

Drug policy – a going-over down-under? Drugs policy in Australia.

The growing questioning and challenging of international drug policy gained momentum and credibility with the 2011 publication of the Report of the Global Commission on Drug Policy.¹ Documenting a global increase in opioid use by 35%, cocaine use by 27.7% and cannabis use by 8.5% in the previous 10 years, the Report concluded that prohibition “has failed comprehensively” and results in more harms than benefits. Existing Conventions and Treaties have coincided with falls in the street prices of illegal drugs; the demand-driven emergence of new drugs; high levels of government spending on law enforcement; high levels of drug-related imprisonment; corruption of police, judiciaries and governments; the power of organised crime and its increased use of violence; destabilisation of states. Think-tanks and campaigners consistently identify these results of the international prohibition-based approach to illegal drugs.

Accordingly, the Commission called for a re-opening of debate on drugs policy; and reconsideration of global and national responses to drugs. National and international bodies, including governments, were encouraged to review their current policies, taking the opportunity to formulate future policies informed by the evidence base of the effectiveness of alternative policy options now in place in several countries.

This Report was not the first time the efficacy of prevailing international policy, based on the 1961, 1971 and 1988 UN Treaties and Conventions, originating in the 1912 international treaties, has been questioned. The decisions taken by the Portuguese government in 2001, and their positive health and social effects for users and civil society, have been instrumental in showing both the possibility of alternatives to prohibition and the evidence of their impact.

A growing number of former – and, increasingly, current – politicians, judges, police officers and heads of state is acknowledging the failures and negative impacts of the current system; and calling for alternative approaches. Calls for changes in international drugs policies since the publication of the Commission’s report include the April 2012 Summit of the Americas in Cartagena, Colombia²; the November 2011 UK open letter³; the re-negotiation of membership

¹ Global Commission on Drug Policy: The war on drugs: June 2011

² Summit of the Americas: April 2012

³ The Times and The Guardian: London: 19 11 2011.

of the 1961 Single Convention by Bolivia permitting domestic use of the coca leaf; the November 2012 votes in the US states of Colorado and Washington to decriminalise the use of cannabis; the May 2013 report presented to the Organization of American States.⁴

The Australian context.

Australian Federal law sets the broad outlines of national policy and practice, with States and Territories having some law-making powers. Based on the recommendations of the 1977 Baume report,⁵ the current national drugs policy⁶ is built on three pillars, determined by the strategy formulated in 1987: supply reduction, demand reduction and harm reduction. The current strategy was endorsed by UNODC in 2008, in a report commenting that the country was “on the right track...drug use levels have dropped significantly.”⁷ In its 2012 report, UNODC recorded that between 2007-10 there had been increases in the use of cocaine, cannabis, methamphetamine, amphetamine, ecstasy and pharmaceuticals in Australia.⁸

Problems associated with heroin were minimal before 1953, when Australia abandoned its previous policy of medical prescription of heroin, seen by some as the start of Australian problems with heroin. In 1997 Premier John Howard dismissed the recommendation of the Ministerial Council of Drug Strategy to support a trial of medically prescribed heroin, presaging the prohibitionist, “tough on drugs” policy subsequently adopted by his government. Some saw this over-ruling of the government’s own expert panel as resulting from US pressure to maintain the prevailing international prohibition approach; and the role of the Murdoch press in shaping public opinion. Proposals for a trial national heroin prescription programme were again vetoed by the Howard government in August 2001.⁹ It should be added that 1997 also saw moves to reduce IDU HIV infection; divert users from the criminal justice system into treatment; provide federal funding for needle exchanges in the States permitting them. The two States¹⁰ which prioritised harm minimisation measures - including needle exchanges, consumption rooms, substitute prescription, de-penalisation of minor cannabis offences - have reported measurable

⁴ The Drug Problem in the Americas: Organization of American States General Secretariat: 2013.

⁵ Drug problems in Australia: an intoxicated society?: Canberra: 1977.

⁶ Ministerial Council on Drugs Strategy 2011: The National Drugs Strategy 2010 – 2015: a framework for action on alcohol, tobacco and other drugs: Ministerial Council on Drug Strategy, Canberra. The associated legislation is the Drugs Poisons and Controlled Substances Act 981. The current policy includes a Tobacco Strategy. <http://www.nationaldrugstrategy.gov.au/> Accessed June 11. 2013

⁷ Drug Policy and Results in Australia: UNODC: October 2008: Preface.

⁸ UNODC: World Drug Report 2012: Recent statistics and trend analysis of illicit drug markets: Page 23.

⁹ See for example Queensland Parliamentary Library: Minimising the harm of illicit drug use: 2002: Page 27.

¹⁰ Queensland and New South Wales.

benefits to individual and community health. Nationally, levels of HIV and hepatitis have been stabilised – the legacy of good practice and policy innovation in the 1980s. Political opposition to needle exchanges in prisons continues.

A 2004 report for the Ministerial Council on Drug Strategy, focusing on prevention and young people, identified tobacco as the leading cause of death amongst all Australians; alcohol causes more deaths amongst children and young people than all illegal drugs; parental use of alcohol, tobacco and illegal drugs has the major impact on young people. It recommended a combination of regulatory approaches and school-based programmes addressing a range of health and social problems; and that greater controls of alcohol be introduced.¹¹

A 2007 federal parliamentary committee reported that the Government's harm reduction policy was not effective enough.¹² It recommended a re-commitment to zero tolerance approaches to illicit drugs and re-evaluation of harm reduction. Federal, State and Territory governments should only fund treatment services with an abstinence aim, prioritising those that are more successful. The report was criticised by many organisations for lacking evidence, being ideologically driven and having the potential to do harm to Australia. Three of the ten committee members, including the Deputy Chair, submitted a dissenting report in which they pointed out that a report commissioned by the House of Representatives four years previously had not been acted on.¹³ The Bishop report and its recommendations were shelved with the election of the Rudd government in 2007.

Current debate in Australia.

A first challenge to existing policy and practice was contained in the 2012 report on recovery by the NGO Anex.¹⁴ The report argued for 'new recovery' practices to be considered to build on the harm reduction programmes "that have been so successful in Australia."¹⁵ The report cautioned against using this philosophy to drive policy, as seems to be happening in the UK, in favour of developing an integrated approach. It does not see recovery as a substitute or replacement for existing policy and practice. The report emphasises that new investment would be required, and warns of the current UK situation of disinvestment in services and "a diversion

¹¹ Prevention of Substance Use, Risk and Harm in Australia: Ministerial Council on Drug Strategy: 2004.

¹² The Winnable War on Drugs: Impact of Illicit Drug Use on Families: House of Representatives: Canberra: 2007 (the Bishop Report.)

¹³ Road to Recovery: Report of the inquiry into substance use in Australian communities: House of Representatives Standing Committee on Family and Community Affairs: Canberra: 2003

¹⁴ Australian drug policy: harm reduction and 'new recovery:' Anex: Melbourne: April 2012

¹⁵ Ibid.: Page 1.

of resources from the proven effectiveness of harm reduction principles and progress”¹⁶, approaches which should be retained. The report points to the lack of evidence of the effectiveness of recovery which has been identified in reviews of evidence by SAMSHA in the US in 2009 and the Scottish government in 2010. This report also makes the point that rhetoric and promise – and ideology - should not be allowed to take precedence over evidence. “Given the weak evidence-base, whole sale shift toward the new recovery programme as it is currently framed involves significant risks.”¹⁷

Australia21.

On November 21. 2012, the Sydney Morning Herald carried an opinion piece by Alex Wodak, president of the Australian Drug Law Reform Foundation, arguing for the legalisation and regulation of cannabis cultivation, distribution and use.¹⁸ This article reflected the activities of the NGO Australia21, which took up the challenge presented by the Global Commission Report. Australia21 said that the Report “...provides timely stimulus for a review of Australian policy on illicit drugs....The Board of Australia21 believes that it is for our democratically elected political leaders to prescribe the remedies for the harms caused by current approaches, but we stand ready to bring all of the resources and expertise at our disposal to work with governments to devise a better approach.”¹⁹ Australia21 organised two Roundtables on the implications of the Global Commission Report for Australia. The proceedings were published in two Reports.²⁰

The first Roundtable involved politicians and drug policy experts; student representatives; a former senior prosecutor; a former head of the Federal Police; a leading businessman; representatives of Families and Friends for Drug Law Reform. Parental views on Australian drug policy, the second prompt for this initiative, were included in the proceedings. The Roundtable Report emphasises the opportunity provided by the Global Commission Report, adding summaries of its own views on prohibition: “It is time to reopen the national debate about drug use, its regulation and control.”

¹⁶ Ibid.: Page 2.

¹⁷ Ibid.: Page 17.

¹⁸ <http://www.smh.com.au/opinion/society-and-culture/high-time-cannabis-was-legalised-so-lets-weed-out-the-problems-20121120-29ny5.html> Accessed November 21. 2012.

¹⁹ Alternatives to prohibition: illicit drugs: how we can stop killing and criminalising young Australians: Foreword: September 2012.

²⁰ The prohibition of illicit drugs is killing and criminalising our children – and we are all letting it happen: April 2012. - the report of the Roundtable held on January 31. 2012; Alternatives to prohibition: illicit drugs: how we can stop killing and criminalising young Australians: September 2012 - the report of the Roundtable held on July 6. 2012.

Roundtable participants agreed with the Global Commission Report's conclusion that national and international prohibition of the use of certain drugs "has failed comprehensively." These policies "have driven their [illicit drugs] production and consumption underground and have fastened the development of criminal industry that is corrupting civil society and governments and killing our children." Prohibition has also meant that governments have avoided "any responsibility to regulate and control the quality of substances that are in widespread use."²¹

The case for regulation was considered, hearing arguments for regulation and against prohibition by a former Federal Minister for Health in the 1975 - 83 Malcolm Fraser government; and a former Western Australian premier. The Roundtable agreed that "illicit drugs" should be controlled and regulated by governments in the same way as tobacco and alcohol. Australian progress in reducing the harms from tobacco ("a drug which kills half the people who use it.") was cited, and contrasted with the increase in social harms attributable to alcohol as its regulation and control have been relaxed. These two contrasting outcomes of regulation were used throughout the discussions as an example of one alternative to prohibition and law enforcement.

The Report summarises legal and prohibition responses, concluding that they "cannot possibly stop" the trade in illegal drugs. Pointing to the number of people criminalised and imprisoned for illegal drug use, it explains how this number represents only a small proportion of those using illegal drugs, indicating that law enforcement is ineffective and unjust. Following this analysis of existing policy and effects, the Roundtable called for a change in strategy, with the qualification that policy changes must ensure that the current situation will be improved, not worsened. Illicit drugs are widely available in Australia, on the street and in prisons, and there is a "flourishing" culture of illicit drug use amongst young people. Policy changes should be informed by international examples and evidence.²²

The political rhetoric around illegal drugs was commented on: "sending the right/wrong message," "soft on drugs, hard on drugs," "the war on drugs," "zero tolerance". Such rhetoric reinforces stigmatisation and marginalisation of illegal drug users, and contrasts with the discourse around alcohol and tobacco, in spite of their health, social and economic impacts,

²¹ Quotations in this and the previous paragraph: The prohibition of illicit drugs is killing and criminalising our children – and we are all letting it happen: April 2012. - the report of the Roundtable held on January 31. 2012: Page 4.

²² Quotations in this and the previous paragraph: Op. Cit.: Page 5.

costs and damage: “But neither drug is prohibited. Instead, they are controlled not by organised crime, but by governments.”²³

There was consensus on the need for national debate about the prohibition of drug use – intentions, effectiveness, alternatives. Participants referred to the “unacceptably high numbers of drug deaths among young Australians” which “cannot be allowed to continue.”²⁴ A bi-partisan approach to reviewing drug policy and identifying alternatives was seen as highly desirable. The success of this approach in other countries and regions should be seen as an encouragement to doing the same in Australia. While recognising the difficulty for politicians of endorsing a new approach, political attitudes were summarised critically: “In spite of the increasing evidence that current policies are not achieving their objectives, most policy making bodies at the national and international level have tended to avoid open scrutiny or debate on alternatives.”²⁵

Discussion topics had been designed to look at the background to current national drug policy: intentions; effects; the international context of challenge or review of current policy approaches; arguments for and against current Australian policy approaches; alternatives to prohibition; drug related harms in Australia. These topics emerged from pre-Roundtable responses to a background paper circulated to all participants.

Further discussion prompts included statements in support of the medical use of cannabis and medically prescribed heroin; a call for a re-think of the criminalisation approach and its consequences in the light of the extensive use of illegal drugs by young people; and in-puts on the effects of the legalisation or regulation of all drugs along the Portuguese model. The medical uses of heroin are, internationally, unavailable to many potential beneficiaries because of governments’ interpretations of international treaties “even though the international treaties have provisions permitting medical and scientific use of the otherwise proscribed drugs.”²⁶

Roundtable One findings.

The Global Commission Report was discussed at length, high-lighting its recommendations that future drug policies should be based on four principles: evidence-based, with harm-reduction aims; based on public health and human rights principles; shared global responsibility for policy

²³ Ibid: Page 6.

²⁴ Ibid: Page 6.

²⁵ Ibid: Page 7.

²⁶ Ibid: Page 5.

development and implementation; policy reviews to be comprehensive and inclusive of a range of civic voices. Policy changes should aim to reduce or end stigmatisation and marginalisation.

Additional Commission recommendations identified, discussed and accepted included: open debate on drug policies; challenging myths and misconceptions; improved monitoring and data collection to assess policies' impact and effectiveness; re-direction of law enforcement approaches to violent organised crime and drug trafficking; experimentation by governments with legal regulation of drugs designed to undermine the power of organised crime; investment in evidence-based prevention; making available a wide range of care and treatment options, including for prisoners; the UN to provide an evidence-based global lead; the need to act urgently – the war on drugs has failed and policies need to change now.

Having explored the Global Commission's work and arguments, the Roundtable looked at the impact of the current Australian National Strategy, concluding that:

- strategy and resources centre on law enforcement
- cost/benefit returns favour expenditure on health and social interventions
- there is a shortage of treatment places in many parts of Australia
- current school-based prevention programmes are largely ineffective in reducing demand
- tobacco and alcohol do not receive proportionate attention or funding
- levels of drug use and availability remain high: there is “a flourishing drug culture dominated by the use of cannabis, methamphetamine and ecstasy, along with emerging new designer drugs, among young people.”²⁷

The Roundtable supported continuing supply reduction activities, but not as the sole or principal response to illegal drug use. Levels of seizures should not be confused with supply reduction: 'high' levels of seizures have not reduced availability. The reduction in heroin supply around 2000 - the 'heroin drought' - is attributable to reduced supply in producer countries, not Australian law enforcement measures.

Drug Use: origins and alternatives.

A high number of dependent drug and alcohol users, female and male, report childhood physical and/or sexual abuse by members of their families. Attitudes which close down debate mean

²⁷ Ibid: Page18.

ignoring these origins and consolidating the criminalisation of young people. The persistence (stubbornness?) of the current approach was seen as based on moralising rather than scientific arguments. The fall from political favour of harm-reduction measures such as needle exchanges and substitute prescription should be re-examined in the context of other countries' experience, where they have been implemented and evaluated with positive results. Political opposition to alternative approaches uses the slogans "sending the wrong message" and "it will increase use and availability." Such rhetoric oversimplifies and polarises debate, marginalising and demonising users and their life-styles and cultures, inhibiting more open debate and take-up of services, arguably creating the harms it claims to combat. More positive demand reduction results have resulted from prevention and treatment services.

Michael Moore argued that governments need to be made to see the effects of prohibition and to begin to look at alternatives. "It is the government that is the problem."²⁸ The current "winners" from Australian drug policy are law-enforcement agencies and organised crime, the losers law-abiding citizens and tax-payers. Reference was made to the existence in the USA of a "drug-law enforcement complex" industry with a vested interest in maintaining prohibition, likened to former US President Eisenhower's identification of a "military industrial complex" in the 1950s.

Following its deliberations, the Roundtable called for a re-thinking of Australian drug policy, with government accepting responsibility for a considered, not a "carry on as usual," response. It envisaged a potential role for Australia in "challenging the current operation of the treaties and conventions, which have imposed a blanket of drug prohibition on the global community."²⁹ No specific proposals for policy changes were made, Roundtable focussing on the need for debate and reform using evidence of policy and practice elsewhere to inform Australian policy change. Discussion concluded: "By maintaining prohibition and suppressing or avoiding debate about its costs and benefits, it can be argued justifiably that our governments and other community leaders are standing idly by while our children are killed and criminalised."³⁰ The back cover of

²⁸ Op. Cit.: Page 20: Michael Moore is CEO Public Health Association of Australia, former Minister of Health, Australian Capital Territories. Visiting Copenhagen in early 2012 I was introduced to the locally treasured statement of Norwegian criminologist Nils Christie: "The most dangerous use of drugs is the political..." BS

²⁹ Ibid: Page 21.

³⁰ Ibid: Page 22.

the Report carries the statement: “The key message is that we have 40 years of experience of a law and order approach to drugs and it has failed.”³¹

The Roundtable made four final recommendations:

1. a national debate on prohibition be re-opened.
2. an Expert Advisory Group be established to follow up the January Roundtable and collate relevant international evidence. This group should seek meetings with economists and policy advisers to discuss the findings of the Roundtable report; with national and government committees, councils and advisory groups; with Federal ministers; with representatives of the media.
3. further roundtable discussion be initiated amongst key stakeholder groups.
4. Australia21 “undertake a further Roundtable on these matters early in 2013.”

Roundtable Two.

The second Roundtable took place on July 6, 2012.³² It summarised the proceedings of the first, highlighting the failure of international prohibition approaches, originating in US President Nixon’s 1971 “war on drugs,” which underpins current international treaties and conventions; the inadequacy of current Australian policies; that the “long and complicated” journey of a drug user “is made more difficult by the consequences of prohibitionist and punitive policies....and the stigma attached to drug use”; that the stigmatising and negative attitudes often expressed by politicians, some religious groups, and some media commentators, using over-simplified language and rhetoric, do not change drug-using behaviour or inform public debate, have a moralising basis and are not informed by evidence-based knowledge or practice;³³ and that the publication of the Global Commission and the Australia21 Reports has acted as a prompt for Australian debate on drug policy, with current policies being “rigorously debated in the media.”

The regulation of currently illegal drugs was confirmed as one approach to be considered. “If we are to reduce the pernicious effects of black market drugs on the Australian community, control of the drug supply system must ultimately be diverted from criminal to civil and government

³¹ Michael Woolridge: Former Health Minister, John Howard Federal Government 1996 - 2007.

³² Its proceedings were published as: *Alternatives to prohibition: illicit drugs: how we can stop killing and criminalising young Australians*: September 2012.

³³ One participant, journalist Lisa Pryor, described comment of this nature as “weak” and “lazy.” She suggested replacing the term “tough on drugs” with “smart on drugs” to support policy reform based on international evidence. *Alternatives to prohibition*: Page 15.

authorities. We must evolve a new approach that acknowledges the powerful economic forces of the drug market, but which is acceptable to the community, and is achievable politically.” This conclusion recognises that “drugs are a market with suppliers and consumers. As long as the demand is there, suppliers will emerge. If drugs cannot be obtained by legal means, then illegal sources will emerge.” The arguments for and against prohibition were re-examined. The case for characterised current international policy as “harm reduction” with no resultant demand reduction; stated the need to retain an international consensus on illicit drugs; and warned against Australia being a “lone voice.” Each proposition is increasingly untrue, as is the summarising claim that current prohibition policies “work” and “succeed.” The argument against prohibition included the statement (by the father of a 23 year old man who died from a heroin overdose) that “the sole aim of drug law reform should be to reduce the number of deaths from drug and alcohol use and the damage caused by disease, crime and other drug harm.”³⁴ The Roundtable also concluded that a drug free society is unachievable.

The Roundtable examined the emerging evidence of alternative approaches to drug policy. A background paper presented case studies of four European countries – the Netherlands, Portugal, Sweden and Switzerland – whose approaches might be relevant to and adopted by Australia.³⁵ This paper included evaluative data about the benefits and disadvantages of these nations’ experiences. The difficulty of obtaining reliable and comparable data on drug use and its impact was acknowledged, emphasising the importance of data collection and methodology to ensure that domestic policy is evaluated and assessed; and can contribute to international monitoring and evaluation, which in turn can influence international policies and treaties. Such data collection can also help to establish bi-partisan agreement - and understanding? - of policies and the international evidence base. The Australian response to HIV in the 1980s could also serve as a model for future Australian policy.

The experiences of the four European countries were examined, including teleconferences with experts in Portugal, Sweden and Switzerland who had been involved in implementing and evaluating drug policies in their own countries. The examples of the four countries demonstrate

³⁴ Quotations in this and the previous paragraph: Alternatives to prohibition.: Pages 8, 12, 13.

³⁵ Hughes C & Wodak A: A background paper for an Australia21 Roundtable, Melbourne, 6th July 2012, addressing the question What can Australia learn from different approaches to drugs in Europe, especially The Netherlands, Portugal, Sweden and Switzerland : 2012.

that it is possible to adopt effective, non-prohibitionist policies which are consistent with international drug conventions and treaties; and which show community benefits.

Portugal, The Netherlands and Switzerland rely on health and social measures rather than law enforcement responses and have experienced a reduction in drug overdose deaths, crime and HIV infection Sweden's "more punitive" approach has been accompanied by lower overall rates of drug use, high levels of drug related deaths and an apparent increase in problem drug use in comparison with other European countries. The tele-conference with Dr. Börje Olsson ³⁶ told the Roundtable that Swedish drug policy is in a transition period, from aiming to achieve a drug-free society to adopting more evidence-based policy and practice - a more "European" approach. Hughes and Wodak conclude that more liberal approaches "do not necessarily lead to increased consumption."³⁷

Experience in Europe: conclusions, lessons, recommendations:

The application and implications of European experience for Australia are extensive. There has been a de facto decriminalisation of cannabis in The Netherlands, although a contradiction remains around the "legalised" use of cannabis in coffee shops when supply remains in illegal hands: the state can't influence or regulate cannabis type grown, imported or used. ³⁸ The Netherlands success has been in creating a separation of markets.

The role of heroin assisted treatment in the repertoire of harm reduction responses has been replicated in six other countries, including Canada. It has contributed to reductions in drug related crime, drug related deaths, HIV transmission. There is, though, low uptake by long-term heroin users, as observed in Denmark and the UK. Its re-introduction in Australia would need discussion and agreement between federal and state governments to ensure consistency in laws, regulation and police responses. The Australian relationship between criminal sanctions and drug use remains unclear. The impact of harm reduction has been an improvement in the health and social situations of users and improved public awareness of effective responses to drug use, although at present (June 2013) there is only one consumption room. ³⁹ A prison needle

³⁶ Director of the Centre for Social Research on Drugs and Alcohol, Stockholm University.

³⁷ Alternatives to prohibition: illicit drugs: how we can stop killing and criminalising young Australians: September 2012: Page 6

³⁸ Proposals prepared by Copenhagen City Council in January 2012 to regulate the sale of cannabis recognised this and extend state involvement to the cultivation and distribution of cannabis. These remain proposals.

³⁹ In the Kings Cross district of Sydney.

exchange programme is planned in the Australian Capital Territory from 2013 - the first in the English-speaking world.

The changes in The Netherlands, in place for almost four decades, have been managed within the constraints of the international conventions. Other European reforms have started to break with the international prohibition approach- the consensus is crumbling. Till now reforms have been “tolerated grudgingly” by the International Narcotics Control Board. Reforms call, at the least, for a review of the current international approach, and policy “modification.” Lessons from Europe provide the opportunity for Australian national drug policy to be reviewed and clarified.

Robin Room wrote “Prospects for change in the international treaties” for the second Roundtable Report. He pointed out that alcohol has always been excluded from the international treaties; and that prohibition of illegal drugs has made it impossible to experiment with regulated markets. He saw the possibilities for change as being, firstly, political responses to the violence and social disruption in Latin America caused by the war on drugs, likely to become a regional approach, and supported by serving politicians and heads of states; and secondly, the likelihood of individual US states adopting regulated cannabis markets. He sees amendments to existing treaties as unlikely, thinking it more likely that individual nations will withdraw from the treaties and either rejoin with reservations (cf. Bolivia) allowing for national reform and nation-specific clauses; or for groups of nations to jointly create and sign-up to new treaties, aiming to supersede the current regime. This possibility is the most likely route to revision of existing treaties and approaches. Australia could set a regional lead, in particular by resisting the use by neighbouring states of trade treaties to weaken regulation of alcohol. ⁴⁰

Roundtable emphasised that “...the primary and overarching goal of illicit drug policy must be to reduce drug related harm.” Criminalisation can act against and add to the difficulties of illegal drug users but “...decriminalisation isn’t a panacea. The huge social and personal harms from the abuse of a legal substance – alcohol – are manifest and persistent in Australia.” ⁴¹ Consequently, the July Roundtable recommended that drugs policy be referred to the Australian Productivity

⁴⁰ Professor Robin Room: Sociologist: President of the Alcohol and Other Drugs Council of Australia: WHO Adviser since 1975 and editor in chief of Drug and Alcohol Review: Alternatives to prohibition: Page 18.

⁴¹ Stephen Parnis, President, Australian Medical Association: (Victoria) Alternatives to prohibition: Page 29.

Commission. ⁴² This means examining successful policy and practice implementation in other countries; and implementing humane practices: “we must learn to live in a world where some young people use drugs.....people who use drugs.....are always Australian citizens with rights and responsibilities..... Drug users, their families and communities would be better off with policies that had been shown to be effective rather than policies based on demonization of a vulnerable minority.” ⁴³

Professor David Penington called for a new approach to cannabis and ecstasy, including decriminalisation of their possession and use for those over 16 willing to be recorded on a national register. ⁴⁴ This would give access to and permission to purchase from an approved government supplier, a system which would also cover the use of cannabis for medical purposes. Suppliers (pharmacists?) would give advice to purchasers and act as referrers to counselling or treatment. His proposals refer to other jurisdictions considering similar action. The use of currently illicit substances should be treated in the same way as other pharmaceutically active substances.

Roundtable Conclusions.

Although neither Roundtable made specific proposals for a new national drugs policy, they did make recommendations about policy approaches and emphases. Reinforcing others’ views, they called for the provision of harm reduction services in prisons, including needle exchange programmes; a review of resource allocation, efficacy, cost-benefit and value for money, of current practice and alternatives; and a call for a National Drug Summit in 2013. The Summit should debate goals for Australia’s future drug policy which would include:

- enhancing community understanding of the risks and harms arising from the use of psychoactive drugs
- minimising deaths, disease, crime and corruption arising from drug use and drug policy
- increasing the likelihood that drug users can lead “a normal and useful life as full and active members of the community” ⁴⁵
- ensuring that drug policies do not create more harm than they seek to prevent

⁴² A body reporting to government on the effectiveness of its policies and able to recommend changes.

⁴³ Alternatives to prohibition: Page 31.

⁴⁴ Professor David Penington AC: Alternatives to prohibition: Page 39.

⁴⁵ Alternatives to prohibition: Page 34.

- ensuring that a range of health and social interventions is available for drug users, including evidence based drug treatment, and that the quality of such interventions is comparable with other health care practice
- adopting education and prevention programmes for young people which have realistic expectations – they can reduce, but not prevent, drug use, and have more impact on reducing drug harms

The Roundtable defined continuing roles for Australia21: distribution of its Reports as widely as possible; consultation with others on planning for the National Summit; working with the Parliamentary Group on Drug Law Reform to further discussion and debate; meeting the chair and executive officer of the National Council on Drugs to discuss the Reports' recommendations; arranging a meeting of experts in international law to determine the extent of flexibility within Australia's legal obligations under current drug treaties; maximising discussion and debate amongst all relevant groups, bodies and organisations, including the wider community. These recommendations stem from the principal Roundtable conclusions:

- prohibition has failed
- a mix of alternative strategies is working elsewhere
- there are growing calls for debate and reform of the drug laws in Australia
- "Australia should now join the international community in a critical review of the international treaties. These treaties seem to have outlived their usefulness."⁴⁶
- illegal drug use and its effects and implications needs to be managed without the pretence that a "war on drugs" can or will "solve" the problem.

Next (political) steps:

The second Australia21 report was launched on September 9, 2012 by Dr. Richard Horton, Editor-in-Chief of The Lancet. On September 12, the Senate⁴⁷ agreed to a motion introduced by Green Party Senator Richard Di Natale, Victoria State, which "notes" the Report and its

⁴⁶ Alternatives to prohibition: illicit drugs: how we can stop killing and criminalising young Australians: September 2012: Page 45

⁴⁷ The Senate is one of two chambers of the Australian Federal Parliament. It shares law-making powers with the House of Representatives.

evidence-based emphasis, and “appreciates” the role of Australia21 in contributing to extending public knowledge of the issue. The Hansard record stated: “Question agreed to.”⁴⁸

Australia21 noted that no major party opposed the motion and that “we have on the record a Senate motion supporting evidence based approaches to harm minimisation, and an acknowledgement that we are making a constructive contribution to public understanding of the issue.”⁴⁹

At the time of writing (June 2013) no date has been set for a National Drugs Summit. (Previous Drugs Summits were held in 2001 and 2006.) Pragmatically, this may not happen till the end of the year or even in 2014 – 2013 is an election year in Australia. The lack of response to the 2003 Road to Recovery report and the subsequent, pro-prohibition Bishop Report in 2007, indicate that debate will be prolonged and contested. The debate will be enlivened by the recent concerns and reports regarding drugs in sport. However, the first political steps towards Australian drug policy reform have been taken and, as experience in other countries has shown, much will now depend on the political flavour and commitment of a new government.

Blaine Stothard.

June 2013.

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⁴⁸ Commonwealth of Australia: Parliamentary Debates: Motions: Illicit Drugs: Wednesday 12 September 2012 <http://parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;db=CHAMBER;id=chamber%2Fhansards%2F502bfd4-d8d6-47d0-9876-bc76488b1b81%2F0114;query=id%3A%22chamber%2Fhansards%2F502bfd4-d8d6-47d0-9876-bc76488b1b81%2F0000%22>

⁴⁹ Australia21 web-site: http://www.australia21.org.au/our_research/illicit_drugs.html Accessed June 18 2013.