

NEWSLETTER

October, 2012

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Join us.

NEXT MEETING

Thursday 25 October, 7.30pm

Speaker at 8:00pm

St Ninian's Uniting Church hall,
cnr Mouat and Brigalow Sts, LYNEHAM

Guest Speaker: Dr Graham Buriski.

Graham will speak about and share with us the insights he has gained on illicit drug use over some years.

I encourage members to come along and hear what Graham has to share with us.

Meetings are followed by refreshments and time for a chat.



End of year BBQ and AGM

@McConnell's

Thursday 22 November 2012 6:30pm BBQ--8pm AGM

Our last meeting for 2012 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 reports.

Marion and Brian will supply meat and salads etc but could members please bring a sweet and drink.

Members and their family are most welcome.

For catering purposes please let Marion know if you are coming. If you don't know our address we will give it to you when you contact us. Looking forward to a pleasant evening together.

RSVP 6254 2961 or email mcconnell@ffdlr.org.au

Editorial

Families must speak out

Another year has come and gone for Remembrance Ceremonies for those who lose their lives to illicit drugs. There have been, at various times during the past year, ceremonies all over the world. In England, in Switzerland, in Austria, in Germany and here in Australia.

Here in the ACT on 8 October, over 100 people attended in cool but fine weather. The ceremony brought forward the grief for

many but the uplifting music by the 20 strong Strange Weather Choir and the fellowship of others who have suffered in the same way was a comfort.

Those who have an eagle-eye for correct grammar might have noticed that the word "lose" was used rather than "lost" because as you would argue these lives have been lost and it is in the past (ie past tense should be used). But no, the word lose was deliberately chosen because, unfortunately, it is ongoing. About 400 people in Australia lose their lives to illicit drugs each year. It happened last year and when the data are in we will find it happened this year and next year. That is, until there is a policy change.

In an effort to raise awareness of members of Federal Parliament we sent each member and senator an invitation to the ceremony. It was a sitting week and although their week did not start until the Tuesday we thought many would have travelled to Canberra over the weekend and would be able to attend. Mal Washer, of course attended, because he was a key speaker and he brought apologies from both the Prime Minister and the Leader of the Opposition. ACT's local senator, Gary Humphries, attended. Apologies were received from some (but not all) of the remaining members and senators.

From the ACT Legislative Assembly Meredyth Hunter, Shane Rattenbury, Amanda Bresnan and Mary Porter attended. Brendan Smith advised he had been caught up elsewhere and apologised. The attendance of these politicians was appreciated but we were disappointed that the Federal Parliament was so poorly represented given that this is at least one way in which our law makers could get an understanding of how laws and policies affect those who take illicit drugs, their families and friends.

Why is there so little interest by MPs? Those who die to drugs during any year do not do so all at the same time, unlike major tragedies like the Bali bombing or a plane crash. Thus attention of media and policy makers is less intense or non-existent. The loss, no matter the cause, is deeply felt in all cases. And it must be noted that with better policies based on evidence many of those deaths could be avoided.

The stigma felt by families, friends and loved ones for a death attributed to drugs means that they do not speak out. The courageous people like Elaine Bridge this year and all those who have spoken at our ceremony in previous years are exceptions.

How can we help more speak out on this? How can we influence our members of parliament so that they at least discuss the issues? How can we add the voices of families to those who have called on the United Nations and governments to find a better drug control regime?

To this end FFDLR, like many others, is turning to the social

media where the traditional media has had little influence and where community leaders are not listening. Shortly we will officially launch a page on our website where parents, family members and their friends from all over the world who have suffered greatly as a result of the prohibition drug laws and policies can sign a Declaration calling on their own governments and the Secretary-General of the United Nations to examine the present prohibition policy and to find a solution that causes the least possible harm.

See below the text of the letter that will accompany the launch. The website is currently available even though it has not been officially launched. I urge you to connect to the website and sign the Declaration.

Invitation to sign Declaration

Parents, family members and their friends have suffered greatly as a result of the prohibition drug laws and policies. They have borne the brunt of those policies. Family members have died or been murdered, been imprisoned, suffered poor health and denied essential treatment services as a direct or indirect result of those policies. Families as well as their using member have also felt the shame, stigma and marginalisation.

The Global Commission on Drug Policy, Avaaz.org, The Vienna Declaration, Australia21, South American leaders and many others have reported the failure of the prohibition policies and are calling for change.

This Declaration is a call for parents, family members and their friends all over the world to come together to insist on better laws and policies to deal with illicit drug issues based on research and evidence. Parents can make a powerful statement on this issue. The voices of parents trying to make a better world for their children need to be heard.

A declaration has been prepared for parents and family members and family oriented organisations to sign. It seeks to introduce better policies and laws that will make our children safer and will offer a helping hand rather than punish and marginalise.

It calls for governments of each country to re-align their drug laws and policies so that human rights are protected, problematic drug use is treated as a health and not a criminal issue, and that policies strengthen the capacity of families struggling with drug issues.

The Declaration also calls on the Secretary-General of the United Nations to evaluate existing treaties and to promote an international drug control regime that causes the least possible harm.

Please sign the Declaration and encourage other family members and friends to also sign it.

The Declaration can be found at <http://ffdlr.org.au/Declaration>.

When sufficient signatures have been collected it will be presented to governments and to the Secretary-General of the United Nations.

A Fresh Approach to Drugs: the final report of the UK Drug Policy Commission

UK Drug Policy Commission, October 2012

We all have an interest in knowing which policies work in tackling problems associated with drug use. Many

members of the public, and many politicians, believe that our drug policies are not working. But the debate about how we address the challenges of mind-altering drugs is polarised in a way not seen in most other policy areas.

The UK Drug Policy Commission was established to address these problems in a different way. Its aim has been to show how independent scrutiny of evidence can produce both better results and more effective use of resources in drug policy and practice.

Existing drug policies have struggled to limit the damage drug use can cause, and now new challenges are emerging. The rapid development of new drugs is changing drug markets too quickly for the traditional methods we use to control drugs to be effective. The economic crisis may be impacting on the nature of drug use and drug problems and, with fewer resources, the capacity of services to respond will be limited further. Added to that, the speed and scale at which services are being devolved to a local level may create increasing and unpredictable variations in the kind of services offered in different parts of the UK.

In this report, UKDPC proposes a radical rethink of how we structure our response to drug problems. It provides an analysis of the evidence for how policies and interventions could be improved, with recommendations for policymakers and practitioners to address the new and established challenges associated with drug use.

UKDPC aims to foster a fresh approach to drug policy: one in which evidence takes priority, creating light rather than heat in the debate on drugs, so that we can create an environment that works to reduce dependence on drugs, safeguards communities and delivers value for money.

Summary of recommendations

Having identified challenges, examined evidence, and suggested alternative ways of approaching drug policy, we conclude by making specific policy recommendations to address these challenges, based on our assessment of what evidence there is. It is crucial that the introduction of these policies is matched with significant efforts to monitor their impact and to extend the evidence base for what works. This will be valuable not only for demonstrating any successes, but is consistent with our belief that policy initiatives must be both evidence based and themselves be evaluated further; policymakers should also be transparent about what does not work.

Supporting responsible behaviour

Key opportunities for policy to support these include:

- Tackle structural problems that increase risk of drug problems
- Develop and evaluate early interventions to help families and communities build resilience to drug problems alongside other problems
- Provide evidence-based prevention programmes to support less risky choices
- Promote interventions which reduce the harms of drug use
- Involve local communities in law enforcement and assess its impacts

Stimulating and promoting recovery from drug dependence

Policy opportunities to support recovery include:

- Tackle stigma towards people with drug problems and their families

- Make the criminal justice system more focused on recovery
- Provide greater support to families of people with drug problems
- Continue to develop treatment systems, mutual aid networks and communities that support those recovering from drug dependence

The laws on drug production, supply and possession

Our conclusions about how the law might be changed are structured in a possible order in which they could be introduced. We are aware that some are shorter term and some longer term adjustments. Of most importance is careful monitoring and evaluation of the impacts of any reforms.

- Review the process for classifying controlled drugs
- Reduce sanctions for drug possession
- Address production and supply
- Review penalties for all drug offences
- Establish consistency in controls over all psychoactive drugs

Improving structures and processes for how we make and implement drug policy

- Introduce independent decision-making on drug harms
- Improve research and policy analysis
- Move the political lead for drug policy
- Create a cross-party political forum to progress dialogue about future policy
- Evaluate local approaches

Conclusion

We think that our work has not only contributed to the development of policies that will be more cost effective in addressing the UK's drug problems, but has also demonstrated the value of independent analysis of evidence.

Our research has identified a number of specific policy proposals which we are confident could be beneficially incorporated into practice. But of more value than the adoption of these specific policies would be a change in UK drug policy's relationship with evidence.

A commitment to the use of evidence to inform which policies are adopted, combined with rigorous trials of new and existing policies, and a willingness to act on the results of this research, would go a long way towards ensuring that the UK has an effective and good value response to the use of mind-altering drugs.

The full report can be found at: <http://www.ukdpc.org.uk/publication/a-fresh-approach/>

Key findings of the 2012 IDRS & EDRS reports - Oct 2012

Illicit Drug Reporting System: A survey of people who inject drugs

Authors: Jennifer Stafford and Lucy Burns, National Drug and Alcohol Research Centre, University of New South Wales

- Heroin remained the most commonly reported drug of choice for participants who inject drugs.
- Recent heroin use and frequency remained stable. The availability of heroin was 'very easy' and purity 'low'.

- Recent use of speed remained stable, while base decreased and ice/crystal increased. All forms were considered 'very easy' or 'easy' to obtain. Ice/crystal was reported as 'high' in purity, while base was 'high/medium' and speed was 'low/medium'
- NSW remained the only jurisdiction where sizeable numbers of participants were able to comment on cocaine. Recent use and frequency of cocaine in NSW was stable. Price remained stable. Availability was reported as 'easy' and purity as 'medium'.
- The cannabis market remained stable. Recent use remained common and frequency of use high, usually daily or near-daily. Hydroponic cannabis dominated the market.
- Extra-medical use and injection of pharmaceutical preparations continued to occur, with jurisdictional differences in patterns observed.
- Sharing of injecting equipment was common. Nearly half of the participants re-used their own needles in the last month.
- Nearly half of the national sample self-reported a mental health problem in the last six months. Mainly depression, followed by anxiety.
- Nearly half of the national sample reported driving in the last six months. Over three quarters drove after taking an illicit drug.
- Over one-third of the national sample reported a criminal activity in the last month, mainly drug dealing or property crime. Around one-third had been arrested in the last year.

Supplement form Kirby Institute - Drug injection trends among participants in the Australian Needle and Syringe Program Survey, 2007-2011

Authors: Brenda Currie, Jenny Iversen and Lisa Maher, Kirby Institute, University of New South Wales; on behalf of the Collaboration of Australian Needle and Syringe Programs.

- Heroin was the most commonly reported drug last injected in all years 2007 to 2011 and accounted for approximately one third of respondents in each of the survey years. Heroin was the most common drug last injected in the Australian Capital Territory, New South Wales and Victoria in all years 2007 to 2011.
- Methamphetamine was the second most commonly reported drug last injected in all years 2007 to 2011 with prevalence ranging from 24% to 30%. Methamphetamine was the most common drug last injected in Queensland in all years 2007 to 2011.
- Pharmaceutical opioids were the third most commonly reported class of drugs last injected in all of the past five years, with prevalence stable at between 14% and 16%. In the Northern Territory pharmaceutical opioids were the most commonly reported drug last injected during the period 2007 to 2011, significantly higher than any other jurisdiction.
- Over the period 2007 to 2011, the proportion of respondents reporting daily or more frequent injecting in the month prior to the survey remained stable at between 47% and 50%.
- HCV antibody prevalence declined significantly over the period, from 62% in 2007 to 53% in 2011, with the decline evident among both men (61% to 54%) and women (64%

to 52%).

- Between 2007 and 2011 HIV antibody prevalence remained low at 1.5% or less nationally and at 2.5% or less in all states and territories.

Ecstasy and Related Drugs Reporting System (EDRS):

Ecstasy returns and the Emerging class of drugs

Authors: Natasha Sindicich and Lucy Burns, National Drug and Alcohol Research Centre, The University of New South Wales

- 607 participants took part in the EDRS in 2012. Due to smaller states having an issue with recruitment NT and WA recruited with broader criteria to include regular (six separate occasions of use) psychostimulant use to recruit regular psychostimulant users (RPU) rather than the previous EDRS criteria of regular Ecstasy user (REU). Participants were primarily recruited through word-of-mouth and street press.
- Preference for ecstasy has begun to return (32% in 2012 versus 27% in 2011). Alcohol has overtaken cocaine as the third drug of choice.
- Whilst the most popular form of ecstasy consumed on a regular basis is pills (tablet form), there has been an increasing trend in the use of powder and the capsule form and more recently MDMA crystals or Ecstasy rock.
- Market characteristics saw ecstasy price as stable at a national price of \$25 per pill; there was an increase in the ease of availability in 2012 with less REU/RPU reporting ecstasy being 'difficult' to obtain. Purity perceptions have also increased with more reports of ecstasy being 'high'.
- Methamphetamine recent use remained stable, with increased reports of difficulty obtaining 'speed' powder.
- Cocaine recent use decreased, however perceived purity reports of cocaine being 'high' increased.
- Hallucinogen LSD has significantly decreased in use in 2012 (34% in 2012 vs. 46% in 2011) whilst ketamine and GHB remained stable.
- Cannabis and tobacco were two of the highest drugs recently used in the sample. The proportion of daily cannabis smokers increased (24% in 2012 vs. 18% in 2011).
- EPS continues to grow as a class of drug. Though small, a significant increase in synthetic cannabinoids was reported in 2012 (15% in 2012 vs. 6% in 2011).

The full IDRS and EDRS October bulletins plus the supplement from the Kirby Institute can be found at:

http://ndarc.med.unsw.edu.au/group/drug-trends#menu_item_8

Diversions courts fall victim to funding cuts

Tony Moore, The Brisbane Times, September 13, 2012

The Newman government will no longer fund the Murri, Special Circumstances and the Drug courts, Budget papers show. That is despite an outcry from community legal groups and the Queensland Law Society when the moves were first reported in July.

This measure means the government will save \$35.7 million over four years.

Attorney-General and Justice Minister Jarrod Bleijie said the decisions had not been easy, but were necessary to return Queensland to a stronger fiscal position.

"The only alternative is to put up government fees and charges which will hit the hip pocket of every Queenslanders and that is something we won't do," Mr Bleijie said.

The Drug Court was established in 2000 to grant offenders a suspension on their imprisonment and allow them to undergo an Intensive Drug Rehabilitation Order.

Mr Bleijie said only 400 offenders had graduated from the program in 12 years at a cost of \$400,000 each.

"The outcomes achieved by the court did not justify the resources or the funding it required to operate," he said.

"We will look at other drug-related diversionary programs which could be made available to magistrates to use at their discretion.

"While the Special Circumstances Court Diversion Program would no longer operate, magistrates would still be able to refer offenders to other services."

Mr Bleijie said the decision to stop funding the Murri Court program was based on evidence that suggested it was not working effectively.

"The Murri Court was not delivering consistent results and did not justify the amount being spent to keep it operating," he said.

"The program was not reducing imprisonment rates for indigenous offenders and has not stopped recidivism in the short term.

"This is because many offenders return to their communities where they are exposed to the same levels of unemployment and drug and alcohol use.

"While the program itself will no longer be funded by the state government, magistrates will retain the discretion to take into account the input of indigenous elders."

Mr Bleijie's advice differs from the outcomes shown in the Magistrates Court in the 2010-11 annual report.

The Magistrates Court of Queensland 2010-11 annual report revealed Queensland saved 588 years of prison time in 2010-11 by diverting 115 people from prison.

Queensland Law Society president John de Groot pointed out the savings of the Drug Court alone to taxpayers.

"In dollar terms, based on a conservative estimate of the cost of imprisonment of \$200 per day per person, the money saved for taxpayers and the government by the Drug Court is in excess of \$41 million," Dr de Groot said.

The latest Magistrates Court of Queensland annual report findings on the alternative courts included:

Drug Court : 588 years of "actual imprisonment time" saved by diverting 155 people;

Murri Court: A detailed study by the Australian Institute of Criminology (2008) found that the number of basic offences (property offences) dropped by 94 per cent. It also found "repeat offending" decreased by 17 per cent.

Special Circumstances Court: Of the 1,668 people referred to the diversion program, 944 were assessed as "eligible" ie 56 per cent were diverted from prison or traditional court sentences.