

Interview with Jacek Moskalewicz

Researchers: VB/BT

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(Transcriber: Debbie Gibson)

V: So maybe shall we start with how you became involved in this general area of study?

J: I benefitted from my university professors, who really set my life perspective and understanding of what science is and what research is. My teacher at the university, of sociology was Zygmunt Bauman who is quite a prominent sociologist, who spent most of his life in the UK, but he taught me in my first year of university in 1967. So it was like opening the windows to the world. He was very well acquainted with current trends in sociology. And then during university I was involved in social psychology and I was interested how effective are small groups in which ideas either of competition or cooperation dominate and it was my preoccupation: I found it to be a serious and interesting field of research. So my Master's Degree work was an experimental study in which I compared two groups and then since it was quite a successful experiment showing that cooperation is not only better in social terms, better communication amongst members of the group, but also better in efficiency. I went to the field, which was called Industrial Work Sociology and I was trying to apply my basic research from my Masters degree to real life in Polish factories, around a situation of cooperation, competition between members of the group in the real world, offering salaries which in a way promoted either cooperation or competition..

Then we had a very interesting time in the industry, because there was some unrest in Poland and we did a study on solving social conflicts within industry. I participated in an international study called Working Class and Automatisation and we did a lot of interviews asking working class people and foremen how they solved the problems and we used the concept of strike, which was at that time not very much welcome in Poland. It was the mid 1970s and instead of strikes in official communications they used the concept of "breaks in work". So unfortunately just after we completed the study, strikes broke out in Poland and my Institute at the time, the Institute of Organisation of the Machine Industry became blamed for spreading the idea of strikes as a way of solving social conflicts. Then in 1976 a new kind of a structure, which was called the Workers Defence Committee (KOR) was set up. The Institute wanted to condemn that organisation as an enemy of the socialist movement. Instead of condemning KOR, we supported them and then after all these events I was told by the director of the Institute to look for another job. It was not kind of, you could use the word repression, it was a kind of advice that I had no prospects in that institute and really it's time to find a new job. Then one of my colleagues from the university told me there was a vacancy in the Institute of Psychiatry and Neurology that time known as the Psychoneurological Institute, in the Department of Studies on Alcoholism and Drug Dependence. So I decided to go and have a kind of vacation from real sociological research, spend two years and I hoped to come back to real sociology. But the time passed and I was more and more involved in alcohol and drug studies. In fact in the beginning, drug studies were something which tempted me to join, because 'drug' was a kind of mysterious thing, we study those habits and therefore I had the sense of mission and purpose in being a drug researcher. But then I found that alcohol research, even though less prestigious, was even more interesting and it

was thanks to the involvement of my Institute in the International Study of Alcohol Control Experiences (ISACE) It was a study sponsored by the World Health Organisation Office for Europe and namely by Jens Hannibal who was then regional advisor. And it was a six country study or six jurisdictions study which involved a group of researchers who soon became my reference group or mentors, or people I learnt a lot from, about the research, alcohol research. And this ISACE study was important because it was not a direct focus on the alcohol, but on alcohol in the context of culture, economics, politics and through that I understood that alcohol is not a separate issue, it's not cultural habit, or harmful habit of some heavy drinkers, but that it's an important element that is everywhere in the social fabric of the society. So it was the beginning, it was the late 1970s and since then I have been here, which I would never predict when I started to work in the Institute of Psychiatry and Neurology. But as a matter of fact it was also a very interesting time for drug studies, illicit drug use just starting to move on in the mid-1970s. Poland was not part of the international market due to currency exchange rates which were not acceptable. You could get for your salary about 20 dollars and you put 1 dollar for housing or something, but to buy heroin from abroad, it was very, very costly, or marijuana or whatsoever. And young people who intended to join the international culture and youth movements started to produce drugs of their choice, made from the Polish poppy. And at that time the cultivation of the poppy plant was not controlled at all. So every second small farm had small poppy fields to grow poppy for the seeds, which were used to produce traditional poppy cakes, or poppy noodles or whatsoever. So young people were coming to these farms, cut green poppy heads and received almost pure opium, which was spilling out from the green poppy heads. So it was quite a new movement and young drug users of the time were not people from the outskirts of society, they were from the main cultural stream of young people, who had education, who had aspiration, who wished to make a distinction between the generation of their fathers and mothers who used to drink alcohol and who didn't use drugs. So it was quite a fascinating area of study and I was lucky enough to come to the field when the first non-government organisation was established to prevent and to treat drug addiction. So it was a long time ago, but at that time the name of Marek Kotanski was well-known, not only in Poland, but in Europe, he was the father of that organisation called Monar. So I had opportunity to see how young people, who were treated at that time in psychiatric hospitals moved to therapeutic communities outside any hospitals and really enjoyed the change and appreciated the change. So it was something I would like to understand. From the very beginning it was something which involved me and I felt was also associated with more wide, more important cultural and political trends.

As I said my first experience in comparative study in alcohol was the ISACE study, which involved people from California, Ontario, Ireland, the Netherlands and Poland and Switzerland. So it was not a big group, in fact it was qualitatively speaking, a very important group. I met there people like Robin Room, Patricia Morgan, Jim Mosher..

And Esa Österberg and Pekka Sulkunen and very importantly Klaus Mäkelä, who was the leader of that project and he took it very seriously. Klaus died a few years ago, but still I remember his deep voice, which was very convincing and attracted attention and Klaus was still talking, not about alcohol research, but about sociology and considered our research as an important contribution to sociology. Like other people,

like Robin Room, or Eric Single and Norman Giesbrecht and a few other people,. Actually we all were a generation of the 1960s, all involved in student kind of anti-systemic movements and eventually we landed in more or less stable positions, research positions. But still we remembered those times when everything started and the change from order existing until 1960s was thrown over in that period. So it was a very, very important, important experience for me and not only did I meet these people, but I realised the value of comparative research. Some issues, some developments which I thought were unique for Poland, or the socialist bloc, were present also in other societies, who were in very different social and political systems. So I was fascinated, have been fascinated since then not only about commonalities, but also differences and it was something which I learned from the ISACE study. Another thing of importance was that it was not just a group of international researchers who sat together and deliberated, assessed the alcohol policies in their countries. Before we started to write anything we keep a very solid inventory of data, which included demographic, epidemiological data, but also some quotations from the belles-lettres to understand each other's country better. So we spent about one year combining all this data together.

In early summer 1980 I went to London for a couple of months and took with me this inventory of data in English and the customs officer when he saw this inventory, he felt that it was a sensitive issue and he confiscated it from me. So it was not a big thing, because I wrote to my friend to send me it over by post and in a week I got it again in London. But it shows how sensitive the alcohol issue was at that time and again I had thought it was a unique feature of the socialist political culture. But then I came across Kettil Bruun, who was a friend of my boss at that time, Ignacy Wald. Kettil Bruun got the first British report on alcohol for review and on each page of this report across the page was written 'confidential' in these watermarks and what Kettil did he copied the report. It was just about the time when the xerox technique became available and he made about 40 copies and sent it around, breaking the confidential status of that report. I'm jumping about, but that report I got from Professor Ignacy Wald who was at that time Director of Research of my Institute. He left Poland in 1969, during an anti-Jewish and antisemitic campaign, which was actually quite short-lived and he spent four or five years in the United States, but then he came back to Poland. He came again to be Director for the Research of the Institute and the head of the expert team on alcohol at the governmental commission on alcohol problems. We collaborated very closely and he also invited me to be a scientific secretary of that governmental commission. And again this expert team consisted of really prominent academics from very different fields, including sociology, but also economy, law, psychology and so on. It was again a moment when I realised that the alcohol question is a very multidisciplinary question and an exciting field of research, because you have to learn more and more and every time you start to research something, to investigate something, you open new perspectives and understanding of the field. So actually Ignacy was quite a person, he also belonged to ISACE group, but not as a superior, rather an older pal. And as far as I remember I learned from Ignacy for the first time about Foucault, Michel Foucault and his way of perceiving social problems and interpreting them and it was also a fascinating experience and everything would feed into the ISACE study. I realised that Poland was one of the first countries in Europe that had school surveys on alcohol. Already in 1913 there was a study in a small town near Krakow on the use of alcohol among pupils of, I think of the age of 13/14 years old, perhaps younger and that study showed that drinking was quite

popular and it was children drinking within the family. It was normal that when you were about to be 14 you became almost a grown up person, you were involved working on the farm, or about to start working in the factory, so drinking was a regular part of that life and they were introduced to that life through drink, already being school pupils. And then we had the first modern surveys on alcohol consumption, in the beginning of the 1960s and we owe this to the Andrzej Świącicki who was a pioneer in Poland and who learned from the Finnish colleagues, because first Finnish studies on alcohol dated back to the late 1940's. This was the survey which took place a year or two years earlier than the American survey on alcohol run by Don Cahalan and others and Robin Room, a young alcohol researcher. We had quite extensive research collaboration. Of course we had collaboration with some colleagues in Russia which was quite peculiar but worked fine, but on the other hand in the 1970s my Institute signed a Memorandum of Understanding with NIAAA within American National Institutes of Health which included the premise that when scholars from one country visited another country the in-country expenses were to be covered by the country visited, which was quite important, because at that time as I said currency exchange rates were very unrealistic and we were not able to use our resources to pay for in-country expenses in the United States. But Polish airlines flew to New York, so we could easily buy a ticket to New York and then were on, as we call it in Polish, on the bread of the United States. So at that time I was lucky to participate in the ISACE meeting which was held in California, in Monterey and then spent three weeks with the Alcohol Research Group in Berkeley. At that time it was not called the alcohol research group, but still the Social Research Group and was part of the University of Berkeley and it was a very fruitful time for me. I had a lot of time to read, to talk, the campus in Berkeley as you know is wonderful for everything, including work and study. My pal in the social research group was Andrea Mitchell, who, I was introduced to her by Robin and in fact I didn't need to look at the catalogue because any time I wanted to get something, I could come direct to Andi, and she was really kind to me. Well in addition Robin had in his mind most of the titles, so I also benefited from his advice and suggestions.

At that time I also come across with the works of Jo Gusfield who actually influenced my thinking and understanding of alcohol policies across my life. It's symbolic crusade by Gusfield. Later on I had the opportunity to meet him and he is a really important person in my research and approach to the alcohol question. On the other hand I still remember a book on the alcohol arena by Carolyne Wiener I believe, who again showed me how weak the relationship is between the real spread of the problem and problem in public perception, how the alcohol treatment system increased suddenly in the United States in few years, even though it was actually needed many, many years before.

Then everything became even more fascinating, both internationally and nationally, home wise, because in the summer of 1980 the Solidarity movement appeared in Poland, and the alcohol issue became an important part of their legacy. They claimed that the Communist government pushed alcohol on the working class, to maximise profits and to make it easier to manipulate a drunken society. So demands to reduce alcohol availability, to change alcohol policy were on the banners of Solidarity from the very beginning of its existence. In fact during this history of strikes in the summer of 1980, in the shipyards of Gdansk, but also in other coastal cities, they announced prohibition, alcohol prohibition, which we studied later and it was again fascinating to realise how important the issue was, because all stakeholders at that time claimed they

were first to announce prohibition. So people in the oil refinery complained that everybody was saying that it was the shipyard which introduced prohibition, when it was the refinery which was first. Then the head of the region claimed that they also proceeded with prohibition immediately after strikes broke out to prevent street riots, where alcohol could not play a positive role. So it was strange to study, I was not a member of Solidarity, but I was a member of the expert team of Solidarity, parallel to being a member of the expert team of the governmental commission. So it was not schizophrenic, we were able to harmonise different perspectives and I enjoyed to travel on both courses in a way. And at that time I also realised that in addition to curiosity, alcohol research and also sociology in general, may affect real lives and may save lives. During the Solidarity period and the year after when martial law was imposed, alcohol consumption declined by 25%. It was the first time since World War II when the consumption of alcohol in Poland almost tripled from 3 litres to over 8 litres. Then in 1981 it declined by 25%. So it was against trends all over Europe, at that time consumption declined only in countries where alcohol consumption was very high, but in countries with low consumption it was still growing at that time. Then we realised that statistics, current statistics, proper statistics reflected this decline in consumption, for example the first hospitalisation due to alcohol psychosis declined by 60% after one year and liver cirrhosis mortality declined by 40%. So it was a very immediate response to the decline in consumption. It was not because Solidarity convinced the population not to drink, but it was a time of shortage of everything, including alcohol. Solidarity as a trade union demanded increases in salaries, in wages, but demanded also that they had to be consulted on all price increases that were controlled by the state. As a result incomes increased remarkably, but prices of alcohol were stable and for first time I remembered, there was a shortage of alcohol in Poland. Then rationing of alcohol was introduced and this was a major factor in the decline in consumption. But this rationing and short supply of alcohol was approved of by both the government, but also by society, which supported Solidarity. So Solidarity demanded rationing, then people accepted, not everyone, of course we had alcohol, but it was a real decline in consumption, as reflected by the decline in morbidity and mortality associated with alcohol use. Well perhaps I have spoken too long, so maybe you have extra questions and I will have a sip of tea, not alcohol!

- V: Can you tell us a bit more about the work with Solidarity, how you worked. I think you say in your answers, your written answers that you combined expert roles for both sides.
- J: That's correct, actually Solidarity formulated demands to the government, to introduce a new alcohol, new restrictive law which reduced many freedoms in access to alcohol as a matter of fact and sometimes the demands were quite radical like obligatory blood tests for venereal diseases from people who were attending sobering up stations. So I remember the Minister of Health negotiated with representatives with Solidarity to apply certain measures in medical treatment. And I remember this historical talks in the Gdansk region when I was a part of both the expert group of the Government and expert group of Solidarity. I remember one of the Solidarity demands was to remove beer and alcohol in general from trains. So going to the negotiations we got the feeling that we got the last beers on the train before the negotiations closed. So it was quite a fascinating period. Then I remember with my friend Antoni Bielewicz, who told me there was a vacancy in the Institute, we wrote

very critical article in the prominent weekly Polityka, criticising government alcohol policy, showing its potential negative consequences. And then Ignacy Wald got a request from the Head of Governmental Commission, to write the response to this article and he told me to prepare that response to that critical article, which I wrote myself. (Chuckles.) So it was quite an experience in my life. Fortunately, martial law was imposed, so I didn't write the critical response to my critical article on government alcohol policy.

Solidarity was very strong, not only because they understood that alcohol is not only an innocent commodity. In the previous conflicts between the working class and the authorities, the authorities used alcohol to blame for riots, to justify using force against the drunken mob, as the media termed the protests. This was to discredit the working class movement, but there was a seed of truth in this accusation, because during these street riots the alcohol shops were broken into and alcohol was looted. So it was one reason why Solidarity paid much attention to alcohol. Another reason was to win moral superiority over the authorities, you push alcohol on us and we want to be free of alcohol, we want to be sober when doing something, we want to be temperate. And as far as I know according to our research, these prohibition during strikes was really respected and whoever tried to smuggle, or whoever was found drunk was thrown out of the gate of the shipyard and there were just two cases in two weeks of strikes. And also in the streets of Gdansk according to the Governor of the region, there were not drunken people. There were even advisors to Solidarity, who were famous for their drinking, they complained, but they respected prohibition. So it was really a climate of having a common aim, common values around alcohol, which probably reinforced a sense, not only symbolic sense of moral superiority, but probably a kind of internal sense of being inclined to protect some values and being together and not breaking self-imposed rules e.g. on alcohol. Then there was a time when both the government and Solidarity competed in introducing restrictive control measures. In Poland prohibition was one of these measures, announced during the legal period of Solidarity, I think 12-15 times nationwide either by Solidarity or by the government and prohibition was the symbol that something serious was going to happen.. Then the government announced a reduction in alcohol supply, even though it damaged the budget. So it was a very fascinating period, a period when you clearly could see the symbolic meanings and the practical meanings of alcohol, alcohol policy. And it corresponds very well with my at that time readings of Gusfield's book on American Prohibition where the symbolic aspects seemed to be more important than technical aspects.

B: Did the alcohol industry have any presence during this time, did they have any actors, did they react to the restrictions that were coming in? So that's one aspect and the other aspect is did it have any consequences regarding illicit production in Poland?

J: Well looking at the statistics, health statistics it seemed that the reduction in consumption was real. As I said hospitalisations due to alcohol psychosis went down by 60% over one year. In contrast over the previous 30 years it was systematically growing in association with growing alcohol consumption. Then liver cirrhosis mortality also declined over one year. Later on we did some studies showing that this immediate reaction on mortality, of mortality on changes in consumption of alcohol do have one year lag.. As far as illicit consumption, of course there was, but as I said it did not compensate for the short supply of licit alcohol. As for the industry during the legal period of Solidarity, nobody would even dare to defend alcohol supply side.

So it was a consent that it's an important question and it would be immoral to call for increasing alcohol supply. But there are some exceptions, for example the monthly ratio of vodka was half a litre per adult person all over the country, except for the Silesia region where it was two bottles of vodka instead. The working class was the strongest in Silesia region, and their interests were respected. But alcohol industry was just silent. They came to have a voice after the new alcohol law was adopted and severe restrictions were imposed on the supply of alcohol. And then micro and macro interests, economic interests slowly reduced the impact of public health interests.

So the new law, alcohol law which had a very peculiar name, because it was named "On bringing up in sobriety and preventing alcoholism". So it had quite peaceful connotation and it was focused on prevention, rather than fighting or whatever. It was adopted in the late 1982, which was almost one year after martial law was imposed. But the shape of the law was exactly as it was agreed upon with Solidarity. There were very small, not important changes adopted. For example as in Scandinavian countries, state enterprise was established, to produce, to import, export and retail distribution of alcohol. And the total number of alcohol outlets was imposed nationwide at the level of 30,000, which was three times less than before. Slowly these restrictive laws were made less restrictive and eventually totally dismantled at the beginning of the 1990s.

But Solidarity, delegalised under the martial law had still alcohol question on its banners. Every August, which was proclaimed by the catholic church as a month of sobriety, there were people with banners written in the Solidarity way that August is a month of temperance, standing in front of alcohol shops. So it was again the way showing that we are here, Solidarity is here even though it was a banned organisation. In fact it was playing with the symbol, because later on the same people allowed the total liberalisation of alcohol control, but until 1989 Solidarity seemed to be very much against alcohol and very much in favour of restrictive alcohol control policies, which they forgot immediately after the market took over civic society and to a large extent over the State. And then illicit supply really started to grow. I'm talking about late 1989/1990 when the government allowed private imports of everything, to supply the very poor market, market of shortages and then people could also import alcohol for their own use and it was how some big fortunes started in Poland. People would import million litres of spirits, claiming that it was for their own use and it was amazing because at the time the total governmental importation of alcohol was not higher than 100,000 litres and in the same time one individual lady from Poznan, imported one million litres for private use and the new government accepted this doubtful way of dealing with the free market and the capitalist economy. So summarising the 1980s, restrictions were more or less accepted by the population and by the government and they were respected, not to the full extent, but at least when you look at sales and the health statistics, it was stabilisation over the 1980s until 1989 when everything changed overnight.

V: Can I go back to something you talked about as very important, which was your international connections and when they began. I think you also talked in that connection about the ICAA Institutes coming to Poland?

J: That's right just after I started my work in the Institute, the first ICAA institutes were organised in Poland in 1978, the first since the interwar times, I believe. And again it

had symbolic meaning too, because at that time the rate of growth of the economy started to slow down. Some tensions within the economy and within society emerged and one of the interpretations of poor productivity was that we drank too much. So measures had to be taken to reduce the impact of this factor. By the way later on in the Soviet Union they came to the same conclusion, which actually culminated in anti-alcohol crusade by Gorbachev and his people. But already in 1978 the Polish governmental commission was quite prominent in talking about it and, a political prominence was given to the commission and to the expert team, they hoped that a reduction in alcohol consumption might bring beneficial results both in productivity and in the health of the society. It was about the same time, in the 1970s when health indicators ceased to improve. Since the war Polish health statistics including life expectancy were coming closer and close to those of western Europe. By the beginning of the 1970s, we had higher life expectancy I believe than Finland and much higher than Portugal, or Spain. Since then, also because of the consolidation of western Europe, the health indicators still continued to improve over there and in Poland they started to level off. It was another reason I guess why the government and party decided to pay more attention to alcohol, despite the economic benefits it brought to the budget. So having this International Council on Alcohol and Addictions Conference, it was a symbol of commitment to the alcohol question. And just before the conference started many contra measures were introduced, including closing down night shops. So during the conference, but also after, night shops with alcohol, which were very popular points of enjoyment and supply, were closed down. I'm sorry for coming back to anecdotes, but I remember I went to such a shop, during a small party we had at home and I realised that it is closed, but only the alcohol section was closed. So it was a night shop, very few shops, night shops we had in Warsaw and there was a gentleman who did drink shandy. It was a new invention, alcohol content 1.2% and he said take 15 of these and you get an effect! He advised me, he was sitting in front of 15 bottles of shandy, empty bottles. So it was a funny transition.

But at that time I had a number of meetings with foreign researchers who were asking me questions about alcohol statistics in Poland, which had semi-confidential status. During the Institutes the discussion was held whether socialism produces high vodka drinking, or high vodka consumption. It was not coincidence that the so called socialist countries were leaders in vodka consumption at that time in the world, but had lower consumption of beer and wines, You know in terms of total consumption, we were in the middle ranking, if such a ranking could be created. But in terms of vodka consumption we led, like Poland, Eastern Germany, Czech Republic, Hungary, I believe and it was not because socialists like vodka that much, From the history we know that, it was a time when working class meetings were held in the beer pubs in Germany and in Austria. So it was not spirits that was associated with socialism, but probably at the time socialist economy preferred goods with quick return rates and of course excess tax on vodka was much higher than on wine and beer. And shops at the time were very small, so it was not room to place thousands of bottles of beer, but instead of this you could place ten times more alcohol, pure alcohol in terms of vodka. But anyway it was a discussion, but it was I think a fruitful discussion and it did not damage the vision of Poland as a country which is seriously concerned with the alcohol question. And how it have come about comparative research being important in my life.

After ISACE's project which I described perhaps in too large extent, its participants were missing each other, missing comparative perspective. We felt that we should do something you know to continue cooperation and then we created a group which was called International Group on Comparative Alcohol Research. The aim of the group was to promote comparative research on alcohol, Parallel, the Epidemiology Section of International Council of Alcohol Addictions evolved ... The people of my generation at that time who were relatively young, felt they had a different identity than the old people coming to ICAA conferences. As you know ICAA conferences were participated in by people in elegant jackets, clapping and applauding and having a good dinner, that took much more attention than real discussion. So the younger Epidemiology Section was very different. On the top of it we had much less money than the regular attenders of ICAA conferences, so we could hardly afford to be a participant and paying a fee, which was already at that time like three/four hundred francs, Swiss francs, which was a lot by any standards of young researchers even from rich countries. By the way we presented ISACE's results in a plenary session of ICAA and at that time I got once in my life and probably once in the life of ICAA, a stipend to go there and to spend some time. So I was really lucky, it was in Vienna and I felt like a king with 300 dollars or something at my disposal! Taking into consideration that my average salary was about 25/20 dollars.

But at that time it was decided that every second year our Epidemiology Section would have separate meetings from the main seminars of ICAA. The first such meeting took place in Finland hosted by Alko (Finnish Alcohol Monopoly) , Klaus Mäkelä was the main person and we had a five day meeting, which was a really small beautiful meeting, attended by no more than 25/30 people and we had no parallel sessions. We had all discussions. We had to read all papers beforehand. It was by the way quite costly to send around all these papers, but sometimes in the evening and in the morning I read the papers for that day, for discussion and it was really, really something. I remember it was June 82 when, international telephone lines were still cut off in Poland and Klaus Mäkelä allowed me to call my parents for free who lived in Paris at that time. I had the first direct telephone conversation with them in seven months and it was a big thing for them in particular because the news from Poland was not optimistic and I could quietly then say life is going on and there are not so many troops in the streets or whatever and we have enough to eat and less to drink. (Laughs). . So it was the first meeting, very fruitful, very nice and then in, I think later in 1982 the Swiss Institute for Preventing Alcohol Problems organised a meeting, the head was Richard Müller at that time they, or we invited much more people, a greater variety of people from different countries, including people from Latin America and a few other places all over the world. So it was a very successful meeting. Well in short, the last meeting of International Group for Comparative Alcohol Research took place in Zaborów in Poland and then the final meeting in Skarpö, organised by Kjetil Bruun.

Kjetil was really an important person in my life too and he visited Poland just before he died in 1985. I pretended to be his colleague, but also his driver, because I drove him around visiting different places and I also sometimes translated his questions. His questions were simple, naïve and enlightening and people realised many things following his questions that were hidden or taken for granted. So his way of asking questions and his way of listening to other people and believing them and so it was something which I enjoyed because I spent almost all the time with him. So Kjetil

Bruun was somebody important for me, but not only for me, I think for the whole generation of alcohol researchers of that time, in particular Finnish researchers and even today when I tell somebody I spent five days with Kettil, they seem to be envious. So and then in, it was 1984 or 85 when Kettil, the first Professor in Alcohol at Stockholm University organised a meeting and part of the meeting was discussion and presenting papers, but part of the meeting was writing bye- laws of the new society we intended to establish, to build. And there were small working groups. I was in the small group which helped organise small beautiful meetings, without getting extended. But we did not prevent its extension. I think in 1986 the meeting of the new society was held in Dubrovnik I believe or Aix-en Provence when Klaus Makela proposed the society would be named after Kettil Bruun, which was accepted of course by everyone, because most of the people had very fond, very good, fresh memories of Kettil who died suddenly at his desk. So and as I already said our preoccupation was the comparative research which we considered a very fruitful perspective to understand not only international developments, but to understand your own culture, including alcohol cultures and your own policy, including drug policies. And it was fascinating that commonalities were much more pronounced than the specificities. For example I remember once in the meeting in Perth, in Australia organised by David Hawks, I presented a paper with a title actually proposed, suggested by David, 'Lessons learned from Polish alcohol policy.' They summarised in fact a victory of economic interest over public health interest and Sally Casswell was sitting in the first row and, said it was identical as in New Zealand. It was 1992. So where the government pretends to be aware or concerned with public health, in fact every time when it comes to the clash between economic and public health interest, the economic interest tends to win at least in the long term, but quite often in the short term. So it was something which I enjoyed in alcohol research, complexity, multidimensionality, but also this comparative perspective, which I still enjoy.

- V: Do you want to tell us something about your continuing involvement in drugs research as well.
- J: Well as I said it was a source of my pride that I am involved in drug research, because I considered alcohol research as less important and less interesting than mysterious drug taking, which was quite a phenomenon in Poland after the World War II, was something more interesting. And it was really clearly associated with youth culture movements from the 1960's and 1970's. So I was witness to the first non-governmental movement to prevent and treat drug abuse in Poland. But also my first task was to do a kind of follow up study comparing different approaches, mainly the psychiatric approach and the approach based on the therapeutic community. Everything showed that the therapeutic community is more likely to be the better approach and more appreciated by patients, but in addition we realised how difficult and complex follow up studies are, what are the indicators, what is it abstinence, or better functioning, what is more important, to fight our disease, or to improve the quality of life of people. These questions are still present in psychiatric mental health research and perhaps in medicine today and what is more important, is it the satisfaction of the client, or the satisfaction of the provider. At that time the head of that movement Monar, Marek Kotanski, claimed that treatment does not need to be pleasant, it has to be effective. So in fact these Monar therapeutic communities were quite restrictive I would say, quite autocratic in another way, similar to Synanon in fact. And we know the history of Synanon which became quite a secret society,

which did not necessarily offer benefits to the members. The Minister of Health, but also we as an Institute promoted competitive non-governmental organisations, which emerged just at the beginning of the legal period of Solidarity. So there was something like a market of different options in drug treatment in the beginning of the 1980s and they started to fight for clients. So the level of restrictions was diminished, even in the Monar therapeutic community. I can say a few good things about the market, because they competed for clients, the number of drug users in Poland was not too high, actually the numbers were exaggerated and the kind of hysteria about drug use was prevalent, was dominant in the media. But then as time went on the situation was more and more quiet, everybody agreed that it's a problem which affects a relatively small number of young people and the solution of the therapeutic community was approved. And the government at that time was convinced that it was going to pay for two year treatment, residential treatment, instead of having these young people in the poppy fields and in the business of producing drugs, because then they operated production and they produced what they called Polish heroin, not only from poppy heads and the poppy milk, but they were able to produce it from poppy straw from the dried poppy which was still quite easy to buy from small farmers, growing poppy for personal use. So they invented something which you could inject and it was dangerous, but it was not that widespread. It spread out a little bit from let us call it middle or high class pupils, or university students to the working class youth. But still the spread was not so high and could be dealt with in my opinion by NGOs and partially by psychiatry. And then in 1985 the new, the first complex comprehensive law on drug prevention was adopted. Again rhetoric is important, because the focus was on prevention and the law did not penalise possession of drugs, no matter amount of these drugs. So it was a very brave solution, to a large extent made by people from the Ministry of Justice, against the Police and very much supported by my Institute and by our expert advice. So we recommended that possession should not be penalized because lots of people who possessed drugs at that time were people dependent on drugs. So drugs were not imported, were not smuggled, but they were produced by users themselves and if they exchanged drugs, they exchanged drugs for drugs. It was a kind of, a barter kind of relationship and the shelf life of this Polish heroin was not long, so when you produce like few litres, you couldn't use it by yourself and you distributed it among people you knew and then the next person collected a huge amount of poppy straw, produced drugs, so it was really bartering. Sometimes it was in exchange for sex, but not too often. So we adopted this law which was in my opinion the most liberal law, legislation in Europe, or perhaps all over. And some people predicted a very disastrous scenario, that these young people not being prosecuted, not being punished, they will spread it to thousand, thousand and hundreds of thousands of young people. But then we didn't see any increase of drug use in population surveys, in police statistics, in medical statistics. Our interpretation of that time was that drug abuse lost its cultural power. When it was used, when it was a habit of young people of artistic, intellectual ambitions, it was given an exact message, come to join us because we are dissident, we represent the counter culture. But when it spread in poor families of working class young people, it lost its cultural temptations. It became less attractive and it didn't spread any further, until the beginning of the 1990's when (currency) exchange rates changed and importing, or smuggling drugs became affordable as much as buying drugs abroad. Smuggling became profitable and buying it, buying drugs from abroad became affordable. So we followed all these developments and it was again fascinating to understand it not from purely technical point of view, but

also seeing the strong involvement of drug use into the general cultural and political process. So it was fascinating to see how drug use changed from the status of a hidden problem, to become a public problem in the 1980s, in the times when Solidarity emerged and became social problems, as before it was seen as a medical complication. So this, the formation of the stakes of the problem, which may apply to all other social problems was something which we enjoyed a lot and which was fun to study. We had to face HIV/AIDS which started in Poland a few years later than in Edinburgh. The first case of HIV infection in Poland was registered in the summer of 1988 and since then as it could have been expected and what we worried about it started to go as a fire in a bush, because the sharing of syringes or injecting was very common. In fact at that time we had no disposable syringes So it was normal that one syringe was shared among 10/15 people. It started very quickly, but very quickly a response came. Fortunately we had this NGO Monar and other NGOs who had good relationships with foreign NGO's. And immediately the syringes and needles were offered by these organisations to Monar> Also the Polish government of the time, it was a military Government, but they were very open for innovation. It was like Gorbachev in Russia, or even better. They allowed people to have needles and syringes and very quickly, also to initiate a massive production, so, small private companies started to produce these plastic things to be distributed. So in about one year the peak of infections, was reached I think it was not more than 2000 and then in the next year it went down, the number of new infections went down to a dozen or so. And these syringe exchanges were organised not only in NGOs but also in state epidemiology stations and they really mushroomed in all places where the population of drug users was large enough to be significant. And in addition to distributing the injection equipment, there was also educational material, very nice brochures or even small books, explaining many risks of infections. And sometimes, people coming to these places were interested and were offered these brochures and information and also they were asked if they wanted to participate in treatment. So this combination, is not only technically to distribute injection equipment, but to teach people, to convince people about the risks and showing them ways to avoid risk and so on. So it was again a good period when I felt I was satisfied,

And soon after I was invited to work as a consultant in the European Office of the World Health Organisation in Copenhagen and I was in charge of the programme of preventing HIV drug abuse and HIV infections in the countries of central and eastern Europe. And I was invited to do this job by Cees Goos who replaced Jens Hannibal as Regional Advisor on Alcohol and Drugs. And it was quite a good period, because I met again many important people from the drug field, because one of my duties was to arrange training for people from the countries ranging from Albania to Estonia, but also to the Central Asian republics, all the Balkans, Slovenia, Bulgaria, Czechoslovakia, or Czech Republic and Slovak Republic, Hungary. At that time WHO continued to have a good reputation to be able to invite many prominent people from all over the world to teach and to participate in these training sessions, organised either in one country, with the participation of single nation, or multinational training sessions. At that time I met for example Gerry Stimson, or Ambrose Uchtenhagen or many others. I also had opportunity to organise a meeting in Moscow, and that meeting brought together people from all Soviet Republics, it was just after the end of the Soviet Union,.

V: You began to talk about the European Union then how that brought more collaboration.

J: After quick Polish transformation to the free market and parliamentary democracy, we started collaboration with the European Union. First it was a bit funny for me because in the capacity of WHO consultant, actually I was travelling from one country to another to spread the news, to bring closer to them the recent developments in research and practice. But then I was approached by people from Spain, who won the grant or contract to teach us how drug policy and drug treatment should look like. But it was quite a nice experience because there was some money behind this and I invited for collaboration a number of the many stakeholders in Poland, to come to the meetings of the group that collaborated with this Spanish group, who pretended to train us again. It was good because these were people not only from NGO's, but also from the police, from the Ministry of Foreign Affairs. All these people, including myself, found a common language. We started to chat together about drug policy in the same terms. We did not always share a common perspective in full, but at least we got a common understanding and what was good that again was that we had many opportunities to meet people from other eastern European countries that intended to join the European Union. We visited these countries and then we learnt from each other and it was a really fascinating experience.

I applied for a practically non-existent budget to fight drugs in Poland, which was somewhere in the European Commission and which was identified by my friend from Denmark, Jens Hannibal, previous WHO regional adviser. And we applied for a project which was called 'Take Off' which means 'Take Off' in literal sense, but also to be high on drugs in Poland. So in a way we stole the 'Take Off' jargon to apply it in drug prevention. And it was a project comparing two small communities affected by the crisis of transition, but also suffering or expecting drug use problems. It was found out that the project does not solve the drug problems as a single problems. That it has to address all social problems suffered by those communities and mobilisation of the community is the most important factor to challenge, to prevent social problems. So the first step what we did actually in practice in these local communities was to put together around the one table all stakeholders of the problems, of the drug problems, but also of other problems. And some of these stakeholders actually competed for money and recognition and claimed to be the major representatives of the drug problem, or drug addicts. But after sometimes being together they realised that cooperation is much better than competition and we agreed on the common aims, common targets which included all stages of drug prevention, starting from working in schools to harm reduction. We didn't focus that much on drug education, because in some schools, drugs were completely absent, so teaching them about the properties of a drug was definitely too early. But we taught teachers and we taught medical staff that in the case of the drug problem coming to their area of responsibility they were prepared to do.

But we also had very simple actions such as having a competition on anti-drug posters. And until the time we had this project, most of the anti-drug posters in Poland were posters to scare people actually, to make them afraid of the drugs, big syringes killing young people, or people hanging on drugs. The colours were black, white, red and quite impressive, but quite inefficient as a matter of fact. And in this competition we awarded prizes to posters which, brought together generations and

they were colourful. They were promoting joyfulness rather than scaring people about drugs and it was quite a crucial moment to get proper public support when we organised the exhibition of these posters, when the young people, the school children could come with their parents and be aware and be happy. Well we really created a kind of community feeling. At that time we also introduced some HIV prevention and we had a BBC documentary showing in details drug use and contracting HIV, but also how to prevent it. And among other things it was shown how to use condoms, through using a banana. And in Catholic country like ours and quite traditional and traditional communities, we found it problematic to show this direct to children. So we decided to invite parents to show this documentary which had a Polish commentary by Polish good actors. And parents were very interested and against all expectations, they said of course our children have to see it, because we can't tell them these things like this, we are ashamed to talk about sex, but it should be shown, they have to protect themselves. So involving parents in drug education and sexual education seemed to be a really good solution from this experience. We did a very simple a study which showed that 80% of inhabitants of those communities, one was 60,000 people and another one was 6,000 people, are aware of the project being held in their community and 60% supported all ,its aspects . We had also involved individual agencies that previously sometimes competed with each other and we stressed cooperation as a matter of the outcome of this project. So it was quite an experience. What we did more, instead of having training separate for the police, for the medical staff, for teachers, for social workers, we put it together in training sessions and they spent together two days, including one evening and one common supper, which made them friends. And in that way having a common language and having informal communication, we changed the order of managing of problems within a community. So if a school teacher had a problem, he could approach direct a social worker to come, or the policeman to come, instead of informing the director of the schools who approaches the head of the police station and then head of the police station could tell one officer to come to the schools. So we facilitated communication between different agencies in charge of the problem. What we found was that juvenile crime rates declined remarkably in comparison with kind of control in society, because young people were busy all the time with numerous initiatives. So it was big support and big help and in addition to changes in these communities, the result was that Polish drug education changed its image totally.

- J: But positive messages actually started dominating Polish let us call it (anti-drug) propaganda. For example the message invented by the Polish Bureau for Drug Prevention, 'closer to children, or closer to the child, further from drugs.' Stressing that closeness within families, supported by parents made the distance to drugs bigger. But in general promoting recreation in general, full of physical activities became and community participation became major message instead of scaring people.
- V: And there have been many other EU joint activities haven't there, some of which we've been involved in.
- J: . And then from the very beginning, we started to participate in comparative projects, initiated by different colleagues from different countries. Well one big experience I would like to mention was a project, which was called 'Technical Assistance to Drug

Demand Reduction in Eastern and Central Europe.’ And it was a project which covered twelve countries, as I said similar to the first projects from Albania to Estonia, Latvia, Lithuania, Poland, Czech Republic and we applied for this project together with colleagues from Vienna, from the European Centre for Social Welfare Policy and Research in Vienna and colleagues from Amsterdam, from the Jellinek Institute. And we got it, it was even bigger project like it was 2 million ECU. It was received and in the first meeting of three institutions that applied, colleagues from Austria, the Netherlands and from Poland, we all agreed on task assignment that the Dutch Jellinek Institute would be in charge of the money, Vienna would be in charge of administration and my institute would be in charge of content wise things. So I was team leader and , it reflected the openness of colleagues from other institutions. One was Flip Maas, also the Dutch person from Vienna and Wim Buisman from Holland. So it was a three year project and we visited all twelve countries, we had visits from all twelve countries together. In the beginning there were some problems in communication. It was a competition about who was more competent in drug issues, in their policy, in their treatment, who has more experience and of course there were differences. For example Slovenia had a lot more experience in drugs policy and drug treatment than Lithuania for example. But all in all people from all countries they supported each other and helped each other and we had practically very, very few conflicts. And it was a great experience, which also left us with the links, with the network of other people after the project was completed and it was one reason why we had good prospects to collaborate as long as the research grants from the European Union started to include candidate countries, like Poland.

So there were, I believe more than a dozen or so, so I can’t talk about all of these, but the first was on drug users in European prisons and it was run, the main coordinator was in Hamburg and it was Heike Zurhold and lastly we collaborated in the EPPIC project which also dealt with a problem of drug users within a criminal justice system as well, the recent project with Betsy (Thom). Having this European project you had easier access to come to prisons to interview young drug users at that time, female drug users in prisons and we learnt a lot about prison life and the worries and hopes of these people. I remember that almost all ladies we interviewed were scared of going to freedom. They felt safer and more quiet being in prison having the rules distributed, being forced to do something, but having their days planned and not chaotic and they were not able to foresee what their future could be with freedom. Of course there were some specificities, for example in Germany, drug using girls were allowed towards the end of their sentence to work outside, to work in the homes of the elderly or whatever. But in Poland it was very different, in Poland the priority for prison staff was to keep the world free of drugs. So at the very last moment the prisoners didn’t get any leave to go home or any prospect to work outside prison and these factors are still the case today. The regime in drug words in Polish prison is very severe, the priority is security rather than other priorities of social work or health priorities. I could mention also the project coordinated also from Germany by Irmgard Vogt on senior drug users. It was like around 2010 when we realised that a generation of drug users from the 1960s and 70s had become seniors and some of them keep going very well. I had a few interviews with people who started using drugs 30 years earlier, or 35 years earlier and were still feeling well. Some of them attributed it to the fact that they produce Polish heroin by themselves and they knew the contents, they knew the procedure, they knew the seed and therefore they were healthy. But really people in their 60’s were not having much deterioration of health, which was a

great surprise, which of course cannot be generalised and we know that drug users live much shorter, but I think a good proportion of these premature mortality is related to our management of drug problems, being prosecuted by the police, being rejected by society, being deprived of employment opportunities and so on. We find out that alcohol and drug policies are quite arbitrary and are taken without any proportion for the size of the problem. It depends on general political life, general political priorities, priorities of some stakeholders and that's what we learnt also from our (comparative) work and gave me the opportunity to collaborate also with Virginia (Berrige). I enjoyed that we had continued to follow in a way the change in the language. It's talked about addiction, or drunkenness or alcoholism and we saw this kind of a race to use less and less stigmatising expressions, which became stigmatising after sometimes being used even in professional language. So it is important that, to be aware of the fact that the way you communicate with patients, with people affected by a problem, as well the language you communicate within the public and policymakers, is absolutely important. And well perhaps if we find a common language and a common understanding of some concepts we might come to the better solutions to the problems which are suffered by societies.

V: Can we ask you what it's been like working in this area, what have been the key facilitators and challenges/

J: Curiosity was one of the main factors that facilitated my interest, but it competes with a sense of public utility. And what I liked very much from the very beginning is the multidisciplinary of alcohol and drug research. You can't be only a sociologist or epidemiologist or economist or historian to understand these problems. So on the one hand I don't claim that I became a very good historian, epidemiologist, economist, sociologist or whoever in the field, but I have the sense that I think of the considerations, under consideration of these perspectives makes me better understand what I am studying. So it is something which seemed to slowly disappear from current alcohol and drug research and I think specialisation and deepening your field rather than extending your perspective, have become dominant. But there are many challenges I could talk about with you, but we have no time to do it. One, is relationships with the industry, I read Betsy's interview in your series and we slightly disagree in this area.

B: Yes. We're still friends!

J: We are not enemies of each other, even though I feel to be an enemy of alcohol industry, well the best way I could hit them was to abstain from alcohol, which I don't do. (Chuckles) But I'm afraid, I see the growing interest of the state is to get the industry involved in funding research, all research and it has some benefits, in particular, if it applies to some technical engineering sciences, but I'm afraid that involvement of the industry in pharmaceutical research, drug research and alcohol research might bring more harm than benefit. And of course it is innocent to take some money from the industry for one small portion of the research, but I'm afraid, I'm scared that one day the government will tell you, if you can get 10% of your budget from the industry, take 40% as they are keen to offer you money and then you get 80% and then an agenda is their, will be their. So this is something which worries me and I have a feeling that, having the example of the pharmaceutical industry, which changed the picture of medicine and paradigm of treatment, I'm afraid about

similar developments in the alcohol field and therefore I'm hesitant to accept funding. But of course if I had not the money to survive, fortunately I retired, but having no source of income, or another source of funding research, perhaps I would accept it. As you know in some African countries the industry funding, or international industry funding constitutes the only source of research and incomes. So it's difficult, it's the role of perhaps WHO and the European Union to reduce the industry impact, or to reduce the monopolised position of the industry in some developing countries in the area of alcohol research. Because it already has quite detrimental health and social effects on these countries. So this is my expression of faiths about the relationship between the industry and alcohol. As long as I can, I reject proposals. I was approached several times actually to do something useful and helpful together with the industry and so far I was saying no

V: Can we ask you who's been the greatest influence on you and in what way they have been?

J: Oh that's a long story, as I told you at the beginning, I said at the beginning, I had really good professors at the university, the Department of Sociology. We had well known Zygmunt Bauman, but we had also Stefan Novak, who spent about one year in the States and he produced a big book on the most advanced methodologies that were developed in the States. So we probably got better acquainted with the most advances in American methodology than the average American student, because it was really a variation of different methodologies from, even from qualitative studies to quantitative studies. And we had also very good subject called 'History of Social Thoughts' which was taught by Professor Szacki who was a great sociologist and historian and I am really indebted to these people. Then I mentioned Ignacy Wald who was a neurologist by profession, but he was always attracted by kind of excluded populations. So he was very much focused on mental retardation and he supported the NGO movement, movement of NGO's, NGO's of parents of children with mental retardation, mental retardation and he was really, really great and his interest in alcohol and drug problems was also stemming from his interest in neglected, forgotten populations as alcohol and drug users were in Poland at that time. And as I told you he was involved very much also in alcohol and drug policy and once during a meeting organised, I guess by Addiction Research Foundation in Canada, we had a discussion what should be the relationship between policy and research and then he quoted a story about the Polish painter Styka who was painting at the end of the 19th Century. And as he was a really, really deep believer, Catholic and when he was painting Jesus Christ, he was always on his knees, painting Jesus Christ and crawling across the painting. And once Jesus Christ came and told him, Styka, the painter, do not paint me on your knees, paint me well. And so he claimed that those in power in fact deserve good advice, not the advice which is given on your knees, it is given considering all limitations and all sensitivities of those in power. And it was actually received as a quite general global message, despite the fact it was invented in 19th Century Austro-Hungarian Empire and said by a person who came from the other side of the Iron Curtain. He died after his second by-pass operation sadly. He was advised not to have the second by-pass and he said I have to live as a normal person, not as a person with all these problems with my health. And then I mentioned also people from ISACE's like Klaus Mäkelä who saw our studies as a general, part of general sociology and I was very proud when Klaus said to me once that Jacek you are a real sociologist. So I still try to keep this identity, despite the fact that many

people call me an alcohol researcher or whatever. But also I came across, well I can claim as a friend, Robin Room who I met first time in 1979, due to this ISACE study and then I benefitted from his knowledge, but also friendship and advice. , I remember at the beginning of my work in the field, Robin invited me to give a review to the paper on alcohol problems, published in Current Anthropology. I was very proud to give this review which was also published alongside his paper. , I would mention Thorstein Veblen book, 'The Theory of the Leisure Class' which made me realise how important symbols are in preserving and performing power, not only of the leisure class. And I have also opportunity during my first stay in the States in Alcohol Research Group to read Jo Gusfield's book on Symbolic Crusade and then I was lucky to meet him directly and then I think up to the present time I am very much impressed by his works and his way of approaching problems. He was talking about alcohol problems, but in fact he was talking about the conceptualisation of social problems in general, social policy and it is something which I like to have learnt and appreciate.

V: . So where do you see the field going now and where would you like it to go?

J: Well I'm scared that what I said actually that we are going to be all, at least many alcohol researchers are going to get more specialised or deepen some narrow fields of expertise, rather than to give communication to the social science in general, or epidemiology in general, which on the one hand is good, but it's not something I would like to be specialised in. And it is related also to the way the science, the research is being managed, or governed by the current government, by the EU, by the system of evaluation of science when we use more and more extensive lists and quantitative measures to evaluate the quality of your work, which is in imminent conflict actually and which makes many people produce more and more papers, more and more narrowly specialised papers. Well then juniors compete with others, to have more and more papers, In the long term in my opinion it makes alcohol and drug research deteriorate, but also science in general will suffer . I'm still lucky that I have opportunities to do the research I would like to do, but I am also under pressure to follow the agenda of funding bodies that means that not always the most important crucial issues are being investigated these days. Also ethical committees in my opinion are defending themselves and defending in a way the security of institutions. Once upon a time many years ago Klaus Mäkelä, when he retired from alcohol research, he initiated to develop research on ethical committees Klaus produced a nice analysis of, I think the ethical codes of the American Anthropology Association. When these codes were created it was to protect the research subjects, to defend native peoples, against abuses by researchers and now it is to defend researchers and institutions against those who are being studied.

V: Is there another question that you think we've missed?

J: I'm concerned that some agendas, research agendas, which are welcomed by policymakers and in particular by politicians are overexposed and may produce not only benefits, but some, a lot of harm. I think this area of foetal alcohol syndrome, which then extended to foetal alcohol syndrome spectrum, or whatever, to increase the statistics on children or babies who could be affected. This is very much welcomed by policymakers. In my opinion it may affect the lives of young mothers, when they are told that your child is affected

by the fact that you are a sinful woman who drank during your pregnancy and now your child suffers. And considering the fact that we do not have any specific treatment procedures for foetal alcohol syndrome, why to identify this syndrome. It is something which in my opinion is more harmful and more stressful, even from a public health perspective. Of course I agree that the younger generation giving birth to the next generation should be aware of the fact that alcohol maybe harmful as much as some drugs, to the foetus, that you may advise many things, other things for example to use contraceptives as long as you don't intend to have a baby. Then once you want to have a baby, you should abstain and then you can give up using contraceptives. This is something which I would, I know it as a good public health perspective, but this race to find out how many children were born with alcohol foetus spectrum or whatever, is something which worries me and on the top of it, it is against women, that's the problem, which puts women in a lesser position.

V: You must be feeling very tired after talking for so long.

J: I think pleasure dominates against tiredness. Thank you very much for your interest and the way you have listened and questioned.

V: Thank you very much for giving us so much time and I think it's been absolutely fascinating hasn't it Betsy.

B: Totally, really, really interesting.