

Drug Advisory Council of Australia Inc.

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The war on drugs is not lost (as some would tell us); in fact it has hardly begun. Australia should not surrender by adopting defeatist policies such as 'supervised' injecting rooms.

The proposal for safe injecting rooms is impractical. Recently in Spain the proposal was rejected because the total costs would be astronomical. This was the opinion also expressed in a commentary in the British Medical Journal by Farrell and Wayne Hall. For example, to provide injection facilities for the number of intravenous drug users in Footscray Victoria would require many safe injecting rooms, not one. (50,000 needles/syringes were given out in the month of March 2000, by one needle exchange in Footscray.) The total cost for the whole of the state would cripple the health and welfare budget and virtually eliminate other well performed treatment centres which have much better outcomes rather than expanding the population of "maintained drug users." Moreover every intravenous injection is potentially lethal.

Statistics show that the majority of drug overdoses occur at home, not on the street. The overdoses most frequently occur among older multiple drug users. The injecting rooms will not save young lives, as those under 18 years of age are not supposed to be admitted. This facility will encourage addiction rather than rehabilitation and give a wrong message of condoned drug use.

The injecting facility (Poliklinik Zock12 in Zurich) shows no evidence of clients ceasing heroin use.

Current 'harm minimisation' drug policies have facilitated and exacerbated the drug epidemic. The needle exchange policy has inadvertently aided and abetted the increase in drug use by its limitless provision of syringes and needles in vulnerable areas, thereby contributing to the spread of Hep C. (Turning Point/Alcohol and Drug Centre reported at the National Drug Trends Conference, Sydney 2000 "Almost 1 in 5 users (of 2000 people surveyed) admitted to borrowing a needle from someone else in the past month, and 35% had given their used syringe to someone else to use."). I had a friend (now dead) who had studied some years of law, then completed a medical degree who became Hep C + through IV drug use ie. it is impossible to 'use' "safely".

Thousands of inappropriately discarded syringes/needles are an unfortunate legacy of the needle exchange facilities which have had a very low rate of needle return.

We definitely do not need

(i) how to use drugs "safely" education in schools

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(ii) needle exchanges

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(iii) safe injecting rooms

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(iv) heroin trials

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(v) decriminalization of drugs

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(vi) increased drug use/addiction in the community

We do need

(i) substantial abstinence education for schools, and community

(ii) increased drug distribution surveillance

(iii) proper enforcement of the law

(iv) a genuine diversion programme in the courts, and

(v) compulsory immediately available detox treatment and rehabilitation to turn back the clock (Naltrexone detoxification and rehab programmes, should be explored, as well as other treatment options.)

With kind regards

Yours faithfully

Isobel Gawler