

Families and Friends for Drug Law Reform (ACT) Inc.

committed to preventing tragedy that arises from illicit drug use

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NEWSLETTER

March 2005

ISSN 1444-200

NEXT Meeting

**Thursday 24 March 2005
at 8.00pm (please note change of
starting time)**

Venue: St Ninian's Uniting Church, cnr
Mouat and Brigalow Sts, Lyneham.

Refreshments will follow

Editorial

The US is attempting to wind back very successful harm reduction practices that are being undertaken around the world.

The US's John Walters, director of the US Office of National Drug Control Policy, went to Europe last week to promote his country's "balanced strategy" of measures against drugs misuse. He used the visit to speak out against "harm reduction" policies and to warn about the long term dangers to mental health of heavy cannabis use.

He addressed the European Parliament pointing out that a combination of effective prevention, treatment programmes, and a clampdown on producers had led to a 17% decrease in drug use among young people in the United States since 2001.

On the face of it that seems like a good result and one that might make one supportive of all other things Mr Walters might say. But this is the point at which our critical faculties need to be engaged.

A decrease of 17 percent represents only a small amount in absolute terms. For example cannabis use in the US in 2001 was 10.6 percent. The 17 percent reduction would have reduced it down to 8.8 percent.

It is a favourite ploy to argue reductions from a high point and disregard data prior to that point. In the case of cannabis for the US, its use has been trending upward since about 1983. Even taking into account the minor drop in 1990, the trend has been upward.

It is possible that the US has yet another minor dip but it would indeed be remarkable if it did not return to its upward trend, given that the policy has changed little over the period. What is important is that a trend cannot be determined by a limited number of data points.

Drug use is about more than just cannabis. Drug use also has its fashions. Some drugs fall out of fashion and new ones come into fashion. Or some old ones come back into fashion. To say that use of one drug has reduced without regard to use of other drugs is misleading and tells us nothing about the management or control of drug use.

There are also other factors that can affect the drug use survey results. These include the nature of the questions

– for example have the questions changed from the previous surveys? The number of people surveyed and the groups from which they were drawn also affect the results.

And if we were to compare countries one needs to know whether respondents to the survey are likely to answer truthfully or would the possibility or even the thought of reprisal might affect their answer.

The claims by John Walters must be viewed with scepticism until more data becomes available. However there is little doubt that he believes he is pursuing an honourable course even if the full truth is not disclosed.

Harm reduction policies, those things that he would like to undo, are about more than just cannabis. They include such things as needle and syringe programs which have been conclusively shown to reduce blood born viruses, supervised injecting centres, non-criminal sanction for drug users, drug treatment rather than jailing for addiction, more and better treatment options, reducing marginalisation and more.

Could one claim that he is lying? Perhaps, but he would say that the end justifies the means. His seductive argument leans toward using tougher measures which in his view will eliminate illegal drug use.

Hugh Mackay in his recent book "*Right and Wrong – how to decide for yourself*" has this to say about ends justifying the means:

"Once you've justified one morally dubious action by reference to some morally attractive 'end', it will become easier to convince yourself, in future, that this is an argument that can be made to work. It is, after all, one of the most seductive of all moral arguments: this might not be, of itself, a good thing to do, but look at the good result it will achieve!"

Cannabis is forefront in drug news at this time. While there have been no recorded deaths anywhere in the world from cannabis, the prohibition laws and associated death penalty in Indonesia might just achieve that end.

New drug laws reflect badly on Government

by Brian McConnell

(Published in The Canberra Times 17 March 2005)

Although aimed at drug traffickers and serious drug offenders, the new ACT cannabis laws effective from 6 March, in fact widens the net and can impose draconian penalties on young people experimenting in or addicted to the drug. Parents who want their kids to survive their experimenting years without the burden of a criminal

record, should be concerned about the implications of these changes

The new law will, amongst other things change the number of plants for which a Simple Cannabis Offence Notice (SCON) can be issued. It aims to prevent drug traffickers organising co-operatives of smaller (mostly hydroponic) growers.

The changes to the law have origins in the 1982 Williams Royal Commission well before any SCON system. It gathered momentum in 1997 through the Officers Committee of the Standing Committee of Attorneys-General. The ACT Government, apparently, unreservedly implemented the outcomes of those processes – outcomes that were almost solely driven by a legal mindset of some 22 years ago where the thought of alternate approaches or social consequences were not on the radar.

Reports in *The Canberra Times* in 2004 left no doubt that large hydroponic cannabis plants, producing quantities exceeding reasonable personal-use amounts, were being grown in rented houses.

Police raids in 2004 have eliminated such cannabis production, the Chief Police Officer recently told a Legislative Assembly Committee.

Eliminated under the old laws! This suggests that it has not been necessary to change the SCON system.

It is surprising that the Stanhope Government, normally a very consultative Government, made no attempt to consult relevant parties other than law enforcement, prior to introducing the Bill into the Assembly. It is also surprising that no account was taken of the December 2000 Legislative Assembly Standing Committee on Health and Community Care report *Cannabis Use in the ACT* - a very thorough report that recommended workable solutions even for this problem of co-operative growing.

If such committee reports are not taken into account, then what is the value of such committees?

The SCON system that served the ACT well for 15 years aimed to:

- separate the ‘soft’ and ‘hard’ drugs markets,
- minimise harm associated with use and minimise the harm associated with policing of use,
- keep kids out of the courts and thus avoiding a criminal record,
- better deal with an activity undertaken at some time by one third of the population.

Statistics show that the use of cannabis is not significantly different between states and territories even though different laws apply. However research by the Federal Department of Health (Monograph #43) demonstrated clearly the social benefits of systems like that applying in the ACT and equally clearly demonstrated the serious consequences of application of criminal law to simple cannabis offences.

The changed law has undermined these basic aims.

The law will now define, for example, a person dwelling in a flat and growing a few plants in their bathroom for

their own purposes as a criminal for which they could receive a 2 year gaol sentence.

Will the changes reduce the number of drug dealers and the supply of drugs, thus achieving the primary aim of all drug laws – reduction of drug use?

If history is any guide then we would have to conclude that it will not. The high profits that can be made as a direct consequence of prohibiting drugs and the steady demand, even under the harshest drug-law regimes, guarantees a steady replacement of apprehended drug dealers

These new laws reflect badly on an ACT Government that otherwise has shown such great promise espousing principles such as harm minimisation, a whole of government approach, a social inclusion plan, a new drug strategy, and so on.

Only a full evaluation of effectiveness of the changed drug laws after they have been in operation for a period will demonstrate their effectiveness. However until that evaluation take place, resulting in the inevitable revision of drug laws, one can only hope that police and others in the criminal justice system will use common sense and discretion so that the least possible harm is visited on minor drug offenders.

FDS Volunteer training program

A two day program to train volunteers for the FDS telephone support line. Volunteers are trained in simple counselling skills incorporating motivational interviewing, listening skills and basic alcohol and other drugs information.

Where: Calvary Hospital Function Room, Cnr Hayden Dr & Belconnen Way, Bruce, ACT

When: Sat 30 May & Sun 1 April, 10am – 4pm both days

A tale of two countries or how crime does not have to flow from addiction

By Bill Bush

Crime is one of the biggest costs of our misguided drug policies. It is not the drugs themselves nor dependence on them that lead to so much crime but the measures that we take to combat those drugs and how we treat those who are addicted to them. Just how much this is so was brought home to me when, in January, I visited the Institute of Forensic Science and Criminology (Institut de police scientifique et de criminologie) at the University of Lausanne in Switzerland.

The Institute under the direction of Professor Martin Killias has assessed the impact on crime of the prescription in that country of heroin and other narcotics. Those admitted to the heroin programme have a history of failure in other treatments. Many had been in trouble with the police.

The improvement in this socially dysfunctional group of drug users is nothing short of dramatic: there is a big reduction in the number who commit crime (the

prevalence) and an even bigger reduction in the amount of crime committed (the incidence).

Those on the program reported the following reductions after a year of treatment compared to the 6 months before their admission:

<i>Offence type</i>	<i>Reduction in prevalence</i>	<i>Reduction in incidence</i>
Serious property offences of burglary, muggings, robbery and pick-pocketing	94%	98%
Other property offences – thefts, shoplifting, receiving or selling stolen property	56%	87%
Selling “soft” drugs such as cannabis	52%	76%
Selling “hard” drugs such as heroin and cocaine	83%	92%

These self-reported reductions are confirmed by other sources, namely police contacts, court records and self-reported victimisation of those on there program.

These reductions occur while the drug users concerned remain addicted to heroin thus showing that addiction does not necessarily lead to crime. Swiss experiences thus indicate that the community at large would not have to bear the brunt of drug-related crime if drug policies were different. Drug related crime is just one more consequence of policies designed to force abstinence on dependent drug users before they are capable of achieving long-term abstinence.

This same link between drug policy and crime is illustrated by research on maintenance programs of the artificial opiate, methadone. Methadone maintenance is successful in enabling many dependent users to regain stability in their lives and greatly reduce their level of crime. The same would apply to buprenorphine or indeed any other treatment that attracts and retains those dependent on illicit drugs.

Experience in Switzerland shows that medically supervised heroin maintenance is particularly successful in reducing crime because it is able to retain in treatment the substantial proportion of those dependent users for whom methadone provides inadequate relief.

Of course, in Australia, because of the policy of the Federal Government, it is not possible for doctors to prescribe heroin. Greater reliance must therefore be placed on methadone and other pharamacotherapies to stabilise the high proportion of dependent drug users who cannot manage long term abstinence.

Opposition to methadone maintenance is, therefore, worrying. Flying in the face of incontrovertible evidence, about the effectiveness of methadone as a long term treatment, the 2003 House of Representatives inquiry recommended that “the ultimate objective” of methadone treatment should be to assist users “to become abstinent from all opioids, including methadone”. This recommendation reflects the

viewpoint that puts making people drug free in front of stabilising their lives.

Cutting back on maintenance programs and adopting tougher police measures against “junkies” is akin to the reaction of drivers who, finding their car skidding, slam their foot on the brakes. The action leads to the very consequence that the drivers sought to avoid.

The combination of the medical methadone and heroin maintenance programs in Zurich probably accounted for a 70% reduction over three years in street robberies. If only this could be achieved in Australian cities.

Things will only get worse while we cut back on long term methadone places. Moreover, so long as the Federal Government maintains its opposition to the prescription of heroin, Australia will be denied the benefit of what Professor Killias and his colleagues describe as “without doubt one of the most effective measures ever tried in the area of crime prevention.”

References:

Martin Killias, Marcelo F. Aebi, Denis Ribeaud & Juan Rabasa, *Rapport final sur les effets de la prescription de stupéfiants sur la délinquance des toxicomanes*, 3rd ed. (Institut de police scientifique et de criminologie, Lausanne, September 2002)

Martin Killias, Marcelo Aebi and Denis Ribeaud, “Key findings concerning the effects of heroin prescription on crime” in *Heroin-assisted treatment: work in progress* edited by Margret Rihs-Middel, Robert Hämmig & Nina Jacobshagen (Verlag Hans Huber, Bern etc, 2005) pp. 193-98.

Catching suppliers a priority rather than needle exchange schemes - us drugs tsar

by David Barrett, PA Home Affairs Correspondent, Scotsman, 03 Mar 2005

The US's drug tsar today defended his Governments opposition to schemes such as clean needle exchange programmes and legal injecting rooms.

During a visit to London, John Walters said the threat posed by the global drugs scourge and scientific studies of addiction did not support such schemes.

He insisted that cracking down on the supply and demand for illegal drugs was a far more effective approach.

His Government's drug policy had seen a 17% reduction in teenage drug use over three years, he said.

Earlier this week the International Drug Policy Consortium, funded by a British charity, said the US was attempting to influence the way its donations to UN drug projects were spent to the detriment of harm reduction schemes such as needle exchange programmes.

"People who advocate for distribution of clean needles or some of those proposing to provide safe injecting rooms or for the Government to provide the drugs we think that is not a fair reading of the science or the threat," said Mr Walters.

"I think we should not be caught up with silly semantics - we all want to reduce the harm.

"There is a serious issue about what are the measures that most effectively reduce harm but the best thing is prevention, second is treatment and third is harm reduction which is just better than doing nothing.

"We certainly don't believe in doing nothing.

"We believe that scarce resources when we are talking about an addicted population should be directed to treatment."

Some advocates of harm reduction schemes were presenting them as the "default position," added Mr Walters, whose full title is Director of the White House Office of National Drug Control Policy.

Speaking at a press conference at the US Embassy in Grosvenor Square, central London, the drug tsar said that this year would be crucial in the future of Afghanistan, which has seen rising heroin production levels in the last two years.

It would show whether the opium poppy crops continued to rise or shrink, he said.

Asked whether Afghan President Hamid Karzai had been set a deadline to reduce opium crops by persuasion before crops were forcibly destroyed, Mr Walters said: "That is not the way the discussion at senior levels that I have been present at has proceeded."

He said Afghanistan needed a strong and focused leader to combat the problem and he believed President Karzai possessed such qualities.

Forgotten Families

Conference in Victoria on promoting family inclusive practice

The Family Alcohol and Drug Network (a network of professionals in AOD promoting family inclusive practice) has organised a one day conference at the Bundoora Campus of La Trobe University, Melbourne on **Wednesday April 20th, 2005**.

The conference will show case existing family practice models and explore some of the contemporary issues facing the sector.

Registration is a steal at \$40 including catering.

For further details relating to abstracts or to register interest in the conference please email fadnetconference2005@sharc.org.au or phone Alan Murnane at Family Drug Help on 03 9573 1706.

Sponsors of this conference include:

La Trobe University

VicHealth

Victorian Department of Human Services.

Random drug testing in US finds another target

Thursday, March 17 2005, *from www.drugpolicynews.org*

Drug testing is again rearing its ugly head in the states despite the negative ramifications it poses. By voice vote

this week, the Human Resources subcommittee of the U.S. House Ways and Means Committee amended welfare bill [HR 240](#) (Personal Responsibility, Work, and Family Promotion Act) to require states to drug test Temporary Assistance for Needy Families (TANF) applicants and recipients suspected of using controlled substances. Those testing positive for drugs would have to be rechecked every 30-60 days and would not receive cash benefits until the test was negative. Additionally, if an individual tests positive between three to six times, as determined by the state, welfare benefits would be suspended for three years. The amendment also proposes cuts to grant money if the states do not implement a drug testing program for TANF recipients.

Grandparents parenting grandchildren

Families and Friends for Drug Law Reform will be represented on a reference group considering how to reduce drug related harm in families where grandparents are parenting because of alcohol or another drug issue.

This is part of a project of the Canberra Mothercraft Society supported by funds from the National Illicit Drug Strategy to strengthen and support families coping with illicit drug use.

We are keen to hear from those of our members who have experience as grandparents or otherwise of the difficulties of drug using parents in bringing up children.

Grandparents will assume parenting only when the parents themselves cannot cope. Therefore, the first step should be to give grandparents strategies that will help them enhance and support the capacities of parents to carry out their responsibilities.

Drug dependence does not make anyone unfit to be a parent. Just as anyone else, people who are dependent will almost always love their children and wish to do the best for them.

Trouble occurs when unreal expectations are placed on drug using parents to become drug free. If there is a tug of war between feeding an addiction and caring for children then children will more than likely come off second best.

This is yet another area where stabilisation of the life of drug users should be the first priority rather than insisting they become abstinent immediately. There are many, many examples of excellent parenting by people who are drug dependent when their life has been stabilised by methadone or other treatments.

Given the difficulties of accessing effective treatments and the unreal expectations about addiction, grandparents are likely to have a big role to play in bringing up their grandchildren. Much in our drug policies and attitudes tends to disempower grandparents just as it disempowers dependent drug users. Those same policies and attitudes also tend to set members of families against each other.

Please pass any ideas you have to Marion McConnell (02 6254 2961) or Bill Bush (02 6257 1786). You can also email us on mcconnell@ffdlr.org.au.