

NEWSLETTER



November 2013

PO Box 4736
HIGGINS ACT 2615
Tel: 02 62542961
Email: mcconnell@ffdlr.org.au
Web: www.ffdlr.org.au
ISSN 1444-200

Contents

- Next Meeting - End of year BBQ & AGM
- Editorial
- NSW government has its 'head in the sand' over rejection of medical marijuana, say critics
- Here's Why Drug Policy Reform Is Gaining Momentum
- As Victoria's prisons overflow, it's time to stop criminalising disadvantage

Next Meeting End of Year BBQ and Annual General Meeting

Thursday 28 November 2013, 6:30 - 8pm at the McConnell's

Our last meeting for 2013 will be an end of year BBQ followed by our Annual General Meeting including election of office bearers and presentation of the President's and Treasurer's Annual Reports.

Marion and Brian will supply meat and salads etc but could members please bring a desert and drink.

Members and their family are most welcome.

For catering purposes please let Marion know if you are coming. If you don't know our address we will give it to you when you contact us. Looking forward to a pleasant evening together.

RSVP Monday 25 November 6254 2961 or email mcconnell@ffdlr.org.au

Editorial

National Commission of Audit

In October the new Coalition Government announced a National Commission of Audit. It said *"the Commission is an essential step in addressing Labor's record of waste and mismanagement..... and the Commission's work will feed into the Government's work on the division of responsibilities between Local, State and Federal Governments."*

The Commission is expected to hold public and private hearings, receive submissions from stakeholders including the public, and directly liaise with Government Departments. It is expected to provide an initial report to the Government before the end of January 2014 with the final report forming part of the 2014-15 Budget process. The Commission is yet to call for submissions from the public.

The announcement included the usual tiresome rhetoric of blaming the previous government and for other reasons has met with some criticism. Mungo MacCallum for example writing in the Drum says not much will be achieved. He says that it is there to justify the government's rhetoric and as a scapegoat to provide a cover for the government should it fail.

Meanwhile Treasurer Joe Hockey says "nothing is off the table".

That being so the government should have a close look at its drug policy and apply the tests that are outlined in the Commission's terms of reference. In part they charge the Commission to:

- ensure taxpayers are receiving value-for-money from each dollar spent;
- eliminate wasteful spending;
- identify areas or programs where Commonwealth involvement is inappropriate

In relation to activities performed by the Commonwealth, the Commission is asked to identify:

- whether there remains a compelling case for the activity to continue to be undertaken; and
- if so, whether there is a strong case for continued direct involvement of government, or whether the activity could be undertaken more efficiently by the private sector, the not-for-profit sector, the States, or local government.

The Commission is also to review and report on the effectiveness of existing performance metrics and options for greater transparency and accountability through improved public reporting.

There is a clear case for the Commission to examine drug policy on all of these criteria. Taxpayers are not receiving value for money and the larger proportion of spending in this area is wasteful. The spending however on such things as the needle and syringe program, most treatment services and items that come under the umbrella of harm reduction (ie reducing the harm from use of illegal drugs) does provide value for money which much research has confirmed. Some research reports indicate that treatment can be over seven times more effective than supply control. But such expenditures represent a very small portion of governments' budgets and it is clearly not enough.

The major portion, some 66 percent, of the money goes to law enforcement. The pursuit of drug dealers only nets a small number of dealers, while some 80 percent of arrests are of users. Even those dealers arrested make little or no difference to the supply of drugs. The "biggest" drug busts that are reported in the press are simply spin and are no indication of the effectiveness of police activity. At best, the outcomes of these activities produce only small blips in the market. Business returns to normal very quickly.



If ever there was a case for better performance metrics and greater transparency and accountability through public reporting it is in the area of drugs.

It would be a simple matter to report on effectiveness of police and law enforcement activities in this area. There are very few effectiveness measures for each of the three pillars of the illicit drug policy of harm minimisation - supply reduction, demand reduction, harm reduction. On supply reduction, reports of amounts seized cannot measure effectiveness without some indication of by how much supply is reduced. Some indirect measures are already available but are not published in terms of measurement of supply control effectiveness. These are economic measures of availability, cost and drug purity.

One other measure is needed - a measure of how much or what proportion the total market supply of drugs is reduced by each seizure. We would for example know that supply control was working if there were such a report that said for many consecutive periods that price was increasing, availability was becoming scarcer, purity was reducing, and the quantum of drugs seized expressed as a percentage of the total drug market was increasing.

But of course that is not the case - price, availability and purity have remained relatively stable for the last 10 years, despite so many "big" drug busts. And there is a strong resistance to produce the latter measure which would demonstrate beyond doubt the effect that such drug busts were having. That measure however if introduced would clearly show that the system was not working and could trigger a change to the current system. But there are many vested interests that would not want that to happen.

It would be a test of the efficacy of the Commission of Audit, if true to its term of reference "whether there remains a compelling case for the activity to continue to be undertaken" and to the Treasurer's claim that "nothing is off the table", if it examines Australia's prohibition drug policies and related activities. There is after all much to be gained, both in money terms and in social terms, by such an examination. But does the National Commission of Audit have the courage to investigate this area?

NSW government has its 'head in the sand' over rejection of medical marijuana, say critics

Amy Corderoy, SMH, November 18, 2013

Cancer patients and doctors have rounded on the state government for rejecting the findings of a report calling on it to decriminalise small amounts of cannabis use for people dying of cancer and AIDS.

The Greens have also accused the government of giving in to "cannabis hysteria" for rejecting the report, which recommended some people with terminal illnesses should be exempted from drug laws criminalising cannabis and a register of approved users set up.

University of Sydney Emeritus Professor of Anesthesia Laurence Mather said it was "complete nonsense" that the medical evidence supporting medicinal cannabis was too limited, or its potency and safety could not be guaranteed.

"Since the 1990s, the scientific evidence that cannabis works for some conditions has become overwhelming," he said. "Since 2001, the Dutch government has been growing and exporting

medicinal grade cannabis with closely regulated composition".

Cancer Council NSW director of health strategies Kathy Chapman said medical cannabis should not be available widely but in some cases people who were dying had tried everything else available.

"Pain relief has improved over the past 10 years or so... but there are still times when people spend their last period of time in a lot of pain, and if you can alleviate that then you have an important responsibility as a society," she said.

Cancer Voices NSW spokeswoman Sally Crossing said the government's response to the issue read like it had its "head in the sand".

"It's a mixture of maintaining old pre-formed views and promoting government agencies which have no mandate to look into this issue, evaluate the research and experience in other jurisdictions, or indeed commission the research they feel has not been done," she said.

However, she was more concerned with the government's lack of commitment to making sure new pharmaceutical treatments based on cannabis were available than the decision on legal exemptions.

The cross-party parliamentary committee found that some people with terminal conditions experienced symptoms that could not be controlled with existing medications, but that the only cannabis-based product legally available was only approved for use in people with Multiple Sclerosis.

It found it could take years for that to be expanded to other patients, and unless it was subsidised financially would be out of reach for many anyway.

In the meantime patients were using cannabis illegally, sometimes without the knowledge of their doctor.

"The Committee agrees with the argument... that a compassionate approach that recognises individual needs and choices is highly desirable and morally justified," it said in its final report. "We have some sympathy for the argument that patients can be trusted to make the best decisions for themselves, and that it is preferable that they do so under the guidance of their doctor".

It recommended the Drug Misuse and Trafficking Act be amended to add a complete defence to the use and possession of cannabis by people with a terminal illness who were authorised to do so. It said the NSW Ministry of Health should establish and administer a register of authorised users.

In her response, health minister Jillian Skinner said pain and palliative care specialists did not support prioritising cannabis when there were other safe and effective alternative medications.

"The government does not support the use of unregulated crude cannabis products for medical purposes as the potency and safety of these products cannot be guaranteed," she said. "The NSW government believes this will not prevent access to appropriate medical treatment for any patient in NSW, given the availability of safe and effective alternative medications".

She said the NSW government's pain management plan, in place until 2016, would increase access to hospital-based pain-management services.

But she did accept the committee's recommendation that she write to the federal health minister expressing her support for the expansion of access to pharmaceutical cannabis products by

additional patient groups and further trials of cannabis-based medicines.

Greens health spokesman John Kaye said the government had given in to “cannabis hysteria”.

“The Upper House Committee carefully confined its recommendations to people with terminal illness or end-stage HIV, yet Health Minister Jillian Skinner rejected the findings arguing that cannabis can be a harmful drug with a number of health impacts,” he said. “The Minister is ignoring the reality that the people we targeted are dying. Long-term health impacts are irrelevant to those who have only a few months or years to live.”

Decriminalisation of small amounts of cannabis was also supported by a number of other submissions to the inquiry, including the Australian Federation of AIDS organisations and ACON.

Michael Cousins, the director of the Pain Management Research Institute at Royal North Shore Hospital and the University of Sydney and a member of the taskforce that developed the government’s pain management plan, told the inquiry there was an “urgent need” for more options for people experiencing pain.

“We should be doing something now,” he said. “In view of the lack of options we currently have, I think it is very important that we take advantage of this option [cannabis]”.

The SMH had a poll following this article. People were asked “Do you support the decriminalisation of cannabis for terminally ill patients?”. 1167 people voted and 97 percent said yes.

Here’s Why Drug Policy Reform Is Gaining Momentum

Michaela Montaner & Dan Werb, October 29, 2013, Global Drug Policy Program, Public Health Program

How do governments know drug enforcement is working? Generally by measuring seizures, arrests, and convictions—based on the assumption that the more drugs are confiscated, and

the more drug users and dealers are imprisoned, the fewer drugs will be available.

That assumption appears to be wrong.

A new study by the International Centre for Science in Drug Policy finds that despite a tremendous increase in seizures, prices actually fell for most illegal drugs over the past 20 years—while purity increased. This raises serious questions about the effectiveness of international law enforcement efforts to reduce drug supply.

The study, supported by the Open Society Foundations and published in the British Medical Journal (Open Access Edition), reviewed indicators of drug supply in consumer markets such as Europe, the United States, and Australia, and drug seizures in those areas in addition to drug-producing regions such as Latin America, Afghanistan, and Southeast Asia.

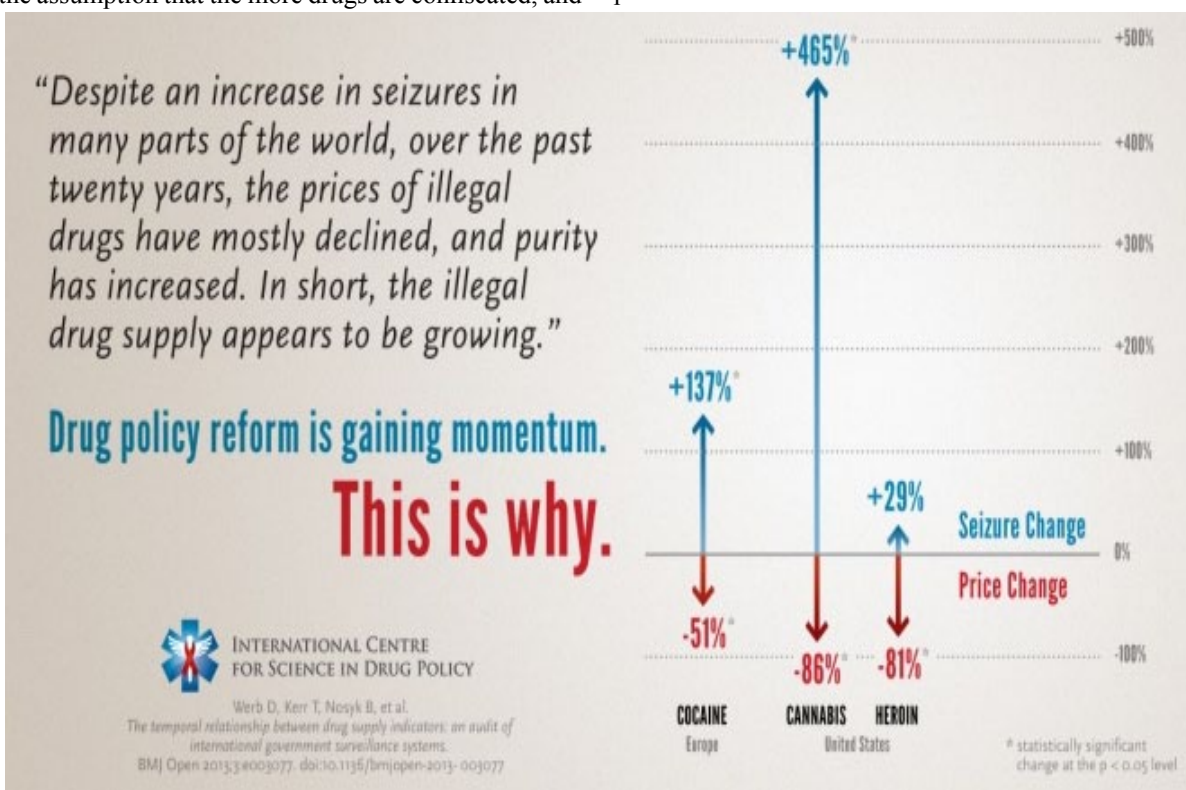
In the United States, there was a 465 percent increase in the quantity of marijuana seized between 1990 and 2010, and an 86 percent drop in price. At the same time, the potency of marijuana in the United States increased by over 160 percent.

Similarly, in Europe, even though the quantity of cocaine confiscated rose by 137 percent between 1995 and 2009, the price fell by 51 percent. What’s worse, in addition to being cheaper, drugs are actually stronger than at any time in the past two decades.

If the goal of global illicit drug policy is to reduce supply and demand, it has failed to achieve those objectives.

Given the experience of the past two decades, it is hard to imagine how the goals of drug prohibition can be achieved under the current scenario. Based on this report and the extensive and growing literature preceding it, it appears as though enacting some form of state-based regulation that takes a public health (rather than criminal justice) approach to the issue of drug use is likely the best way to increase safety and reduce drug-related problems experienced by communities.

Implicit in such an approach is the need for governments to prioritize measures that evaluate the effectiveness of policies



based on how they impact drug-related harms (like the number of overdose deaths or the incidence of HIV transmission) as opposed to simply relying on the amount of drugs that are seized each year.

Our current drug strategies are failing. It's time we did something differently.

As Victoria's prisons overflow, it's time to stop criminalising disadvantage

Peter Norden, Adjunct Professor, School of Global, Social and Urban Studies at RMIT University, 30 Oct 2013, The Conversation

Reports have emerged today that police officers in Victoria are being forced to "babysit" prisoners who cannot fit into the state's crowded prisons, leading to renewed criticism of the Denis Napthine-led government's "tough on crime" approach.

But what has led to this rapid expansion of the Australian prison population, which has been increasing at three times the rate of the national population over a period of almost 20 years? It certainly hasn't been down to an equivalent increase in criminal behaviour, at least as far as the available evidence on crime statistics is concerned.

Last week, British academic John Podmore argued that the Victorian government is failing to learn from the experience of prison expansion overseas. Podmore wrote that prison expansion was:

...the first refuge of intellectually bankrupt politicians, clamouring for votes by getting tough on crime.

He rightly pointed out that the tide is turning in England and the United States, where the costs have been weighed up against the limited benefits when inmates are finally released.

The latest Australian Bureau of Statistics (ABS) quarterly figures show that Victoria has had an 8.2% increase in prison numbers in just 12 months, more than doubling the increase in NSW.

However, a change of policy direction in Victoria is not likely to occur, at least not before the next state election. The Napthine government has heavily favoured a "tough on crime" approach, with armed protective services officers on railway stations and plans to house the overflowing prison population in tents.

Rest assured that these tents will not be in your backyard, but behind razor ribbon wire fences, holding back prisoners, the majority of whom were convicted of non-violent offences. In the late 19th century, Victorian governments had resorted to prison hulks down at Williamstown, a formerly working class suburb that has been gentrified over recent decades. However, today, it is thought of as better to leave them "out of sight and out of mind", often in rural and remote parts of Victoria.

While the pendulum on locking up minor offenders must swing back - even if it may take years, as has occurred in the US and the UK - a whole generation of young men (and increasingly women) will spend a considerable period of their adolescence and early adult years behind bars in the meantime.

One hint about why prison populations are expanding, particularly in Victoria in recent years, might be found in the the National Centre for Social and Economic Modelling's (NATSEM) latest report. It identified a statistically significant increase in those living under the poverty line - around 2.6 million Australians - a

quarter of whom are dependent children. Poverty was extreme for families without any employed persons. It found that some localities had between 23.7% and 44.9% of children living in poverty.

These findings confirm a number of national research studies (which I managed) on social disadvantage, undertaken by Professor Tony Vinson from the University of Sydney from 1997 to 2007. He found high correlations between serious disadvantage - measured by more than 20 disadvantage factors - and conviction and imprisonment rates.

Australians recognise the complexity of addressing this connection in relation to our Indigenous communities. The same challenge needs to be recognised and addressed in seriously disadvantaged non-Indigenous communities, as clearly established in Vinson's postcode mapping exercise.

The enthusiasm with which the Victorian government has embarked on its prison expansion policy - naturally to the delight of the private prison industry - is energy misdirected. The serious and critical challenge facing the government is to develop a more cohesive community by addressing the growing social divide within what is clearly an increasingly prosperous Australian society.

The early signs of social breakdown become evident in increased child neglect and abuse, early school leaving, domestic violence and concentrated long-term unemployment. Our priority should be to find innovative policy solutions to address these problems and reduce the generational cycle of poverty. And as the demand for increased housing increases that pressure, the solution could be found in more integrated social planning that can produce liveable and affordable communities.

There are no short-term solutions once disadvantage becomes entrenched within families and across localities. Criminalising disadvantage may appear effective in the short term, at least until the next Victorian election. But lasting solutions demand a more integrated approach that facilitates community growth and cohesion.

Christmas Greetings to all

We wish you all a happy Christmas and New Year and we thank you for all your support.

We hope to see you again next year.

Our next Meeting and Newsletter will be in February 2014

