

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

committed to preventing tragedy that arises from illicit drug use

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NEWSLETTER

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NEXT Meeting

Thursday 27 April 2006

7.30pm

Venue: St Ninian's Uniting Church, cnr
Mouat and Brigalow Sts, Lyneham.

Bill Bush will give an update on the
plans for the ACT Prison

Refreshments will follow

Remembrance Ceremony

This will be held on Monday 16th October at 12.30pm at our Memorial site, Weston Park, ACT. Please put this date in your diary. Other ceremonies will take place in Sydney and other venues which will be made known closer to the date.

Membership Fees

A reminder that membership fees are due this month is contained in this newsletter. Please check that your details are still correct and if not please make changes. Make sure your email address is included so that information can also get through to you this way. We are presently having quite a few emails 'bounce back'. Your membership fees are very important to the ongoing work of FFDLR. And as the threat to undermine Harm Minimisation looms it is even more important that our voice be heard so that the hardship for families and users is not made even more difficult.

Editorial

Over the years there have been many royal commissions into drugs, many inquiries, both parliamentary and otherwise, many research projects undertaken into drug use, a number of drug summits, many books and reports written and there have been countless conferences, forums and seminars.

FFDLR has been active in a number of conferences and Parliamentary inquiries – a summary of our latest parliamentary submission is produced in this Newsletter – and with one notable exception (to the best of my knowledge) the reports of those inquiries have provided good responses, that if acted upon would have made a difference. (The exception was the Parliamentary

Enquiry into Drug Abuse in Australia which ignored the overwhelming evidence presented to the enquiry attempted to turn the clock back 25 years by pushing a drug free, zero tolerance approach.)

That is not to say that some good has not come out of the many inquiries, reports and drug summits. NSW now has a Medically Supervised Injecting Room, WA implemented more realistic laws on cannabis and more money put into the sector. The publicity over the summits raised community awareness and some states widened involvement to incorporate community views.

WA produced the most comprehensive material for participants preparing for its summit in 2001. It produced 9 issues papers and a statistical summary. The issues papers ranged from young people and illicit drug use to support and treatment to drug laws and enforcement to linking drug strategies to overall community involvement.

The papers posed questions such as:

- Should fundamental changes be made to WA drug laws?
- Is there a need for self injecting facilities in WA?
- Should research into amphetamine related harm and harm reduction in WA be funded?
- What factors should determine whether a drug is legal or illegal?
- What social policy framework is required to ensure that social and cultural factors are taken into consideration for the effective management of illicit drug use and its associated problems?
- Do we currently have a range of appropriate drug policies in place?

In the issues paper 'Linking Drug Strategies Into Overall Social Policies to Address the Underlying Causes that Generate other Social Problems, such as Violence, Suicide and Crime' the following statement was put:

The need to acknowledge that society has always tolerated the 'recreational' use of drugs

Anthropological evidence suggests that in the whole course of human history most societies have used drugs for non-medical, 'recreational' purposes. We need to look no further than our own society's 'recreational' use of alcohol and tobacco. Both are legal drugs, but are now recognised as having significant harmful effects, as well as conveying significant pleasure to users. Moreover, as already observed, different societies display different degrees of tolerance to the same drug,

and may change their tolerance to the drug over time as, for example, has occurred when certain legal drugs legally prescribed at one time are prohibited at another.

Following the summit the Australian National Council on Drugs conducted an alcohol and drugs forum in Perth and reported as follows:

Concern was expressed about the current Western Australian Government's commitment to the recommendations emanating out of the WA Drug Summit. In addition, there was a perception among some forum participants that debate on drug issues in the community and by those people in positions of power in WA need to be better informed. (Perth AOD Agency Forum report, 2002)

Therein lies the problem. Support and action on any report or recommendation relies on the political will of those in government and relies on the knowledge that they possess. It relies also on the knowledge and support of the member of parliament's constituency which often drives a parliament's decision making process. One can only wonder at the plethora of forums, and publications that provide answers but yet result in no substantial action.

The debate in Federal Parliament on the abortion pill RU486 is informative. It firmly established that health treatments be left to experts and individual doctors. Now if only drug addiction and drug treatments were to be considered as health and social issues then there might be some substantial progress.

In the meantime many of the important questions raised by the WA Drug Summit and the many other inquiries still wait to be answered and acted upon.

Submission of Families and Friends for Drug Law Reform to the Inquiry by the Parliamentary Joint Committee on the Australian Crime Commission into Amphetamines and other Synthetic Drugs

Executive Summary

In this submission, Families and Friends for Drug Law Reform addresses the terms of reference of the Committee to "inquire into the manufacture, importation and use of Amphetamine and Other Synthetic Drugs (AOSD) in Australia."

Trends in the production and consumption of amphetamine and other synthetic drugs

There is now a robust and growing market for methamphetamine and ecstasy in Australia. The involvement of highly resourced and very well organised criminal syndicates is obvious. Under the present policy settings, the market for the more potent forms of methamphetamine has escalated since about 2000 from virtually nothing.

The more potent forms of crystal and base methamphetamine made their appearance in the Australian market at the end of the 1990s

- From 2000 and around the time of the heroin drought the market for them grew several times over. For example, by 2004 46% of regular ecstasy users surveyed in New South Wales used crystal compared to just 6% in 2000
- Powdered forms of methamphetamine have become about five times more potent.

Large quantities of methamphetamine tablets manufactured in Australia and from overseas are now passed off as ecstasy.

- Between 1998 and 2004 there was a 22% increase in the number of people who reported recent use of what they thought was ecstasy.
- According to the 2005 *World Drug Report* of the United Nations Office on Drugs and Crime, Australia has the unenviable distinction of having the highest usage rate

in the world for these drugs.

Strategies to reduce the amphetamine and other synthetic drugs market in Australia

There is no realistic prospect that growth in the methamphetamine market can be reversed under the same policy settings that have existed since the market ballooned from about 2000. Nor does there appear to be any realistic prospect under current policy settings that the enormous harm associated with these potent drugs will do anything other than grow and, in the process, absorb increasingly more scarce public and private resources.

- The market cannot be reduced by intensification of supply reduction measures.
- Governments should embrace a treatment- and prevention-orientated drug strategy in which law enforcement plays a supporting role rather than the current situation where law enforcement dominates the other arms of drug policy.

The capacity of treatment and other demand reduction measures should be applied to reduce the market for drugs as discussed in a submission of Families and Friends for Drug Law Reform to the review of the

Public Meeting Methamphetamines, Mental Health and Drug Law Reform –

If you missed this meeting which was held on Thursday 30th March at the Legislative Assembly, the talk given by Andrew Macintosh, Deputy Director of the Australia Institute is available on our website. This was a very successful public meeting with around 80 people in attendance. We are grateful to Mary Porter (MLA) for sponsoring the meeting. Andrew's recently published paper – "Drug Law Reform – Beyond Prohibition" is available from the Australia Institute Website – www.tai.org.au

Australian Crime Commission Act 2002 (FFDLR 2005b, App. B).

- The processes of the criminal law which have a negative impact on the mental health and general well being of young people who use illicit drugs should be avoided. (Recommended in submission of Families and Friends for Drug Law Reform to the Senate Standing Committee on Mental Health (FFDLR 2005c, pt. III).

The immediate focus should be on reducing the market for the particularly harmful potent forms of methamphetamine rather than aiming in the short term to reduce illicit drug use across the board.

- Such measures should include a system of credible health warnings combined with pill testing (submission of Enlighten Harm Reduction).

Longer term market reduction measures should use the best available evidence to develop strategies that undermine the economic conditions in which the illicit market thrives, particularly:

- the direct marketing peer group system that strongly promotes market growth;
- the profit which drives the extraordinarily efficient retail distribution system;
- the motive of the user who deals to support a habit;
- the capacity of the distribution system to supply a smorgasbord of drugs. There is a need to quarantine the distribution of less dangerous drugs from more dangerous ones;
- risk factors for use and thus demand. There is a particular need to address mental health risk factors by ensuring that the *National Drug Strategy 2004–2009* and the *National Mental Health Plan 2003–2008* are thoroughly integrated as recommended in the submission of Families and Friends for Drug Law Reform to the Senate Standing Committee on Mental Health (FFDLR 2005c, §§115–19); and
- addiction which arises from drug use. Address it by promoting treatment and, where there is no adequate treatment, tailoring law enforcement effort so that users are channelled to less dangerous drugs.

The extent and nature of organised crime involvement.

The co-operation and integration of large-scale criminal enterprises is evident in the production and trafficking of both imported and locally produced drugs.

The nature of Australian law enforcement response

On the supply side, the Australian law enforcement response relies on seizures of drugs and precursors, detecting clandestine laboratories and attempts to disrupt criminal organisations.

Even with the existence of diversion schemes, at the retail end law enforcement relies largely on arrests and prosecutions of users and low level dealers who are in fact users who deal to support their habit.

- Law enforcement should support and not undermine measures to improve the general well being of drug users

The adequacy of existing legislation and administrative arrangements between Commonwealth and States agencies

Guidelines for police and prosecutors should be adopted to ensure that serious drug offence legislation that exposes drug users to very severe penalties is not implemented so as to cause more harm to the user than the drug itself or to impede the social reintegration of drug users.

- In particular such guidelines should be adopted for the Commonwealth *Law and Justice Legislation Amendment (Serious Drug Offences and other Measures) Act 2005* which, as described in a submission last year of Families and Friends for Drug Law Reform to the Senate Legal and Constitutional Affairs Committee, overlaps state and territory law, extends down to mere possession and imposes draconian penalties on activities regularly undertaken by illicit drug users (FFDLR 2005d).

An assessment of the adequacy of the response by Australian law enforcement agencies, including the ACC.

The advent and growth of a market for more potent methamphetamine and false and genuine ecstasy tablets in Australia has happened almost exactly as criminal intelligence forecast that it would happen.

The ACC should routinely undertake assessments of the effectiveness of drug law enforcement based on market indicators of price, purity, level of use and surveys of availability.

The ACC in conjunction with appropriate drug research agencies should routinely publish estimates of the size of the Australian illicit drug market.

The Australian Federal Police should abandon its current performance indicators which simply reflect the level of drug seizures without any assessment of the influence of those seizures on the drug markets.

[The full submission can be found on the FFDLR website ffdlr.org.au]

Changes in Canadian heroin supply coinciding with the Australian heroin shortage

Evan Wood, Jo-Anne Stoltz, Kathy Li, Julio S. G. Montaner, & Thomas Kerr

British Columbia Centre for Excellence in HIV/AIDS, St Paul's Hospital and Department of Medicine, University of British Columbia, Canada

[The following abstract is of research from Canada which contradicts any claims that the heroin drought in Australia was caused by Australian law enforcement. The full article can be found in the journal "Addiction".]

Aims

Previous studies have largely attributed the Australian heroin shortage to increases in local law enforcement efforts. Because western Canada receives heroin from similar source nations, but has not measurably increased enforcement practices or funding levels, we sought to examine trends in Canadian heroin-related indices before and after the Australian heroin shortage, which began in approximately January 2001.

Methods

During periods before and after January 2001, we examined the number of fatal overdoses and ambulance responses to heroin-related overdoses that required the use of naloxone in British Columbia, Canada. As an overall marker of Canadian supply reduction, we also examined the quantity of heroin seized during this period. Lastly, we examined trends in daily heroin use among injection drug users enrolled in the Vancouver Injection Drug Users Study (VIDUS).

Results

There was a 35% reduction in overdose deaths, from an annual average of 297 deaths during the years 1998–2000 in comparison to an average of 192 deaths during 2001–03. Similarly, use of naloxone declined 45% in the period coinciding with the Australian heroin shortage. Interestingly, the weight of Canadian heroin seized declined 64% coinciding with the Australian heroin shortage, from an average of 184 kg during 1998–2000 to 67 kg on average during 2001–03.

Among 1587 VIDUS participants, the period coinciding with the Australian heroin shortage was associated independently with reduced daily injection of heroin [adjusted odds ratio: 0.55 (95% CI: 0.50–0.61); $P < 0.001$].

Conclusions

Massive decreases in three independent markers of heroin use have been observed in western Canada coinciding with the Australian heroin shortage, despite no increases in funding to Canadian enforcement efforts.

Markedly reduced Canadian seizure activity also coincided with the Australian heroin shortage. These findings suggest that external global heroin supply forces deserve greater investigation and credence as a potential explanation for the Australian heroin shortage.

Dates for your diary

ACTCOSS presents a forum on the Community Sector and the ACT Prison

The forum will examine the importance of community services to ex-prisoners and their families, options available to people exiting the Belconnen Remand Centre and New South Wales prisons, and what local community services can expect after the opening of the ACT's permanent jail.

The forum will provide an opportunity to discuss services.

When: 9.30am to 4pm, Tuesday 16 May, 2006

Where: Canberra Multicultural Centre, London Circuit, City: NB – This venue is equipped with a hearing loop.

Details of costs and registration forms will be sent out at a later date.

To register your interest please email ACTCOSS Senior Policy Officer, Karen Nicholson at: karen@actcoss.org.au or phone 6202 7222.

Relapse Prevention and Support Program

A group for adults with substance use issues, who wish to develop and maintain healthier lifestyles

Relapse prevention is a free 6 week program commencing 23 May 2006. Meetings are held from 1:30pm – 3:30pm at 1 Moore St Canberra City (Civic Health Building).

Contact for registration 02 6205 4545

Effective Weed Control

A free, 5 week, group program for cannabis users wanting more information or who want to change their cannabis use.

The group is open to all adult cannabis users.

Effective weed control starts 25 May 2006 at the Health Building, first floor, 1:30pm to 3:30pm Thursdays – corner Moore and Alinga Streets.

Contact for registration or more information on 02 6205 4515

Other 2006 Effective Weed Control program dates:

- * July 27
- * September 21
- * November 16

Family Drug Support presents a practical course to help family members cope with drug and alcohol issues –

the Stepping Stones Courses.

A mid-week daytime course: Thursdays 12 – 2 pm from 15 June for 9 weeks. Venue: Civic Health Building, 1 Moore St. ACT

Weekend course beginning on Friday 11 August at 5.30pm for 5 sessions. Venue: Function Room, Calvary Hospital, Belconnen, ACT

Register soon: 6207 9977.

Cost \$30 per family (includes booklet Guide to Coping) (Run by the ACT Alcohol & Drug Program and Ted Noffs Foundation)

Course developed by Tony Trimmingham, Family Drug Support.