

NEWSLETTER



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NEXT MEETING

Thursday 24 October, 7.30pm
St Ninian's Uniting Church hall,
cnr Mouat and Brigalow Sts, LYNEHAM

Meetings are followed by refreshments and time for a chat.

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Dates for your diary

18th Annual Remembrance Ceremony

- Monday 21 October 2013 at 12:30pm Weston Park Yarralumla, ACT

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 sweet 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

Jail overcrowding

The ACT's Alexander Maconochie Centre is becoming overcrowded and the government has double bunked a number of prisoners and is planning to extend the prison.

When the prison was first considered in the late nineties Families and Friends for Drug Law Reform (FFDLR) advised in its submission that a new prison would quickly reach its limits because it would be easier for a magistrate or judge to hand out a jail sentence knowing the detainee would not be sent interstate away from family support. The promise of a human rights prison also increased the attraction.

Examination of the arrest rate and the demographics of the prison population gives another clue to the overcrowding. Over 80% of those arrested for drug related crime are users - not drug dealers. And of those in the jail about 70% are there for drug related causes and/or have a drug dependency.

It is in this area of drugs that gives a clue to where the government can reduce the overcrowding in the AMC

Before the prison was established in the ACT, FFDLR advised the then government that it was opposed to the current situation in which prisons were seen as a core element of the community's response to the health issue of drug addiction. It was essential then (but disregarded) and it continues to be essential today that any expansion of prison capacity be viewed in the context of drug policy. This should be obvious since about 70% of inmates are gaol for drug related offences and are themselves drug users.

The evidence is that if medically supervised prescription of heroin was introduced as one of the available treatments an overall fall in offences of some 68% would be expected by users on that program. For offences particularly associated with the drug lifestyle such as burglary, muggings, robbery, pick-pocketing and drug trafficking the reduction is likely to be in the region of 90%. (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)

Portugal decriminalised all drug use in 2001 and has seen a drop in drug-related offenders in prison from 44% to 21% with no significant increase in drug use in that country.

Country after country now realise the need for alternatives to drug prohibition and are undertaking innovative ways to address this.

A petition presented to the Legislative Assembly by FFDLR in 2011 simply calling for an evidence based discussion on drug

policy was effectively ignored. For the most part the focus always seems to be on the symptoms and not the cause eg how can we punish for what the person has done or how can we patch the person up.

In all the suggestions on dealing with the AMC overcrowding, not once has the idea of examining the drug laws that give rise to much of the overcrowding been suggested.

There is a very large elephant stomping around. Dealing with it would bring so many benefits for the people of the ACT. Not only would there be no need for additional prison space to house ACT prisoners but substantially less than the present capacity would be required. Such an outcome would have major budgetary savings as well as social benefits.

Undoubtedly the strategy that would have the most desirable social outcomes and would be most cost effective is to reduce the level of delinquency in the first place. The adoption of a world's best practice drug strategy holds out that prospect.

To quote Philip Adams: The crime that shouldn't be a crime at all. The crime that more than any other on this sad, silly earth of ours preoccupies the police, clogs the judicial and penal systems, chokes the courts and crowds the prisons. The prisons we can't build fast enough. Were drugs to be decriminalised in this country, we would regain something of our collective sanity.

The ACT Legislative Assembly must address drug policies before it considers an expansion to the jail.

Amnesty vigil: World Day Against Death Penalty

The following is a speech presented by Brian McConnell on 10 October 2013 at the vigil held at the Australian national university.

My interest is the involvement between drug laws and how they relate to the death penalty. It may surprise you that support for the death penalty in Australia is declining for murderers, but there is twice as much support for the death penalty for drug traffickers. A Morgan poll puts the latter at 50%.

This enthusiasm for the death penalty is intimately tied to the war on drugs.

Singapore

In Singapore on 2 December 2005 a 25 year old man Nguyen Tuong Van was executed for drug trafficking. He had 396 grams of heroin strapped to his body and had been arrested transiting through Singapore on the way to Australia. He was just 22 years old at the time.

His twin brother had accumulated debts from his heroin addiction and the only quick, but naive, way that Nguyen saw of helping him repay the debt was to smuggle some heroin into Australia.

Bali Nine

Around the same time a group of nine young people travelled to Bali on a paid holiday plus a promise of a financial reward on their return for smuggling heroin back into Australia.

Scott Rush's father became suspicious and talked to his lawyer who phoned, whom he thought was the AFP, and asked them to stop Scott from flying out to Bali.

The AFP however advised the Indonesian police of the operation who in turn, on 17 April 2005, arrested the nine in the departure lounge at Bali airport on their way back to Australia.

They planned to smuggle 8.3kg of heroin from Indonesia to Australia.

Two of those arrested; Andrew Chan and Myuran Sukumaran have received the death penalty and are in Kerobokan Prison awaiting execution by firing squad.

The AFP knew that people caught in Bali under Indonesian law for drug smuggling exposed them to the death penalty. Assistant Commissioner Mike Phelan of the AFP was responsible for this case.

Colin McDonald QC for the Rush Family said this on the ABC's Australian Story:

"It's hard to make operational sense of what did occur.

If it was to catch the big guys, that didn't happen.

If it was to catch people here in Australia higher in the hierarchy in the drug scene, that didn't happen.

Could they have been arrested in Australia? Yes, they could have.

And did Indonesia get anything out of it? No.

And did we as an Australian society get anything, really, out of it? Yes, some drugs were interdicted in Indonesia, but they would have been [interdicted] in Australia.

And there was the potential to catch people who are higher up in the nefarious world of drugs, and that was lost."

Mike Phelan also on Australian Story said this:

"The thing that is important here for everybody to realise is that even with the aid of hindsight, should the same set of circumstances present themselves again with another syndicate or other people, we would do exactly the same thing."

Phelan's comments must be of great concern for those of us who oppose the death penalty.

Australia has laws, protocols and procedures that should cover this situation. But neither the Mutual Assistance Act nor the AFP's memorandum of understanding covered this situation.

Notwithstanding that there was nothing written that prevented the AFP from doing what it did. It has acted contrary to Government's opposition to the death penalty and condemned two Australian citizens to death.

Effectively Australia had exported the death penalty.

Footnotes

It is interesting to note that Mike Phelan was promoted in 2007 to the position of Chief Police Officer for the ACT. (he has since left that position.)

The Rush family took the AFP to court claiming that it had acted unlawfully. That was found by the court not to be so. But the judge said there was a need to address the procedures and protocols.

Scott Rush was initially sentenced to life imprisonment. He appealed and surprisingly the sentence was changed to the death penalty. A later successful appeal to the Indonesian Supreme Court reduced that back to life imprisonment.

Investigations by Indonesian police failed to identify the source of the narcotics. Chan used a Thai prostitute as a contact and a go-between. She has disappeared. The heroin trafficker suspected of supplying the drugs was not arrested but was shot

dead by police in Jakarta.

Prime Minister Abbott in his recent visit to Indonesia raised the case of the Bali 9 in his formal talks. He would not give any details of the nature of his discussion with Indonesian President Susilo Bambang Yudhoyono, but the report of the visit says Australia opposes the death penalty and usually pleads for an alternative sentence. We will wait and see if this new government can rectify the AFP's mistake.

Phillip Adams on Bali 9

For me, Phillip Adams sums it up exactly.

“This wretched case highlights two important issues of politics and public policy. Both at their worst. First, the moral horror of capital punishment. Second, the endless moral panic driving drugs, a local and international issue. But don't degrade your selves with an act of official murder. Least of all for the crime of drug smuggling.

Were drugs to be decriminalised in this country, we would regain something of our collective sanity.”

Conclusion

The punishment does not fit the crime. The punishment has never deterred future similar crimes. The quantity of drugs seized from the Bali nine made no difference to the supply of heroin. It amounted to less than 1/2 of one percent of that consumed each year in Australia.

The world, driven by a moral panic about some drugs, has introduced laws in an attempt to stop their production and use. Millions of dollars are spent on this cause but to no avail. We in Australia have ramped up our penalties, built more jails, spent most of the money devoted to this cause on the criminal justice system.

The effect has been to create a very profitable but risky black market. Risky because death always lurks around the corner. Sometimes from the drugs themselves (which can result from unregulated quality control), sometimes from drug dealers themselves, and, sometimes from legal murder by other countries

All of this from the simplistic notion that banning a substance rather than regulating it will be successful. If the drugs were properly regulated there would have been no death of Nguyen Tuong Van and no Bali Nine, no deaths from drive by shootings and no deaths resulting from poor quality control of the drug manufacture.

We need to act to be rid of the war on drugs both in this country and in neighboring countries to curb, at least some of the enthusiasm for the death penalty.

Poverty driving farmers to opium: official

Aung Kyaw Min | Monday, 07 October 2013 Myanmar Times

Increasing poppy cultivation is a reflection of the limited livelihood options open to farmers in border areas, a high-ranking member of the Myanmar police force said this week.

Police Major Zaw Win told reporters at a meeting of the ASEAN Senior Officials on Drug Matters (ASOD) in Yangon that poor farmers are the “victims” of poppy cultivation, and cultivation will only decline again when they have better ways to make money.

Myanmar's strategy for eradicating poppy is two-fold: destroying

poppy fields and working to help farmers find more sustainable – and legal – livelihoods.

But Pol Maj Zaw Win said eradication “will not have an effect” without alternative economic opportunities.

“We need to reform the poppy cultivator's livelihoods to develop sustainable [alternatives],” Pol Maj Zaw Win said.

“Poppy cultivation will end if [the farmers'] businesses progress and we can implement sustainable economic development for their futures.”

Nevertheless, official figures show the government destroyed three times as many acres of poppy in 2012 than the previous year – 23,717 hectares versus 7058 hectares.

So far this year more than 12,257 hectares have been destroyed, Pol Maj Zaw Win added.

Poppy cultivation increased 17 percent in Myanmar in 2012, with a total of 51,000 hectares (126,023 acres), up from 43,000 hectares (106,255 acres) in 2011. Myanmar is the largest poppy cultivator in Southeast Asia and second only behind Afghanistan worldwide, United Nations Office of Drugs and Crime (UNODC) statistics show.

Pol Maj Zaw Win said combating illicit drugs “is an uphill battle, but one that we must never give up fighting”. The drug problem, he said, continues to constitute a serious threat to public health, as well as to security and safety.

While poppy cultivation remains a problem, the smuggling of chemical drugs, or amphetamine-type stimulants (ATS), such as Ecstasy and methamphetamine, poses a greater threat to Myanmar than ever.

“A new challenge is the production, trafficking and abuse of ATS,” Pol Maj Zaw Win said. “The increase in the trafficking of cold tablets containing pseudoephedrine is at a six-year high and most of the trafficking is from the Indian border.”

Pol Maj Zaw Win made his remarks at the beginning of the 34th ASOD meeting in Yangon on September 24. ASOD is monitoring the progress of its 2009-2015 work plan for Myanmar with the goal of achieving a “drug-free” ASEAN by 2015.

Addiction can't always be cured so let's focus on quality of life

David Best, Associate Professor of Addiction Studies, Turning Point Alcohol & Drug Centre at Monash University, The Conversation, 10 October 2013,

Alcohol and substance abuse costs the Australian economy \$24.5bn a year. The human toll from accidents, overdoses, chronic disease, violence, mental illness and family disruption, however, is immeasurable.

Modern, evidence-based policy responses to addiction focus on treatment, where patients aim to withdraw from drugs through therapy and medications. Harm-minimisation strategies such as the supply of clean needles and syringes and the prescribing of substitution medications are also key elements of Australia's drug strategy.

But while these measures play an important role in how we deal with addiction, little attention is paid to what happens next.

Regardless of how good the treatment is, half to three-quarters of drug users relapse. And the quality of life for problem alcohol and drug users in and out of treatment is low – they're likely to

face social exclusion and discrimination.

This is why so many professionals and policy makers, as well as people with addictions and their family members, are turning to the recovery movement – as many in the mental health sector have done in recent years with great success.

Long journey of recovery

The movement recognises that recovery is a long journey, with addictions typically lasting for an average of 27 years. It aims to address quality of life issues by providing specialist help alongside more practical assistance and referrals for training, employment and relationship-building.

At the heart of the recovery movement is a shift of emphasis away from “treatment” as a model reliant on professionally delivered interventions. Rather, the movement sees the recovery journey an intrinsically social process and seeks to create the conditions that allow those with addiction problems to achieve a sense of connection in their community, including with peers who are further along in the path of recovery.

Whether or not individuals can be “cured”, a sense of meaning and a positive identity is likely to empower people with addictions to improve their well-being, their ability to cope with stress and to manage any ongoing symptoms they have.

The recovery movements in alcohol and drugs mirror similar shifts of perspective and emphasis in mental health and in the rehabilitation and therapeutic jurisprudence movements in criminal offenders.

These approaches argue that the aim of publicly funded interventions should be sustained change located in the family and community (broader public health rather than individual-level interventions), rather than sticking band-aids on symptoms. Therefore, the solutions are relationships, jobs and training courses, not just drugs and talking therapies.

What does the evidence say?

Recovery is strongly linked to social connectedness and to

meaningful, social activity. These are the key bridges from alcohol and drug treatment, when it is needed, to effective social reintegration and positive life quality.

From the United States, we know that only around 10% of those who complete alcohol or drug treatment receive community-based ongoing help. Yet, when this is received, it improves the person’s outcomes by 30 to 40%.

Similarly, a 2009 trial of support for problem drinkers found that adding one person in recovery to the social networks of a newly detoxified drinker improved the chances of them staying sober for a year by 27%. This is a huge impact that results from changing not only social networks but the underlying values, attitudes, beliefs and expectations.

People with a history of drug or alcohol abuse who are active in their communities have a higher quality of life.

A Scottish study of recovering from alcoholics and heroin users in the deprived housing estates of Glasgow found that the more time people spent with other people in recovery, the greater the levels of well-being reported.

It also found that people who were active in their families and communities – by parenting, volunteering, being members of social networks, by working and training – had the best quality of life.

A new way of thinking about addiction

The recovery movement is a philosophical shift that recognises that the growth of well-being may happen separately from reductions in symptoms and harms, and that professionals have a critical but partial role in long-term change.

Funding treatment is crucial to saving lives and preventing individual and community harm, but investment in aftercare and linking to recovery communities and meaningful activities is the main way that treatment becomes a portal to well-being.

It is that transformation that will safeguard people with alcohol and other drug problems, their families and their communities from the cycle of relapse and the despair of addiction.

Drug war failure: US drug control budget plotted against falling price and rising purity of heroin

