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France

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Definitions

Best practice: the best application of the available evidence to current activities.

Evidence base: a concept imported from the medical field, defined as 'the conscientious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients' (Sackett, 1996). When applied to drug demand reduction, this refers to the use of scientific results to inform interventions decisions.

Guidelines: 'statements that include recommendations intended to optimise patient care that are informed by a systematic review of evidence and an assessment of the benefits and harms of alternative care options' (Institute of Medicine, 2011).

Protocols: documents that specify the procedures to follow for the performance of certain tasks.

Standards and quality standards: principles and sets of rules based on evidence (Brunsson and Jacobsson, 2000), used to implement the interventions recommended in guidelines. They can refer to content issues, processes, or to structural aspects.

Accreditation: the process by which an institution delivering a service is independently assessed for quality against pre-defined criteria and standards, which are set by the accrediting body.

Benchmarking: the process of comparing service processes and performance to best practices from other services. Dimensions typically measured are quality, time and cost.

Certification: is a process to recognize that a specific service provider is in line with predefined quality standards.

T0. Summary

Please provide an abstract of this workbook (target: 500 words) under the following headings:

Summary of T1.1.1
- State whether your National Drug Strategy addresses quality assurance.

Summary of T.1.2.1
- Report the type of organization(s) responsible for quality assurance (or promotion of Best Practices) in your country.

Summary of T1.2.2
- State whether an accreditation system for intervention providers in drug demand reduction exists in your country.

Summary of T1.2.3
- State if an academic curricula or continuing education programmes for professionals working in the field of drug demand reduction exist in your country.

[T1.1.1.] France's national anti-drug strategy aims at strengthening its effectiveness by relying on robust scientific data. The **Interministerial Strategy for Mobilisation against Addictive Behaviours 2023-2027** establishes as principles for action the need to build on robust knowledge in order to increase the efficacy of public action in terms of prevention, risk reduction, treatment, the criminal justice response and the fight against trafficking (MILDECA 2023). It supports the need to encourage research, particularly in the area of public policy evaluation.

[T1.2.1.] In France, quality assurance in Drug Demand Reduction (prevention, risk reduction, treatment and rehabilitation) builds on specific advocacy, guidelines or trainings from public health institutions or professional societies.

The **French National Authority for Health (*Haute autorité de santé,* HAS)** diffuses professional guidelines/recommendations on risk reduction and treatment.

In recent years, recommendations to prevent the risk of overdose when using opioids to treat chronic pain have occupied an important place. In particular, the misuse of tramadol and codeine has been of important concern. Faced with the persistence of cases of misuse and falsified prescription, the National Agency for Medicines and Health Products Safety (ANSM) decided to change the prescription rules for

tramadol and codeine in 2025. The HAS developed a decision algorithm for healthcare software to alert professionals of changes in prescription and delivery conditions, with the aim of reducing the risk of misuse, addiction and overdosage (see T1.2.2).

The French Public Health Agency (*Santé publique France* - SpF) disseminates evidence in drug prevention research and supports the local experimental transfer of international evidenced-base programmes like Unplugged (Lecrique 2019), Good Behavior Game (GBG), Strengthening Families Program (SFP), etc. In 2024, its register of effective and promising interventions in prevention and health promotion includes 13 prevention programmes in the field of addiction.

Many professional federations are also engaged in developing quality and professional supports, in particular by developing internet portals for sharing public health knowledge on care towards drug users, risky behaviours, prevention programs and best practices in the field of addictions. In recent years, an important dynamic has been engaged to develop psychosocial skills.

[T1.2.2.] Since 2023, the National Authority for Health (HAS) has awarded a best practice recommendation label to guidelines that have been developed in accordance with the methodological and ethical procedures and rules recommended by the HAS. This means that a favourable opinion has been issued regarding the content of the publication, and the HAS encourages health professionals to implement the proposed guidelines.

In 2025, the HAS awarded this label to the best practice guideline entitled “Use of psychoactive substances: prevention in the workplace” (HAS 2025a) developed by the French society of alcohology (SFA), the French society of occupational health (SFST) and the Association Addictions France (AAF).

T1. National profile

T1.1. Policies and coordination

The purpose of this section is to provide a brief summary of quality assurance-related objectives, if any, within your national drug strategy.

T1.1.1. Please summarise the main quality assurance-related objectives of your national drug strategy or other key drug policy document.

A new 2023-2027 Interministerial Strategy for Mobilisation against Addictive Behaviours has been adopted in March 2023 (MILDECA 2023). The Interministerial Mission for Combating Drugs and Addictive Behaviours (MILDECA) which reports to the Prime Minister is responsible for its implementation. The strategy reaffirms the need to base public action on the available scientific knowledge across its five areas of action among which one is directly related to observation, research and evaluation. It is aimed at reinforcing quality in responses to the consequences of addictions for the individuals and the society.

The interministerial strategy for 2023-2027 (op cit) aims to support the dissemination of programmes to strengthen psycho-social skills, launched by an inter-ministerial instruction (Legislative order of 19 August 2022), including by modelling such programmes for older teenagers aged 16 to 18 and by modelling of intervention strategies in different areas of the child's life (agricultural educational settings, youth protection services and child welfare services). This new strategy provides professionals with best practice guidelines to harmonise professional practices for treatment adapted to clients’ needs.

T1.2. Organisation and functioning of best practice promotion

The purpose of this section is to describe the organization of best practice promotion in your country

T1.2.1. What are the **national organizations/institutions** promoting quality assurance of drug demand reduction interventions and their function? Please provide a brief description of each body and their relationship, including the following information: In which of the following areas are they responsible for quality control a) treatment provision, b) prevention, c) harm reduction and d) social integration.

- **The French National Authority for Health (*Haute autorité de santé,* HAS)** is an independent scientific public authority that aims at regulating the quality of the health system. It has a specific remit of developing guidance and disseminating evidence-based information among health professionals. Regarding addictions, the HAS publishes recommendations towards professionals or patients on prescriptions for drugs diverted from their use, risks of overdose, addiction reduction devices, etc. The HAS also supports quality assurance in the service provision of Social and Medicosocial Establishments and Services (ESSMS), including specialised drug treatment centres (CSAPA) and low threshold facilities (CAARUD). It accredits external evaluators to carry out the mandatory two independent external evaluations of the activities and service quality of the ESSMS during the 15-year license period. These evaluations must follow a set of specifications that are defined by decree [Decree of 15 May 2007 setting out the specifications for the evaluation of the activities and quality of services provided by social and medico-social facilities and services]. The Regional Health Agencies (ARS) decide on the renewal of the operating authorizations for the addiction-related ESSMS against these specifications. Furthermore, since 2023, the HAS has awarded a best practice guideline label to guidelines developed in accordance with the methodological and ethical procedures and rules recommended by the HAS.

- **The French Public Health Agency (*Santé publique France*, SpF)** falls under Ministry of Health and has a scientific and expertise remit in the health field. Developing health promotion, prevention and health education as well as the reduction of health-related risks are part of its duties. Therefore, it sustains the dissemination of knowledge on science-based prevention methods or evidence-based programmes. But documents are diffused for information purposes only as no drug prevention protocol is imposed to prevention providers or public services. It provides for expertise or funding to support the experimental transfer of several international evidenced-base programmes to local French context, e.g., Unplugged, GBG, PANJO (Nurse Family Partnership - NFP), SFP, Break the cycle. Since September 2018, the National Public Health Agency (SpF) is coordinating an online register of effective and promising interventions in prevention and health promotion (Santé publique France 2025). In 2025, this register includes 13 prevention programmes in the field of addiction.

- **The Health Insurance (*Caisse nationale d'assurance maladie*, CNAM)** manages the addictions fund (*Fonds de lutte contre les addictions*-FLCA), created within the National Health Insurance Fund, and contributes to the financing of local, national and international actions on all addictions with or without substance. The FLCA, created in 2018 supports the continuation and strengthening of public health actions against addictions, including by providing for financial support to applied research and evaluation of prevention and treatment. The fund provides grants for actions, studies and doctoral studies, consistent with government priorities in the field of addiction prevention.
  The Health Insurance also publishes the health insurance expenses and income report each year (Assurance Maladie 2025). This report is based on an analysis of the health system and makes proposals for improvement to the health system, within seven major chapters, including a chapter on medicines, among which those diverted from their use.

- **The National Agency for Medicines and Health Products Safety *(Agence nationale de sécurité du médicament et des produits de santé ANSM)*** is the public actor that allows, on behalf of the State, access to health products in France and ensures their safety throughout their life cycle. At the heart of the health system, it acts in the service of patients and their safety, alongside health professionals and in consultation with their respective representatives.

- The association **Fédération Addiction** is a network of associations and professionals of addictology (it includes more than the half of CSAPA and CAARUD). Its ambition is to fight against the stigmatization of people affected by addictions and build with them responses adapted to their needs. It publishes guides, available on demand, on various subjects. Fédération Addiction also coordinates a multi-partnership portal for health professionals willing to engage in early intervention or outpatient care towards drug users (drug must be understood as licit or illicit drugs (alcohol, tobacco, cannabis, psychotropic medicine, etc.): https://intervenir-addictions.fr/. This portal provides common law practitioners from the community, school, workplace or emergency settings with guidance and tools to detect problematic drug use, to

refer to specialised services or to prescribe/initiate opioid substitution treatment. Training materials and networking indications are also available. Fédération Addiction supports prevention workers through its support platform for the implementation of prevention programmes, which aims to consolidate, optimise and mutualise prevention practices. In particular, the platform supports the dissemination of four evidence-based programmes: the Unplugged, Primavera and 'Bien jouer' universal prevention programmes, as well as the PSFP family and parenting support programme (Prévention - Fédération Addiction).

- The association **Addictions France** is an association whose mission is to support people in difficulty with addictions and their entourage by managing structures, raising awareness and acting in health promotion, training and advising field actors and advocating for a coherent health policy on addictions.
- **The Addiction prevention network (*Réseau de prévention des addiction*, RESPADD)** raises awareness on addictive practices (drugs, tobacco, alcohol, gambling, etc.) in health establishments (hospitals, clinics, medico-social establishments, etc.) to prevent such practices and their complications for their patients and staff. It also aims to support establishments in caring for the people concerned and to promote a network dynamic in the field of addictology. The RESPADD offers health and social staff (medical and paramedical) and managers training to update their skills and responses in relation to addictive practices.
- **The French Federation of Addiction Care (*Fédération Française d'addictologie*, FFA)** promotes and supports education, training, research and studies in the various fields of addictions and the **National University College of Addictology Senior Teachers (*College universitaire national des enseignants en addictologie*, CUNEA)** promotes teaching on addiction in medicine and in the various health professions.
- **The French Society of Public Health (*Société française de santé publique*, SFSP)** gathers many disciplines for collective and interprofessional reflection. It formulates proposals for decision-makers and, via the media, to inform public opinion on health policy issues, the strengths and weaknesses of their implementation. In the field of addictions, it promotes the development of psychosocial skills, support for parenthood and the reduction of heath social inequalities.
- **The Federation Promoting Health (*Fédération Promotion Santé*,** former *Fédération nationale d'éducation et de promotion de la santé, FNES*) (a non-profit NGO) finalised the development of a national resource website on psychosocial skills (Sirena-CPS) in order to improve the understanding of the concept of psychosocial competencies by professionals and its application in different life settings (https://www.sirena-cps.fr/). Intended for professionals involved in the prevention of risky behaviours, it provides validated intervention materials and tools, easy access to information, training and support adapted to the different social environments in which they work.
- In August 2022, the CAPS portal Capitalization of experiences in health promotion, coordinated by the *Fédération Promotion Santé* (former National Federation of Education and Health Promotion, FNES) and the French Society of Public Health (SFSP) was launched (https://www.capitalisationsante.fr). This tool is a national mechanism for sharing public health knowledge. It is part of the national initiative InSPIRe-ID (Public Health Initiative for the Interaction between Research, Intervention and Decision, *Initiative en Santé Publique pour l'Interaction entre la Recherche, l'Intervention et la Décision*), coordinated by the French Health Directorate. With the help of a simplified search engine, the portal offers 175 (in April 2025) different prevention programs that have been the subject of at least one process of evaluation and 13 more transversal sheets.

T1.2.2. Please **provide a reference to any national practice guidelines published in the last five years** in the areas of control a) treatment provision, b) prevention, c) harm reduction and d) social reintegration (URL, PDF, English Title).

a) Treatment provision

As part of the roadmap "Preventing and Responding to Opioid Overdoses. Roadmap 2019-2022" (Ministère des Solidarités et de la Santé 2019) defined by the French Ministry of Solidarity and Health (DGS), the HAS published recommendations for good practices on the prevention and management of opioid overdoses in march 2022 (see best practice workbook 2023). In order to reduce overdose and physical dependence to opioids the aims of the recommendations are to:

- recall general principles for opioids medicine use
- promote the appropriate use of analgesic opioids in the management of acute or chronic pain
- promote the appropriate use of opioid agonist therapy and naloxone in the management of opioid substance use disorder and overdose (HAS 2022).

In 2023, a note towards patients have been released by the HAS to prevent the risk of overdose when using opioids to treat chronic pain (HAS 2023).

Beginning 2024, the HAS has also issued a notice in favour of reimbursement of Ventizolve (naloxone for adults in one-dose nasal spray solution) for immediate administration in the emergency treatment of known or suspected opioid overdoses, manifested by respiratory depression and/or central nervous system depression, in a medical or non-medical context (HAS 2024).

In recent years, misuse of tramadol has steadily increased and has become a major public health problem. Since 2022, in order to stem the opioid crisis and its misuse, the prescription period for these drugs is limited to three months (compared to twelve months previously). The HAS published in March 2022 recommendations of good use in order to accompany professionals in the prescription of these analgesics at risk of misuse or dependence and in the management of dependent patients. In 2024, the Health Insurance and the representative unions of pharmacists could rely on these recommendations to develop a dedicated support. This "opioid" accompaniment would remind patients of the rules of proper use, identify and alert patients in case of disorder related to the use of these drugs and accompany patients in case of detection of misuse.

In 2025, faced with the persistence of cases of misuse and falsified prescription, the National Agency for Medicines and Health Products Safety (ANSM) decided to change the prescription rules for tramadol and codeine.

Two new provisions came into effect on March 1, 2025:

- All drugs containing tramadol, codeine or dihydrocodeine must be prescribed on a secure prescription, either alone or in combination with other substances (paracetamol, ibuprofen, etc.).
- The maximum prescription time for codeine (or dihydrocodeine) drugs is aligned with tramadol, and is twelve weeks (three months).

The HAS developed a decision algorithm for an healthcare software to alert professionals of changes in prescription and delivery conditions, with the aim of reducing the risk of misuse, addiction and overdose.

b) Prevention

On 12 June 2025, the board of the National Authority for Health (HAS) awarded the National Authority for Health label to the best practice guideline entitled "Use of psychoactive substances: prevention in the workplace" (HAS 2025a) developed by the French society of alcohology (SFA), the French society of occupational health (SFST) and Addictions France Association (AAF). This guideline aims to support occupational health and prevention services in developing prevention measures for the use of psychoactive substances in the workplace, in collaboration with employers, employees and staff representatives. It involves both the detection of addiction-related issues, the reduction of addiction, and the prevention of psychoactive substance use among all stakeholders within the company or organisation, taking into account the specific conditions of the professional sector. It addresses both the impact of addictive behaviour on work and the influence of work on the use of psychoactive substances.

Four tools have been developed as part of this good practice guideline:

- Tool no. 1 for general practitioners, addiction specialists and primary care professionals
- Tool no. 2 for employers
- Tool no. 3 for workers
- Tool no. 4 for occupational health and prevention services (SPST)

In May 2025, the addiction prevention network (RESPADD) published guidelines on the use and misuse of psychotropic drugs, intended for helping professionals (both medical and non-medical), care recipients and their relatives (Bonnet *et al.* 2025). These guidelines cover three pharmaceutical categories: opioids (particularly tramadol), benzodiazepine and pregabalin. The publication provides professionals with guidance on how to detect misuse, and offers care recipients information on symptoms and appropriate actions to take in the event of an overdose. Tools and resources to inform and guide psychotropic drug users are also provided.

In January 2025, the HAS began drafting recommendations for professional good practice in the field of "specialised prevention" (special education for young people at risk of marginalisation), with the aim of clarifying the professional framework for intervention. Such recommendations will cover the foundations, methods of intervention and their specific features, as well as the methods of collaboration with local partners. Among the specific situations addressed by specialised prevention, the issue of addictions will be dealt with by supporting the means of identifying and addressing situations and taking associated trafficking into account (HAS 2025b).

In 2024, the college of general practice (*Collège de la médecine générale - CMG*) has published an online kit on "Medical addiction microstructures" (CMG 2024a). Microstructures are places where general practitioners collaborate with a psychologist and a social worker to form a multi-professional team of primary addictology care.(CMG 2024b).

In 2024, Addictions France has published the final version of a guide on advanced consultations in Youth Addiction Outpatient Services (*Consultations Jeunes Consommateurs Avancées,* CJCa). Created in 2004, the mission of the Youth Addiction Outpatient Services (CJC) is to provide information, evaluation, brief support and guidance if necessary to young consumers and their entourage. In the continuity, the CJCa have been created to develop the 'going towards" approach, by going to the places where young people are. The guide aims to understand the factors that influence the arrival of young people at CJCa and improve their effectiveness (Association Addictions France 2024).

Launched in 2021, the AIPAUC project (*Améliorer l'information, la prévention et l'accompagnement des usagers de cocaïne* - Improving information, prevention and support for cocaine users), conducted by the Federation Addiction, mobilises addictology stakeholders and non-specialist professionals on new tools and collective responses to provide to cocaine users, whether they use powdered cocaine or crack. In 2023, several regional conferences have been organised (Fédération addiction 2023a). In 2024, three guides were made available on prevention, risk reduction and support for cocaine users (Fédération Addiction 2023b, c, 2024).

In 2023, the FLCA (addictions fund) has commissioned an evaluation on the "*Mois sans tabac*" program (Month Without Tobacco), which concludes that the second phase to be undertaken for the deployment of *Mois Sans Tabac* involves the need to consider a more complex approach to addictions (poly-consumption) and to reposition the operation in a more comprehensive regional tobacco prevention policy (Assurance Maladie 2022a). The FLCA has also launched an evaluation of the "*Lieux sans Tabac*" (Places Without Tobacco) prevention program, which provides a cross-sectional analysis of the different approaches for non-smoking premises (Pluricité and Sedetiam Conseil 2023).

With the support of Santé publique France, the Organisation for Economic Co-operation and Development (OECD) published in June 2023 a report on the return on investment of the tobacco control policy implemented in France between 2016 and 2020 (Devaux *et al.* 2023). The results show an estimated average return of 4 euros for each euro invested in effective prevention actions. These results support the commitment to tobacco control in France and internationally. After a drop in the prevalence of smoking, unprecedented in France between 2014 and 2019, the latest data published in May 2023 show a stabilisation in 2022. These results therefore call for a re-mobilization of actions in tobacco control policies.

c) Harm reduction

In 2025, Association Addictions France published a guide entitled “Pathways of individuals receiving support in CSAPAs: a professional practice guide to welcoming and supporting people in specialised drug treatment centres (CSAPAs)” (Association Addictions France 2025). This guide encourages reflection on the pathways of people receiving support, emphasising the importance of experiential knowledge and personal resources. This guide reiterates the key principles of welcoming and supporting people in CSAPAs, as well as the existing tools. The aim is to provide teams with reference points and resources to help them structure care pathways and improve professional practices. The objective is to harmonise practices while maintaining diversity, and to showcase the initiatives conducted in the field.

In February 2023, the Fédération Addiction and AIDES have created a group of exchanges and skills sharing on chemsex (Fédération Addiction 2023d). In 2024, these two professional federations published a guide «Go to the chemsexers» that should enable stakeholders in sexual health, prevention, risk reduction and care to put in place services to accompany the chemsexers under the best conditions (Fédération Addiction and AIDES 2024).

d) Social reintegration

The above-mentioned guidelines on prevention and risk reduction for social and medico-social institutions are the latest issued in relation to social reintegration. Indeed, taking better account of addiction problems among the public in these establishments is presented as a means of supporting the social inclusion and empowerment of people (HAS *et al.* 2022a, b, c, d).

The Fédération addiction also participated in the SEMID-EU project (https://correlation-net.org/project/semid-eu/) to produce knowledge on the specific needs of migrant drug users in the European Union with the objective of changing public policies (Correlation 2024a, b, c).

e) Peer support

The FLCA has commissioned an evaluation of the peer-based prevention programmes that it has funded. This evaluation, which was published in May 2022, provided recommendations to funders and decision-makers on the components to be taken into account with regard to peer prevention programmes and to be required from project developers (Assurance Maladie 2022b).

In September 2020, the Fédération Addiction published the guide "Participation of users: from involvement to cooperation", with the support of the Ministry of Health (Fédération Addiction 2020). This guide was created by a joint working group – composed of as many care professionals as users – including mutual aid and self-help associations. It provides an overview of how drug users are involved in their care pathway, within their care and support structure, towards their peers and in society, and it shows the diversity of practices. It aims to promote drug users’ empowerment, to help them co-build a care pathway that meets their needs and improves their quality of life.

T1.2.3. Do you have any accreditation systems for intervention providers in drug demand reduction? If yes, please provide a brief description of the system. If a list of accredited organizations is published in online (online portal), please provide a brief description of the portal and the URL?

There is no formal system of accreditation or certification for intervention providers in drug demand reduction.

Since 2023, the HAS has awarded best practice guideline labels to guidelines that have been developed in accordance with the methodological and ethical procedures and rules recommended by the HAS. This means that a favourable opinion has been issued regarding the content of the publication, and the HAS encourages health professionals to implement the proposed guidelines.

T1.2.4. Do you have specific education systems for professionals working in the field of demand reduction? If yes, please provide a brief description. Information relevant to this answer includes:

- specific academic curricula
- specific continued education/specialization courses

Specific academic curricula

There is a one-year specialised training in addiction in the third cycle of medical studies. Continuing education programmes for medical doctors and other professional in the field of addiction are also in place. See section T1.2.4 of the 2021 'Best Practice' workbook for details.

Specific continued education/specialisation courses

Specific continuing education is provided to drug specialised law enforcement officers, i.e. FRAD (national *Gendarmerie*) or PFAD (national Police) (see T.1.2 of the 2022 "Prevention" workbook), who are likely to train their colleagues and deliver prevention interventions on topics like drugs, alcohol or violence, in various settings (mainly schools, and also occupational settings, common touristic sites...).

Specific training for peer helpers

In order to better inform and train people and drug service practitioners in first aid and administration of naloxone in case of opioid overdose, the NGO SAFE offers an online short training that explains how to use Naloxone, entitled "One Hour to Save a Life" (https://naloxone.fr/).

The association *France Patients Experts Addictions* (FPEA) aims to strengthen the place given to Patients Experts within the processes of care in addictology (treatment, harm and risk reduction) and in other medical specialties. It has also the general purpose to enhance the commitment of civil society in these care processes. The FPEA coordinates a college of holders of the "Patients Experts Addictions" certification. This certification allows the "graduates" to intervene as employees, Liberals, entrepreneurs or volunteer, on a part-time or full-time basis.

T2. Trends. Not applicable for this workbook

T3. New developments

The purpose of this section is to provide information on any notable or topical developments observed in best practice promotion in your country **since your last report**.
T1 is used to establish the baseline of the topic in your country. Please focus on any new developments here.
If information on recent notable developments have been included as part of the baseline information for your country, please make reference to that section here. It is not necessary to repeat the information.

T.3.1. Please comment on any notable new or topical developments observed in best practice promotion in your country (eg. new standards/guidelines/protocols developed).

Please see highlighted information (in yellow) throughout the workbook.

T4. Additional information

The purpose of this section is to provide additional information important to best practice promotion in your country that has not been provided elsewhere.

T.4.1. ***Optional****. Please describe any additional important sources of information, specific studies or data on best practice promotion. Where possible, please provide references and/or links.*

Several important reports or platforms were published in 2023 and 2024, related to the use of scientific evidence in the funding and implementation of practices and actions that aim to change health behaviours.

- In January 2026, the General Audit Office of Social Affairs and the General Audit Office of Administrative Affairs published the evaluation conducted in 2024 on addiction care centres (HAS, the French DCRs), a scheme piloted since 2016 to reduce nuisance associated with drug use in public spaces (Leonnet *et al.* 2024). The aim of this evaluation was to inform the Government on whether to maintain, adapt or discontinue the HSAs by assessing their relevance and their role within the range of harm reduction tools, their impact on public peace and order, as well as the procedures for their establishment and the suitability of their locations.
- Two consulting firms (Planète Publique and CEMKA) were mandated by the CNAM, on behalf of the Technical Committee of the addiction fund (FLCA), for conducting an evaluation of projects funded by the fund to equip professionals with tools for their training and practices in managing addictions (Assurance Maladie 2024).
- In November 2024, the General Audit Office of Social Affairs (*Inspection Générale des Affaires Sociales*) published a report on the use of scientific evidence in prevention and health promotion (Bras and Monasse 2024). This report first analyses the issue of evidence in a comprehensive way, before looking at local health prevention and promotion actions that aim to change behaviours harmful to health.
- Funded by the FLCA, the French Society of Alcohology (*Société Française d'Alcoologie*) has launched a project, called Alcohol Consumption Science, that aims to improve knowledge and de-banalise alcohol use through science-based communication.

T.4.2. ***Optional****. Please describe any other important aspect of best practice promotion that has not been covered in the specific questions above. This may be additional information or new areas of specific importance for your country*

In December 2025, MILDECA published a guide for law enforcement professionals entitled "Illicit drugs, use, risks and support" (MILDECA 2025). This operational guide provides an analysis of the current situation with regard to illicit drug use. Without claiming to be exhaustive, this document provides updated reference points and key insights on:

- the substances available and their effects;
- addiction mechanisms;
- existing treatment services.

The "Prevention and harm reduction of opioid overdoses in the Provence-Alpes-Côte d'Azur (PACA) region" programme, known as "POP", was developed in 2020 by the Centre for Evaluation and Information on Pharmacodependence (CEIP) for the PACA-Corsica region, with financial support from the regional health agency (ARS). In order to improve treatment services for patients at risk of opioid overdose, the programme aims to:

- improve professional practices for the benefit of patients/users;
- increase the distribution of naloxone;
- involve users and their friends and family members in addressing overdose risk;
- improve the vigilance, warning, and response system.

POP also involves developing communication materials and providing support through awareness-raising and training to enhance the skills of general practitioners and staff working in specialist pain and addiction treatment centres. Finally, it aims to establish an Overdose Sentinel Network, in collaboration with multiple partners. Following the positive evaluation of the programme, which was launched in 2020, the rollout of POP across all French regions received financial support from the Fund for Combatting Addiction (FLCA).

The training in addictology is part of the second cycle of studies of medicine, odontology, maieutic and pharmacy. Addictology is included in the program of national classification tests (ECN) that give access to the postgraduate medical studies. In the third cycle of medical studies, a transversal specialised training (FST) in addictology is the reference path to get an overspecialisation in this field. It offers the possibility for students to have an activity in the medico-social or hospital specialised services.

In addition, various university degrees in addictology exist, some of them being general, and others more specialised (for instance, focused on women, on specific substances, on dual disorders). Some of these degrees are now fully in digital learning. Compared to the initial training during medical studies, these trainings can be followed by a broad range of professionals (e.g., social workers, psychologists).

The National University College of Addictology Senior Teachers (*Collège Universitaire National des Enseignants en Addictologie,* CUNEA) provides standardised guidelines for students ("référentiels de spécialité").

In April 2024, EHESP and Mildeca have created an e-learning module dedicated to addictive behaviours, which is accessible here: https://formation.conduites-addictives.ehesp.fr/. This new platform identifies:

- the mechanisms, reality and extent of addictive behaviour in France,
- actors, mechanisms, initiatives and public policies that combat addictive behaviour,
- the brakes and levers to an effective action against addictions

In March 2025, the podcast ""AddictoLearning" was broadcasted for healthcare students and practitioners, covering basic knowledge of addictology, products, behaviours, clinical data, complications, the main medicinal and non-medicinal therapeutic approaches and important educational messages. This content was produced in collaboration with several medical faculties, the OFDT and the French public health Agency, under the coordination of an addictologist (Dr Karila). Based on 30 audio clips (lasting less than 10 minutes each), which are accessible via 9 platforms (https://smartlinks.360.audion.fm/fr/addictolearning), these microlearning modules complement other teaching methods, such as face-to-face or hybrid training, allowing learners to practise at their own pace and according to their own priorities.

The public authorities ensure that those involved in prevention and research who receive public subsidies have no links of interest with the tobacco, alcohol, cannabis, gambling and video games industries.

The new Interministerial Strategy for Mobilisation against Addictive Behaviours 2023-2027 presents evaluation an essential lever for implementing effective responses, based on the following examples:

- psycho-social skill enhancement programmes;
- low-risk consumption rooms, the rigorous evaluation of which has led to the drafting of new specifications for future addiction treatment centres;
- experimental programmes to preventing young people from becoming involved in drug trafficking (LIMIT'S programme).

T5. Sources and methodology

The purpose of this section is to collect sources and bibliography for the information provided above, including brief descriptions of studies and their methodology where appropriate.

T.5.1. Please list notable sources for the information provided above.

Index based on use of literature and the Internet

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T.5.2. Where studies or surveys have been used please list them and where appropriate describe the methodology?

None