

Preventing the harm

I refer to the letter by Geoffrey Fitzgibbon (Letters, October 9); and also, note the article (“‘Oversold’ pill testing not a magic bullet: toxicologist”; October 9, p.2).

Pill testing seems to be another harm reduction initiative along the lines of the disallowed heroin trial, injecting room and needles in prison.

I see little logic or reason in having a drug policy that prioritises harm reduction, not harm prevention. Yes, we need to reduce the harm caused by bush-fires, but no government, fire service, or community would change its primary aim of reducing the number of fires for reducing the harm from them.

Why put the possibility that pill testing may save a young life above the certainty that getting youth drug free certainly will?

And compound the situation by extremely low funding of treatments that have that aim?

C. Rule, Gilmore

Criminalising our kids

Alas, drug laws do criminalise our kids (Geoffrey Fitzgibbon, Letters, October 9).

How else can you explain that some 90 per cent of those arrested for cannabis offences are consumers, not providers?

We have seen a large reduction in smoking by making it an offence under the Tobacco and Other Smoking Products Act to sell cigarettes to those under 18, not for them to possess tobacco. But Mr Fitzgibbon is right that methadone is not for everyone. We need every effective therapy that minimises the obstacle to users seeking and remaining in treatment.

Many beneficiaries of pharmacotherapies, including heroin assisted treatment in countries providing it, graduate to abstinence-based rehabilitation.

All things are possible when people’s lives are stabilised. As the US National Institute of Drug Abuse writes: “methadone treatment has been shown to increase participation in behavioral therapy and decrease both drug use and criminal behaviour.”

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