

# **Health and Human Rights Perspective on the EU Drugs Strategy 2026 - 2030 from the Perspective of Civil Society Organisations in South East Europe**

## **Executive Summary**

Civil society organisations (CSOs) working on health and human rights welcome the EU Drugs Strategy 2026 - 2030 as a key opportunity to advance a humane, evidence-based, and rights-centred approach to drug policy. To be effective, the Strategy must place the right to health, harm reduction, and non-discrimination at its core, ensure meaningful participation of affected communities, and translate commitments into concrete, measurable actions through a balanced implementation framework.

The Strategy matters for South East Europe because it offers a shared, forward-looking framework to address drug-related challenges that are inherently cross-border and deeply connected to public health, social inclusion, and human rights. By promoting evidence-based, health-centred approaches and stronger regional cooperation, the Strategy supports both EU candidate countries and Member States in reducing harm, strengthening health systems, and building trust between institutions and communities. Its consistent implementation across the region can help prevent policy fragmentation, reduce inequalities, and ensure that security objectives are pursued in ways that protect human dignity and contribute to long-term social stability.

This policy brief outlines key priorities and concerns from a health and human rights perspective, with a focus on practical implications for EU institutions, Member States, and candidate countries.

## **1. Drug Policy as Health and Human Rights Policy**

From a health and human rights perspective, drug use should be addressed primarily as a health and social issue rather than through punitive or enforcement-led approaches. Evidence consistently demonstrates that criminalisation and repression increase health risks, stigma, and social exclusion, while failing to eliminate drug markets.

The EU Drugs Strategy 2026–2030 should therefore:

- Clearly prioritise prevention, treatment, care, and harm reduction as central pillars of drug policy.
- Align fully with the EU Charter of Fundamental Rights and international human rights obligations, including the right to the highest attainable standard of health.
- Avoid policy measures that result in inhuman or degrading treatment or restrict access to essential healthcare.

## **2. Addressing Stigma, Discrimination, and Inequality**

People who use drugs often experience multiple and intersecting forms of discrimination in healthcare, employment, housing, and the justice system. Stigma remains a key barrier to accessing services and achieving positive health outcomes.

CSOs stress that the Strategy should:

- Explicitly recognise stigma and discrimination as structural drivers of harm.
- Promote equal and non-discriminatory access to health and social services.
- Pay particular attention to groups facing heightened vulnerability, including women, young people, Roma communities, migrants, and people in detention.

### **3. Harm Reduction as an Essential Pillar**

Harm reduction is an evidence-based, cost-effective approach that saves lives, prevents the spread of infectious diseases, and strengthens public health. From a civil society perspective, harm reduction must be recognised as an essential and non-negotiable pillar of the EU Drugs Strategy.

The Strategy should:

- Explicitly support measures such as needle and syringe programmes, opioid agonist therapy, drug checking, and overdose prevention.
- Ensure sustainable and predictable funding for harm reduction services, including in prisons and other closed settings.
- Protect harm reduction providers and service users from criminalisation, harassment, and administrative barriers.

### **4. Human Rights Safeguards and Accountability**

Strong human rights safeguards are necessary to ensure that the implementation of the Strategy does not result in unintended harm.

CSOs call for:

- Systematic health and human rights impact assessments of drug-related policies and measures.
- Accessible complaint and remedy mechanisms for individuals whose rights are affected.
- Regular monitoring of the Strategy's impact on marginalised and vulnerable groups.

Accountability should be treated as an operational requirement, not a rhetorical commitment.

### **5. Access to Care and Continuity of Services**

Access to evidence-based drug treatment and harm reduction services remains uneven across Europe, particularly in institutional and custodial settings.

The Strategy should:

- Promote universal, voluntary access to quality drug treatment and care.
- Ensure continuity of care in prisons, detention facilities, and during transitions back into the community.
- Address legal and administrative barriers linked to criminal records and punitive sanctions.

### **6. Participation of Civil Society and Affected Communities**

Meaningful participation of civil society and people with lived experience of drug use is a core human rights principle and a prerequisite for effective policy-making.

The Strategy should:

- Establish structured and transparent mechanisms for CSO participation in implementation and monitoring.
- Include people who use drugs and peer-led organisations in decision-making processes.
- Safeguard civic space and ensure the independence and sustainability of civil society actors.

## 7. Benefits of the EU Drugs Strategy 2026–2030

### For EU Candidate Countries

#### *Clear alignment with EU accession requirements*

The Strategy provides a coherent framework for aligning national drug policies with EU standards under Chapters 23 and 24, supporting reforms in public health, human rights protection, and rule of law.

#### *Strengthening health systems and harm reduction services*

It reinforces evidence-based approaches to prevention, treatment, and harm reduction, helping candidate countries address gaps in access to care, particularly for vulnerable and marginalised populations.

#### *Improved policy coherence and institutional coordination*

The Strategy supports integrated approaches across health, social, and justice sectors, reducing fragmentation and strengthening national coordination mechanisms.

#### *Enhanced access to EU funding and technical support*

Alignment with the Strategy facilitates access to IPA funds, EU expertise, and cross-border programmes supporting health services, data collection, and civil society capacity.

#### *Greater protection of human rights and civic space*

By embedding human rights principles, the Strategy strengthens safeguards against discrimination, excessive criminalisation, and barriers to healthcare, while reinforcing the role of civil society in policy design and monitoring.

### For EU Member States of South East Europe

#### *Reinforcement of health-centred and rights-based drug policies*

The Strategy supports Member States in consolidating harm reduction, treatment, and prevention as core components of drug policy, contributing to reduced mortality, morbidity, and social harm.

#### *Improved regional cooperation and policy coherence*

As frontline and transit countries, SEE Member States benefit from coordinated approaches with neighbouring EU and non-EU countries, reducing cross-border harms and policy inconsistencies.

#### *Reduced pressure on criminal justice systems*

By promoting alternatives to punitive responses for drug use, the Strategy supports more proportionate policies and helps ease overcrowding in prisons and overburdened courts.

#### *Stronger data, monitoring, and evidence-based policymaking*

The Strategy encourages improved data collection and evaluation focused on health and social outcomes, enabling more effective and accountable national responses.

#### *Enhanced community safety and social cohesion*

Investments in prevention, health services, and social inclusion contribute to safer communities, reduced stigma, and stronger trust between institutions, service providers, and affected populations.

## 8. Call for a Comprehensive and Balanced Action Plan

The success of the EU Drugs Strategy 2026 - 2030 will depend on the adoption of a comprehensive and balanced Action Plan that translates strategic commitments into concrete and measurable actions.

From a health and human rights perspective, such an Action Plan should:

- Place health, human rights, and harm reduction at the centre of implementation.
- Ensure a genuine balance between demand reduction, harm reduction, and supply-related measures.
- Allocate sufficient and sustainable funding to health- and community-based services.
- Use indicators focused on health outcomes, reduced harm, and improved quality of life.

## Recommendations Table

Priority Area	Key Recommendation	Rationale (Health & Human Rights)	Expected Impact
<b>Health-Centred Drug Policy</b>	Explicitly position the right to health as a guiding principle of the EU Drugs Strategy 2026–2030	Aligns drug policy with EU fundamental rights and public health obligations	Improved health outcomes; reduced mortality and morbidity
<b>Harm Reduction</b>	Recognise harm reduction as a core, non-negotiable pillar of the Strategy and ensure sustainable funding	Harm reduction saves lives and prevents infectious diseases	Reduced overdoses; lower HIV/HCV transmission
<b>Non-Discrimination &amp; Stigma</b>	Integrate anti-stigma and non-discrimination measures across all pillars of the Strategy	Stigma is a major barrier to accessing care and services	Increased service uptake; improved social inclusion
<b>Access to Care</b>	Ensure universal, voluntary access to evidence-based treatment and continuity of care, including in prisons	Gaps in care undermine both health and rights	Better treatment outcomes; reduced relapse and harm
<b>Human Rights Safeguards</b>	Introduce routine health and human rights impact assessments for drug policies	Prevents unintended harm and rights violations	Greater accountability and policy coherence
<b>Civil Society Participation</b>	Establish structured mechanisms for meaningful CSO and peer involvement in implementation and monitoring	Participation improves effectiveness and legitimacy	More responsive and evidence-informed policies
<b>Balanced Implementation</b>	Adopt a comprehensive Action Plan with balanced funding across health, social, and enforcement measures	Over-securitisation undermines health objectives	Sustainable, rights-based implementation
<b>Monitoring &amp; Indicators</b>	Use indicators focused on health outcomes, quality of life, and reduced harm	Enforcement metrics alone are insufficient	Transparent evaluation of real-world impact

## Conclusion

For civil society organisations working on health and human rights, the EU Drugs Strategy 2026–2030 represents a critical opportunity to advance drug policies that save lives, reduce suffering, and uphold human dignity.

Its impact will depend on whether it delivers tangible improvements in access to care, reduces stigma and discrimination, ensures meaningful participation of affected communities, and embeds accountability and human rights safeguards throughout implementation.