



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

committed to preventing tragedy that arises from illicit drug use

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NEWSLETTER

May, 2002

ISSN 1444-200

Next Meeting Thursday, April 23rd at St Ninians Uniting Church, Cnr Brigalow and Mouat Streets, Lyneham 7.30pm

GUEST SPEAKER at 8pm

The guest Speaker will be **Solicitor Jennifer Saunders** who will speak about "**the interplay of the legal system and drugs**". She will talk about the procedures when kids and young adults get involved in the legal system because of drug related offences, the situation regarding remand, access to medical treatments (including methadone and dual diagnosis situations), scope for access, dealing with the police and the Director of Public Prosecutions and what is involved in securing legal representation. There will be time for questions. A cuppa following will give an opportunity for informal discussion

Editorial

In this month's newsletter we have a further look at the state of play in European countries and in Canada – started of course by the trail blazing efforts of the Swiss who implemented prescription heroin treatment and the Dutch far-sighted approach to drug matters.

The Swiss efforts have made significant benefits as reported by Sian Powell in the Australian on April 4: "As well as the demonstrable improvements in health and stability, and the marked reduction in crime, [Drugs Policy Analyst] Reuter has discerned another benefit. "If people who were addicted went into heroin maintenance fairly early in their heroin careers, the supply shifts – it's more difficult for non-addicts to find reliable source. The Swiss are starting to argue that they're seeing some of that."

The pragmatic Dutch policy separates the "soft drug" market from the "hard drug" market as well as providing non-judgemental care, support and treatment for the person who is caught up in the addiction of drugs. Cannabis can be purchased and consumed in certain cafes and police will not apprehend users unless there is a public nuisance or other reason. They have long had supervised injecting rooms and have recently completed their heroin prescription trials.

Back home in Australia: the ACT government is establishing a 'Substance Abuse Task Force' and the Federal Government has commenced an advertising campaign praising their 'tough on drugs' strategy.

Also this month the Meanjin journal will concentrate on drug issues. It should be well worth a read.

Be alert for the publication and release of the National Household Survey. It will be a definitive survey on drug use in Australia and is planned for release on 23 May 2002. This survey is undertaken every three years – 1995, 1998, and 2001 – and in the previous two reports drug use was shown as increasing. This year the survey was undertaken in the midst of the heroin drought (not really a drought but a severe shortage) and we could see a reduction in the use of heroin because of that. However from other reports and information we should see in the survey a significant increase in the use of methamphetamines and cocaine. The question that will be in the forefront of our minds when the survey report is released is "what does it tell us about the effectiveness of Australia's drug policy?" Ed

Information on Drug & Alcohol issues in Spanish

Information session for parents and guardians from a Spanish speaking background who are interested in learning more about drugs and alcohol issues with adolescents will be held on the following dates.

Friday 24 May at Room 2 Griffin Centre
12 noon to 2pm

Thursday 30 May at Room 4 Griffin Centre
7pm to 9pm

Friday 7 June at the Community Room at Belconnen Public Library 12 noon to 2pm.

Transport and childcare can be arranged with notice. Light refreshments

For more information call Women's Information, Resources, Education on Drugs and Dependency on 62458860

AFP cannot serve two masters

It is important that the ACT has an independent police force to provide fearless and frank assessments, and certainly one that is free of outside political direction, says Bill Bush.

Published in the Canberra Times 14 May 2002.

The Australian Federal Police Commissioner, Mick Keelty, told the Adelaide Advertiser recently that "I have not favoured injection rooms" (April 20, p.59). In December the

Canberra Sunday Times reported him as “rejecting” plans for injecting clinics saying that “to me its just a nonsense that people are trying to trot out heroin trials in the country at a time in our history when we have never been more on top of the heroin problem”.

These comments put him at odds with the ACT Government policy. The Labor Government has pledged active involvement in the evaluation of the Kings Cross trial and, if favourable, is prepared to establish an injecting room in the ACT. Chief Minister Jon Stanhope has written to Prime Minister John Howard in support of a trial of heroin prescription.

The divergence raises big questions about the extent to which the ACT is master of its own police force and whether the AFP can be looked to to provide information and assessments unaffected by the political interests of the Commonwealth which it also serves.

There are large qualifications on the extent to which the AFP is answerable to the ACT Government as opposed to the Federal Government. The ACT has engaged the AFP under an arrangement with the Commonwealth that is supplemented by a purchase agreement directly with the AFP.

The ACT Government may give general directions to the ACT’s Chief Police Officer and secure that officer’s removal but ultimate control is not in the ACT’s hands. The CPO as an AFP officer is “subject to the authority of the commissioner”. The directions of the ACT Police Minister are “subject to” written directions of the Commonwealth.

Drug policy seems to show it is impossible for the AFP to please two masters, particularly given the directions of the Federal Justice Minister to Keelty to provide “an effective contribution to the implementation of the Government’s ‘Tough on Drugs’ strategy”.

The ACT should either have its own police force or an arrangement to quarantine the police force that it hires from “outside” police directions that conflict with ACT policies.

But there is another and deeper principle at stake. This is the extent that an agency like the police service should be subject to political direction from any quarter.

There is a strong argument that directions should be narrowly limited. Institutions such as the police and directors of public prosecutions are sworn to uphold the law laid down by Parliament. Courts are arbiters. Discretion there inevitably is in the application of the law but that discretion must be seen to be exercised by the police and DPP on transparent, impartial and non-political grounds.

For the benefit of parliament and the public the commissioner is also entitled, even expected, to comment on the effectiveness of the law that he or she is faithfully bound to implement. It is a matter of deep concern if the commissioner becomes just the cypher of the political executive.

Since his appointment last year, Keelty’s public comments on drugs give cause for both hope and doubt about the independence of his office. On the one hand he has disclosed facts that sit uncomfortably with the boasted success of the Federal Government’s drug policy.

For example, in June last year he revealed that there has been “a business decision by Asian-organised crime gangs to switch from heroin production as their major source of income to making of methamphetamine, or speed, tablets” (Herald Sun, June 19, p.10) and that “their market research

... tells them that these days people are more prepared to pop a pill than inject themselves” (p.1).

He also revealed that “corrupt officials in the drug-producing nations made the trade impossible to stamp out” (p.4). In Adelaide he warned that “Australia faces a potentially larger problem [than heroin] dealing with amphetamines” which he described as “simply frightening” (Advertiser, April 20, p.59).

On the other hand, many of Keelty’s comments on drug policy go beyond the efficacy of law enforcement: he endorses the Federal Government’s drug policy in the sort of language that ministers use.

This may be consistent with the directions given to him but it gives the appearance of undermining independence.

The tale of the National Crime Authority compounds this concern. Last August its chairman, Gary Crook, declared that “the scale of the illicit drug problem and its onward progression is such as to demand the highest attention of the government and the community” and that “a coordinated and holistic approach is required”.

In this context he suggested that a step like heroin prescription was “worthy of consideration ... to control the market”. The Federal Government and Keelty sharply criticised these comments.

Crook is now subject to a familiar public-service device of having his position reorganised from under him with the prospect of greater political direction to his successor from a board.

It is important that the ACT has an independent police force to provide fearless and frank assessments and certainly one that is free of outside political direction. The welfare and security of our community demands no less.

Germany: drug deaths decline

Source: New York Times (NY) , 07 May 2002

The introduction of state-run rooms where addicts can use drugs helped cut the number of drug-related deaths in 2001 by 9.6 percent from the previous year, a Health Ministry report said. The decline, to 1,835 deaths, was the first in four years. There are about 20 drug consumption rooms in Germany, run by state authorities. In March, seven cities began "heroin-supported therapy" in which addicts get heroin under medical supervision.

Europe Moves Drug War From Prisons to Clinics

By T.R. Reid, Washington Post Foreign Service, Friday, May 3, 2002; Page A01

LISBON -- The last time the cops nabbed Miguel, he was carrying one envelope with several grams of heroin and another with a slightly smaller stash of cocaine. “I thought, ‘Oh Lord, here we go again,’” Miguel said, grimacing at the memory. “I figured I was headed straight back to Leiria,” the dank national prison where he has served two terms on drug charges.

As it turned out, Miguel did not do another stretch behind bars -- not because of a clever defense lawyer, but because of Portugal’s fundamentally new battle plan in the long-running war on drugs:

This nation of 10 million has decriminalized all drug use.

Today Miguel remains a free man, dividing his time between part-time work as an auto mechanic and outpatient treatment at Lisbon's biggest drug treatment clinic.

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Increasingly, drug users are viewed not as criminals, but as victims of a drug culture that tough laws could not control.

Spain, Italy and Luxembourg have also decriminalized possession and use of most drugs, and several other countries have effectively done the same by waiving criminal penalties for addicts who are not found to be dealing.

The director of the European Union's Monitoring Center for Drugs and Drug Addiction, Georges Estievenart, noted that this more tolerant stance applies not just to users of such "soft" drugs as marijuana, but also to heroin and cocaine addicts. "The general trend across Europe," Estievenart said, "is an approach that focuses on the traffickers and does not pursue the drug user as a criminal.

The premise is that it is not in the interest of society to put these people in jail, where they don't get treatment but do get fairly easy access to all kinds of drugs.

"Some people refer to this as the 'pragmatic' approach," he said. "It assumes that drug use is a fact of life that society can't stop, so policymakers should try to control the damage. The U.S. perspective, of course, is different. They seek to eliminate drug use by prohibition."

Drug policy is not uniform across Europe. Some countries, notably Sweden and Greece, have held fairly firmly to a U.S.-style, "just-say-no" approach. But in most of Western Europe, said Jonathan Cave, a drug policy expert at Warwick University in Britain, "the general direction is harm reduction rather than use reduction."

"As the U.S. experience shows, people do obtain and use drugs, even if you spend billions trying to stop them," Cave said. "So now the goal [in Europe] is to have it happen without the risk of overdose, of HIV, of random crime to support the habit."

The ethos of harm reduction was set forth succinctly by Vitalino Canas, the former Portuguese government minister who has championed the new approach here. "Of course our message is, 'Don't use drugs at all,' " Canas said. "But people don't always listen. So then we say, 'If you use, do not use hard drugs. And if you use hard drugs, do not inject them. And if you inject, do not share needles.' We think this is more realistic than 'just say no' all by itself."

Europe's approach has drawn some sharp criticism, not least from the International Narcotics Control Board, the U.N. agency set up to enforce several international treaties that ban the sale or use of narcotics.

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U.S. drug enforcement officials have also sniped at European drug policies, saying that legalization encourages use. To date, there is little clear evidence as to the impact of the new policies. "We are eagerly awaiting studies," said the EU's Estievenart. "But so far, we don't have the data to show whether or not the pragmatic solution can reduce the use of drugs."

The shift toward tolerance began decades ago. In the 1970s, the Netherlands was a leader, tolerating use of such so-called soft drugs as marijuana, or cannabis, as it is gener-

ally known in Europe. The famous "hash houses" that opened along the old canals of Amsterdam still draw a steady clientele of locals and tourists. Customers can order from two different menus. One has coffee -- espresso, cappuccino and the like. The other has an even wider selection of hashish, a form of cannabis -- "Nepal," "Kashmir," "Thai," "Kabul." The barman will also roll joints, which cost about \$3 each. Contrary to Amsterdam's freewheeling reputation, the hash houses tend to be quiet and controlled. At risk of police closure, the shops strictly enforce the mandatory age limits -- customers have to be 18 to buy drugs there, two years older than the legal drinking age.

"Decriminalization has worked fairly well in the Netherlands," said Cave, the drug policy expert at Warwick University, adding that few hash-house customers have been found to move on to hard drugs.

Amsterdam's approach to cannabis spread widely through Europe. Today, by statute or in practice, police officers in most European countries ignore users of marijuana or so-called recreational drugs such as amphetamines and ecstasy. The latest convert is Britain, where the Home Office (roughly the equivalent of the U.S. Justice Department) said in March that it would downgrade cannabis from a "Class B" to "Class C" drug.

This would eliminate criminal penalties and treat possession or use like a parking violation. With the approval of the central government, some local police departments in Britain have already taken that step in practice. In the south London neighborhood of Brixton, the local police commissioner announced last year that his officers would no longer bother to arrest pot smokers. Today it is commonplace to see young Londoners lighting a "spliff" on the sidewalk outside Brixton's police station.

A recent study by the Joseph Rowntree Foundation, a London research group, concluded that the Brixton experiment was a resounding success. Ignoring marijuana offenses, the study concluded, allowed the police to direct money and personnel to more serious crimes and "removed a major source of friction between the police and the community." The report said the more relaxed approach was "unlikely" to lead to greater use of marijuana or more harmful drugs. It offered no data to support this conclusion.

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Portugal's new drug law is so protective that it rejects terms such as "addict" or "user." Rather, the person hooked on hard drugs is referred to as a "consumer."

In the real world, the distinction between "consumer" and "dealer" is not always clear, of course. To draw the line, Portugal has made rules based on quantity. Anyone arrested with less than 10 days' personal supply of each drug is considered to be in possession of the drugs for personal use and is not prosecuted. Anyone arrested with more than 10 days' supply can be charged with dealing.

A drug user picked up by the police is initially sent to one of 18 civilian "drug commissions" around the country. The commission is supposed to deal with each case individually, but users of cannabis or amphetamines are generally given educational material and released, while those using hard drugs are assigned to a treatment program.

A user who accepts treatment faces no further punishment, Canas said. Those who duck out of treatment, or are caught offending again, face administrative penalties

similar to those for speeding or failing to file a tax return. Initially, there are fines, beginning at about \$22. More serious violators can lose their driver's license or the right to travel abroad, or be assigned to such public service jobs as cleaning graffiti off the city's walls.

Elza Pais, who runs the local drug commission for Lisbon, said most consumers turned over by police say they want to break the drug habit and that they readily accept treatment. A few would actually prefer to go to prison, she said, perhaps because drugs tend to be easier to obtain there. "But we no longer have that option."

Like most of the people arrested for drug use in Lisbon, Miguel was dispatched to the sprawling four-story treatment center on Taipas Street in Lisbon's Bairro Alto neighborhood. There he came under the friendly but firm ministrations of the center's energetic director, Luis D. Patricio.

"We have inpatients and outpatients here," Patricio said, leading a tour of his center like a hotel manager showing off a fancy new resort. "We have young mothers and aging pensioners. We have people who genuinely want to end their addiction, and people who probably just think it is easier to come here for methadone than to scratch up the money for a fix on the street.

"But for all of them, we have the same message now: You are not a criminal. You do not have to fear the government or the doctor. With good treatment you can get over addiction, and we are going to help you do it."

After two decades of treating Lisbon's drug problem, Patricio said he is certain Portugal's new policy is the best course. "In prison, you turn an amateur drug user into a professional," he said. "That's what America is doing; in Europe, we are looking for other solutions."

Canas, the former government minister, acknowledges that the long-term result of the policy is unclear. "We only put the law into effect last July," he said. "Perhaps in a year or so, we will be able to draw some conclusions about the impact.

"For now, the fact is that we are experimenting."

Paper on pot pushes wonders of weed

Source: NOW Magazine (Canada), May 09, 2002

Website: <http://www.nowtoronto.com/>

From the Week Online with DRCNet, Issue #236 -- May 10, 2002

The Senate Special Committee on Illegal Drugs released a discussion paper on pot last week, and in the process exploded many of the marijuana myths that have kept policy-makers in a fog when it comes to decriminalization. Will it help cure the Grits of their reefer madness? Here's an excerpt.

Everyone has opinions on cannabis. Yet opinions are often biased, based on myths and lack of information. Indeed, some of our own opinions were just that when we began our study. Cannabis may well be one of the most studied of all plants. Yet even scientific evidence is contradictory.

Some of the conclusions that emerge from the research may shock some of you.

Studies indicate that the vast majority of cannabis smokers never progress to other drugs.

While it is true that most users of hard drugs have also used cannabis before these other drugs..., other factors, mainly psychosocial, would better explain progression to other drugs.

Between 8 and 10 per cent of cannabis users may develop some psychological dependency, a much smaller proportion than for many other drugs, illegal and legal, and comparable to prescribed medications.

For most dependent users, stopping use for a few days is usually sufficient to eliminate any symptom of addiction.

Cannabis, like any other drug, has potential negative health effects. But (it) also has positive effects. These include relaxation, euphoria and sociability. Cannabis also has therapeutic applications.

Many of us perceive that a significant proportion of ordinary criminality is related to drugs. Nevertheless, the relationship between drugs and crime is more complex. This relationship does not apply in the case of cannabis.

It is impossible to estimate the total costs of cannabis criminalization. The most recent Auditor General's Report mentions that the annual cost of fighting illegal drugs for federal agencies alone is over \$500 million.

Cannabis, like other drugs, impairs motor and coordination abilities.

Drivers under the influence of cannabis are more cautious and less aggressive and drive more slowly than drivers under the influence of alcohol.

Some witnesses before the committee and individuals writing to us are concerned that a more "liberal" drug policy would mean increased use, especially by youth.

Studies show that in the Netherlands, despite a more liberal approach than other countries', the proportion of youth using cannabis is not higher. In fact, it is in the middle of the pack.

Does cannabis use affect academic performance or social abilities? Studies indicate that problem young cannabis users are also problem alcohol users, manifesting other "risk-taking" behaviour. These are therefore symptoms of other underlying problems rather than causes.

Much to our surprise, public policies have little impact on use levels and patterns.

Prohibition and criminalization entail a criminal record for simple cannabis possession, fuel a black market that brings young people into contact with criminal elements and force them to hide to avoid police scrutiny.

Public policies also entail other negative effects. Prohibition makes public health approaches, balanced information, prevention and quality control of substances difficult, if not impossible.

National policies on drugs find much of their legitimacy in the international conventions and treaties.

Yet these international agreements evolved in the absence of any significant drug problem in the developed countries that pushed them.

Some articles reprinted here are by courtesy of the Drug Reform Coordination Network which can be found on the web at: <http://www.drcnet.org>.