



The Vienna Drug Policy 1970 to 2005: External and Internal Views

*Irmgard Eisenbach-Stangl, Arno Pilgram,
Christine Reidl*

Project Directors:

Irmgard Eisenbach-Stangl, Arno Pilgram

Irmgard Eisenbach-Stangl is

Senior Social Scientist,

Christine Reidl is Researcher at the

European Centre

for Social Welfare Policy and Research,

Programme Area "Alcohol, Drugs,

Addiction".

<http://www.euro.centre.org/eisenbach>

<http://www.euro.centre.org/reidl>

Arno Pilgram is Senior Researcher at

the Institute for Sociology of Law and

Criminal Sociology, Vienna

In the 60s of the last century, the international drug policy changed substantially: its focus shifted from supply control to demand control. Demand control was conceived as addiction control, and addiction was understood in psychological terms to be a problem of the individual. Accordingly, the drug policy instruments were altered and expanded. On the one hand, the "repressive, socially excluding penal measures now also aimed at individual drug users; on the other hand, new measures were introduced: "Early diagnosis, treatment, information, after-treatment, and social re-integration" are, for the first time, mentioned as drug policy measures in the Single Convention of 1961. By introducing measures of "integration" or "assimilation", drug matters became the responsibility of not only national policy authorities but also – and this was the novelty – of regional authorities that had so far been in charge of health, social welfare, and education in Austria like in most European countries. Whether the local policy became active in drug issues and in what ways it became active and how it cooperated with the policy at national level, varied regionally.

The Formation of a Regional Drug Policy

This study investigates the formation of a regional drug policy and takes Vienna from 1970 to 2005 as an example. The investigation starts at a time when the authorities in the capital of Austria also began to react to the fundamental changes of both drug consumption and drug users, changes which had led to the inclusion of measures of integration in the

international drug policy. This was essentially due to the fact that cannabis had become the most-used illegal substance, and that drug users had become younger and belonged to the educated classes. The development of the Vienna drug policy will be studied from different angles and for a period of 35 years. The angles consist of an “external” perspective – scientific and as objective as possible, and an “internal” one – the subjective views of two groups of people that were affected by or involved in the changes. The “external view” and even more so the “internal views” may also be seen as a – qualitative – form of evaluation of the corresponding activities of the community.

Studying External and Internal Views

As for the external view, the development of the different branches of the municipal drug policy machinery was studied on the basis of reports and statistical material in addition to which – when necessary – oral information was collected. On the same basis, the national context was examined, and here especially the drug legislation and the activities of the respective executive authorities since these two areas are central to the national drug policy and influence and restrict the local authorities. With the help of this material, five phases in the development of the Vienna drug strategy could be identified on the basis of which the two groups of people concerned were selected.

The people concerned are, on the one hand, professionals who played a major role in the implementation process of the Vienna drug policy in the period under investigation – such as drug coordinators of the City and the persons working in the various drug services – as well as persons who implemented the internationally/nationally determined drug strategy in the area of Vienna, that is drug crime specialists such as members of the police and the judiciary. These people were referred to as the “actors”. The second group of persons concerned whose “internal views” of the Vienna drug policy are relevant for this study were drug users and relatives of drug users. These people were referred to as the “addressees”. Four subgroups of “addressees” with different drug policy experiences were interviewed: (1) “Inconspicuous” drug users who had not come in touch with drug policy measures in the form of either “repression” or “assimilation”; (2) long-standing “clients” of facilities of the Vienna drug service; (3) “criminalized” drug users who had been confronted

primarily with “repressive” institutions, especially with the penal system; and (4) “relatives”; the latter were differentiated according to the extent of their drug policy engagement. Of those concerned, a total of 90 people were talked to in guided interviews that took half an hour, sometimes two hours, and more, and that were, with the interviewees’ consent, tape-recorded, transcribed, and interpreted by means of content analysis.

The Vienna Drug Coordination Pacifies and Enhances Professionalism

The results of the first part of this study, the Vienna drug policy seen from a social science “external perspective”, show that the City’s drug policy machinery developed late; but once it got started, it moved rapidly in terms of integration – of drug users, drug consumption, and finally of the drug services. At the beginning of the time period under investigation, the City authorities hardly became active in tackling drugs: in Vienna, it was mostly repressive institutions under federal administration which reacted to the first *Gammler* (in English: loafers or beatniks), as the youthful cannabis users and critics of society of the late 1960s were called by the professionals who then worked in that area. About ten years later, when drug consumption and drug users had again changed and had started to get marginalized, the local authorities reinforced their activities and set new trends in the fields of treatment, care, and prevention as well as in the administration. At that time, the national drug strategy was – also financially – supporting the development of measures of “assimilation” to control the demand on a regional level. And already in the mid-80s of the last century, in both the capital and the other federal states of Austria, the impact of drug policy measures of “integration” began to exceed those of “repression”.

In the late 80s, the development of the various regional drug strategies is, in Austria, accompanied by inter- and intra-professional conflicts about the “nature” of the drug issue. Especially in Vienna, the various professionals in the fields of prevention and care argue fiercely about adequate aims and means of intervention: some favour abstinence and abstinence treatment while others go in for the reduction of risk and harm. The conflict leads to the establishment of a proper drugs administration in Vienna. In 1992, a drug coordinator of the city of Vienna is appointed. In

his office the municipal drug policy activities and the money available for drug matters are coordinated, drug policy is turned into a “cross-section policy”. From now on, the development of a City drug strategy accelerates: the drug service facilities are extended, diversified and professionalized. Thus, conflicts among the different drug service facilities are pacified, at least for the time being. New rehabilitation and prevention facilities are founded, and the manifold drug organisations of both the City and the State are networked. The numbers of – actual and potential, marginalized, and socially integrated – drug users who are reached by the communal drug services multiply, but at the same time, those who become recorded by the police and are subjected to the judicial machinery become more numerous, too.

Over the last years, the Vienna drug policy has been faced with more difficult general conditions: The partial privatization of the Vienna drugs administration carried out at the end of the 1990s had the effect that cost calculations became more important. Furthermore the communal drug policy – as in other European cities – was pressed for introducing measures that would protect the general public from (potential) nuisance of drug users. At the same time, the national drug strategy became (once) more restrictive, and the drug situation in the City got worse: The number of both marginalized and socially integrated drug users increased, and the drug market became more professional – probably because of intensified police surveillance on European level. Small-scale drug dealing, which for quite some time had been in the hands of local drug consumers, was increasingly taken over by foreigners, which had the effect that the drug issue was again, and more than before, connected with the question of foreigners, immigrants, and refugees.

Drug Policy “Actors” Support the Municipal Drug Policy

What do those concerned think of the development of the Vienna drug policy and how do they react to it? The interviews with the “actors” do not give a uniform picture, but there is certainly unanimity and little inconsistency: almost all of them approve of the Vienna drug policy. The most positive answers come from City and district politicians as well as from members of the Vienna drugs administration. Politicians and administrators both emphasize the successful settlement of conflicts, the good compromise, and the consensus upon which the Vienna drug policy is based and by which the drug policy differences of the political parties as well as those of the various drug services could be pacified. Also the

actors of the various municipal drug facilities – abstinence-oriented, risk- and harm-reducing, preventive, and rehabilitative – have a positive attitude towards the development of the Vienna drug policy. But when it comes to evaluating the development of the last years, a critical undertone can be heard: according to these “actors”, the increasing importance of cost-benefit calculations and the growing orientation towards efficiency and effectiveness not only limit the scope of action but also obstruct the introduction of the necessary drug policy innovations. And there are finally the interview partners that work in the police force and the justice system and that look at the Vienna drug policy from a certain distance, partly with goodwill, but partly with reservations and distrust. Those with goodwill – that is all the interviewees who work in the penal system, but not all of the representatives of the police and the judiciary – consider themselves as parts of the municipal drug policy and welcome the cooperation or want to improve it; those with distrust consider themselves to be obliged to other – higher – policy levels. But the real source of conflict is located between the security executive and the judiciary.

The Drug Users’ Views are Determined by their Experiences With Drug Facilities

The “internal views” of the “addressees” differ more fundamentally than those of the “actors” and are clearly determined by their experiences with the various drug services. Those who have remained “inconspicuous” – mostly because of their own good social resources – rely on their own problem management and informal networks. They have a positive attitude towards the City drug policy and the “integration efforts” of the municipal drug facilities, but these facilities are further away from “inconspicuous” drug users than their “repressive” counterparts. While the latter represent a hostile (drug) morality against which one may negatively develop and sharpen one’s own (more “honest”) principles, the former are to be avoided: even when one’s own problem management fails, one will not take refuge to them because they are characterized by their clients’ stigma. The “clients”, however, by taking refuge to institutions of “assimilation” protect themselves from “repression” by the police and the judiciary, which they fear, and they use drug service offers more or less independently. Although they may be seen as customers who are able to choose, they themselves feel caught inside the City drug machinery. Such feelings are, on the one hand, due to the stigma that is attached to these drug users as well as to the drug service, and, on the other hand, to a lack

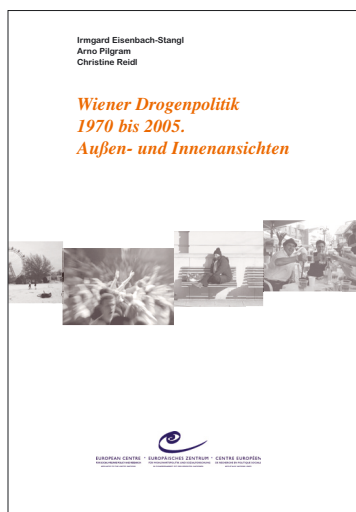
of alternatives such as job offers in the labour market. Finally, those who are “criminalized” feel rather distant to integrative facilities, which, to some extent, has to do with their unfulfilled expectations. Instead of being sick, dependent clients of the drug services, they prefer to be “losers” or just persons with bad luck who could, however, learn and act more cleverly the next time. The “criminalized” drug users, who mostly come from under-privileged milieus, have adapted to the “repressive” drug facilities, and hardly criticize the repressive drug morality that is represented by them. The fourth and last group of “addressees”, the relatives – almost exclusively mothers – cannot orientate themselves by either the municipal drug policy or the international/national drug policy: they criticize the City drug policy and its “integrative” facilities for giving up abstinence as the exclusive aim of drug policy; they also criticize the internationally and nationally controlled repressive measures because these measures hit drug consumers – and therefore their own drug-addicted children. In general, relatives feel excluded from and neglected by the drug policy and see themselves as uninvited spectators or as victims; they wish for greater solidarity, but such a wish at present can apparently come true only when the relatives themselves can come to terms with being “clients” of the municipal drug service.

The Vienna Drug Policy is Successfully Walking a Tightrope in the Service of Social Integration

To sum up, the history of the Vienna drug policy as written down in the documents and statistical material used for this study and as told by the “actors” and “addressees” in the interviews can be read as a success story of a regional drug policy within the European Union. It is the story of a successful act on a tightrope that is moved and ever so often shaken by different social forces which, in some cases, work against each other. The Vienna drug policy started late, but once it got going, it moved on resolutely towards coordination by combining drug-related activities in the City with respect to organization and subject matter (“cross-section policy”) and towards social integration by professionalizing the various drug services. However, in recent years, the limitations of the Vienna drug policy have become more obvious. These limitations are, on the one hand, due to the fact that the decision-making powers of the City authorities do not extend to all the relevant drug policy organizations and areas and that the various activities of the relevant organizations and areas are



not sufficiently tuned. This situation has, among other things, led to the (expensive) duplication of control activities and has resulted in different control cultures for different groups of drug users. On the other hand, the Vienna drug policy is restricted because it cannot, by definition, influence all the political areas that determine the drug situation. It is necessarily a “lifestyle policy” that cannot fight the causes of the social problems that are the breeding ground for the way of life under discussion, such as poverty, unemployment, and lack of education. The limitations that become obvious by investigating the Vienna drug policy as an example of a regional drug policy will hopefully stimulate the concept of a “holistic” drug policy on all the different levels: the national as well as the supranational levels; may these study results also work as a reminder that there are basic social problems that have to be tackled in the fight against drugs.



WIENER DROGENPOLITIK 1970 BIS 2005. AUßEN- UND INNENANSICHTEN

This study examines the development of the regional drug policy of Vienna in the years from 1970 until 2005. The investigation starts at a time when the authorities in Austria began to react to the fundamental changes of drug consumption which had taken place in industrialized countries in the 1960s: drug users were younger, better educated, and more critical of society, and cannabis had become the most-used illegal substance. In Austria, like in other countries, “integrative” measures in the areas of health, social welfare, and education were added to the arsenal of repressive, criminal-law instruments of drug policy. These new measures were used and expanded on a regional level.

The study that looks at the history of the Vienna drug policy over a period of about 35 years does so by applying two angles: a scientific observer’s perspective is supplemented by subjective views of two groups of those concerned with or affected by the new policy. The “internal views” can also be read as a – qualitative – form of evaluation of municipal drug policy activities.

For the “external view”, the development of the different branches of the municipal drug policy machinery was examined on the basis of reports and statistical material. On the same basis, the national context was studied, especially drug legislation and the activities of the executive authorities, which are both central areas of the national drug policy that influence and restrict local drug policy authorities.

Those concerned are, on the one hand, professionals who were, in the period under investigation, active in implementing regional and national drug strategies in Vienna – the drug policy “actors” as they are called in this study. On the other hand, the study deals with drug users and relatives of drug users – the drug policy “addressees”. For this study, a total of 90 people were interviewed, and the interviews were evaluated by means of content analysis.

Irmgard Eisenbach-Stangl is Senior Social Scientist at the European Centre for Social Welfare Policy and Research, Programme Area “Alcohol, Drugs, Addiction”. Before that she was a Senior Researcher at the Ludwig Boltzmann Institute for Addiction Research in Vienna.

Arno Pilgram is Senior Researcher at the Institute for the Sociology of Law and Criminality, Vienna, Research Areas “Policies of Law and Implementations of Law” and “Social Interventions in Criminal Justice”.

Christine Reidl is Researcher at the European Centre for Social Welfare Policy and Research. Before that she was a Researcher at the Ludwig Boltzmann Institute for Addiction Research and the Institute for the Sociology of Law and Criminality in Vienna.

Orders of printed copies:

Sucht- und Drogenkoordination Wien, Modecenterstraße 14, Block B, 1030 Vienna, office@sd-wien.at

Download as PDF: European Centre (http://www.euro.centre.org/detail.php?xml_id=1162)

ISBN 978-3-902426-46-8, April 2008, 328 S.



About the European Centre for Social Welfare Policy and Research

The European Centre is a UN-affiliated intergovernmental organization concerned with all aspects of social welfare policy and research.

More information:
<http://www.euro.centre.org>

European Centre
for Social Welfare
Policy and Research

Berggasse 17
A – 1090 Vienna

Tel: +43 / 1 / 319 45 05 - 0
Fax: +43 / 1 / 319 45 05 - 19
Email: ec@euro.centre.org

Core Functions

- An international centre of applied social science and comparative empirical research on social policy and welfare
- An information and knowledge centre providing social science-supported social policy intelligence through a think-net
- A platform initiating future-oriented public policy debates on social welfare issues within the UN-European Region

Research Focus

The European Centre provides expertise in the fields of welfare and social policy development in a broad sense – in particular in areas where multi-or interdisciplinary approaches, integrated policies and inter-sectoral action are called for.

European Centre expertise includes issues of demographic development, work and employment, incomes, poverty and social exclusion, social security, migration and social integration, human security, care, health and well-being through the provision of public goods and personal services. The focus is on the interplay of socio-economic developments with institutions, public policies, monetary transfers and in-kind benefits, population needs and the balance of rights and obligations.

European Centre Publications

- Book Series “Public Policy and Social Welfare” (Ashgate, Aldershot), in English
- Book Series “Wohlfahrtspolitik und Sozialforschung” (Campus Verlag, Frankfurt/New York), in German
- Other Book Publications, books or special reports published outside the above series, with a variety of established publishing houses and in various languages.
- “Occasional Reports”, contain conference or expert meeting syntheses, reports resulting from projects, etc., in English / French / German
- The European Centre Newsletter, in English

Geographical Domain

All governments of States that are members of the United Nations, in particular those of countries of the UN-European Region, are invited to participate in and contribute to the activities of the European Centre. This results in a geographical domain of potential Member Countries of more than 50 European nations as well as the United States of America, Canada and Israel.