



Witness 4

The Ministry of Health and Care Services

Minister of Health Ingvild Kjerkol (Ap)

The Ministry of Health was informed about the disparity between drug policy and human rights on 13 March 2013. Minister of Health Jonas Gahr Støre was the first to be held accountable, and incoming Minister of Health Bent Høie was informed about the disparity in December 2013. Since then, Høie has received a dozen letters from AROD which speak to the importance of clarifying a catalogue of rights. In 2015, the Minister of Health [received](#) the same five questions as the Ministry of Justice as well as a walkthrough of human rights responsibilities. The [response](#) from the Minister of Health was that he "obviously respects and will continue to respect human rights" but that "the ban on drugs must be upheld".

The Minister did not comment on any objections. In 2017, therefore, in [another](#) letter, the Minister of Health was held accountable and the problem of public panic was highlighted. AROD not only elaborated on the difference between the morality of prohibition and that of the constitution but the similarities of a war on drugs to preceding totalitarian campaigns were also anchored in their common implications for international law. Principled thinking showed that such



moral crusades were not merely confused expressions of human growth ambitions but had a common theme: They were (and are) the result of a need to find a scapegoat, a fiend against which society can unite, as well as the tendency of the state to feed on this phenomenon by latching onto fear-based prejudices. It is this combination that has driven the history of unjust persecution, and since it is painful for officials who have viewed themselves as managers of a decent project to accept such information, AROD elaborated on the psychological challenges faced by employees.

Even so, the Minister of Health did not budge. The political process was still defined by public panic, but with the drug reform, a new opportunity for rights thinking arose. Together with a handful of organisations, AROD, therefore, [contacted](#) the Minister of Health and demanded that human rights concerns were put first. The Ministry of Health and Care Services responded by referring to the Ministry of Justice and Public Security as "the right body", but the Department of Justice placed the responsibility back on the Minister of Health because "the Ministry of Health and Care Services has the main responsibility for following up on the drug policy". AROD, therefore, [contacted](#) the Minister of Health, but the Minister [referred](#) "to the Parliament's treatment of the drug reform in question".

This makes no sense when public panic has been detected and the Norwegian Parliament continues to support a regime of punishment based on rejected premises. The response of the Minister of Health, therefore, led to [another](#) letter in which AROD warned of civil disobedience. This letter stated the following:



For a number of years, we have tried to get the Norwegian state to recognise international obligations in this area of law, and we do not find the Minister of Health's answer reassuring. On the contrary, the Minister is familiar with the Royal Commission's detection of public panic as formative to drug policy and has received documentation of the connection between this phenomenon, unconsciousness, scapegoating, arbitrary persecution, and human rights crimes. The Minister is aware that there is the same mismatch between the human rights principles and drug policy as there was between these principles and the prohibition of homosexuality earlier, and we are very disappointed with the Minister's lack of commitment.

After all, the Minister has all the essentials to understand the injustice of drug policy. As an openly gay man, the Minister is part of a group that was previously hunted by the police due to an orientation that others, with no right, could interfere with. Principles such as equality, autonomy, proportionality, and the presumption of liberty invalidate state intervention, and the most relevant difference between homosexual people and drug users is that the latter has had to suffer far more for their beliefs, that the state's responsibility has not yet been recognized, and that we are dealing with a far greater legal scandal.

While the prohibition on homosexuality was mostly dormant and only a few received punishment, the police resolve around 30,000 drug cases a year. The effort put into this operation is far more organized, far more totalitarian, and it is astonishing that the



Minister of Health has no qualms about leading the way in oppression. It happens on the Minister's watch after the Minister has been sufficiently informed and knows better. Therefore, AROD will set up an outlet for cannabis consumption outside the police station on September 11, 2021, so that we can use the right of review of the law.

Bent Høie (H) resigned in October 2021 and Ingvild Kjerkol (Ap) took over as Minister of Health. AROD [contacted](#) the new Minister of Health to ensure responsibility for drug policy, but the Minister was determined to maintain the status quo. Kjerkol would rather continue punishment on rejected premises than protect human rights principles, which led to AROD [reporting](#) the Minister to the police, and with this summary, AROD's history with the Ministry of Health and Care Services is explained.

Questions to Minister of Health Ingvild Kjerkol

Minister of Health Kjerkol (Ap) has been central in opposing the Solberg government's drug reform. The Labour Party's proposal for reform is not a reform at all but continues the punishment on discarded premises. Few lawyers support the notion of punishment for some drug users but not for all, and the [media](#) and other politicians have been [ruthless](#). The Liberal Party (V) [claims](#) that "more lives will be lost while we wait for the government to find out that their plan will not be possible to implement", but the Labour Party continues to distinguish



between needy and criminal behaviour. The resistance from the reform community has been huge, and the situation appears locked.

The Minister of Health has received documentation from AROD, which explains the conflict between prohibition and human rights. The Minister's response was that the government is opposed to a general decriminalisation of drugs, and the fundamental objections were ignored. Why has the Ministry of Health not responded to the criticism? Does the Minister not have a positive obligation to take alleged human rights violations seriously?

The Royal Commission's mandate was to assess the relationship of the proposed legislation to human rights. The proposed legislation entailed punishment for more than user doses, and there is a presumption of freedom in the constitution. Does this not mean that prohibition must prove its legitimacy?

Considering that the state has the burden of proof, as the Royal Commission and your [predecessor](#) have pointed out, does it make sense to talk about human rights without including a regulated market? Can politicians move from punishing to pathologising drug users without emphasising human rights principles?

The report of the Royal Commission showed that public panic has shaped Norwegian drug policy, that punishment must be defended, and that the basis for punishment does not hold up. Despite this, the Minister of Health wants the system of punishment to continue while objections are ignored. Does the Minister of Health put the political program of her party above constitutional obligations?



Chapters 3.2 and 3.3 of the drug reform report use words such as "public panic", "disproportionate representation", "misleading ideas", "incorrect investment in punishment", and "reality-resistant wrongdoing" to summarise the development of drug policy. We are dealing with a policy characterised by "stereotypical representations," "moral indignation and motives for revenge," one where "scientific analysis of the drug problem have played a minor role". "Panic" is used several times. Could public panic have been shaping drug policy for 50 years if principles such as equality, proportionality, self-determination, and the presumption of freedom were sufficiently emphasised?

Since the Norwegian Penal Code Commission ended its work in 2002, decriminalisation has been professionally recommended, but for just as long, the Ministry of Justice and the Storting have resisted the process due to the signal it would send and for fear of increased use. Now, as the Royal Commission's report shows, punishment and drug use are unconnected. On the contrary, while the benefits of punishment are uncertain, the costs are enormous and it is for the state to demonstrate a beneficial effect. We, therefore, ask: Does the Minister of Health regret that rights have not been treated differently? Rather than punishing on refuted terms, should the Minister hasten the human rights analysis that the Ministry's senior advisor in 2020 told ARÖD would be done sometime in the future?

The report of the Royal Commission shows that public panic has shaped the drug policy and that punishment for drug use cannot be defended. ARÖD believes that human rights violations are connected to public panic, which means that to the extent that panic characterises



development of drug policy, principles such as autonomy, equality, proportionality, and the presumption of freedom will not be sufficiently emphasised. What does the Minister of Health think about AROD's argument for a regulated drug market based on human rights? Can the Minister perceive a connection between moral panic, human rights violations, and the arbitrary persecution of the past, or does the Norwegian drug policy protect human rights?

The Government's advisers in drug policy are former Director of Public Prosecutions Tor-Aksel Busch, retired judge and public prosecutor Iver Huitfeldt, and others who measure proportionality based on a drug-free ideal. This tradition is much defined by the moral panic documented by the Royal Commission, and the contrast to the Director of Public Prosecutions is noteworthy. This is how Huitfeldt [answered](#) Rett24's question of whether a body search is a proportional intervention if the police perceive a person as intoxicated:

A state of intoxication in itself gives good reason for suspicion of possession and possession presupposes acquisition and again almost always import. Proportionality must be related to a standard. If the police find a slice of salami with narcotics, the case is thus not clarified and decided. A sausage slice must come from a whole sausage; therefore, the whole sausage becomes the standard. This is the case with all drug discoveries; the proportionality must be assessed against a large, unknown quantity.

It is no wonder that the Labour Party's lawyers and the Director of Public Prosecutions clash. The former weighs proportionality on the



basis of a drug-free ideal, but if there is neither a rational distinction between legal and illegal drugs nor good reasons for punishment, the intervention cannot be proportionate. The Director of Public Prosecutions and the defenders of a liberal rule of law, therefore, seek proportionality as derived from human rights, not a drug-free ideal. They perceive more and more clearly the reality of human rights violations while the Labour Party continues the public panic documented by the Royal Commission: Is it wise to use such advisers who appear increasingly isolated? Why not consider counter-perceptions? Cannot the verdict of history be dreadful if the Labour Party retains its blinders?

The Labour Party [claims](#) that society's reactions to drug use should be proportionate and that people with extensive drug problems and addiction have the right to a dignified life, regardless of which drugs they use. Had the Labour Party weighed proportionality on the basis of human rights, ARÖD and the Labour Party would have agreed, but the party's idea of dignity and proportionality follows a drug-free ideal where the goal of abstinence trumps everything. In the Labour Party's universe, therefore, there is no unproblematic use of illegal drugs, and consumers must be helped out of abuse whether they want to or not. Freedom from intoxication is the only measure of dignity, and no one in the Labour Party wonders whether it is proportionate to deny self-determination in this area. Even so, why discriminate? Why do we need a prohibition to help cannabis users, but not an alcohol prohibition to limit the harm that alcohol causes to society and the local community? In what way can the ban be said to be necessary in a modern society?



The Labour Party wants to [retain](#) punishment for reasons of morality, as a prohibition is said to protect children and other vulnerable people. Now, as the report of the Royal Commission shows, punishment and drug use are unconnected. On the contrary, while the benefits of punishment are uncertain, the costs are enormous, and it is incumbent on the state to prove a beneficial effect. Your predecessor has [said](#):

Today's penal system has failed. The weight of documentation indicates that punishment has no positive effect, but on the contrary many negative effects. Punishment has major harmful effects and has a socially skewed effect. In other words, it is those who claim and believe that Norway should continue to punish the use of drugs in the way we do today, who should find the scientific documentation to continue with something that has been proven not to work. So far, they have not been able to come up with professional evidence for their claims.

As we can see, while the Labour Party claims that punishment has an important norm-setting effect, your predecessor disagrees. We, therefore, ask what kind of "signal" a policy sends that disenfranchises citizens who choose a drug safer than alcohol and tobacco, that criminalises unproblematic drug use, that makes drug use more dangerous than necessary, and that punishes sellers of drugs less dangerous than those the state is promoting for sale?

Whether the Norwegian drug policy represents proper use of criminal law or is a case of arbitrary prosecution depends on whether punishment can be defended. To the extent that the drug policy is based on flawed



premises, does not the prohibition signal the opposite of what the Labour Party wants?

The report of the Royal Commission is clear that the burden of proof is on the state. Does it not imply that a new inquiry must be made? Should the Ministry not answer questions of rights before a prohibition is continued?

To the extent that politicians oppose human rights analysis, can the people have confidence in the political process? If there is no rational distinction between legal and illegal drugs, can citizens learn anything from the drug policy other than to see through hypocrisy?

In a criminal market, there is no quality assurance and no protection against fraud and robbery. If the Labour Party, as stated in the party program, wants to "ensure a better life situation and dignity and reduce stigma for people with substance abuse problems", and seeks to pursue a "knowledge-based" substance abuse policy that "makes it safe to ask for help", is it prudent to exclude regulation? Could not a controlled market have made everyday life safer for society and easier for the police? Could it not have reduced crime, disease, violence, suffering, stigma, and death? Does the Minister have any reflections on this?

For obvious reasons, prohibitionists have invested heavily in politics. As long as a criminal market exists, there will be prestige, budgets, and powers in the war on drugs, but the defence recalls page 26 in the drug report in which the committee for reasons of principle does not propose to authorise treatment based on coercion, or to provide health care without the person's consent. The UN working group against arbitrary imprisonment is also [clear](#) that drug users should not be forced into



recovery, so what does the Minister of Health think about the Labour Party's drug reform? Does it secure human rights? If yes, how?

According to the Royal Commission, even "the introduction of penalty-like administrative fees may, depending on the circumstances, conflict with the citizens' right to privacy, etc. and the right to health". (p. 176) If this is disproportionate, what about penalty limits of up to 21 years? Why is a dealer more blameworthy than a user of drugs? Can the Minister of Health explain the reasoning behind the government's position without divulging double standards from alcohol policy?

In the drug policy, the Ministry of Health has twisted the law on supply and demand into a victim and abuser context. This is how users are pathologised and sellers demonised. However, are we not dealing with the same law of supply and demand and the same varying user patterns whether the substances are legal or not?

The report of the Royal Commission demonstrates that the idea of the drug shark is political fiction and that the argument for punishment remains unsubstantiated. If penalties for use fail the standard of human rights, should penalties for sale not be examined? Can the Minister say that this is the case today?

If politicians do not distort the law of supply and demand into a victim and abuser context, what is the point of separating drug use from its sale? How does 1 or 100 grams determine whether a person should be pathologised or demonised?

The reason for the prohibition is the need to send a message to the youth. It is unclear whether the prohibition signals benign guardianship or whether it is better for citizens to take responsibility for their own



choice. We do not yet know whether the politicians' incapacitation is necessary or whether the state's effort to protect public health does more harm than good, but due to the perceived danger of the spread of drugs, threshold values have become a compromise between those who want to remedy the damage of current drug policy and those who do not want to think anew.

Threshold values are therefore central to the question of punishment. Politicians see this as a way to separate users from sellers, but one gram can be sold and 20 grams can be used for self-consumption and such values are without a basis in principle. No one has explained how one or 10 grams determines whether citizens should be diagnosed or incarcerated and if the threat of spreading is not greater for cannabis than alcohol, how to justify penalties up to 21 years? If we recognise that people choose drugs not for pathological reasons only and that the humanisation of drug users makes it problematic to prosecute, what about the dangers of a criminal market? Is prohibition necessary in a modern society?

It seems that a more holistic perspective would benefit the Minister of Health and the Norwegian people. The Minister of Health, for example, wants to protect young people, but prohibition fosters crime. Many young people prefer cannabis to alcohol and criminalisation means that they must deal with criminals. The better the contacts in the criminal world are, the better the quality and bargain, but at a cost of chaos and uncertain future prospects. Most people who are imprisoned on longer sentences are therefore users, not cynical drug lords, and the myth of the drug shark is political fiction. Yet the prohibition turns users into



sellers, and later into inmates, while leaving a market worth hundreds of billions to criminals. Can't young people be better protected if drug users are given an alternative to crime? Cannot a regulated market remove much of the banned substances' allure?

The defence asks because thinking along these lines ensures that Canada, Germany, and other nations refer to the Convention on the Rights of the Child to defend the regulation of the cannabis market. A more holistic perspective could also save politicians the challenge of morally and legally separating drug users from drug dealers and problem use from recreational use. There are no good answers on how to solve this, but if the goal is to reduce overdoses and to help those in need, is not a regulated market most apt to remove the shame and stigma? Is it not a controlled supply that secures users the most?

The minister claims to be on the side of the youth. Even so, is not persecuting people for behaviour that is less harmful than legally regulated behaviour a sign of religious fanaticism more than rational concern? How is drug policy different from the arbitrary persecution of the past?

Those who do not accept the ideal of a drug-free society regard the prohibition ideology as hypocritical. Users would rather deal with sellers than the police, and the prohibition experiment has led to a steady erosion of the authority of the state. Instead of inviting respect for law and order, the result of the drug law is that more and more people see illegal drugs as a symbol of freedom: Why not look at drug policy more holistically? Could not this have reversed the trend?



Overall, there are very good reasons to consider a regulated market. The most important is, as the Royal Commission concluded,

In the committee's assessment, the best available knowledge provides a fairly clear basis for concluding that criminalisation of drug use has unintended negative effects. At the same time, there does not seem to be good empirical evidence for a possible preventive effect of the punishment, at least not an effect that there is no reason to believe can be achieved through the use of alternative measures. In light of this, the committee cannot see that the justification requirement for penalising these acts has been met.
(p. 30)

If the justification requirement for penalties for use and possession is considered unfulfilled, should not the creation of a regulated market be justified? Is this not all the reason needed?

There are also other reasons for regulating illicit drugs as we did almost a hundred years ago with alcohol. We know that prohibition comes with major societal costs, that it forces users to have contact with criminals, and that the illegal market threatens society. For half a century, slowly but surely, the drug trade has corrupted law and order and the institutions intended to safeguard an open society while, at the same time, sacrificing a larger percentage of the population. These are dynamics that receive little attention, but **has the involvement of the police made the world a better place? Has prohibition been successful, or could more have been done with less intrusive means?**

Because no investigation has been made, there is a blind spot, but the Director of Public Prosecutions' report on the use of force in minor drug



cases shows that the assessments of the police have been systematically inadequate and that thousands of human rights violations occur every year: How does the current regime safeguard drug users? How can the Director's efforts to ensure human rights protection for drug users in meeting with the police prevent arbitrariness? As it is, cannot the police easily justify strip searches by claiming suspicion of sale, whether that is the case or not? Should this question be up to the individual police officer?

What about the likelihood of drug addiction? The Director of Public Prosecutions has issued directives, but can we trust the police to assess the threshold for impunity in the best possible way? How should the police distinguish between health problems and criminal behaviour in the area of drug policy?

The new practice in minor drug cases has been prepared based on the Supreme Court's assessment of rights. As both the Director of Public Prosecutions and the Supreme Court emphasise the legislator's signal more than principled considerations, threshold values distinguish between punishment and impunity, but no one has shown how threshold values prevent arbitrariness. As long as this is the case, the danger of human rights violations is profound and neither citizens nor the police can be on safe ground. We know, after 40 years of chasing drug users, that a toxic culture exists among the police and that a public prosecutor from the Norwegian Narcotic Officers Association (NNPF) has [claimed](#) that the Director of Public Prosecutions' guidelines will not change much. Should it be crucial to the sense of justice whether drug users meet a liberal or conservative police officer?



What does the Minister of Health think about toxic culture in the state apparatus? Can public panic shape drug policy for 50 years without the dysfunctional culture being a problem? Can we trust that human rights violations will not be perpetuated, even after the Director's guidelines in minor drug cases?

What does the Minister of Health think about the toxic culture in the upper echelons? Can public panic continue decade after decade without leadership failure? Has it become a tradition in the drug-fighting machinery to find managers who support a prohibition regardless of legitimacy? Has 50 years of prohibition promoted a culture in the system in which the preservation of prestige, budgets, and powers defines the debate?

It is primarily the NNPF that insists on a drug policy that the Royal Commission and more and more constitutional courts find unjustifiable, while LEAP represents their opposite. The former have traditionally been the government's advisers, while the latter works for a more wholesome and human rights-based drug policy. Is it not logical to look to LEAP if the Støre-Government's name and reputation are to be redeemed?

It is not to be expected that confidence in the police and politicians can be improved as long as the justification for punishment remains unclear. Rather than adapting the terrain to the map, as the Labour Party does to protect the prohibition paradigm, is it not better to draw a map that follows the terrain? Does the Minister of Health not see the verdict of posterity?



The Norwegian government equates prohibition with solidarity in practice, but we are more likely talking about bureaucratic mismanagement of an unusually destructive nature. That is why the report of the Royal Commission was so discouraging for politicians, and "the dangers of drugs" and "fear of sending the wrong signal" remain weak justifications for punishment, for which there is no empirical evidence. In fact, several constitutional courts have anchored the right to cannabis use to the principle of self-determination, and if there are good enough reasons to choose drugs other than alcohol, why use police power against unproblematic drug use? Why should drug users risk penalties and the problems resulting from an illegal market? Can the Minister of Health say something about this that is not applicable to alcohol too?

The need for the protection of children and young people is the mantra of prohibitionists. "That we allow one harmful drug does not mean that it is wise to legalise other drugs", they say. Nevertheless, thousands of human rights violations have been uncovered because of the Director of Public Prosecutions' report on the use of force in minor drug cases, and the threshold values do not prevent arbitrariness. Instead, the upper limit values for decriminalised drug offenses are a way to preserve a blind spot so that the prohibition ideology can continue.

It is nevertheless clear that prohibition entails constant human rights violations. The Director of Public Prosecutions has uncovered systematic abuses in less serious drug cases, but a larger catalogue of rights remains unclear and the Minister is responsible for the drug policy's relationship to human rights. Thus, we state: Not only does the



Norwegian drug policy [cost](#) 6.5 billion kroner annually, but the more the state has fought a war on drugs, the more the stigma, illness, suffering, and death achieved. Since the 1980s, the price measured in overdoses and deprivation of liberty has been hell to pay, and is this money well-spent when everything indicates that the interventions in privacy have a high price and that less intrusive measures are better suited?

The Minister of Health has to go by her gut, as no report has assessed the pros and cons of a regulated market. Nevertheless, few experts believe that drug use will increase significantly, and it is more likely that crime will fall to the level of the 1950s, before the war on drugs accelerated the statistics. This was at least what the Dutch authorities concluded after examining the case ([Human Rising](#) p. 136). Therefore, it only makes sense that the Minister of Health, like everyone else involved in drug policy, should be invested in clarifying whether there is a right to psilocybin and cannabis use, as several courts claim for the latter, and whether this right includes a regulated market. Public panic has been proven in the development of drug policy, and from the drug users' point of view, is it not natural that stigma, social exclusion, and overdoses are connected and that prohibition contributes to problematic drug use? Could not treatment equal to that for alcohol drinkers inspire more sensible drug use? Could it not have contributed to safer drugs and an increased incentive to seek help? Could it not have reversed a development that transforms drug users into criminals?

We ask further, from the point of view of morality, can citizens readily assume that prohibition is good and that those who undermine it are



evil? Is the goal of a drug-free society a worthy ideal? What is it about cannabis and psilocybin that makes the protection of law enforcement necessary? And if we are not distorting the law of supply and demand, why are drug dealers so bad?

Prohibitionists can hardly answer, as tyranny and autonomy are opposites in a meaningful universe. We know that users would rather deal with sellers than with the police, and while the former have offered a product there are good enough reasons to use, the latter have offered coercion and deprivation of liberty. Can shared ideas of sound morality be wrong? Could this be the engine behind moral panic and human rights violations?

If the Minister of Health does not see the connection between public panic, punishment on rejected grounds, and human rights violations, ARÖD's documentation identifies others who do, and from the point of view of society, we cannot assume that prohibition is necessary to protect society. Instead, the question becomes as follows: Has the war on drugs reduced supply and demand? Has it promoted unity, healthy values, and good research or done the opposite? Could the prohibition have fostered a collective psychosis, much like the Salem witch trials?

For over 10 years, the Ministry of Health has had information that indicates the latest. The connection between public panic, human rights violations, and the arbitrary persecution of earlier times is documented in *Human Rising*, a report forwarded to Norwegian authorities in 2010, and the use of force in drug policy is, therefore, extremely problematic. From the point of view of human rights, goals and means must be credibly related, and if less intrusive measures are better suited, the



presumption of freedom dictates that the state of nature be emphasised. For thousands of years, people have used cannabis and other illicit substances with impunity, so why not take insights from the alcohol policy? Why live with threshold values so low that users must deal with criminals almost daily? Why not ensure quality-controlled substances? Is it reasonable to expose users and society to such a burden?

The Minister of Health [believes](#) that "the government's drug policy should prevent and reduce the negative consequences of drug use". Even so, prohibition makes drug use as dangerous as possible, and this appears conflicting. We therefore ask, is the basis for Labour's drug policy to ensure that the worse-off drug users are, the less drug use occurs in society in general? Is it proper policy to prevent drug consumption by making sure that drug use is at its most hazardous?

The Minister of Health has [said](#), "People with extensive drug problems and addiction have the right to a dignified life, regardless of which drugs they use". Does this apply to experimental users and recreational users as well? Do they have the same right to a dignified life?

What does dignity entail: is it a drug-free life, or one where autonomy, proportionality, and the principle of equality are emphasized?

Opponents of drug reform see decriminalisation as a gift to organised crime, while the drug economy is portrayed as a serious and increasing challenge for open societies: unless the pharmacological properties of the illicit drugs suggest a treatment different from alcohol, is it fair to discriminate? Does the former Minister of Health find illicit drug sales more reprehensible than alcohol sales?



We touch here at the Achilles heel of the prohibition, that morality used to justify the law's most severe punishment for victimless acts. Only by turning the law of supply and demand into a victim and perpetrator context does the prohibitionist ideology make sense, only in this way can the infantilisation of drug users and demonisation of drug dealers continue. Still, culture is not a good enough reason to punish, and if better reasons fail, the court must recognise a parallel to the arbitrary persecution of earlier times. Addressing the problem of arbitrariness is crucial, and we ask the following:

- As a comparison of cannabis with alcohol and tobacco shows that the legal drugs are not only more harmful to health but also worse for society, will the Minister of Health defend the current drug policy? Can the Minister, without building on a discriminatory practice, argue for a different approach to alcohol and cannabis use?
- As the same law on supply and demand dictates the use of legal and illegal substances and varying user patterns are the same regardless of substance, will the Minister of Health defend the persecution and demonisation of offenders? What has a cannabis grower done that is worse than that done by a beer or wine brewer? What has a cannabis dealer done that is worse than that done by any other employee in the trading of goods? Is it anything other than double standards that makes prohibition an accepted policy?
- As drug researchers note that drug prohibition has had worse side effects than drug use itself and more and more organisations and professional panels publish reports that conclude the same, will the Minister of Health, based on the evidence that the cure (prohibition) is



worse than the disease (cannabis use), defend the application of Sections 231 and 232 of the Norwegian penal code? On what basis can 21 years of imprisonment be defended when large parts of the western world transition to a regulated market?

These are questions that determine human rights. For five years AROD have been waiting for answers, which indicates that these are difficult questions. Nevertheless, the burden of proof belongs to those who want to punish, and the Norwegian drug policy's problems with human rights are receiving more and more attention. The media has had a lot to say about the police scandal that is unfolding, and the integrity of the department is one reason Are Frykholm, the leader of the Norwegian Association for Police Lawyers, is [calling](#) for leadership. Equally important are the rule of law's guarantees for the persecuted groups, and if these questions cannot be answered, should not the Minister of Health accept responsibility for the Norwegian drug policy's problem with human rights and work for a more holistic approach?

The Minister of Health has also received [questions](#) from Arild Hermestad and the Green Party (MDG). All of the questions touch upon a blind spot that the prohibitionists depend on, and they have also not been answered. What signal does the Minister of Health send by ignoring questions that point out the problems with prohibition?

The Ministry of Health's lack of responsibility in the field of intoxicants was remarkable before the Minister's time but has become so striking that society is waking up. Drug using communities have no confidence in the Minister of Health, and the Liberal Party accuses the Minister of continuing a policy that kills. If the questions from AROD and MDG



cannot be answered responsibly, should not the Minister of Health mark her distance from a totalitarian party program? Should not the Minister accept responsibility for the problem with human rights and work for a drug policy that can be defended?

What are the Minister of Health's thoughts on the need for a truth and reconciliation commission?