

## **Criminality and Addiction (Drugs and Alcohol) Present Views in Forensic Psychiatry**

*Heinz Prokop\**

My own involvement with the problem of addiction goes back to 1971 when the first outpatients' drug clinic in Tyrol (Austria) and the sanatorium for alcoholics in 1972 were founded. Also, at this time, having been appointed professor of forensic psychiatry, I was faced with increasing and more extensive involvement with the subject.

From the mid-sixties onwards an explosive development of the drug problem among young people started in the Tyrol. At that time it involved tablets used for cough remedies, stimulants, appetisers and hypnotics. From 1969/70 it was hashish, but there were also countless burglaries of chemists, so that hardly a single chemist's in Tyrol was spared. Mainly alkaloids such as heptadone, pethidine, morphine, tranquillisers and sleeping tablets were stolen.

From 1971/72 it was heroin. At first this was mainly limited to places near the border like Seefeld, Kufstein, but also Mayrhofen in Zillertal and even Innsbruck. Drugs quickly spread everywhere until finally, people on their own or very small groups living in remote valleys came to be affected.

From 1985 cocaine was also increasingly used and since about four years now also ecstasy. The rohypnol wave, which at the moment beside alkaloids is the most widespread drug, has increasingly flooded the country since about 1980, particularly towns and markets, and rohypnol is easily available everywhere.

In the fight against this drug explosion, the state has always remained several steps behind what is really necessary as far as treatment and prevention are concerned. This running fight coupled with the surrender of lost ground finally led to the dams bursting. The small dams which had been built were incapable of withstanding the drug wave.

The liberal attitude of political-ideological oriented groups and the methadone substitution are evidence of these unsuccessful running fights.

\* M. D., Professor of Medical Psychology and Psychotherapy and Professor of Forensic Psychiatry, Austria

Up to now, people thought that with methadone, one had found the philosopher's stone. Due to propagation by Swiss "drug experts", methadone was also administered to hundreds of patients in the Tyrol. Politicians swear by it and medical doctors are divided into groups, either for or against. The most important group, the addicts themselves, who have had intensive drug experience, consider it useless.

The call for a new small dam, which has already been introduced in an experimental program in Switzerland, is becoming louder. "Heroin on prescription" is now being propagated as the solution. This would apparently slowly bring about the downfall of the international drug trade in the west and it would be possible to set up controls. Every doctor should now become a "prescriber" of heroin.

This small dam will not be able to hold. Cocaine users will rightly cry out that "we are being discriminated against". So cocaine, stimulants, amphetamine based substances etc. will also have to be made available on prescription . . .

This development in the spread of drugs, from a stream to a huge river, will necessarily bring about a "state of emergency". The warning, that by joining the European Union, Austria's border controls would also become insufficient was ignored. Planned, international measures were not taken. There is a group of dealers made up of Turks and people from former East Bloc countries which is becoming increasingly dominant. In these countries the border controls are not sufficient.

The new narcotics law officially allows methadone treatment. The barriers against other drugs still remain, at least on a legislative level. I hope that a contribution towards this still sensible attitude has been made by the symposium in Vienna, at which Mrs. Haller, Mrs. Kuchernik and I myself spoke. This attitude has been shown in the Austrian parliament mainly by the ÖVP and FPÖ, but not by the Green environmentalists and not at all by the Liberals and some of the SPÖ.\*

The spread of drugs in schools, among young people between the ages of 14 to 18, and also in prisons is easy to see when one has worked for years in forensic psychiatry. The percentage of undetected cases of drug abuse is increasing dramatically in this country.

\* ÖVP = Austrian People's Party, FPÖ = Liberal Party of Austria, SPÖ = Labour Party of Austria.

The large amount of crime arising from burglaries of chemists has decreased. This is not so much a result of methadone substitution, but because of the multiplying of small dealer activity and the far easier availability of all drugs.

On the other hand, an incredible increase can be detected in small crime in the area of delinquency against property (stealing and burglaries). A new activity of drug addicts, which one cannot even call crime for the procurement of drugs any more, consists in a kleptomania-like stealing of foods, clothing and cosmetics.

The number of people working in the drug area, including police officers schooled in drug matters as well, has hardly increased. They are completely overburdened in their work in the face of this explosive spread of drugs.

In all the "treatises" that have to be written it is not only the influence of hard drugs that plays a role. On the contrary, a larger contingent is made up of rohypnol, tranquillizer and hashish consumers who do not or only irregularly take hard drugs. Addiction to rohypnol, with a dose of 20-40 tablets a day is quite frequent, although some of my patients take up to 70 tablets a day.

This fact needs to be stressed here because this large group of patients seldom receives any treatment, has hardly any place it can turn to for help and does not even seek this. They are sitting in a place which serves as the transition to a dependency on hard drugs.

Young people taking these kinds of drugs very often appear in groups. When defending themselves you always hear these drug consumers telling the court that "I took such and such an amount of rohypnol". Of course, for the purposes of denying responsibility, the real amount taken is raised and multiplied. With no urine test and a claim that one has "a total amnesia of the course of events in committing the crime" it is very difficult to judge.

Of course, every prisoner knows very well that rohypnol is the trump to play in his own court case. If anyone happens to be unaware of this, then such a person must be either a total outsider or mentally handicapped.

Drugs are available in every prison. This is made possible by those allowed out. The authorities are overburdened if they want to stop drugs being smuggled into the prisons. It is not seldom that one hears in an report that the person concerned while serving a sentence of sev-



*Heinz Prokop (left) and Robert Maginnis*

eral years in a prison came into contact with drugs for the first time and finally became addicted. Suicide attempts with drugs, especially sleeping tablets and tranquillisers, are also common.

By the way, one can also point to similar experiences in the army. Here, national service recruits make their first initiating experiences with addiction, especially alcohol, but also with hashish.

The principle "therapy instead of punishment" is rightly anchored in our legislation. However, the number of addiction clinics and personnel is insufficient and there is more and more of an imbalance. What use is a legal directive saying that someone has to be treated and must bring proof of having had such a treatment, if there are not enough contact centres and personnel (people to accompany and look after the addicts), and if it is impossible to carry out controls.

The next problem which has not been solved one little bit, is the care of drug consumers who are HIV infected or who have already become ill with AIDS. Up to now I have had to work on my own with drug addicted HIV-infected persons and those who have already contracted AIDS, a number of whom have already died.

In our country there are still no suitable treatment centres and accommodation for drug addicts with AIDS, because they are not fit for

a penal institution and they are released from prison. On the one hand they have nothing more to expect from life, and on the other hand they have a *carte blanche* to become a dealer. One such example was an addict who had AIDS and who managed to sell no less than 100 kilos of hashish and procure for himself a decent standard of living before he was caught again.

Instead of spending any money on the armament industry, the state should channel every bit of money available into combating addiction and above all into drug prevention. Of course, fighting unemployment among the young should also be given priority because it is these young people who create a country of expectations for the drug trade.

### Consequences

1. A liberal approach transforms the stream of drug consumers into a huge river which leads to flooding the country, to a state of emergency and, if not dammed in time, will lead to the downfall of that country.
2. Drug information and drug prevention in schools is totally inadequate. a) teachers should be free of any addictions, also where nicotine and alcohol are concerned, and with this deep felt conviction, lead and influence our youth. b) the same applies to parents. The symbiosis with parents, which reaches deep into one's consciousness, is formative even if only one parent is dependent on nicotine or alcohol. For this reason the paths of children with drug addicted parents are even more unavoidably and fatally plotted.  
Teachers should be given an intensive training course in combating drugs which they would be obliged to attend by law, and which would also have a decisive influence on their views. It is not enough for a teacher to attend just an evening talk on drugs or even a whole morning. The situation is much too serious and threatening.
3. Groups need to be formed among young people who are sure and steeled in their stance against drug use, such that they influence other young people with their idealism for a drug free youth.

Time, unfortunately, does not permit me to talk about other extremely important factors for instance the significance of the symbiosis with parents, which for me is the most significant thing I have learned in the many years I have been working in forensic psychiatry.

The necessity of a citizens' initiative against drugs which was repeatedly stressed in several papers may be justified on a national level or at least within the framework of a state or within a community, but it has only found very limited acceptance.

I hope, nevertheless, that what I have said provides a modest contribution to the subject of "the danger of being destroyed not only by environmental pollution but also by a pollution of our inner worlds with irreversible effects on genetics and for humanity".