



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

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

## September Newsletter 2016

PO Box 7186, KALEEN ACT 2617

Email [president@ffdlr.org.au](mailto:president@ffdlr.org.au) Telephone (02) 6259 9899

Email [treasurer@ffdlr.org.au](mailto:treasurer@ffdlr.org.au) Telephone (02) 6258 9575

Web [www.ffdlr.org.au](http://www.ffdlr.org.au)

Twitter @FFDLR

Hi Everyone,

This early September newsletter was prompted by some information recently to hand and is focussed on the upcoming Canberra elections. However, I thought members in other States and Territories might find it interesting.

The approach that I am adopting when talking to politicians and candidates is twofold. Firstly I like to try and find some common values. Often the case is that we both have community welfare at heart. Having reached agreement on this I don't present my own thoughts – instead I offer the positions that the experts in drug research are suggesting – people the government fund to provide them with advice.

You can see how I did this in the report below using the recommendations of the Canberra Drug summit. I have also provided information from the ACT ATOD research e-bulletin. I thought such information might be of value to those talking to candidates

Peter

### **ACTCOSS leaders forum – 29th August**

I attended the the ACTCOSS leaders forum, flagged in the last newsletter, on Monday evening this week. I was able to ask the leaders, *given the drug summit in the ACT in April, and the recent round table in Sydney, if they would be willing to consider changes to drug laws.* I did this in the context of reading out two of the resolutions from the Canberra drug summit, namely

*Putting health and community safety first requires a fundamental broadening of illicit drug policy in*

*Australia away from failed punitive enforcement to proven health and social interventions, and*

*Australians should implement and evaluate the health benefits of removing criminal sanctions for personal drug use as demonstrated in international settings.<sup>1</sup>*

A fairly comprehensive report of this question was reported in the Canberra Times (CT) on Tuesday under the heading Labor, Greens would consider drug law reform.

Mr Rattenbury reported on his recent visit to New Zealand and experiences of the different approach being implement in that country. He said that the war on drugs was not working and the ACT needed a more effective approach.

Mr Barr also supported having a debate on reforms and thought that the city was ready for this.

Mr Hansen expressed the sentiment that he would not pursue such reforms although drug users did require help. Post meeting he talked to me personally and explained that whilst he had expressed a negative opinion he was quite prepared to talk about the issue with FFDLR.

The CT article is available at:

<http://www.canberratimes.com.au/act-news/barr-uses-first-major-debate-to-announce-bulkbilling-gp-grants-20160829-gr3ubf.html>

Coincidentally there is another article in the CT about pill testing at dance parties.

<http://www.canberratimes.com.au/act-news/labor-liberals-reluctant-on-pill-testing-at-canberra->

<sup>1</sup> <http://www.drugpolicyreform.com.au/>

When anyone takes action to attempt to make something happen, that something becomes more likely

[festivals-20160830-gr4i06.html](http://festivals-20160830-gr4i06.html)

Mr Hanson is reported as saying that pill testing would be sending the 'wrong message'. Andrew Barr was reported as stating that pill testing is "not a government endorsed approach" and that the possession of drugs remains an offence.

The Greens support pill testing.

An extensive commentary on pill testing was provided recently by Gino Vumbaca in the Huffington Post. See along with other valuable articles.

<http://www.huffingtonpost.com.au/gino-vumbaca/the-rejection-of-drug-testing-is-a-hard-pill-to-swallow/>

## ACT ATOD research

The ACT Alcohol Tobacco and other drugs (ATOD) Sector research e-bulletin provides much valuable information and commentary including this week the following two articles. The comments reproduced are taken from the e-bulletin.

## ACT Sentencing Patterns for Drug Possession

On 16 August 2016 the ACT Attorney-General, Simon Corbell, released a series of ACT Sentencing Snapshots prepared by Dr Lorana Bartels of the University of Canberra. One of the Snapshots, no 5, deals with sentencing in the ACT Magistrates Court for drug possessions, specifically the offence of possessing a drug of dependence, possessing cannabis and possessing a prohibited substance other than cannabis. The data cover the period 1 July 2012 to 31 August 2015 and have been sourced from the ACT Sentencing Database.

During the three years and two months covered by the report, 117 sentences were imposed in the Magistrates Court for possessing a drug of dependence, 145 for possessing cannabis and 134 for possessing a prohibited substance other than cannabis, a total of 396 sentences.

With respect to *possessing a drug of dependence* (e.g. the unlawful possession of a controlled substance such as oxycodone), the most common

sentence among the 117 cases was a good behaviour bond (44%), followed by a fine (28%), fully suspended sentence (9%), imprisonment (8 cases, 7%), partially suspended sentence (3%), periodic detention (1%), and other orders (9%). 89% of offenders were males and 11% females. Some 55% were sentenced for multiple offences.

With respect to *possessing cannabis*, the most common sentence among the 145 cases was a fine (76%), followed by a good behaviour bond (21%) and other sentences (3%). No-one was sentenced to imprisonment. 83% of offenders were males and 17% females. Some 68% were sentenced for multiple offences.

With respect to *possessing a prohibited substance other than cannabis* (e.g. heroin), the most common sentence among the 134 cases was a good behaviour bond (50%), followed by a fine (26%), imprisonment (13 cases or 10%), fully suspended sentence (8%), partially suspended sentence (4%), and other orders (3%). 85% of offenders were males and 15% females. Some 46% were sentenced for multiple offences.

*Comment: ATODA is surprised to see, from these data, that 21 sentences of imprisonment were made during the 38 months under review. Although we are not privy to the details of the individual cases, the fact that these offenders were charged with the minor offence of possession of small quantities of drugs, rather than supply-type offences, and were sentenced to imprisonment, highlights the need to decriminalise these minor offences and to increase the number of people who use drugs who are diverted from the criminal justice system into interventions that are likely to assist them in overcoming substance use disorders and other life challenges.*

Source: Bartels, L 2016, *ACT Sentencing Snapshot: no. 5: drug possession*, ACT Law Courts and Tribunal, Canberra, [http://courts.act.gov.au/magistrates/services/act\\_sentencing\\_database\\_actsd\\_and\\_sentencing\\_snapshots](http://courts.act.gov.au/magistrates/services/act_sentencing_database_actsd_and_sentencing_snapshots)

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## **In what ways can drug consumption rooms improve the well-being of drug users and reduce overdose?**

In 2012, Danish politicians passed a law that allowed drug consumption rooms (DCRs) to operate; among the objectives of this intervention were to improve the well-being of vulnerable citizens and to reduce the number of overdoses. Five Danish DCRs are currently operating. A team of Danish researchers undertook a national investigation focused on assessing the impact of Danish drug consumption rooms on the health and well-being of DCR clients and factors facilitating the acceptance of DCR clients in order to improve their health and refer them to social and health service providers. They conducted 250 hours of participant observation in the DCRs, followed by in-depth qualitative interviews with 42 DCR clients and 25 staff members. They found that 'DCR clients experienced a sense of social acceptance while inside DCRs. Members of staff conveyed a welcoming, non-judgemental attitude, and DCR clients were predominantly satisfied with the facilities. They prioritized forging relations with drug users so as to foster a sense of social acceptance within DCRs. The primary goal of staff members is to prevent overdoses by informing clients about strong drugs and by intervening in cases of intoxication. DCRs provide security to clients. In cases of health-related problems, DCR clients were referred to local health clinics. Members of the staff build bridges for DCR clients by guiding them towards drug treatment programmes and services in the social and the health sectors'. The researchers concluded that 'The study reveals a consistency between DCR clients and staff members with respect to appraisal of the importance of DCRs. Both clients and staff agreed that DCRs provide a safe haven in the environment in which DCR clients often live and that staff members approach to clients with the intention of promoting acceptance clears the path for the prevention and treatment of overdoses and providing referrals to healthcare facilities, to drug treatment centres and to social services'.

**Kappel, N, Toth, E, Tegner, J, & Lauridsen, S 2016, 'A qualitative study of how Danish drug consumption rooms influence health and well-being among people who use drugs', Harm Reduction Journal, vol. 13, no. 1, pp. 1-12.**

*Comment: In 1999, during the previous epidemic of opioid overdose morbidity and mortality, the Legislative Assembly for the ACT passed the Supervised Injecting Place Trial Act. The establishment of Canberra's supervised injecting place was blocked by two independent members of the Assembly. Perhaps the time has come to re-visit the need for such a facility in Canberra, particularly in light of the demonstrated success of the Sydney Medically Supervised Injecting Centre and the continuing high rates of overdose in Canberra?*

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