

WROZLAW



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Drug Addiction Unit
Municipal Council**

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Individual tragedies and their social context count for drug addiction problems.

This is not only a social problem, it is as well a society problem. The public interest concentrates on a rather narrow category of drug addicts: on those who use drugs of illegal trade and those who withdraw into a specific subculture because of the circumstances they have to live in - controversial to the stereotype of social health.

The attention is not given to those who present different forms of dependence but do not enter into the collision with the law, although their phenomenology of dependence is the same.

"Being dependent on something" is the common experience of almost all of us.

Therefore, the relations between drug addicts and the rest of the society should be based upon understanding, compassion, and help in their "return from dependence".

In Poland the drug dependence was treated as a socio-medical problem for the first time in the 1960ies. In the 1970ies it became part of a cultural phenomenon. At the beginning of the 80ies the phenomenon of narcomany became specially acute in towns and industrial agglomerations. The spread of narcomany among the Polish society and youth in particular accelerated the law regulations concerning this problem.

The legal procedures were facilitated by the fact that Poland is member of the International Convention on Drug Use and Abuse which implied certain obligations. The specificity of Polish drug addiction consists of the dominant use of opium and its derivatives.

The availability of *Papaver Somniferum* and poppy heads together with poppy straw always satisfied the demands. To obtain opium poppy very seldom required purchase and thus illegal traffic. The drug addicts usually cultivated poppy plantations themselves or bought it directly from the farmers. The production of "Polish Heroin" is done by two different methods - both easy to perform in home kitchens. Therefore, the supply of opium and its derivatives was almost unlimited and lead to rapid and severe dependence.

As a result of the easy and unrestricted access to opium poppy, a law to change this situation had already been passed in 1983. From then on poppy plantations had to be registered and after the harvest all products except the poppy seeds had to be sold to a local representative.

The new law on the prevention of drug dependencies was passed by the Polish government on January 31, 1985.

The aim of this new law was not only to punish but also to prevent people from addiction and cure. The law obliges the Ministries of Health, of Education, of Justice, and especially the Ministry of Agriculture to fulfill the new legal demands. It emphasizes the necessity of a widespread social involvement in order to create an attractive alternative model of life which would protect against escapism into the world of drugs.

The new law also penalizes illegal cultivation of poppies by destroying them immediately or by confiscation by the government. Moreover, the illegal cultivation of poppy and cannabis may be punished by up to two years of prison.

These penalties concern the collection of poppy milk as well as opium, poppy straw, cannabis resin, and cannabis plants. The poppy plants can only be cultivated on special conditions with governmental permission.

The law also restricts the availability of psychotropes as well as cocaine, hallucinogens and all other drugs causing dependence. It assumes that all medical and rehabilitation care will be voluntarily. Only persons under 18 years of age can be given compulsory treatment. Compulsory treatment can only be sentenced to people over 18 years of age as part of a penalty procedure in case of their breaking of the law (stealing, assaults, robberies)

The law punishes heavily those who are involved in trafficking and are responsible for the addiction of others in a direct or indirect way.

Punishment may be executed up to 10 years for the traffic and 5 years for illegal production. The use and possession of drugs is not penalized in Poland. The law has to teach, to cure, not to punish. As part of the new law the formation of a Prevention of Drugs Funds took place.

The law has inspired the creation of the Commission of Prevention of Drug Abuse. This Commission was nominated by the Prime Minister of Poland. The Commission has large competences and is treated as a counselling body.

The Commission also postulated and supported new associations for drug abuse prevention. Among them and most important:

- "The Association of Drug Users Families and Friends"
(concerning children and youth addiction)
- "The Association of Prevention of Drug Dependency"
- "Forge" (the organisation helps finding jobs for drug addicts and those who are in risk of becoming addicts.)

One of the main tasks of the Commission is to formulate new programmes of drug abuse prevention. Prevention means to understand and discover ethical factors that increase the risk of narcomania.

These are among others: a disintegrated family with conflicts, with few children or an only child, where both parents work outside of home. Factors favouring narcomania are a high tolerance for smoking, alcohol consumption, medicament ingestion, and nicotinism. But also an attitude of subjectivity, submission, emotional lability, anxiety and the sense of being wronged and threatened during childhood and adolescence.

Another inclining factor is the lack of capability to effort and to overcoming difficulties. An important factor is also a low level of tolerance to frustration, depressed selfconcentration and a lack of a definite hierarchy of values and of an aim in life, a depressed selfconcept, an unsatisfied need of affiliation, following the principle of seeking pleasure in life, and finally a milieu of drug users and an easy access to drugs.

Some of the above mentioned symptoms require confirmation in further studies of various milieus and groups.

At the moment there are about 800.000 drug addicts in Poland and only a bit more than 800 places in different "rehabilitation centres". There are 18 MONAR rehabilitation centres (MONAR=Youth Movement against Narcomany), 10 centres under the guidance of the Ministry of Health, 3 centres created by different churches: catholic, protestant, and baptist. There is also 1 centre of the Association of Prevention of Drug Abuse and 3 hostels.

There are also drug addicts wards in almost all psychiatric hospitals of Poland. "MONAR" has lately established 16 consulting points for drug users where they can come before and after treatment. Among those 800.000 drug users there are at least 100.000 infected by HIV. Drug addicts account for half of all seropositive patients in Poland.

In 1989 the Ministry of Health introduced a program for the prevention of HIV infections among drug users.

In Wroclaw, where I come from, there is a specific subculture of drug addicts. There are about 80.000 drug addicts and among them 1/3 of so-called "old users". "Old users" are a group of addicts who started to use drugs during the Hippie movement. It is a hermetic group with special norms and values. They do not allow newcomers to enter. As a result of this - the index of appearance of HIV in this group is almost "0". Young newcomers do not have any values, no code of behaviour and 30% of them are seropositive.

In Wroclaw and the Low Silesia region there are four MONAR centres and drug addiction is treated in 3 psychiatric hospitals.

The psychiatric hospital of Wroclaw engages in detoxication of drug users and runs a consulting unit for them. Participating in this line of therapy is a doctor on the centre's staff and a group of five persons from the MONAR Youth Movement for Control of Drug Use. Some of the therapists are people who have abused narcotics themselves. After the detoxication at the centre patients may be directed to a MONAR rehabilitation institution. For this purpose the Health Service in Wroclaw provided a

separate building and covers the expenses, salaries of the staff and cost of rehabilitation procedures. The rehabilitation of drug users takes up to two years. No form of organized support for persons who have undergone rehabilitation and have returned to their community has yet been developed.

A few years ago a regular ward for drug users with 10 beds has been established. Each patient of the ward can find a place in one of the rehabilitation institutions all over Poland after they are released from the hospital.

Moreover, the ward staff runs outpatient clinics for consulting and rehabilitation purposes. This ward also supervises a youth centre called the "Home of Warmness and Love" where young people who fear to become dependent on drugs can find help and support. This ward also accepts seropositives. The psychiatric hospital of Wroclaw was the first hospital in Poland to admit HIV infected persons. The preventive measures against AIDS are undertaken by the Wroclaw Municipal Council. The Commission of Health Protection of the Municipal Council has organized special "AIDS Schools" in order to educate the instructors on that subject.

Persons with a diploma of that school will organize lectures on AIDS related problems in all schools of Wroclaw. The Wroclaw professional milieu is very concerned about the prevention of drug dependency.

The efforts of prevention of all possible dependencies are also of great interest. In the psychiatric hospital a prevention program including a global approach is formulated which will involve schools, different institutions, youth organizations, the church, the Trade Union, sports clubs, the Association of Women, and television stations. This also assumes the participation of all members of the Wroclaw society in this struggle of freedom from "being dependent".

DISCUSSION



Margarethe Nimsch
Frankfurt:

First I have a question about the statistics. I don't know whether it was the translation; perhaps I just misunderstood. How drug addicts are there in Poland and how many in a city like Breslau? Perhaps you could tell us what the population of Breslau is, and how many Poles there are altogether? I think I heard the figure 800,000 drug addicts, but that can't be right.

Ms Serafinowska-Gabryel
Wroclaw:

In Poland, yes. But in the Lower Silesia region it is 70.000 drug addicts. Because Wroclaw is the capital of Lower Silesia. There are about 5 Million persons living there.

Margarethe Nimsch
Frankfurt:

In a population of 5 million you have 70,000 drug addicts?
Not including people addicted to alcohol?

Ms Serafinowska-Gabryel
Wroclaw:

Well, I may be not quite correct, because I don't know how many we have in Lower Silesia exactly, but let's say in Wroclaw whose number of inhabitants is a little bit like Frankfurt, around 800.000, we have something like 12.000 drug addicts. Among them there are 1/3 of old users. This means that they are not infected by AIDS.

Kurt Lange
Hamburg:

What do you mean by "drug addicts"? Do you mean those who are growing or cultivating opium poppy and are opiate takers, or do you mean drugs altogether that is any kinds of psychotropic substances except alcohol?

Ms Serafinowska-Gabryel
Wroclaw:

Exactly - all others except alcoholics.

Kurt Lange
Hamburg:

Could you give us a calculation about the heroin or opiate users?

Frau Serafinowska-Gabryel
Wrozlau:

Yes, 80 % of these.

Kurt Lange
Hamburg:

80 % of these 800.000?

Frau Serafinowska-Gabryel
Wrozlau:

Nowadays it might have changed a little bit, but 80% was the number in 1988.

Kurt Lange
Hamburg:

But you said the problem in Poland was less tragic as in other countries. According to the figures you gave us, it is even worse. With regard to injecting, sniffing, or inhaling heroin or other opiates...

Frau Serafinowska-Gabryel
Wrozlau:

They are mainly injecting and then they are drinking it. They make a special comport as it is called.

Kurt Lange
Hamburg:

Yes, but how many are those?

Serafinowska-Gabryel
Wrozlau:

As I said: 70 to 80 % of all drug users.

Kurt Lange
Hamburg:

But that is much higher than in Germany and all other countries over Europe.

Frau Serafinowska-Gabryel
Wrozlau:

Yes, I think it is, because because we have this access to opium and a limited access to heroin.

Mr Hofmeister-Wagner
Frankfurt:

I think that this drug addict statistic, which I too find horrifically high, is due to the fact that we are here talking for the first time about opium, which in Germany is of very little significance, and which in Poland people evidently grow for themselves. This sort of thing goes on in North Hesse too: cannabis in the allotment garden. It gives the matter a different dimension when we say these are opium poppies which I can grow for myself. In the past there was not much in the way of prosecution. At first the statistic shocked me, and I thought there must be at least one zero too many. But when I consider how the supply system must operate, then it seems perfectly conceivable against a population figure of 5 million. The logistics, the road from producer to user, are obviously very different, and I would assume that Poland doesn't have our problem of trafficking.

What I'd be interested in is how exactly the heroin is produced, because there must be a quite different effect owing to the other alkaloids and the potencies they have, which are, of course, not present in the heroin we have. Perhaps just a short explanation.

Frau Serafinowska-Gabryel
Wroclaw:

But I'm not really a specialist of this production, so I will tell you the parts of process. First you have to pick and dry the poppies. Then you put it into a big casserol and pour a certain amount of water over it - lets say, it must be covered at least five times. Then you add the chemical things like - what's the name in english? - an acic-acid - after a few hours of cooking it, you have this comport. This can already be used orally and also be injected. Those who have a little more patience to wait, cook it with some other things. After it has been boiling for some hours you have to put it into a very hot oven and "fry" it and the you get the powder. The powder is dissolved with something to get a liquid again and this liquid is what we call "Polish heroin". There are two possibilities to use it: one is found in Gdansk and the other one in Elenagora (?) near Wroclaw, this one needs chemical compound which are possible to get there because the have some chemical plant there. It was no problem to smuggle some of the chemicals out. Now it is no longer possible as the smuggle has been stopped. So, now you can only make the compound in the Gdansk way where in the last process of making the compound some special components were used. This is why the access to this Polish heroin is really unlimited.

Ernst Buning
Amsterdam:

This morning we heard about the incredibly high prizes here in Frankfurt and in Zürich. We all know that the economy in Poland is suffering very hard and there is a lot of need for hard western valuta. And by the first of January the Polish people can travel

to the western side of Europe - what is the likelihood, that some "smart" people will start to supply the western European countries with their poppy products for a very cheap price?

Frau Serafinowska-Gabryel
Wroclaw:

Well, I think we have to think about it. It is very possible that this might happen. On the other hand we already had times when we didn't need any visa for Austria or the Scandinavian countries and this traffic never really developed. We didn't have these problems yet. But that may be also because of the rather unusual idea of going abroad. Now this has changed and Germany and Holland may be easily accessible. I think it is better to know it in advance but if it happened, it might be that drug addicts will be severely poisoned by Polish heroin coming into this scene. I hope that we will at the same time try to stop it, especially when we know how cheap Polish heroin is in relation to your prices. We have already discussed this, because it is in our interest and also in your interest. But we have to be absolutely conscious about it.

Dr. Bossong
Hamburg:

I'd like to get back to the statistics again. Are the 800,000 people you mentioned addicts or users?

Frau Serafinowska-Gabryel
Wroclaw:

These are people that have come into contact with drugs and are treated as potential drug-addicts.

Dr. Bossong
Hamburg:

That probably makes my second question superfluous. I wanted to ask whether the addicts are an open and public problem, as is the case with us, for example.

Frau Serafinowska-Gabryel
Wroclaw:

I think this is really a very interesting question. Actually they are not. There is only a tiny percentage of them who live in miserable conditions. We have not the pictures we saw today very often. It is getting a little bit like it is in Holland. The drug users are gathering in certain places but they are still much more in touch with the society than drug users we heard of earlier. But in connection with AIDS the hostility of the society might also get stronger.

Dr. Bossong
Hamburg:

Does that mean that drug consumption and consumers are more integrated in society?

Frau Serafinowska-Gabryel
Wroclaw:

It is not accepted, but these people are not despised although they are living in some sort of an isolation, because they live in groups where they understand each other better. But society doesn't actually "sort them out". But they are definitely different from the rest of the society. Those who have overcome their addiction are very eager to work in the field and we accept them with pleasure, because we feel this is the best connection you can have to drug users.

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