

Research Project : International comparison between two models of health public policies toward drugs abuse (France, Netherland, 1960's-1980's).

From the 1960's to the 1990's, through differentiated chronologies, European societies crossed a period of "Drug War", between an increase of drugs abuse striking the youth and the relative "normalization" of the social representations of drugs and public health approaches inferred by the set up of harm reductions policies. Among the various types of drug abuse (cannabis, heroin, cocaine), we find the use of medicines, as well legal psychoactive substances (antidepressants, tonics) as products taken from the pharmaceutical industry to feed an illicit traffic (amphetamines, paregoric elixir filtered by drug addicts to extract opium or codeine, morphine). Associated with others drugs in poly-addictions, this abuse can have disastrous health and social implications, in terms of social marginalization. In reaction, political responses were different, according to national contexts and social-cultural histories. Compare French and Dutch situations can be very interesting. In France, public authorities have (over-)reacted, in an atmosphere of moral panic, against what they have named a real "plague" which threatens the western civilization. Drugs policies were clearly repressive, the pharmaceutical industry was particularly controlled and the health policy was principally oriented toward a curative perspective without possibilities of giving "legal and therapeutic drugs" (such as methadone treatments) before the 1990's. The Dutch policy, since the 1970's, according to a French point of view, could be considered as more liberal, more understanding toward the reasons of the social demand of drugs ("softs drugs" of course but also medicines)¹. To what extend is this dichotomy really relevant ?

In the frame of my PhD researches, I have already worked on the archives of the French Health Ministry, more specifically those of the "Direction de la Pharmacie et du Médicament" (and its "Bureau des stupéfiants")², what allowed me to highlight some specific topics : drug control and regulation, thefts of medicines in pharmacies and hospitals (robberies committed by drug users), pharmacies inspections made by State agents (with destructions of medicines classified as narcotics and not intended for sale by the new legislations successively adopted during the period), involvement in the works of international organisms (such as the International Narcotics control board of United Nations) in matters of

1 According to my own researches, I always insert the use of psychotropic medicines in the largest question of narcotics abuse (illicit and legal drugs). But the frontier between medicines and narcotics is anyway very fine and vague, because both can imply similar behaviors of addiction and historically a substance often crossed from a category to another one (amphetamines, LSD...).

2 French National Archives (Centre des Archives Contemporaines, Fontainebleau).

regulation of pharmaceuticals products, set up of the administrative structures in charge of this mission, imports and exports control, inventory of the problematic cases of addictions or overdoses, laboratories control, administrative rules and authorizations, preventive actions, participation of the health authority in the elaboration of a prohibitionist legislation (the French 1970's law). On all these points, I would like to compare the French policies with the Dutch ones : what are their specificities in a context of increasing drug abuse, their aims and results, and the tools used to cope with the problem ?

Moreover, many times in the 1970's, in the frame of the international cooperation in matters of fight against drugs, for example during the discussions of the Pompidou Group (created in 1971 on the initiative of the French President), specially on questions relating to health aspects (regarding the different care systems opened to drug addicts), disagreements sometimes very strong appeared between French and Dutch representatives (repressive positions against more liberal positions)³. Besides a lot of other French archives (Interior Ministry, Press, Police archives...) show that there was, during all these years, a true obsession on Holland considered, rightly or wrongly, as "the drug paradise", the source of all wrongs connected with drug abuse in Europe, to a great extent because of the supposed negligence of Dutch government and his poor model of public health management. Therefore it seems to be very interesting to study this antagonism "on the other side"⁴, that would probably allow me to bring to light some misunderstandings on the French side.

Last but not least, beyond these technical and institutional problems, the research will have to come to a reflection about drugs social demand. The analysis fits the scope of the concept of « medicalization »⁵ and could contribute to redefine it. Medicalization, as a way of conceptualizing the relations between politics, medical institutions and individuals, also connected with the considerations of French philosopher Michel Foucault about the rise of "biopower"⁶, will have to be questioned and is the anthropological and philosophical background of our historian research.

3 Archives of the Interdepartmental Group on Narcotics, 1971-1975, French National Archives (CAC, Fontainebleau).

4 By taking into account the work of Marcel DE KORT, *Tussen patient en delinquent*, Rotterdam, 1995.

5 CONRAD Peter, *The Medicalization of Society : On the Transformation of Human Conditions into Treatable Disorders*, Baltimore, Johns Hopkins University Press, 2007.

6 FOUCAULT Michel, *Naissance de la biopolitique : Cours au Collège de France 1978-1979*, Paris, EHESS Seuil, Gallimard, 2004.

Concerning the research materials, by joining the local working group of DRUGS based in Descartes Centre in Utrecht, I would like to explore **the archives of Dutch Health Ministry and Dutch Medicines Control Board**. Before November 2009 (the period proposed for the exchange), I think master enough Dutch language to work on these archives. If not, if it's too difficult to understand Dutch empirical materials, I can withdraw on **English writings of Dutch drug researchers, on interviews with them** (Gemma Blok or Dirk Korf from the University of Amsterdam, Charles Kaplan, Stephen Snelders or Toine Pieters from the VU Medisch Centrum, and Peter Cohen, the director of the Centre for Drug Research, all based in Amsterdam). Moreover, I shall work on (Dutch and English) **documents of the library of the Trimbos Institute, the Netherlands Institute of Mental Health and addiction**, in Utrecht.