



# 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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## **Annual General Meeting**

Thursday 26 November 2009 at the McConnell's home

Our last meeting for 2009 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 report.

This will take place on Thursday 26<sup>th</sup> November at 6:30pm for the BBQ and 8:00pm for the AGM at Marion and Brian's home.

Marion and Brian will supply meat etc but **could members please bring either a salad or sweet.**

Members and their family are most welcome.

**RSVP**  
6254 2961

**For catering purposes please let Marion know if you are coming and what you can contribute in the way of a salad or sweet.**

If you don't know our address we will give it to you when you contact us.

Looking forward to a pleasant evening together.

## **Editorial**

### **People traffickers; drug traffickers: similar causes.**

Recently you would have heard Prime Minister Rudd talk about the boat people and those who try to bring them to Australia. You would have heard him say how evil the people smugglers are.

The major reason people flee a country as refugees is because of the harsh and brutal conditions they experience in their country. They have made a decision that a chance for a better life is a better alternative than staying. That applies even if that chance encompasses a dangerous boat voyage and incarceration in Australia.

The current refugee/boat people are Tamils coming from Sri Lanka. And the reason they are leaving is because of the harsh and inhumane treatment by the Sri Lankan government. Former Prime Minister Malcolm Fraser has pointed this out recently.

And for a fee there will always be someone willing to help the refugees get to somewhere else.

The focus by our government has not been on the cause but on the captains of the boats that are bringing them here.

There is a parallel with the illicit drug trade. The focus has largely been on the traffickers. Witness the public funds, yes, yours and my tax dollars, that have been poured into the prevention of the supply of drugs.

The result? Some arrests, some confiscation of money, goods and property and some good publicity for customs and police, but has it stopped the trade? A rhetorical question – of course it hasn't.

The supply is there because people want to use the drugs, some because they are dependent on them.

If the Sri Lankan government ceased persecuting the Tamils would that solve the refugee problem? It seems a logical solution.

Could a similar solution be developed to stem the trafficking of drugs? Perhaps. If some realities were acknowledged then some rational debate might ensue and real solutions could be found. It must first be acknowledged that prohibition has generated a problem worse than the one it set out to solve.

Antonio Maria Costa, Executive Director of UN Office on Drugs and Crime confirmed this when he said: *'Looking back over the last century, we can see that the control system and its application have had several unintended consequences—they may or may not have been unexpected but they were certainly unintended.'*

Secondly it must be acknowledged that there will always be a demand and if the preferred drug is not available another will be found – the current scramble to prevent the non-prescribed use of medications illustrates.

Given these two premises, the next step is to clearly set out what it is that we wish to achieve. Currently Australian policy says (within the context of prohibition legislation) that it wishes to minimise the harm from (certain) drugs. But the problem here is that of the three pillars that make up the harm minimisation policy the supply reduction element has effectively hijacked the agenda and the funding but without being accountable.

There has for example been no real or objective evaluation of the effectiveness of supply control. There has been an attempt to demonstrate the cost savings to the community of drug seizures. But that has been posed by the AFP themselves which has been demonstrated to simply reflect the quantity of drugs coming into the country, not whether it has any effect on the amount of drugs consumed.

The aim must be for an effective drug policy – one that causes the least possible harm to individuals and the

community and that puts life and well-being first. Words along these lines inserted as an objective of the legislation in the all current drug legislation together with a requirement for a periodic assessment against that objective could move us in the right direction.

## **After the War on Drugs: Blueprint for Regulation**

TRANSFORM Drug Policy Foundation

*The following is an extract of a new report by TRANSFORM. The full report can be found at: [www.tdpf.org.au](http://www.tdpf.org.au)*

There is a growing recognition around the world that the prohibition of drugs is a counterproductive failure. However, a major barrier to drug law reform has been a widespread fear of the unknown—just what could a post-prohibition regime look like?

For the first time, ‘After the War on Drugs: Blueprint for Regulation’ answers that question by proposing specific models of regulation for each main type and preparation of prohibited drug, coupled with the principles and rationale for doing so.

We demonstrate that moving to the legal regulation of drugs is not an unthinkable, politically impossible step in the dark, but a sensible, pragmatic approach to control drug production, supply and use.

Global drug policy is rooted in a laudable and justifiable urge to address the strong, and very definite, harms that certain non-medical psycho-active drugs can create. This urge has driven a prohibitionist global agenda based on viewing drugs as a ‘threat’, an agenda that gives clear and direct moral authority to those who support it, while casting those who are against it as ethically and politically irresponsible. However, both experience and research suggest that the most effective way of minimising drug harms is through regulation, based upon normative, legal frameworks, rather than prohibition. With this report, we are seeking to engage with such arguments, and to replace moral absolutism with an ethics of effectiveness. In particular, we are looking to show in very practical terms how drug legalisation could be managed, and how a post-legalisation world might look.

We are not suggesting the immediate and unconditional legalisation of all drugs. Legal unregulated markets would be only marginally less harmful than the illegal unregulated drug markets currently in operation. Nor do we feel that, in seeking to bring drug management into line with the most up-to-date research, and with legal and social norms applied to currently legally managed substances such as medical drugs, nicotine and alcohol, that we are being either disruptively radical, or particularly revolutionary.

In fact, all our proposals are based on current, proven substance licensing and management regimes. We have used these to develop a series of models for drug provision, and looked at the practical details of regulation. We have also mapped out a path to regulation, and tried to define how different kinds of legal markets for different types of currently illicit drugs might work in practice.

We are clear that this report is a starting point, not a conclusion. We hope that it will lead to further discussion, and establish tools to support this dialogue. We are also clear that, although we are as troubled as our prohibitionist colleagues by drug harms, it is not possible to eradicate them completely. Rather, we seek to deploy a combination of research and experience to ensure that such harms are minimised as effectively as possible, at global, national and local levels.

### **Five models for regulating drug supply**

Options for drug regulation sit between two extreme management approaches. At one extreme is the current model—prohibition/criminalisation, which forbids all non-medical supply, production and use of drugs. At the other extreme is free market legalisation, which makes drug sales legal and essentially unrestricted.

Both are absolutist models; neither allow for nuanced, harm minimising management of individual drug supply and usage. Drug regulation, however, moves away from such one-size-fits-all solutions. It provides a flexible spectrum of drugs management approaches which can be deployed as appropriate in response to localised needs and priorities.

We have identified five key models for such management:

**Prescription:** the most controlling model, this would be an exact equivalent to current prescription models for medical drugs, and some opiate maintenance programmes.

**Pharmacy sales:** drugs would be made available through pharmacies or pharmacy-like outlets, either on prescription or over the counter.

**Licensed sales:** vendors would be granted a licence to sell specific drugs under certain, clearly defined conditions, on off-licence like premises.

**Licensed premises:** vendors would be licensed to manage premises where drugs would be sold and consumed, much like public houses and bars.

**Unlicensed sales:** certain low risk substances could be managed through food and beverage legislation, as—for example—coffee is currently managed.

### **Listen to Phillip Adams on this issue**

*After the War on Drugs*

Is it time for a war on the 'war on drugs'? No proper comparison of prohibition, legalisation and regulation of illicit drug use has ever been conducted. A leading British drug reform body says it is time to try new ways of regulating drug use.

<http://www.abc.net.au/rn/latenightlive/>

### **Editorial by Nature on the Nutt affair, then Nutt himself has a piece in the New Scientist below.**

<http://www.nature.com/nature/journal/v462/n7269/full/462011b.html>

Editorial - Nature 462, 11-12 (5 November 2009)

## **A drug-induced low**

The sacking of a government adviser on drugs shows Britain's politicians can't cope with intelligent debate.

During his tenure as the UK government's chief adviser on drug abuse, David Nutt ruffled many a feather with his provocative remarks. Earlier this year, for example, he published an article that called for a wider debate on society's approach to risk and that favourably compared the dangers of the psychoactive amphetamine drug MDMA (ecstasy) to those of horse-riding (D. J. Nutt *J. Psychopharmacol*; 2009).

But it was only on 30 October that Nutt, a professor in neuropsychopharmacology at Imperial College London, was summarily fired from his position as chair of the British government's Advisory Council on the Misuse of Drugs by home secretary Alan Johnson. According to Johnson, Nutt's crime was to muddy the allegedly clear waters of government drugs policy by publicly making statements that questioned it, thereby going beyond his remit as a scientific adviser (see *Nature* doi:10.1038/news.2009.1053; 2009).

That concern should not be dismissed lightly. Politicians cannot always base their decisions solely on scientific advice, but must also consider such factors as public sentiment. Scientific advisers who publicly attack decisions they consider to be less than ideal, and in so doing provide ammunition for political opponents of those decisions, are entering dangerous territory.

Nonetheless, in this case, the position of the Labour government and of the leading opposition party, the Conservatives, which vigorously supported Nutt's sacking, has no merit at all. It deals a significant blow both to the chances of an informed and reasoned debate over illegal drugs, and to the parties' own scientific credibility.

Nutt's fate was decided following the publication last week of a thoughtful analysis of the challenges in estimating the harm done by drugs (see <http://go.nature.com/dPiUAt>). In this paper, for example, Nutt notes that public perception is highly influenced by the way the media cover dramatic events such as drug deaths. He goes on to analyse such coverage over a decade. The data show that the media have disproportionately highlighted the comparatively small number of deaths caused by drugs such as cocaine and MDMA compared with the far more numerous deaths caused by other substances, such as alcohol.

The imbalance has convinced the public and politicians that some notorious drugs are much more dangerous than they are. Such perceptions heavily influence the government's classification of substances under the Misuse of Drugs Act, which in turn determines the penalty for being found in possession of a given drug.

Nutt goes on to detail efforts to develop an evidence-based scheme that ranks drugs according to "nine parameters of harm", which range from an individual drug user's ravaged veins to society's extra payments for health care. The harm ranking that results bears only an approximate resemblance to the official classification. For example, alcohol and tobacco, which don't fall under the Misuse of Drugs Act, rank considerably higher than

MDMA, which is classified as among the most dangerous drugs.

That scheme has no official standing, unfortunately. But in describing it, Nutt attempted to do what he has done in many other public discussions: portray risk in terms that people can understand, look at the underlying factors that influence scientific and public debate, and thereby highlight how politicised discussions about drug use have become. To Johnson, this was apparently tantamount to "lobbying" against political decisions.

Thus the sacking. As *Nature* went to press, two members of Nutt's former committee had resigned in protest against the government's intolerance. They were right to do so. The government, meanwhile, badly needs to restore its credibility on this issue. One good way to do that would be to follow Nutt's suggestion to turn the advisory council into an independent body reporting to parliament as a whole, not to any individual official. An independent, scientifically run drug-regulation system would also free politicians from having to politick over who is toughest on drugs, something that would spare them and scientists much unnecessary future trouble.

## **Dutch among lowest cannabis users in Europe-report**

Reuters, Thu Nov 5, 2009 6:30am EST

AMSTERDAM, Nov 5 (Reuters) - The Dutch are among the lowest users of marijuana or cannabis in Europe despite the Netherlands' well-known tolerance of the drug, according to a regional study published on Thursday. Among adults in the Netherlands, 5.4 percent used cannabis, compared with the European average of 6.8 percent, according to an annual report by the European Monitoring Centre for Drugs and Drug Addiction, using latest available figures.

A higher percentage of adults in Italy, Spain, the Czech Republic and France took cannabis last year, the EU agency said, with the highest being Italy at 14.6 percent. Usage in Italy used to be among the lowest at below 10 percent a decade ago.

Countries with the lowest usage rates, according to the Lisbon-based agency, were Romania, Malta, Greece and Bulgaria.

Cannabis use in Europe rose steadily during the 90s and earlier this decade, but has recently stabilised and is beginning to show signs of decline, the agency said, owing to several national campaigns to curb and treat use of the drug.

"Data from general population and school surveys point to a stabilising or even decreasing situation," the report said.

The policy on soft drugs in the Netherlands, one of the most liberal in Europe, allows for the sale of marijuana at "coffee shops", which the Dutch have allowed to operate for decades, and possession of less than 5 grams (0.18 oz).

Nearly a fifth of the 228 coffee shops in the Dutch capital of Amsterdam, a popular draw for tourists, are scheduled to be shut down because they are too close to schools.

The full report by the European Monitoring Centre for Drugs and Drug Addiction is available at

## **Also some notes from the 2009 Annual Report from the European Monitoring Centre for Drugs and Drug Addiction.**

### **Law enforcement practice confronted by competing policy objectives**

Drug law enforcement receives a high profile in this year's annual report, and a 'Selected issue' addresses the sentencing and other outcomes of those charged with drug offences. The number of violations of drug laws reported in Europe continues to grow. And although the data are difficult to interpret, this observation raises questions about the extent to which law enforcement practice is in step with policy objectives in this area.

Broadly speaking, the European policy debate has moved towards the view that priority should be given to interdiction activities targeting the supply rather than the use of drugs. Reflecting this, in some countries the legal penalties applicable to supply-related offences have been raised or minimum tariffs have been introduced. The extent to which this shift in emphasis away from users and towards drug suppliers is being translated into policing practice is difficult to gauge. Only in a few countries do offences related to drug supply outnumber those for drug possession. Overall, the number of supply-related offences has increased; but the number of offences related to possession or use of drugs has also increased, and to an even greater degree. As well, across Europe the picture for supply-related offences is more mixed, with half of the reporting countries noting a decline in numbers in the medium-term data.

The in-depth review on sentencing for drug law offences in Europe that accompanies this report explores what happens to those who violate drug laws. Custodial sentences are common for supply-related offences, but they tend to be given at the lower end of the available tariffs, averaging 3 years or less. This may simply reflect the reality that many of those charged are at the lower end of the supply chain, for example street dealers or addicts who also sell drugs to support their habit. This finding has implications for the development of minimum sentencing guidelines, if they are intended to deter high-level career criminals from becoming involved in drug supply.

In most countries, custodial sentences are rarely handed out for drug use or possession. That said, a small percentage of those appearing in court will get an immediate prison sentence, possibly because of aggravating circumstances. This means that increasing numbers of drug users come into contact with the criminal justice system only to receive an administrative or minor sanction. Leaving aside the possible deterrent effect of this kind of action, it does raise the question as to what extent this contact with certain groups of drug users represents a missed opportunity for other demand reduction activities.

Some countries have developed innovative approaches in this area, but overall these are still rare.

As those charged with drug offences are likely to be a diverse group, needs assessment is a particularly important issue for service development in this area. For health-related interventions, these span a continuum from prevention, education and harm-reduction approaches, to brief interventions and, when warranted, referral to specialised drug treatment and social support services.

Developing a workable model to ensure appropriate referral trajectories is likely to pose an organisational challenge. Portugal has addressed this problem somewhat differently. The use of drugs is no longer subject to criminal sanctions, and those found in possession of drugs are directly referred for needs assessment to a special tribunal, known as a 'commission for dissuasion of drug abuse'. The tribunal can issue fines, but sanctioning is not its main objective. This scheme has now been operating for 8 years. Initial fears that this approach would lead to an increase in drug tourism or increased levels of use do not appear to be supported by the data available.

## **Peace With Poppies Opium in Afghanistan**

[Jacob Sullum](#) from the [November 2009](#) issue of [Reason.com](#)

"The farmers are not our enemy," the State Department's Richard Holbrooke declared in June, referring to Afghans who grow opium poppies. Since the U.S. government's official goal is to wipe out their livelihood, the farmers could be forgiven for misunderstanding. To reassure those who interpret ripping up their crops as a hostile act, Holbrooke said, "we're going to phase out eradication."

Acknowledging a truth that the Bush administration steadfastly refused to concede, Holbrooke, the special U.S. envoy to Afghanistan, told the Associated Press that "eradication is a waste of money." Although "it might destroy some acreage," he explained, "it didn't reduce the amount of money the Taliban got by one dollar." Indeed, "it just helped the Taliban" by driving farmers into the arms of the theocratic rebels.

Although Afghanistan's counternarcotics minister responded to Holbrooke's remarks by insisting that "our strategy's perfect," he may be the only person outside the Taliban who thinks so. Last year, according to the U.N. Office on Drugs and Crime (UNODC), Afghanistan produced 40 times as much opium as it did in 2001, the year of the U.S. invasion. It supplied 93 percent of the world's illicit opium, the export value of which was equivalent to one-third of the country's gross domestic product.

Instead of seeking to wipe out poppy cultivation, the Obama administration plans to focus its anti-drug activities in Afghanistan on laboratories and traffickers. Although that approach may alienate fewer farmers, it is not likely to have a noticeable impact on heroin consumption. The UNODC reports that between 1998 and 2007—the U.N.'s official "Decade Against Drug Abuse"—estimated illegal production of opium more than doubled worldwide, while the average U.S. retail price for a gram of heroin, adjusted for purity and inflation, fell from \$597 to \$364.