Irwin, I	Debbie (REPS)	BECEIVED House of Petresentatives House of Petresentatives
From:	COLLIS PARRETT	Family & Community
Sent:	Sunday, 21 July 2002 10:05	PM 72 Committee 68
To:	fca.reps@aph.gov.au	WY ZI II OL
Subject: Submission on Substance Abuse		

I apologise for the lateness of this submission and request that it be accepted for consideration.

PREAMBLE

Those who support the removal of criminal sanctions for the personal use of dangerous mind-altering illegal drugs not infrequently support Australia's illicit drug strategy of harm minimisation, suggesting that the 'state' should be able to 'control' supply and demand of legalised drugs. This has been tried in The Netherlands with cannabis over the past 15 yrs or so. However it has not worked. Numbers of licenced cannabis cafes have fallen (and continue to fall) to 800 from a high of over 1200. Numbers of illegal outlets have increased steadily to almost 1500. Although not originally planned, drug gangs are now supplying cannabis to both legal and illegal outlets. People may grow a certain number of plants, but most of the yields are purchased by the drug gangs - so that they have become richer and more powerful and now produce tens of millions of ecstacy tablets and export them to Australia and elsewhere. Several roads leading out of Sth Australia where there is a more permissive attitude to cannabis use are know as 'cannabis highways' to other States. The Netherlands Government is now tightening all illegal drug laws including those relating to cannabis sale and use.

I submit that cannabis is to the drug scene what the famous 'broken window' was (and is) to lawlessness in New York. A permissive or indifferent attitude to small crime symbolised by the broken window led inevitably to greater small and larger crimes. Addressing the smaller crimes yielded by now well know results, with far less crime and safer neighbourhoods eg Wahington Heights. The argument put is that by being lenient to cannabis users, police can turn their attention to 'more important' drug crimes. One might as well argue to remove police from car-theft duties and concentrate on home invasions. Obviously car-theft rates would rocket out of control. To adopt a permissive or indifferent attitude to cannabis will allow the use and dealing of it to escalate to totally unacceptable levels with concomitant health problems.

Many drug law reformers argue cannabis and other drug use is a medical problem. This is partly true. But to turn a `blind eye' to dangerous drugs in our streets like cannabis (and there is very weighty medical evidence that it is) is not a way to treat the problem medically. Those wanting liberalisation of illegal drug laws can't have it both ways. Either illegal drugs are to be treated as a medical problem or not, and the matter should not be `greyed over' by arguing that its possible to use them `recreationally'. That was the argument for tobacco smoking - but it kills about 18,500 Australians annually. Alcohol kills about 3,500 annually and that too is used recreationally. Those two drugs became SOCIALLY ACCEPTABLE before their mortality and morbidity potential was known. Only irrational thinking at the highest level would suggest we should now legalise or decrimimalise more killer drugs (when we do know their killing ability) to join the ranks of our two biggest killers - just so the ideology of ` I have a right to use illegal drugs for personal use' can be satisfied. The case based on reason and logic is just the opposite, ie, the rights of the majority of society or the common good must be held paramount, and prevail.

As a stark example of the the permissive and incongruous approach to cannabis use, in the A.C.T. a person can be fined up to \$5,000 (rightly so) for dumping goods other than clothing/shoes next to a Smith Family collection stand in a street, but someone caught smoking cannabis is more often than not cautioned and/or let off with a small fine. I suspect it is similar in a number of the States.

AUSTRALIA AND SWEDEN :

Probably the shortest and best way to illuminate the failure of Australia's illicit drug strategy is to make comparison with Sweden - which has about half our population.

Australia's strategy - harm minimisation/harm reduction

Sweden's strategy - has a drug-free society as its ideal/aim

PLEASE NOTE :

Many people react initially against the concept of Sweden's strategy saying it is unrealistic, and probable unachievable.

However, when asked if they strongly support the UN ideal of delivering human rights as quickly as possible to all the peoples of the world they immediately answer `YES', and they hold to this answer even when its brought to their notice that human rights are breached daily in many countries around the world. They then quickly realise there is no difference in holding the human rights ideal permanently, even though it is breached daily, and holding to an ideal of a drug-free society even though it is breached daily when people take illegal drugs.

Sweden has 6,000 heroin addicts, Australia has 75,000. The number of heroin addicts in Australia has doubled in the past decade.

Sweden has a TOTAL of approx. 26,000 heavy abusers (equivalent to Australia's `addicts'). Sweden's definition of a heavy abuser is somewhat wider than Australia's because it includes daily or near daily users and any who have injected in the past month, plus dependent cannabis users. Australia is estimated to have over 200,000 cannabis users of whom about 25,000 are dependent. TOTAL numbers of illegal drug addicts and dependent users of cannabis in Australia is approximately 125,000.

QUESTION

On the above figures, Sweden, with about half our population, has almost 5 times fewer numbers of `total addicts' and 12 times fewer numbers of heroin addicts. If Sweden had the same ratios in its favour in regard to, in the first instance cancer cases, and in the second instance cardiac cases, would we not want to adopt their cancer and cardiac strategies and treatments. Then why not for illegal drugs ?

Numbers of registered methadone users in Australia have risen from approx. 500 in 1985 when the harm minimisation strategy was introduced to approx. 31,500 today. Sweden has 800 registered methadone users. To put this situation into even clearer perspective, Sweden has 30 times (9 million) the population of the A.C.T. (300,000), but the same number of registered methadone users - 800.

Submitted for your consideration

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