



Another story about the Swedish Drug policy.

Sweden is by strategic means held out internationally as the country with the best drug policy in the world! The drug policy in Sweden is in our perspective highly problematic as it stands in opposition for the possibilities to work with methods of harm reduction. Why? Because of All treatment of drug users are based on a zero-tolerance approach – the goal is total abstinence.

One major point is that it is forbidden to use drugs in Sweden, which makes programmes for syringe exchange impossible to implement on a national scale – the argument that is used: society can not provide tools that are used to commit a crime!

The former drug policy coordinator to the government did a survey within the police: 9 out of 10 officers said it is more important to arrested 9 drug user instead of arresting the dealer that provided the drugs! That really shows how moralistic the Swedish policy is. The argument again: its illegal to do drugs! The goal must always be Zero-tolerance and drug abstinence.

The other related problem is that the programmes for Methadone and Buprenorphine are very restricted and burdened with rules of conduct – moral again - that in some cases leads to problematic users being kicked out of programmes for a period of minimum three month!

In Sweden we only talk about rehab and treatment as it is the solution to the drug problem! We never talk on behalf of all users that can not stop, or are not willing to stop! Sweden is the only country with in EU that has a law that forbid pharmacies to sell syringes! Also we only have 2 syringe exchange in all Sweden – in 2 cities – open 2 hr a day – closed sat and sunday!

We strongly believe that a new modern drug policy is most needed in order to solve the problems that comes with the "war on drugs" and most important – saving lives. A new policy must be free from dogma, based on Harm reduction principles, human rights, research and most important the drug users own knowledge. Nothing about us, with out us!

Swedish drug policy is based upon the idea of a good, drug free world, which means that the war on drugs must be scaled up in order to achieve this "dream". In Sweden this also means that fighting the existence of drugs has become more important than limiting and reducing the Harms that are caused by illicit drugs on both the individuals and on society. In Sweden The political ideas has more importance than saving lives? Politicians always focus on the so called "SIGNALS" instead of talking about reducing Harm.



Because of this Our brothers and sisters suffer and in worst case they die, not always, but too often because of the side effects caused by the Swedish zero tolerance drug policy – the STIGMA. More over, the criminalization not only of the drugs but of the personal drug use as such – which is the current Swedish legal system. There is two different and completely opposite strategies, one totally against drugs and drug users! The other one is more flexible and pragmatic, and in my opinion most realistic. With the consequence that supporters of the first approach consider (the ones against) supporters of harm reduction as facilitators and partners in crime with drug consumers.

The final argument from the defenders of the Swedish drug policy today is that it ensures the life and safety of our young ones. Fighting illegal drugs, in all aspects and in all ways these defenders claim – is the best way to ensure our children to stay clean from drugs, social exclusion, and premature death. We not only believe, we know! That these arguments are false and dangerous. Those of us within SDUU who have children of our own, all wish for our loved ones, that Sweden would follow the path of harm reduction.

I will explain some of the most central misunderstandings concerning drug use and drug addiction, that the current Swedish policy is based upon. In short: Demonising the drug means only demonising the drug user.

We call upon a policy for humanity and respect. The goal for every humane society must be the loving of each and every one of its children, without regard to the economical individual status. Therefore, reducing the harm, or so called "harm reduction", is the single most important policy on the drug field, in a modern and humane society.

The stigmatization of the drug user cause more death than narcotics do (quote: Dr Massimo Barra The Red Cross).

Swedes, in general, have no problem keeping prejudice at bay, or understanding that its effects can be devastating. Today we don't turn our trust to witch-craft, but we have a drug policy that is as far from science and reason as the 16th century witch-hunts - and about as effective. In Sweden we have been raised and learnt that drug users are a terrifying; a being with little control of his drives, always lying and manipulative. This image was created in the mid-end of the sixties by DOCENT Nils Bejerot, one of the most central architects behind the today's drug policy and foremost he created the moralistic non scientific drug treatment – total abstinence. One can say that he is the founding father behind the Swedish model - the good, Drug free society. One of Dr Bejerots ideas is that drug users must be made into a danger to society, a virus that must be controlled and struck against. The drug user must be treated as if he didn't know his own good, and must be taken care of.



One consequence of this "policy", is that the user's views and wills is not considered; the control of the individual becomes the whole point of the treatment - and not the users own doing - unless it fails, and by the same logic becomes the users fault. Did It make sense? This is so wrong, because a user's perspective is needed to establish methods based on reality.

My organization (The Swedish Drug Users Union) possess great experience and knowledge. Yet this, and scientific knowledge, is overlooked by politicians and other decision makers, as it would collide with the vision of the drug-free society. One may even go so far as to say that we have a situation where ideas and assumptions have more importance than facts and knowledge. We need to look forward, and also to bring closure to failed policy.

The focus should lay on the users need, not the societies need as today, Now we have to stop wasting time and energy on keeping alive a dogmatic vision that is not in accordance with reality. We do not protect society from illicit drugs by stigmatize the drug user. Instead we have to spread the light of science. Together with professionals, politicians, scientists and drug users a new drug policy can come to place.

With today's policy, we don't fight a plague, we fight humans.

A change of focus from preservation of dogma to preservation of the right to life and health. The focus must change from the no-narcotics and total abstinence of drugs policy, to a non harmful focus that holds a goal that preserves rights, dignity and respect for individuals. We must make clear distinctions between prevention, organized crime, and Harm reduction. With clear distinctions it is possible to avoid irrelevances in the work with the issue. Police should fight crime, social services care for help seekers, and treatment must be based on policies that use best practices drawn and based on science and research. Perspectives and experiences should be drawn from of users and professionals in the field.

Legislative evaluations and steps for change:

Sweden needs to identify and make haste to change legislation that increase and inflict harm on an individual level, as well on society. One of the most conflicting laws concern the use of drugs and it is forbidden to have drugs in your body; this is a major cause of hindrance for Harm reduction policy to be implemented at any level.

A Ombudsman for drug users- NARKO:

Sweden is a progressive state where an ombudsman for various group of interests is seen as an important instance for upholding Swedish and international law and intentions in regards to authorities. This should be as important concerning drug users. Drug users are often in situations where their rights are abused or over looked, for example in cases when they get thrown out of treatment.



A Harm reduction coordinator:

Instead of demanding even more cooperation between organizations there should be a coordinator that can gather the over all need for information, joint ventures and projects, that can also initiate projects and evaluate these before making recommendations.

Some disturbing facts are that - Almost 98% of the IDU:s have got infected by Hepatit-C with in 2 year.

Nothing About Us Without Us:

