

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

*committed to preventing tragedy that arises from illicit drug use*

PO Box 4736, HIGGINS ACT 2615, Telephone (02) 6254 2961

Email [mcconnell@ffdlr.org.au](mailto:mcconnell@ffdlr.org.au) Web <http://ffdlr.org.au>

**NEWSLETTER**

**September 08**

**ISSN 1444-200**

**NEXT Meeting**  
**Thursday 25 September 2008**  
at 7.30pm

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

## 13<sup>th</sup> Annual Remembrance Ceremony

'for those who lose their life to illicit drugs'

**Monday 20th October, 2008, 12.30pm – 1.30pm**

Weston Park, Yarralumla, ACT

Speakers include:

- Senator the Hon Jan McLucas, Parliamentary Secretary to the Hon. Nicola Roxon, Minister for Health and Ageing
- a member of the clergy
- a family member

Music tba

Refreshments will be served following the ceremony.

**If you have a family member or friend who has lost their life to illicit drugs and would like them remembered by name at the ceremony please phone Marion on 6254 2961 or Bill on 6257 1786.**

**HELP NEEDED:** If you are able to help with sandwiches, cake, slice, fruit etc. please contact Marion on 62542961 as soon as possible.

### **Sydney Ceremony**

Date & Time: Saturday 18 October, 6.00 pm

Venue: Ashfield Uniting Church,  
180 Liverpool Road – Ashfield

Enquiries: 4782 9222 or to have a name read or display a photo.

## **Editorial**

Talk to many people about statistics and their eyes start to glaze over. But so much of what we do is governed by statistics.

In the political arena surveys or polls ask a proportion of the population what they think about this or that. A most common one is the polls taken about leadership – whether the Prime Minister rates higher than the opposition leader for example or how you would vote if an election was held today.

In the medical area the experimental results of certain treatment options can demonstrate the effectiveness of that treatment. For example if 100 people are given one treatment option, and of those, there are 40 successful

outcomes (however that may be defined), and another 100 are given a different treatment and only 10 have successful outcomes, then we could say that the first treatment is better. Thus a government committed to objective and evidence based policies and practices **should** allocate the most funding to the first option.

Take another example of the long experience of two methods that attempt to achieve the same or similar outcomes. After researchers examined the two approaches they found that one approach is far superior, by as much as seven times. This is a factual example of the comparison between treatment for drug addiction and law enforcement as a means of reducing the supply of drugs. One would have expected governments to heed this result and allocate more funding to the better option – treatment – and less or at least freeze the funding level for the less effective option.

However this is not always the case. Resource or funding allocation is not always based on such objective and evidence based measures.

Of the allocation of government funding between law enforcement and health, the greatest amount goes to law enforcement. According to the Drug Policy Modeling Project almost 70 percent or over \$2 billion per year goes to law enforcement. Yet the cost effectiveness of such a large allocation is yet to be seriously questioned.

Allocation policies that are not based on objective evidence or cost effectiveness result in growth in laws that further erode civil liberties, growth in police powers, and growth in prisons and prison populations. All at the expense of more effective health oriented options which attract a mere 13 percent of government funded resources.

### **These allocation policies are out of step with public opinion.**

The Australian Institute of Health and Welfare tests public opinion on drug issues every three years with the Household Survey when it asks a range of questions.

When asked how a householder would allocate \$100 between education, treatment and law enforcement for illicit drugs, law enforcement never received more than \$46 in any of those household surveys. That is, public opinion said less than 46 percent of the illicit drug budget should be spent on law enforcement. This contrasts starkly with the actual expenditure of 70 percent.

But in another area, according to the Household Survey, the public strongly supports treatment and harm reduction approaches.

Three particular harm reduction questions related to support for 1) the needle and syringe program, 2) methadone maintenance programs and 3) regulated injecting rooms. The table below shows the outcomes for the last four Household Surveys:

	1998	2001	2004	2007
Needle & syringe program	50.0%	59.0%	54.6%	67.0%
Methadone maintenance program	57.8%	63.7%	58.0%	67.7%
Regulated injecting rooms	33.1%	45.1%	39.8%	49.9%

In all measures shown, there is increasing support. People strongly support the needle and syringe program and the methadone maintenance program. Thus increased funding in these two areas should not see a voter backlash. And while the methadone maintenance program only has relevance for heroin addiction in a similar way increased funding for other treatment programs also should not see a voter backlash.

The growth in support for regulated injecting rooms is interesting. Although there is only one injecting room in Australia, it indicates a growing sophistication of knowledge of the population in respect to that issue.

The public's view on these matters is fully supported by the evidence. And on the funding allocation there is consistent evidence emerging that the expenditure balance between law enforcement and health is not right.

It is the discussions that we have with other members of the community, the letters to the editor, the letters to our members of parliament that raise the awareness on these issues. And members should not be concerned if there is no instant result. It is work for the long term good of our families and our community. The upward movement of public opinion is the measure of our progress.

## Jail no drugs or no rights?

Bill Bush

*The following opinion piece was published in the Canberra Times on Wed 27 August. The amendment to the Corrections Management Act to allow routine strip searching in the new Alexander Maconochie Centre in the ACT is something we should all be appalled by. Please bring this dehumanizing practice to the attention of as many people as you can and protest against its use.*

*The Community Coalition on Corrections put out a media release condemning the practice but it had very little attention from the media.*

*The new prison was officially opened on Thursday 11<sup>th</sup> September. The first inmates are not expected to arrive before November.*

In its last sitting days before the election the Government has put to the Assembly legislation to widen the power to strip search detainees. The Canberra Times revealed the context on Monday ("ACT ban on searches real risk to safety", August 25, p7).

The ACT Ombudsman has advised that the long-standing practice of routine strip searching of detainees entering the Belconnen Remand Centre breaches the

new Corrections Management Act. The Bill before the Assembly will permit the practice where the authorities judge it "prudent". No longer will there need to be a suspicion on reasonable grounds.

In the grim history of prisons, routine strip searching is recent. At least in the case of women, it began in Northern Ireland in the early 1980s and was eventually adopted around the world. It is a standard feature of Australian prisons. The audit by the Human Rights Commission of ACT remand centres outlines the practice.

"Five visits in one week would involve ten strip searches - one before each visit, and one afterwards".

Prisoners at high risk of self-harm "are to be strip searched every night before they are locked in their cell". Taking of urine samples for drug testing, which occurs on a routine, random and compulsory basis, involves further stripping.

"The detainee is strip searched and then has to urinate, in the presence of two officers".

The Bill's explanatory memorandum acknowledges "the inevitable humiliation of the strip search procedure". The Human Rights audit describes "an invasive procedure where all clothing is removed (although the person is now to be half-clothed at all times), the mouth is checked, including under the tongue, the detainee has to run their hands through their hair and to pull their ears forward, to lift genitals or breasts, present the soles of their feet for inspection, and finally to squat and cough."

The practice of strip-searching lies on a fault line between aspiration and the reality of prison. On the one hand, there is the hope we all want to embrace: the first ACT prison will be different, it will be human rights compliant, healthy and family friendly. It will rehabilitate and be a source of pride for the ACT. On the other hand, there is the fear that prisons are brutal places where the worst of human nature is played out.

The urgent appearance of the Bill now is something of a reality check. However distasteful, the Government sees that: "The strip search of prisoners on a random or targeted basis is an integral part of maintaining appropriate levels of safety and security." An X-ray body scanner is not yet cleared as safe and may never be for women. The Government finds itself in the bind that it is because it believes strip searching is key among a raft of measures essential to keep drugs out of the new prison. Strip-searching is thus a marker for the goal of a drug free prison.

To achieve that goal, the Government is prepared to traumatise women and create a stressful environment that aggravates mental illness among a prison population known to be in poor mental health. It is also prepared to sacrifice its goal of a family friendly prison.

A significant number of women elect not to have contact visits from friends and family members mainly because they know they would have to be strip searched afterwards. Families and friends themselves think twice about visiting when they realise the consequences for the person they visit. On the information that is available, strip searching does not keep drugs out of prison. Over a four year period there were 41,728 strip searches at a

Brisbane Women's prison. This led to only two discoveries of illicit drugs. Over a 27-month period 35,288 searches at similar prison in Victoria produced only 20 items of unspecified contraband. In spite of that intense effort, "the presence of illicit drug use is still significantly high in both Queensland and Victorian women's prisons".

The recently published National Corrections Drug Strategy concedes as much nationally: "approximately 60 per cent of offenders report drug use on at least one occasion during their current term of imprisonment. Around 33 per cent of people who inject drugs continue to inject drugs in prison. A smaller percentage of people also begin using drugs and injecting drugs for the first time when in prison."

The point of principle before the Assembly is whether it will endorse in the name of the fiction of a drug-free prison a practice that undermines what a human rights compliant prison stands for.

*Bill Bush is a member of the ACT Community Coalition on Corrections & Families and Friends for Drug Law Reform.*

*SOURCE: /The Canberra Times,/ Wednesday 27 August 2008, p. 13*

### **STEPPING STONES TO SUCCESS**

A structured and experiential course for families who are supporting drug dependent loved ones.

To be held over 2 weekends

25-26 Oct and 8-9 Nov

Building 7, Canberra Hospital, Palmer St, Garran, ACT

9.30am – 4.00pm

Cost: FDS Membership \$30

You need to register by phoning 02 47829222 to receive an application form.

### **Alcohol & Drug Program**

#### **Group programs available**

**Effective Weed Control** - for cannabis users wanting more information or who want to change their cannabis use.

**Relapse Prevention Program** – for adults with substance use issues, who wish to develop and maintain healthier lifestyles

**Controlling Your Drinking**

**Mindfulness Meditation & Stress Management**

**Stepping Stones (as above)**

For more information or to register phone

6205 4515 or 6207 9977

## **ACT ASSEMBLY REPORT ON EARLY INTERVENTION AND CARE OF VULNERABLE CHILDREN**

The ACT Standing Committee on Health and Disability released a report at the end of August containing a raft of practical measures to help vulnerable children.

The Committee accepted a key thrust of FFDLR's submission made in May that the focus should be on strengthening the capacity of parents to fulfil their responsibilities rather than insisting they overcome their dependency. The Committee put it in this way:

*"The Committee notes that parental substance abuse on its own is not a predictor of a child at risk of abuse or neglect and acknowledges that there are many families living fulfilling and socially responsible lives, while also living with an addiction."*

And that:

*"The Committee agrees that these mothers must be supported, to not only strengthen their parenting capacity, but to address the other issues in their lives that may be contributing to their ongoing substance abuse problems."*

The Committee recommended the enhancement of some promising programs that the ACT Government has embarked on to bring together various services including those dealing with domestic violence, family support, drug and alcohol and mental health. For example, *"The Committee recommends that the ACT Government develop a targeted antenatal education program for high-risk expectant mothers in consultation with Child and Family Centres and relevant community organisations . . ."*

The Committee also accepted the need identified in our submission to make drug and alcohol services like the methadone program accessible and welcoming of mothers.

On the other hand the Committee once again blinked when faced with the big question: it was silent on the part played by drug policy settings in causing child abuse and neglect. In doing this its work joins the procession of reports and enquiries across Australia that have with ever mounting desperation sought to rearrange the deck chairs on a sinking child protection system.

As we stated in our submission:

*"In this submission Families and Friends for Drug Law Reform calls upon the Committee to acknowledge the large body of evidence that many measures dictated by existing drug policy cause serious harm to children including to unborn children and infants aged up to two years old."*

In other words this latest of reports on the deepening crisis of child protection failed to address to Recommendation 1 of our submission that:

*"Open minded consideration should be given to the serious possibility that policies like those concerning illicit drugs actually harm children of drug dependent parents."*

## References:

ACT, Legislative Assembly, Standing Committee on Health and Disability, /The early intervention and care of vulnerable infants, /report no. 8 (Legislative Assembly, Canberra, August 2008) at

<http://www.parliament.act.gov.au/downloads/reports/08hlthVI.pdf>

For our submission see our website or

<http://www.parliament.act.gov.au/committees/index1.asp?committee=54&inquiry=736&category=14>

<<http://www.parliament.act.gov.au/committees/index1.asp?committee=54&inquiry=736&category=14>>

The opening statement of John Ley to the Committee is in our May newsletter also available on our website as well as in the Committee Hansard report at

<http://www.hansard.act.gov.au/hansard/2005/comms/health18.pdf>.

## Do not punish the addicted – treat them

By Jean Martin Büttner, translated from Tages-Anzeiger, 5/9/2008

Ambros Uchtenhagen, the pioneer pragmatic Swiss expert on drug politics, turned eighty years old and was honoured in a drug congress that began in Zurich today.



Ambros Uchtenhagen: Drug patients can learn to live with their addiction.

“That everyone who is addicted remains addicted for life is a dogma,” he said. “It is a proven fact that one can successfully exit from addiction, and even from a controlled consumption. But that is not valid however for everyone.”

Ambros Uchtenhagen sits at the desk of his work room in the old precinct of Zurich. He has just celebrated his 80<sup>th</sup>, but he does not seem to be eighty years old. He considers his answers carefully, before answering precisely.

The answers come from this psychiatrist who also studied philosophy. Often the debate on the drug problem is one sided and from irreconcilable positions. But when he speaks about intoxication, he includes social, historical and cultural connections. Addiction

manifestation has much to do with the condition of society.

### Life without self-destruction.

The peace of the physician contrasts with the chaos of his patients, whom he has treated for a long time. They spend day and night procuring drugs which gives them a short period of peace, until withdrawal symptoms shake them. They ruin their health, they see others around them die, or death come to them. It has long been like that.

If a drug patient overcomes their dependence, new difficulties threaten them. “A large problem of such patients is their isolation,” said Uchtenhagen. “Old personal relationships are lost, and new relationships are difficult to make. Isolation and boredom increase the danger of a relapse.”

Ambros Uchtenhagen contributed much to improve the survival of such patients. He belongs to the pioneers of modern, ie pragmatic Swiss drug politics, which provides support instead of punishment, because addiction is understood as a medical and not a legal problem.

In order to help these patients, he developed, in Zurich, the controlled heroin delivery, which was then called for by votes of the Swiss population. The political party SVP [the [Swiss People's Party](#) (Schweizerische Volkspartei), a right-wing political party in Switzerland] nevertheless still calls for abstinence as the only goal of a successful therapy. For some this can help them to lead a certain and responsible life grants the psychiatrist. For others this same life goal is also attainable, without abstinence - with or without professional support. “One can learn to live with a dependence without self-destruction.”

### More countries follow the Swiss example.

With this pragmatic attitude Switzerland has emancipated itself of the puritanically moulded drug politics of the USA. That puritanical approach has not freed America from its drug problems, there today thousands, mostly young people, are criminalised.

“Except for the USA only Russia has such a predominantly repressive drug policy”, says Uchtenhagen. “Even dictatorships such as China or the Islamic Republic of Iran, on this question of drug policies, are very pragmatic and closely related to ours - not only in respect of repression, but also in respect of prevention, therapy and damage reduction.”

“Nevertheless society expects more from the addicted than from other patients”, he believes. Why? “Because society assumes that they must rid themselves of their addiction sooner, or they will only have trouble as the addiction returns.”

## DRUGS IN THE FAMILY

Meets fortnightly on a Thursday, 7.30pm – 10 pm, Seminar Room, Lewisham Bldg, Calvary Hospital, Bruce. More info 6257 3043. This is a support group for families experiencing drug use.