



Drug policy reform in Norway

«From punishment to help»

actis

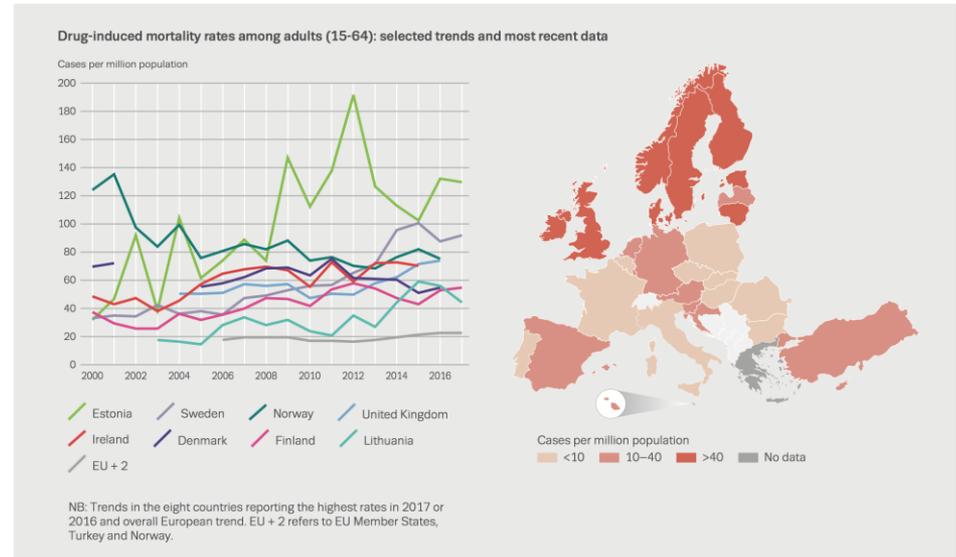
RUSFELTETS SAMARBEIDSORGAN

Drug policy in Norway

- Drug use and possession are criminal offences
 - Theoretically punishable by up to 6 months prison (- in reality rarely prison sentences)
 - Adults: usually fines
 - Young people: usually a structured follow up programme with the aim to reduce/stop drug use
 - No criminal record for young people under 18, unless repeat offenders or serious crime
 - Stronger emphasis on alternative sanctions - «drug courts», programmes for young offenders, «drugfree contracts»
- A gradual process of depenalisation over the past two decades - lower penalties, higher limits for amount of drugs for personal possession
- Low use rates - among the lowest in Europe
- Strong emphasis on expanding access to treatment and harm reduction services
 - Waiting lists for drug treatment reduced
 - Expansion of substitution treatment - researchers say the need is met
 - Expansion of harm reduction measures - needle/syringe program, substitution treatment, injection rooms, trial of heroin assisted treatment

Why drug policy reform?

- High overdose rates
- Continued problems despite expanding services
- Political pressure
 - Advocates
 - Media
 - Experts
- Edifying examples from other countries
 - Decriminalization in Portugal
- International bodies advocate for decriminalization:
 - UN Commissioner for Human Rights, UNAids, WHO, UN Secretary General, UNODC



What is decriminalization?

Decriminalization:

- certain acts are no longer criminal offences, usually; buying, possessing, using
- no court appearance, no criminal record, no threat of prison
- But: they are still illegal → sanctions can be applied, e.g. fines, warnings, suspension of driving or weapon licence etc.
- Many different options ranging from almost no reactions to strict sanctions
- Permitted within the framework of the UN drug conventions

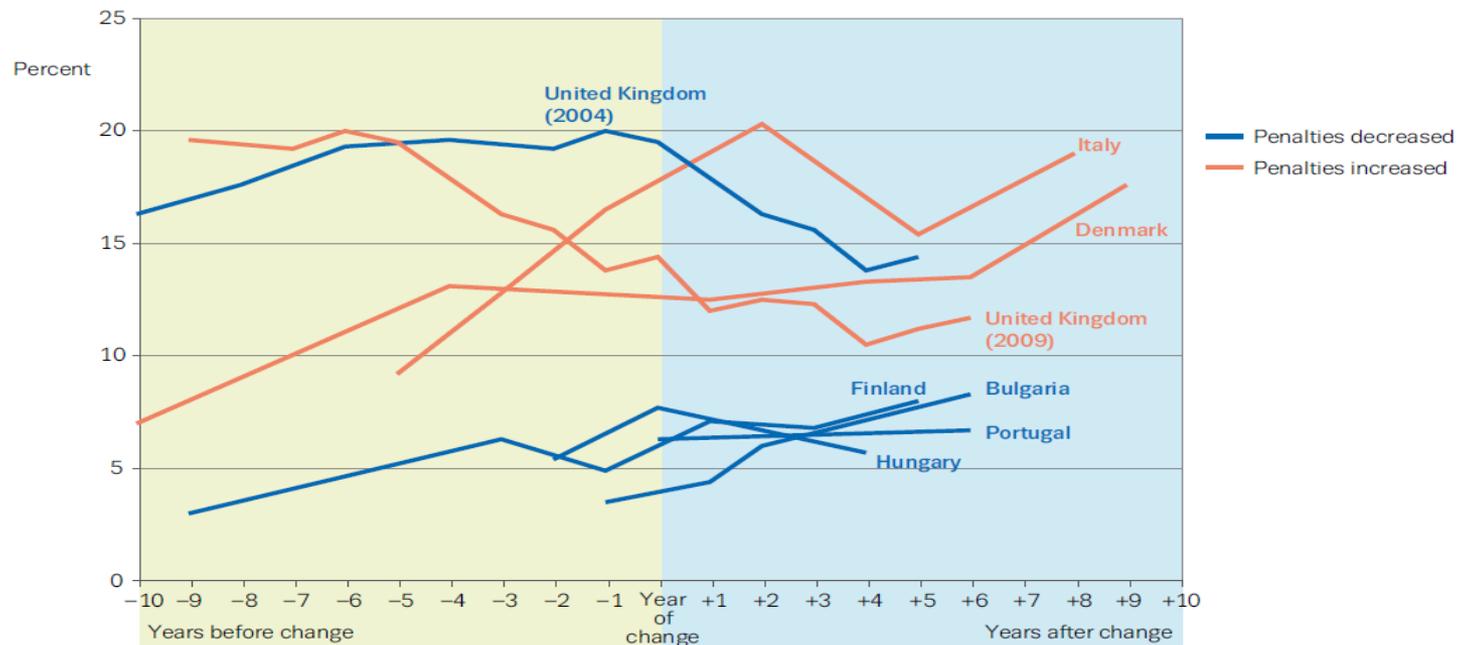
Differs from legalization

- production, sales and use legal and regulated
- in violation of the UN drug conventions



Consequences of decriminalization

Cannabis use before and after changes in legislation in selected countries: use in previous 12 months among young adults (age 15–34)



Portugal

- Since 2009 Portugal has become a «buzzword» in international drug policy
- Like many countries – heroin epidemic in Portugal in the 1990s.
 - High overdose rates
 - High HIV rates
 - Open drug scenes
 - Rated as the «biggest problem in the country»
- Portugal established an expert commission to address the problem and they presented a strategy
- In 2001, Portugal introduced a drug policy reform
 - Increased access to treatment
 - Harm reduction
 - Decriminalized possession and use of all narcotic drugs – from cannabis to heroin
 - Drug dissuasion commissions to give individualized sanctions



HELOMVENDING. På et møte med politiet i Lisboa får Bent Høie (H) høre hvordan rusreformen har forandret samfunnets holdning til narkomane. Her sammen med politioffiserene Carlos Reis (fremst) og Carlos Cachudo, og to medlemmer av kommisjonen, Nund Capaz og Nadia Simoes (ved siden av Høie). Statssekretær i helsedepartementet, Maria Jahrmann Bjerke og statssekretær i justisdepartementet, Thor Kleppen Sættem, sitter til venstre for Høie. Foto: Kristiansen, Tore

Høies nye rusreform: Vil behandle narkomane – ikke straffe

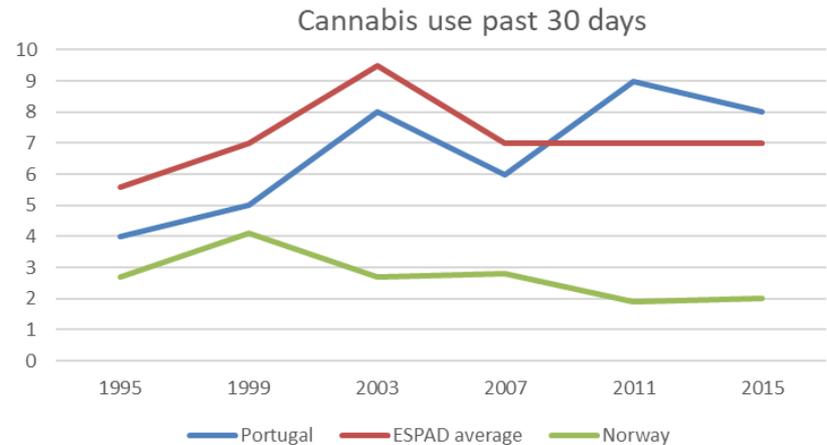
Dissuasion commissions

- Commissions – lawyer, social worker, doctor/psychiatrist – decide sanctions in individual cases. Sanctions primarily intended to help, but can also be punitive:
 - Fines (€25-150 depending on income) or community service
 - Warnings/admonitions
 - Withdraw work licences (e.g. Doctors, drivers)
 - Cannot go certain places
 - Cannot hang out with certain people
 - Ban travels abroad
 - Regular attendance at commission/therapist
 - Withdraw weapon licenses
 - Seize personal belongings
 - Stop payment of social benefits
- In reality, most cases are dismissed without any sanctions (>70 % in 2015)
 - 1 in 5 are referred to specialized support or treatment

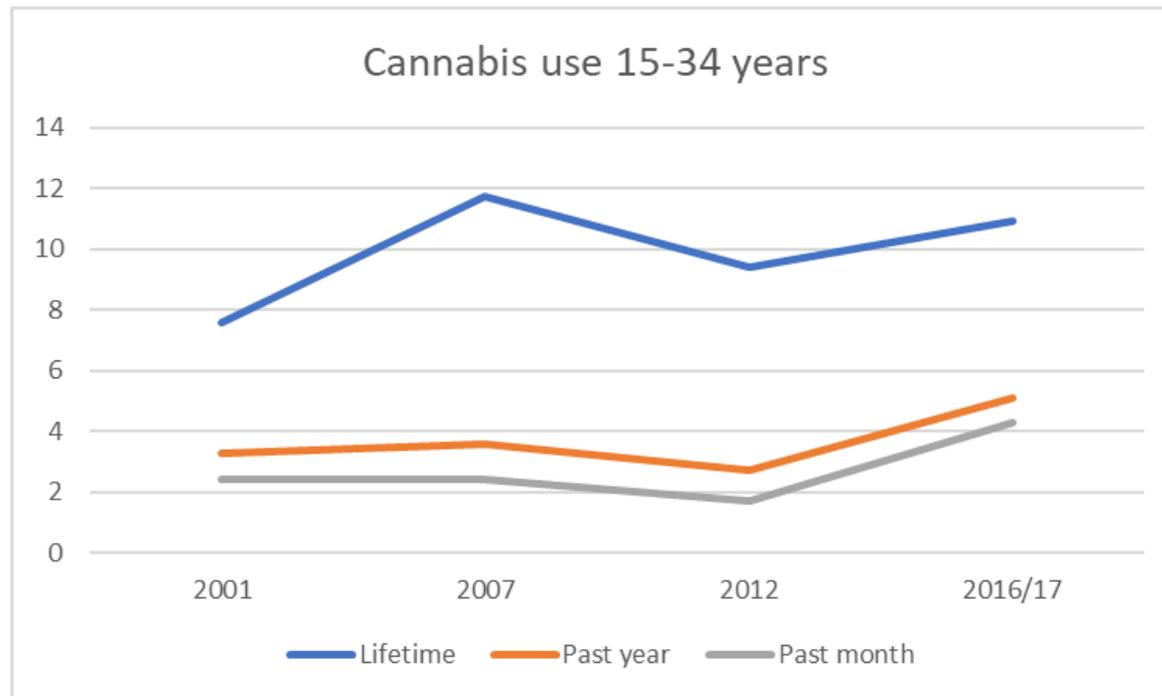


Drug use in Portugal - youth

- Portugal used to be lower than the European average, now slightly higher
- Not possible to attribute this to decriminalization - or any other policy change
- Norway (and Sweden) have lower consumption rates among youth



Drug use in Portugal - young adults



Drug related harm in Portugal

Reduction in drug related deaths

- Data series not good quality
- Similar reductions in other countries

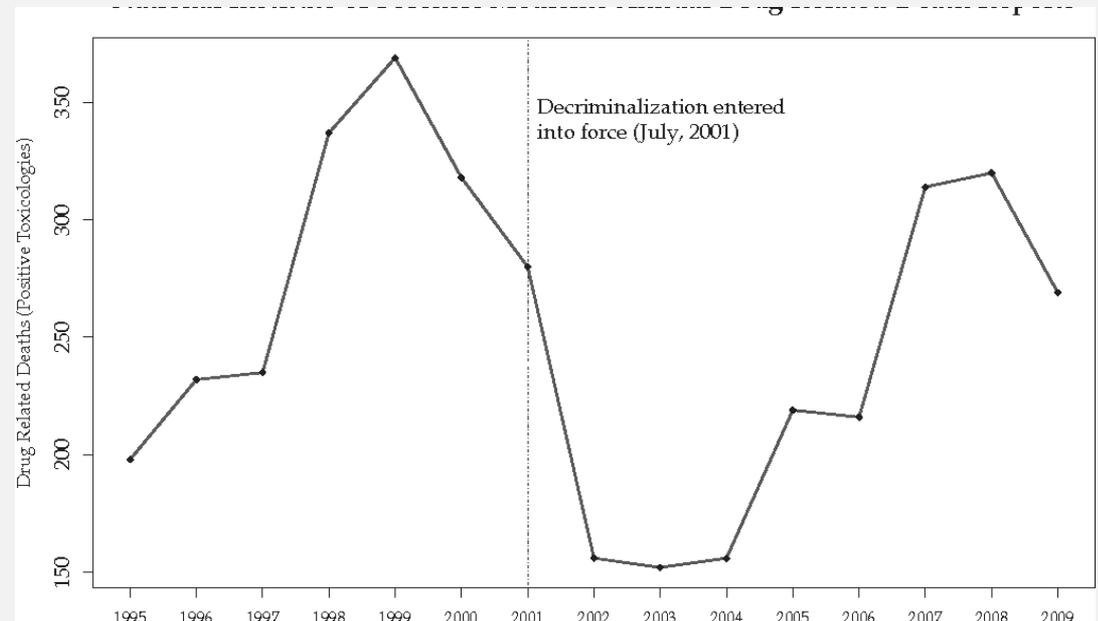
Reduction in waiting lists for treatment

Reduction in new HIV/AIDS cases

- From very high rates
- Still higher than in Norway and Sweden

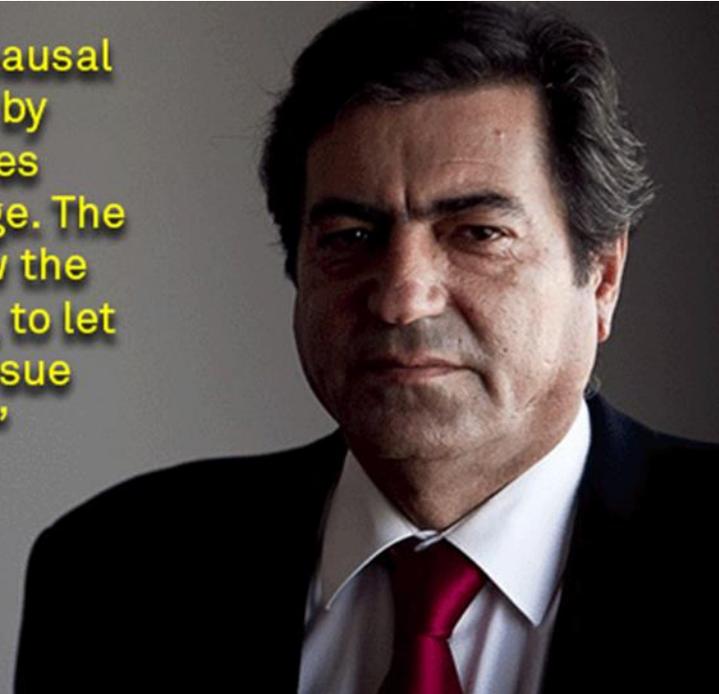
Evaluations of the policy have been positive - emphasize better health services, less problem use, less HIV/AIDS fewer deaths

No evaluations look specifically at decriminalisation



“It’s very difficult to identify a causal link between decriminalisation by itself and the positive tendencies we’ve seen ... It’s a total package. The biggest effect has been to allow the stigma of drug addiction to fall, to let people speak clearly and to pursue professional help without fear.”

Dr João Goulão
Architect of Portugal’s
decriminalisation policy



Drug Policy Reform...

The coalition government's political platform:

- shift society's response to people caught for use and possession of drugs from punishment to help, treatment and follow up
- responsibility for response to use and possession of illicit drugs transferred from the justice sector to the health services
- Recognise that drug problems are primarily a health challenge.
- Penalization of use and possession of illicit drugs has contributed to stigmatisation, marginalisation and social exclusion and may have been an obstacle to providing adequate help to users



“a significant shift in our understanding of what a drug problem is and how we as a society address this problem”

...but not a revolution

- not legalization of use and possession
- the police still have a role in uncovering drug use
- police can demand that the user gets health help and can impose sanctions if this is not followed up
- some hesitation regarding the word “decriminalization”
- a drug reform working group mandated to prepare the reform

Drug reform working group

Mandate:

- Figure out how - not whether - to decriminalize:
 - draft a reform that will shift society's respons to use and possession of illicit drugs from the justice sector to the health sector
 - look specifically at Portugal for inspiration, but also consider other models
 - ensure that the proposal is in line with international commitments, such as UN drug conventions and Human rights
 - ensure that the proposal can be integrated in existing services, organizations and government structures
 - open consultation process with stakeholders

Specific questions



How much is a user dose?

Should there be limits?



What sort of sanctions can be used?

if you are caught multiple times
If you don't follow up offers/sanctions



Should buying drugs be decriminalized?



Can existing alternative punishments be part of the model?



Can sanctions be harmonized with the principle that health treatment is voluntary?

Can health services impose sanctions?
Can health services monitor adherence to sanctions?

Some dilemmas

- Defining drugs as a health problem has consequences:
 - Health help is voluntary
 - The health sector is there to help people, not impose sanctions
- What do we do with the large number of users don't have a health problems at the moment?
 - Do we send them to the health services anyway? If not; what sanctions are available? Who will impose them?
- How do we meet young people who are caught doing drugs?
 - Can current follow-up programmes that are based on criminal law be continued - or must it be voluntary?
- Effects on the black market
 - Most studies don't find a clear effect of decriminalization on use prevalence - but probably context dependent - differ between user groups and age groups
 - Worst case is increased acceptance - increased use - growing black market
- Effects on police work
 - Decriminalization → police don't have a mandate to investigate, e.g. search home, frisk, check cell phones etc. → More difficult to gather information
 - Must expect that sellers adapt to new rules i.e. stay below decriminalized possession limits
 - Consequences for enforcement: Police priorities will shift when there is less incentives to discover and investigate use/possession
 - Penalties may be less important deterrent than risk of discovery



Drug policy reform in Ireland

- Mandate: «to consider the approaches taken in other jurisdictions to the possession of small quantities of drugs for personal use»
- Examine advantages and disadvantages of other models (e.g. Portugal)
- Legal/constitutional issue
 - Directing people to treatment when no crime has been committed
 - Not possible to set up dissuasion commissions etc with powers of civil sanction in Irish legal system
- Recommendations:
 - Formal warnings with first time use
 - Referral to early intervention or treatment
 - Information campaigns
 - No prison sentences
 - Clean record after three years
 - Referral from justice to treatment



Process ahead

- The working group presents its proposal on 19 December (?)
- Hearings
- Political process in Parliament
- Outcome?
 - Depends on the proposal
 - Majority support for the slogan «from punishment to health»
 - But - the devil's in the details



IKKE STRAFF MEN HELP. Flertallet i Stortinget vil nå endre norsk narkotikapolitik. Foto: Thomas Arnesen/NTB

Historisk i Stortinget: Slutt på straff for rusmisbrukere

Bruk av narkotika skal ikke lenger straffes, men behandles. Flertallet i Stortinget gjør nå en historisk omlegging av norsk narkotikapolitikk, og vil overføre ansvaret fra justis til helse.

