

# The new dual-track drug policy paradigm – an important and original finding

Tuukka Tammi

Medicalising prohibition: Harm reduction in Finnish and international drug policy. Helsinki: Stakes, 2007, 151 p.

Tuukka Tammi's dissertation, *Medicalising Prohibition*, is a serious, thoughtful, subtle, dignified and remarkably mature work of scholarship. It consists of six chapters, five of them published in leading journals or edited books, and one new chapter, the title of the work, which develops themes from the others and extends them in original and sometimes bold ways.

*Medicalising Prohibition* illuminates a complicated and shifting phenomenon: the place of harm reduction within the drug policies of Finland and to some extent other countries, especially since the early 1990s. In the new summarizing chapter he writes:

“The concept of harm reduction is typically associated with a drug policy strategy that employs the public health approach and where the principal focus of regulation is on drug-related health harms and risks... *The general conclusion of this study is that rather than posing a threat to a prohibitionist drug policy, harm reduction has come to form part of it.* The implementation of harm reduction by setting up health counselling centres for drug users – with the main focus on needle exchange and extending substitution treatment – has implied the creation of specialised services based on medical expertise and an increasing involvement of the medical profession in addressing drug problems. At the same time the criminal justice control of drug use has been intensified. *Accordingly, harm reduction has not entailed a shift*

*to a more liberal drug policy nor has it undermined the traditional policy with its emphasis on total drug prohibition. Instead, harm reduction in combination with a prohibitionist penal policy constitutes a new dual-track drug policy paradigm.”* (emphasis added)

In developing his conception of a two-track approach to drug policy, Tammi first observes that Finland has fully embraced harm reduction within a medical framework and system. In the early 1990s, harm reduction was barely heard of in Finland; nowadays it is successfully integrated into Finnish health care and services. Second, and contrary to the early hopes of some researchers including myself, he also finds that the acceptance and integration of harm reduction has not reduced coercive and punitive criminal justice policies. In Finland, and to some extent in other countries, harm reduction has been thoroughly adopted without a substantial softening in the legal status and criminal justice handling of drug users.

This is an important and original finding, one I have begun using in my own work on understanding the dramatically increasing numbers of cannabis and other drug arrests in the U.S. and Europe since the 1980s. I'd like to see the insight become an important part of the growing understanding of the place of harm reduction policies within contemporary drug policies – which Tammi correctly and courageously identifies as “prohibition.”

In each of the other five chapters (the original articles), Tammi examines in depth various aspects of the harm reduction movement, its implementation, effects and consequences. The first chapter asks, “Has the drug policy in Finland changed?” He finds that it has, but in a contradictory fashion. Although written before he had fully worked out the dual track understanding, the chapter describes empirically some of what he later explicitly conceptualized.

The second chapter, on “three factions” within the harm reduction movement, uses

original data about Finland and other European countries to distinguish serious professional and political differences in perspective and approach within the developing, international, harm reduction traditions.

The third chapter discusses “the struggle over the concept of harm reduction in the 1997 Drug Policy Committee in Finland.” It shows how the police and other criminal justice authorities interpreted harm reduction in a way that allowed them to continue doing much of what they had already been engaged in. Tammi finds that for the criminal justice system in Finland and at least some other places in Europe, harm reduction has involved a change in vocabulary but not by and large in practice.

The fourth chapter focuses on needle exchange programs and tells how they came to be adopted within Finland in the context of the HIV and AIDS epidemic. This is an important story and Tammi has pulled together a great deal of information making it available for the first time for researchers in and outside of Finland.

The fifth chapter contrasts the views of patients and their families on the one hand, and those of medical and other authorities on the other, showing them often at odds in their understanding both of the nature of the problem and the best remedies to apply.

*Medicalising Prohibition* is very well written and its English does the thing that good writing must: it gets out of the readers’ way allowing us to see what the author has seen. And to an extent that is rare even among very good writers, Tammi does not repeat himself. Indeed he seems allergic to redundancy. Read together, the chapters in *Medicalising Prohibition* appear not as discrete articles, but as parts of a “book,” an unusually clear and thoughtful one.

Tammi writes very much from inside the world he is studying, but he retains the distance and perspective to coolly, carefully describe what he finds. The social worlds he writes about are to some extent strange, odd, peculiar, even eccentric. He does not try to soften that or pretend that views of the

various social actors are always consistent or even make sense. In the spirit of Michel Foucault, he lets the strange remain strange. But he does not exaggerate or even highlight much the oddness of what he finds. Like a gentle, humane, empathetic anthropologist from an advanced civilization, or even a far away galaxy, he offers detailed descriptions and summaries of the often contradictory things the participants themselves are saying and doing, and the often contradictory ways that drug policy actually operates.

Tammi points out in various places in his chapters that influential individuals and groups in Finnish society regularly say that they seek to bring about what they call “a drug-free society.” The United States of America, where I come from, also has powerful groups, including the U.S. government, which likewise proclaim their commitment to a “drug-free society.” I’d like to briefly consider that concept of a drug free society, for it is part of the ideological support for the punitive criminal justice policy “track” that Tammi finds mostly untouched by the advance of harm reduction. The ideal and goal of a drug-free society are, I suggest, truly strange.

The same people and groups who unabashedly claim they seek a drug-free society never suggest that they seek or could reasonably expect to get a crime-free society, or a sickness-free society, a waste-free society, an intolerance-free society, or even an ignorance-free society. In all these and many other cases, everyone recognizes that human beings are living and therefore imperfect creatures, and that no society or culture can be free of problems – of crime, sickness, waste, intolerance or ignorance. In all cases, the wisest observers and participants, and even others not so wise, understand that it is sensible to try to *reduce* these problems, to shrink and minimize them. But nobody thinks we can be *free* of them. Except, for drug *use*. For drug use (and not just abuse) it is still perfectly acceptable for eminent and supposedly reasonable people to claim to seek perfection through social policy.

If that was the only problem with the notion of the drug-free society that would be quite a lot. But there is another problem: the concept it uses of “drug.” Everyone, including school children, understands that alcohol is an intoxicating substance, that alcohol is a drug. Many people understand that tobacco also contains a serious psychoactive drug: nicotine. And people who think for a moment also know that coffee, tea and even Coca-Cola contain substantial amounts of caffeine, which the pharmacologists (and our own bodies) tell us is also a psychoactive and physically active drug with substantial effects. A substantial number of pharmaceutical substances are also psychoactive, including natural and synthetic opiates such as morphine and fentanyl. There are prescription sedatives and tranquilizers including widely-used benzodiazepines like Valium. There are stimulants including prescription amphetamines and also anti-narcolepsy drugs, and substances such as Ritalin given to children. And there is a new class of drugs, the SSRIs – the serotonin reuptake inhibitors – of which Prozac is one, as are some illegal drugs.

Despite this abundance of psychoactive drugs all around us, prominent and respected individuals and organizations, including two U.S. Presidents named George Bush, and the U.S. government, have strongly called for a drug-free society. The United Nations

has even called for a “drug-free world.” All of this is not just odd or strange. It is not even just impractical or wildly utopian. Rather, I suggest that the goal of a drug-free society is best captured in a term that was used in other contexts by the great British writer Isaiah Berlin. The goal of a drug-free society is what Berlin called “incoherent.” The idea does not hold together. It actually does not make sense.

Tuukka Tammi touches upon this immense problem with the notion of the drug-free society only briefly and indirectly. He is more clinical than I am willing to be, at least right now. But his work on the character, spread and limits of harm reduction opens a path for further research and discussion about the real-world meanings and impacts of the often hidden drug policies routinely operating all around us. *Medicalising Prohibition*, from its title on, asks the right questions, and in seeking answers successfully contributes to making visible some of the poorly understood system of world-wide drug prohibition, including its more punitive goals and often well-hidden punitive effects. I hope he inspires other such work.

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