

Secretary
Standing committee on Family & Human Services
Parliament of Australia
Canberra

Inquiry into the impact of illicit drug use on families

I make this submission to the enquiry with the hope that it contributes to greater understanding of the problem and may lead to some effective solutions.

In making the submission I request that the family not be identified.

Introduction

I believe this is a complex matter with the present enforcement activities not being very effective.

Many millions of dollars have been put into road safety campaigns and when I consider the long term effect of illicit drug use I believe the effect will be worse than the road toll. For this reason I would advocate moving resources from road safety education to illicit drug education, using examples from the 20 year old cohort.

I believe there needs to be greater understanding of the interaction between intelligence, the education system, the expectations of youth and drug use. This may include the role of short attention spans and the resulting need for ongoing mental stimulation.

Background family situation

- My wife and I have two sons, one of whom has used illicit drugs – probably over a period of three years. He claims that he is no longer using them, but one can not be sure. He has also taken alcohol in binge drinking sessions a number of times.
- Educational testing several years ago claimed that his intelligence put him in the top 10% academically.
- While at school he claimed he was not challenged and did not find the lessons interesting. Most of those in his drug scene are those with above average intelligence.
- During his drug use he was moody and aggressive which put considerable strain on family relations.
- While he was using he would lie when asked questions, on drug use and other topics, and that has destroyed the trust that used to exist between him and the rest of the family.
- He claims that he only used cannabis and methamphetamine (ICE), and there is no way he would use other drugs.
- He dropped out of university and only worked part time at a low skilled job. Some of the people at this work place were also active in the drug scene, and the hours he worked were a good cover for some of his activities.

- He still is evasive over many issues as he still sees many of those with whom he used to consume drugs.
- When asked why he took drugs he would argue that the consumption of alcohol was worse for the human body and that was a legal drug. He would also quote research evidence from the internet showing no long term harm from drug use. He would not accept that more recent research had overturned the results he was quoting.
- I have never taken drugs or alcohol, while the other members of the family do have a social drink.
- He now claims to have medically diagnosed depression and drug induced psychosis. He also claims he has only a few years left of a 'normal life' and then his mental problems will impair his activities.
- He continues to live at home and has now returned to university studies.
- His behaviour put pressure on the family when asked what he was doing. It is very denigratory to say my son is on drugs.
- His behaviour also challenges the belief that you have done your best to bring up a child to fit into society and be a normal citizen.
- Drug consumption challenges the fundamental assumptions that one brings to being a parent. If you set a good example, why does your sibling not follow your example. Why does the sibling accept the advice of the peer group instead of the parent. Why are the life experiences of the parents so easily discarded for the beliefs of youth.

Other aspects

- Much of the information to support his belief structure came from the internet. Current recent research results and government reports need to have the metadata to show on the first page of results when a person does a search for information on a particular drug.
- Peer group beliefs appear to be stronger than parents or other authorities. I have been told that I just do not understand the high that comes from the drug.
- He states that a seller only needs capital of \$3000 to have a monthly turnover of \$250,000.
- To reduce the manufacture of 'pills' the availability of the active ingredient has to be controlled. It is suggested that it is easy to obtain industrial quantities of ingredients, and many are commonly used chemicals, so the critical or active ingredient needs to be controlled.
- It is obvious that consumers have enough ready cash to pay for their habit and restricting availability and increasing the price may contribute to a reduction in use.
- Current policing approaches appear to be marginally effective and not reducing either supply or desire to consume.
- Both sons are very clear in their minds that they do not drink and drive and appear to measure their alcohol intake to prevent driving with an alcohol content above the limit. We need to achieve a similar result with illicit drugs.
- If the desire for drugs and the availability was less then fewer families would have to go through the trauma of dealing with the challenges to their authority and the social stigma that results.

- At one time I contacted the local police and wanted to take some action. They told me over the phone that it would be at least three weeks before they would look at my information. I knew it would be valueless by then so gave up.
- When asked what would happen if sellers did not sell, he says others would quickly fill the gap – there is a demand for illicit drugs.
- He argues that it is easy to recognise police officers because they are not as young as the drug takers and they will never partake of drugs – so will never completely fit the scene.
- He says that all those who take ‘pills’ know the risks and are willing to accept the consequences.
- He says that takers prefer methamphetamine because the effect lasts longer than heroin.
- He claims that certain clubs have an arrangement between management and drug sellers. It would appear to be a symbiotic arrangement, preventing turf wars and keeping patrons coming to the clubs.

Recommendations

- Run a campaign to let the community know that families with children who are users are not failures.
- Run a campaign to advise 15 to 20 year olds the risks of mental damage resulting from illicit drug use. People used in the campaign need to be about 20 years old and show the effects of illicit drug use.
- Run a campaign to tell the community it is OK to be bored. We can not always be stimulated to the maximum and quiet periods are part of life.
- Encourage and support research that leads to greater understanding of the interaction between intelligence, the education system, the expectations of youth and drug use. This may include the role of short attention spans and the resulting need for ongoing mental stimulation.

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