

THE RESPECT AGENDA

In the second of his two-part article on Danish drug policy, Blaine Stothard looks at the provision and amenities for active drug users in Copenhagen.

It was snowing when I arrived at the entrance to BrugerForeningen (BF – Danish Drug Users Union) in Copenhagen's Nørrebro district, but the climate inside was anything but wintry. Before I had taken my coat off, I had been noticed and welcomed by some of the 'active users' – in BF's terminology defined as current substance users involved in attending and managing BF's premises and activities.

On the third floor of a building used for social and community purposes, BF provides a drop-in room service from 10am until 3pm, after which it's members only (for a fee of about £12 a year). There is just one paid employee, but there is always a duty officer and a trainee in attendance during drop-in opening times. All the work is done by the users. Other facilities in the building have hosted conferences, anniversary celebrations and their 'User Friend of the Year' award – recipients of which have ranged from NGO workers to politicians.

BF's Chair, Jørgen Kjær, introduced me to the users. The first person I spoke to told me: "I feel at home here – because I am at home." This sentiment was echoed by others during my visit, reflecting BF's success in creating an atmosphere of respect for self and others and of 'peace and quiet.' This contributes to stabilising users and ensuring that their using behaviour is as safe as possible, with information and seminars on safe injection – keeping users alive and, ideally, in improving health.

Tobacco smoking is allowed and cannabis is tolerated: it's a pre-dinner ritual for some to promote appetite and

accompanies a public hand washing ritual before the evening meal 'to show that we care for one another.' Cocaine and alcohol are not permitted on the premises, however: Jørgen Kjær says that it can make individuals' behaviour unpredictable, selfish, aggressive or confrontational, behaviours which would undermine the peace and quiet ethos.

BF organises seminars for politicians, the media, and drug and alcohol practitioners, including the police, and arranges placements for social work training institutions. Regular safer injection seminars are run for first-time attenders, with refreshers for longer-term users. Clean works are easily available in Copenhagen and BF's activities include a syringe patrol, operated since 1997, which collects discarded works from streets and other publicly accessible areas in Vesterbro, an area of Copenhagen frequented by injecting drug users because of its open market.

Another activity undertaken by BF is to show users how to make 'safer' crack. They justify this, both as a way of engaging with crack users who are often marginalised even within the drug-using community and to assist in the production of a substance which is 'cleaner' than that bought on the street. They want to encourage the substitution of ammonia with baking soda, as there have been cases of acid attacks between dealers in dispute.

BF's wider aims include re-establishing the humanity and dignity of users, setting a political agenda for reform and countering stigma and

prejudice. BF was also active in the campaign for the provision of medically prescribed heroin introduced on a limited basis in 2008.

Not surprisingly, the campaign attracted a lot of media attention. One article in *Berlingske Tidende* (think *Daily Telegraph*) pinned on the BF notice board described the situation of a 27-year old female cocaine and heroin user, who obtained some of her income from commercial sex work. She had a 71-year old client with necrophiliac tastes who would 'feed' her with sedatives and sleeping pills until she was comatose and then have sex with her. She was 'paid' in more drugs. This helped shift some public and political opinion towards supporting the legalisation of heroin prescribing, so that users were not reliant on degrading behaviours and lifestyles to fund their substance use.

However as mentioned in the previous article, the strict rules and regulations surrounding provision make it unattractive for many users; because the prescribed heroin has to be injected – it cannot be smoked or sniffed – users who have never, or who have stopped injecting, now have to in order to comply with the regime.

Out on the streets, the voluntary agency Fixerum operates a 'Fixerlance' (a combination of fixerum and ambulance) in and around Vesterbro. This provides a sheltered space for users to prepare and inject their (illegal) heroin using sterile equipment. Fixerlance is staffed by volunteers, including qualified doctors and nurses, who are legally required for administration of naloxone, with which

Fixerum Chair, Michael Lodberg Olsen



PHOTO: BLAINE STOTHARD

Campaigners see increased availability of naloxone as essential to a wider campaign to reduce drug-related deaths – 276 in 2011, compared to 115 in 1995, in a country with a population of 5.5 million. Revised regulations on the availability and administration of naloxone could, campaigners hope, form part of a new national drugs strategy.

Many campaign aims require new or amended legislation – regulation of medically prescribed heroin and the wider availability of naloxone. Some first steps were taken this summer: the Ministry of Health will now allow prescribed heroin to be ingested in tablet form but has rejected suggestions that smoking heroin also be allowed. Use of nasal spray is still being considered. *Druglink's* readers may be familiar with Copenhagen City Council's proposals to regulate production and supply of cannabis, still on the political agenda although the initial proposal that legislation be prepared was rejected by the Ministry of Justice in May.

About 600 users visit Vesterbro's open market for illegal drugs. About 40 per cent live in the area. Some users with whom Fixerum has contact are not Danish citizens. Eastern Europeans known to Fixerum and other agencies are frequently homeless. Awareness is growing of an association between crack use and asylum-seekers. There is some overlap between users, homelessness and commercial sex work, but prostitution does not seem to be a major source of funding of illegal drugs purchases.

The overriding impression from my visit is the disparity between national legislation and the highly responsive practice of some voluntary agencies, such as BF and Fixerum. The work of these agencies has direct personal support from many politicians, local and national, and some funding from Copenhagen City Council and national Ministries. This is strikingly illustrated by the acceptance of BF's current illegal drug users as appropriate individuals to be trained in the administration of naloxone. Although this is beginning to change, the personal and financial recognition and support for the work of these voluntary agencies has yet to translate into legislation which would allow users throughout the country to benefit.

■ **Blaine Stothard** is a prevention specialist and *Druglink's* book reviews editor.

ASKED ABOUT HIS MOTIVATION FOR HIS CAMPAIGNING, FIXERUM'S CHAIR AND DRIVING FORCE MICHAEL LODBERG OLSEN SAYS SIMPLY, "IT'S BECAUSE I LIVE HERE"

the mobile fixerum is equipped. Two users can be seen at a time.

Fixerum had a low-key launch in September 2011. Fixerum was prepared to contest any legal and court actions, by residents or the local authority, but there have been none. Some of Fixerum's funding, including its Fixerum's purchase, has actually come from local residents and businesses. Fixerum has offices in the former meat-market buildings in Vesterbro. The buildings are now used for a variety of social and commercial purposes: one catering enterprise, established by former illegal drug users, rejoices in the name Junk Food.

Asked about his motivation for his campaigning, Fixerum's Chair and driving force Michael Lodberg Olsen says simply, "it's because I live here." With other volunteers, Olsen had previously opened a café and health centre for users, including a room for smoking cannabis and crack. Police acceptance of this activity required that the premises were not used for dealing. When the

City Council realised this, and that the toilets were being used to inject, Olsen had to leave the management body and his role as director. The City Council took over the running of the café, with guards at the toilets, and closed the smoking room. Fixerum argued for extended opening hours; instead they were reduced.

On a more positive note, in June this year, a national law was passed permitting the establishment of consumption rooms. Fixerum is now commissioned by Copenhagen City Council to provide the Fixerum service seven days a week until a building-based consumption room is opened in 2013. Concern among campaigners that the new law would, in line with the regulations for medically prescribed heroin, require users to inject has been allayed: consumption room users can inject, smoke or sniff their heroin. Such conditions, along with the credibility established by existing staffing, are likely to encourage take-up of this service. Olsen estimates that five fixerums are needed in Copenhagen to cater for users buying on the illegal market: users of prescribed heroin cannot take it away from the clinic where it is supplied.

Another hot topic at the moment is the provision of naloxone. Currently a prescription-only medicine, administration has been extended in a trial involving BF where 14 active members have been trained. BF and the harm reduction campaigning organisation Gadejuristen are pushing for the availability of naloxone to be extended to users, families and friends.