

## **The Tragic Outcome of Sweden's Dream of a Good Drug Free Society**

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My name is Berne Stålenkrantz.

In the 1980's I was a fairly successful fashion photographer. My pictures were published in leading magazines and prize-awarded marketing campaigns.

However, I met The White Lady. I got addicted to heroin - and the combination of the strong addiction of opiates and society's way of handling drug abuse ruined everything for me.

Luckily, my family stood beside me throughout the hard years. Special thanks go to my wonderful wife.

I was one of a very few heroin addicts in Sweden (800 nation-wide) who had the opportunity to have access to a methadone substitution programme.

One year ago I was finally strong and well enough to start my way back into society. Instead of getting back to my old work, I felt I had an obligation to use my experiences, knowledge and capacity to help other drug addicts in the same situation, and to reveal some of the true facts of the Swedish battle against drugs and drug addicts.

In October last year, I co-founded the Swedish Drug Users Association, for opiate addicts who are taking or who need Methadone or Subutex substitution treatment and became its president. Today we have more than 500 members, a nation-wide organisation, 8 established local branches and 6 more starting up right now.

Contrary to Swedish drug policy, I don't regard drug users or drug addicts as a uniform collective. I can say though, that in making the following remarks, I represent the vast majority of the opiate users and addicts in Sweden.

#### **The Swedish model**

The Swedish model for drug policy is based on the struggle for a good drug-free society.

My first question is: Is this dream possible?

My first answer is: No!

In *theory*, Swedish drug policy combines zero-tolerance towards both use and abuse of drugs with active police work and active social work. In *practice*, Swedish drug policy means criminalizing both personal possession and personal intake of drugs. In *practice*, Swedish drug policy means demonising BOTH the drug and the drug addict. In *practice*, Swedish police regularly enforce compulsory urine tests to detect personal drug use.

Since the Swedish constitution prohibits body searches when investigating minor offences, the Swedish parliament passed a bill in 1993 that increased the sanction scale for personal drug use to a maximum of six months imprisonment. No prison term for drug use has ever been sentenced – that was obviously not the purpose of the new law.

In *practice*, Swedish drug policy means overriding constitutional individual rights, to give the police the authority to harass drug users.

In *practice*, Swedish social workers have a strong moralistic attitude towards drug use. Condemnation (*fördömmande*) and even contempt (*förakt*) are common attitudes towards drug addicts.

This may sound a strong, subjective statement, but in reality these are facts that are true for Swedish drug policy practice at all levels of the drug user scale:

- Opiate addicts using or abusing other drugs (such as amphetamines or cannabis) are automatically refused methadone treatment.
- Patients within methadone treatment are automatically expelled from the program if they have a relapse in taking heroin.
- Non drug related penalties, such as traffic offences, commonly lead to addicts being expelled from methadone or Subutex programs.

And not only heavy drugs are treated this way:

- The argument against the use of cannabis is regularly used to take children away from their parents. This especially affects young, poorly educated single mothers.
- According to the LVU, the law regarding the treatment of young people, teenagers are commonly forced into compulsory rehabilitation for modest use of cannabis or ecstasy.

As you can understand, the Swedish model for drug policy therefore has led to a great amount of alienation for the drug user. A large number of drug addicts in Sweden have no actual relation with or trust in *anyone* outside the drug community. Social workers are considered enemies. The police as well of course, but also doctors, teachers and psychologists!

This might be a little hard to understand, but one of the fundamentals of the Swedish anti-drug policy is propaganda. By this I mean the systematic spread of politically-induced disinformation in order to create a strong and wide support for the extreme measures taken in the struggle for a drug-free society. This is naturally also a question of age and generation. The so called "MTV generation" has a totally different attitude from its predecessors and therefore the basis for the Swedish drug control is diminishing. But among "grownups" the attitude towards drugs is extreme and therefore many teachers, parents, doctors, school nurses, etc. overreact and take drastic measures such as contacting police or social security. In the case of an overdose, addicts sometimes even avoid calling for an ambulance because they are too scared of attracting the social workers' or the police's attention.

Methadone patients expelled from treatment almost inevitably fall back into heroin addiction that is commonly financed by theft or fraud.

The problem with Swedish drug policy is that there is a vaguely articulated but overall accepted assumption that all drug policy must aim at fighting narcotics in the same way regardless of its differing aspects. There is a lack of recognition that there should be a distinction between the different measures needed to handle the different problems. This leads to a war, not only on drugs but also a war on drug addicts and drug users. The medical treatment of addiction and the legal war on drugs goes together in one combined policy.

Patients can be refused medical treatment because of criminal behavior. The places within methadone treatment programs are strictly limited. It is illegal to hand out clean needles to addicts and needles are not available in pharmacies. A long, official, new policy debate on needle exchange has not yet occurred. Many addicts are denied detoxication when demanded. Most treatments offered are connected with strong restrictions and zero-tolerance.

Now, let me refer to some of the tragic figures of the statistical outcome of Swedish drug policy: Since 1979 the number of heavy drug users has increased rapidly and evenly by on average 5% a year from the late 1970's to the late 1990's. Much reported decrease of heavy drug use among young people (aged under 24) was dramatically changed in the mid 1990's with a more than 100% increase from 1992 to 1998. Unfortunately, we lack more recent comparable statistics, but the figures available indicate that the trend has continued (according to the Senlis Council's report, 2003).

We also see an increase in the number of police officers, and this can be a good measuring devise of the increase in repressive policies. Added to this, in 1999, 40% of the reported drug offences concerned consumption, 40% regarded possession, and 15% regarded dealing. So, 80% of the criminal charges concern using or possessing drugs. This also gives a hint to the repression involved in the Swedish model.

My second question is: Are these "true" costs in human's lives in the increase of heavy drug users and repression unnecessary? My answer is: Yes! To a large extent these tragic costs are unnecessary consequences of the rigid, ideologically based drug policy called the Swedish Model.

So in conclusion let me share with you some reflections on what I consider the alternative: Ideologically or emotionally speaking, we must replace moralism, zero tolerance and the "war on drugs" with solidarity, understanding and love.

Now, don't misjudge me! I am not a flower-power kind of guy straight out of the 1960's. I don't believe in ever-increasing taxes and social welfare systems. I'm not blaming the capitalist system on the lack of social concern in the global market economy. On the contrary, I am a warm advocate of free enterprise, personal responsibility and limited government.

But this has to be combined with an understanding of the underlying psychological and sociological factors of drug abuse. People get messed up sometimes. All illicit drugs have their “relatives” within legal and medically accepted drugs and treatments. Morphine is known far back in history to be not only one of the greatest relievers of physical and mental pain.

And still, I haven’t yet mentioned any figures for the economic costs. This is because the true cost of Swedish drug policy is not primarily the enormous price of increasing the police force by as many as four times. I could have shown you the increasing number of prisoners on drug charges. Or the steady increase of social aid to drug addicts.

The true costs are the hundreds of people who have been killed by the Swedish drug policy over the past two decades.

Theft, fraud, and violence are increasing because of the criminalisation of drugs.

The Swedish Drug Users Union demands that medical treatment and addiction treatment in Sweden be separated from the government’s actions to prevent illegal drug trade. Actions to prevent the spread of diseases, such as needle exchange programs, must be initiated. The addiction treatment sector must be given increased funding and subsidies to be able to decrease the medical harm of drug use. Substitution treatment must be more readily available on demand for treatment. All psychiatrists should be allowed to prescribe Subutex and Methadone, not only those working in specialized drug treatment programs.

The Swedish Drug Users Union further demands that the use of drugs is decriminalized:

- Taking drugs out of the black market.
- Taking drug users out of the hands of the pushers.
- Allowing drug addicts to be part of the society and thereby reachable for help and treatment.

80% of those sentenced for drug crimes today, are people caught with quantities of drugs for personal use. Only 5% of those imprisoned for drug crimes have committed serious crimes. Imprisonment leads to further problems in dealing with drug addiction, since substitution treatment is not allowed in Swedish prisons.

The policy of condemnation must be replaced by understanding. Alienation is a major problem in the treatment of drug abuse.

We must spread the understanding that most problematic drug abuse has other underlying factors such as social or psychological reasons. Taking this into account can only increase the understanding of drug abuse and increase society’s ability to help. The alienation of society’s most fragile individuals is stronger than ever. Drug addicts die, drug addicts suffer.

But also the rest of society suffers as well by not only paying the tax bill, but by having their property stolen and in worse cases getting injured or even dying in the underground drug war.

And of course, everyone suffers the risk of their child, brother or sister being one of the unfortunate victims of Swedish drug policy. I have a 15-year old son. For his sake, I am fighting the Swedish drug policy. The true costs are too high!

Thank you!