLE?

Sciensano in cooperation with the Subfocal Points, both with a renewed mandate

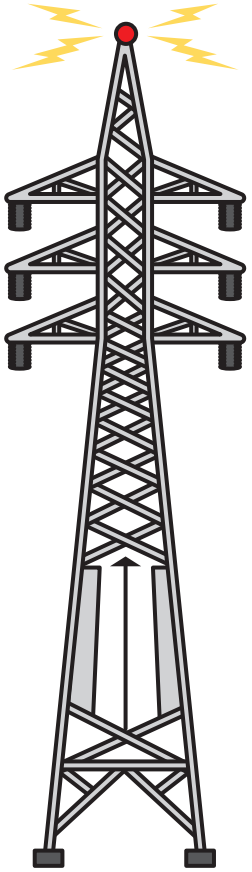


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7. CREATE SHARED RESPONSIBILITIES BETWEEN ACADEMICS AND POLICY MAKERS TO DISSEMINATE RESEARCH RESULTS

WHY?

Research results are often not translated into decisive policy initiatives. Increasing the dessiminitation of research results should be a shared responsibility

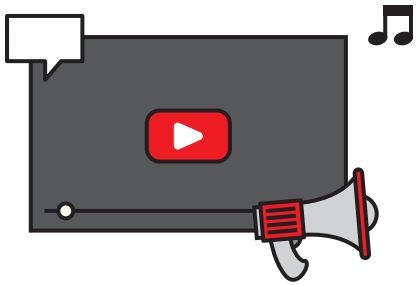


HOW?

Creating societal impact as essential part of research, besides the creation of scientific impact



Develop a communication plan, at the start of the research project



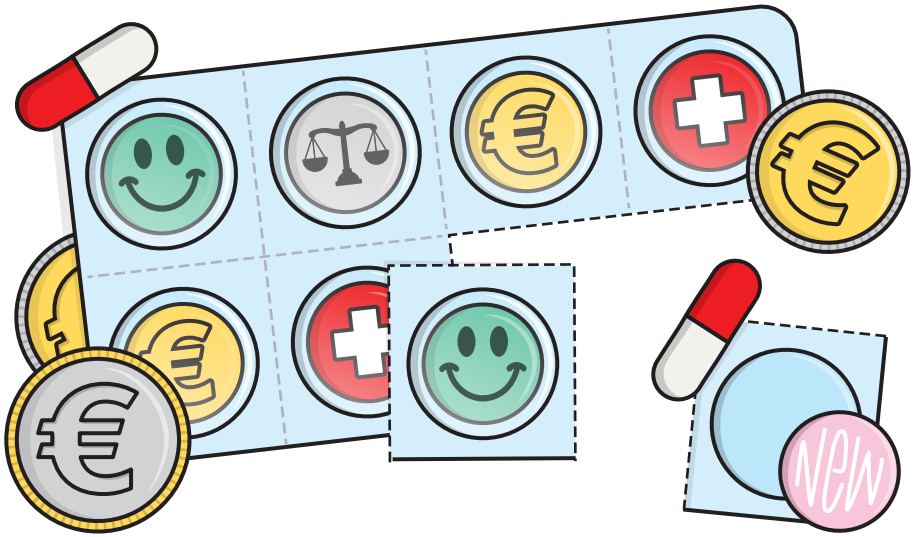
No one size fits all: Tailor the dissemination to your specific target group(s) and focus on different platforms to disseminate the message

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8. CREATE OPPORTUNITIES FOR INNOVATIVE PROJECTS

A FUND TO DEVELOP INNOVATIVE (PILOT) PROJECTS ON THE DEMAND SIDE AND THE SUPPLY SIDE

WHY?



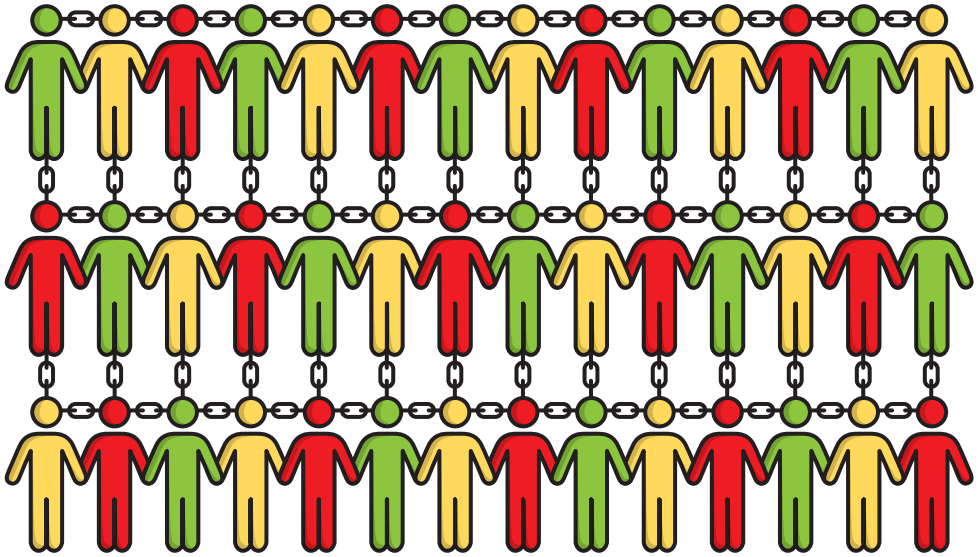
Prevention, treatment and law enforcement practitioners are confronted with the challenge of an ever-changing drug phenomenon and the emergence of new trends.

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9. SUPPORT THE DEVELOPMENT OF STRUCTURAL AND SUSTAINABLE FORMS OF COOPERATION

TO STRUCTURALLY SUPPORT THESE INITIATIVES BY GUARANTEEING CONTINUITY

WHY?



At the local level we find a lot of examples of integral and integrated cooperation. Yet, they often operate on the goodwill or inititaive of individuals, which could threaten continuity.

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10. PREVENTION

STRUCTURALLY FUND PREVENTION AND EARLY INTERVENTION INITIATIVES



The prevention and early intervention sectors are structurally underfunded. Although the sectors have proved to be innovative with its limited resources, there are many unresolved bottlenecks related to this issue of underfunding. Structural funding is needed to develop not only a demand-oriented but also a proactive prevention offer, without having to compromise on quality. In this way, continuity of prevention, but also early detection and intervention can be guaranteed for the various target groups.

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11. HARM REDUCTION

IMPLEMENT A LEGISLATIVE FRAMEWORK TO SUPPORT RISK REDUCTION INITIATIVES

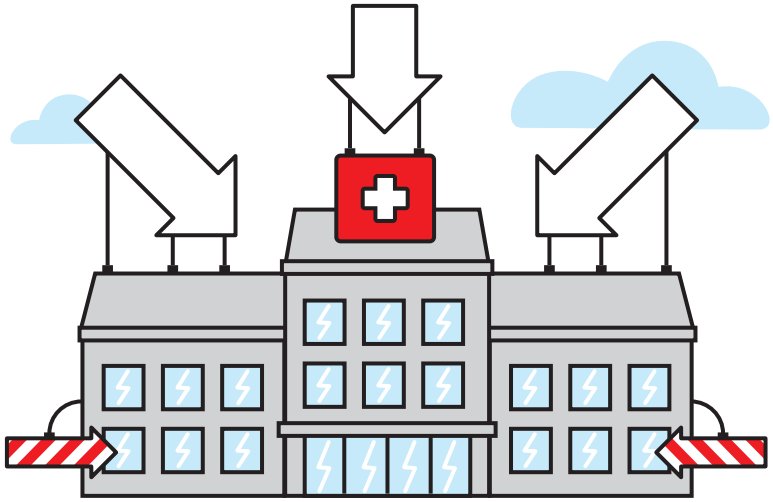


Strengthening the legal framework is a fundamental precondition for the elaboration and structural expansion of harm reduction initiatives.
Several risk reduction initiatives run up against the current legislative framework that limits what they can do.

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12. TREATMENT

INCREASE ACCESS TO DIVERSE AND QUALITY TREATMENT, BOTH GEOGRAPHICALLY AND BY ELIMINATING BARRIERS

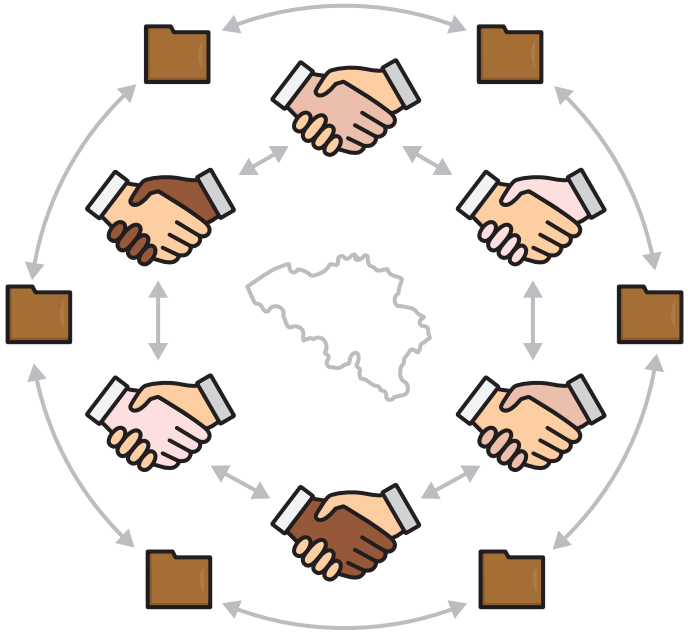


Tto expand the treatment offer geographically by tailoring the drug treatment offer to the setting and needs of both the geographical region, but also to the needs of the clients. Urban areas have different needs than rural areas and the treatment offer must be adjusted accordingly.

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13. ENFORCEMENT

IMPLEMENT AN OVERARCHING COORDINATING FRAMEWORK BETWEEN THE DIFFERENT ENFORCEMENT PARTNERS TO FACILITATE INFOFLUX AND TO PROMOTE COOPERATION



The research results have shown several obstacles to the coordination between different enforcement partners, amongst others with infloflux, as well as with cooperation. We therefore recommend more coordination between the different enforcement partners in order to bring them closer together and facilitate cooperation, e.g. by involving all enforcement actors in the implementation of the Framework Note on Integral Security and also as much as possible in other necessary policy frameworks and working groups

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