

**INQUIRY INTO
methamphetamine and its chemical precursors
by the
Parliamentary Joint Committee on Law Enforcement
Submission of
Families and Friends for Drug Law Reform
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I. INTRODUCTION

1. Families and Friends for Drug Law Reform is most grateful to the committee for this opportunity to make a submission to its important inquiry into methamphetamine and its chemical precursors being one of the family of synthetic stimulants referred to generally as Amphetamine Type Substances. In particular Families and Friends for Drug Law Reform is grateful to the committee for its indulgence in according us extra time to prepare this submission.

2. Families and Friends for Drug Law Reform recalls that the predecessor of this committee, the Parliamentary Joint Committee on the Australian Crime Commission considered "amphetamines and other synthetic drugs" in 2006. Our present submission is informed by the extensive submission that we made to that inquiry in March 2006 and to the review of the *Australian Crime Commission Act* 2002 that the same committee undertook the year before.

A. *About Families and Friends for Drug Law Reform*

3. Families and Friends for Drug Law Reform was formed 20 years ago as a result of the public meeting in April 1995 of a group of people in the Australian Capital Territory who had a child, relative or friend who had died from a drug overdose death. Its membership now extends across Australia. The grief that all shared turned to frustration and anger that those lives should have been lost: all would be alive today if drug use and addiction had been treated as a social and medical problem and not a law and order one. The criminal law and how it was enforced contributed to the death of these young Australians.

4. Since then the group has been intent on reducing the tragedy from illicit drugs, reducing marginalisation and shame, raising awareness of the issues surrounding illicit drugs and encouraging the search for and adoption of better drug policies.

5. Families and Friends for Drug Law Reform does not promote the view that all drugs should be freely available. Indeed it believes that they are too available now in spite of their illegality. As this submission will explore, experience points to reliance on the criminal law to control their availability being ineffective and, in fact, counterproductive.

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B. About methamphetamine

1. Forms of methamphetamine

Meth/amphetamine comes in many forms including powder/pills (speed), crystal methamphetamine (crystal meth or ice) and a sticky paste (base). Ice is usually the most pure form, followed by base then speed. The 'high' experienced from ice and base is much more intense, and with intense reactions come powerful responses including comedown, the potential for dependence (addiction) and chronic physical and mental problems (DoHA 2013).

2. Methamphetamine as the new crack cocaine

Writing in 2009, a British drug policy think tank noted that:

"As a result, and combined with substantial problems associated with the illicit drugs trade, methamphetamine has become very much the 'new drug menace'. . . . It should also be acknowledged that methamphetamine is easily manufactured from accessible precursor chemicals and drugs, which include over the counter medicines (ephedrine and pseudoephedrine). This at once makes control next to impossible, and creates an attractive and lucrative market for criminal profiteers. In the absence of legally accessible options for other amphetamines or stimulants, such profiteers have once again been able to skew illicit markets towards the most potent, risky and profitable products" (p. 138).

II. METHAMPHETAMINES AND SUPPLY REDUCTION

A. Market indicators of methamphetamine

It is naively assumed that the success of an anti drug policy can be measured by the amount of drugs seized, and the extent to which the drug trade is disrupted by indicators like the arrest of dealers, the number of clandestine laboratories that are closed down and the level of proceeds of crime that is seized. From this point of view the Australian community could well take comfort from the record success announced in May by the Australian Crime Commission and the Minister for Justice that: "In the 2013-14 financial year, Australian law enforcement agencies seized a record 27 tonnes of illicit drugs and made more than 110 000 arrests." (ACC 2015). Nothing could be further from the truth. Just as a record fish catch indicates a well stocked fish population or a record number of rabbits trapped, the continuing existence of a rabbit plague, so does a record quantity of drugs seized indicate a thriving illicit drug trade. Law enforcement success is an indicator of the health of the drug market. If law enforcement was succeeding in suppressing the trade, law enforcement success would be small and declining. Acceptance of this proposition is vital if the committee is to make any realistic recommendations to tackling the use of methamphetamine in Australia. The illicit trade and consumption of methamphetamine is a market and must be understood and analysed as a market whereby suppliers provide a commodity to satisfy the demand from consumers. In other words, methamphetamine and its precursors are like any other commodity that is traded, apart from the fact that this commodity is illegal. To its credit the Australian Crime Commission

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recognises this. It affirms that its annual illicit drugs charter report seeks to give “a robust picture of the Australian illicit drug market” and it has observed that: “Organised crime groups are profit driven, constantly looking for new opportunities, operating across domestic and international borders” (AMC 2015).

It is the illegality of trade in any illicit drug that poses such a challenge to analyse. Most notably, illicit markets lack the transparency of trade in standard commercial products. Even so, data are routinely collected that provide revealing insight into this apparently opaque black market. This possibility is reflected in annual reports on ecstasy and related drugs and of usage patterns among injecting drug users reported in the illicit drug reports. These two invaluable reports are issued annually by the National Drug and Alcohol Research Centre of the University of New South Wales. For a number of years these have included a chapter entitled: “drug market: price, purity, availability and purchasing patterns”. Similarly, the Australian crime commission issues an annual *Illicit drug data reports* that includes for each illicit drug a section on “Domestic market indicators”.

Information on level of use, availability, price and purity is capable of telling us how commercially successful the drug trade is or, from the point of view of this committee's terms of reference, how effective Commonwealth law enforcement agencies have been in reducing if not eliminating the supply of drugs to the Australian community. Supply reduction is, of course, one of the three long-standing pillars of Australia's drug policy of “harm minimisation.” Supply reduction stands side by side with demand reduction and harm reduction. In fact it is the pre-eminent pillar of the three, with two thirds of the budget of governments devoted to illicit drugs spent to bolster it.

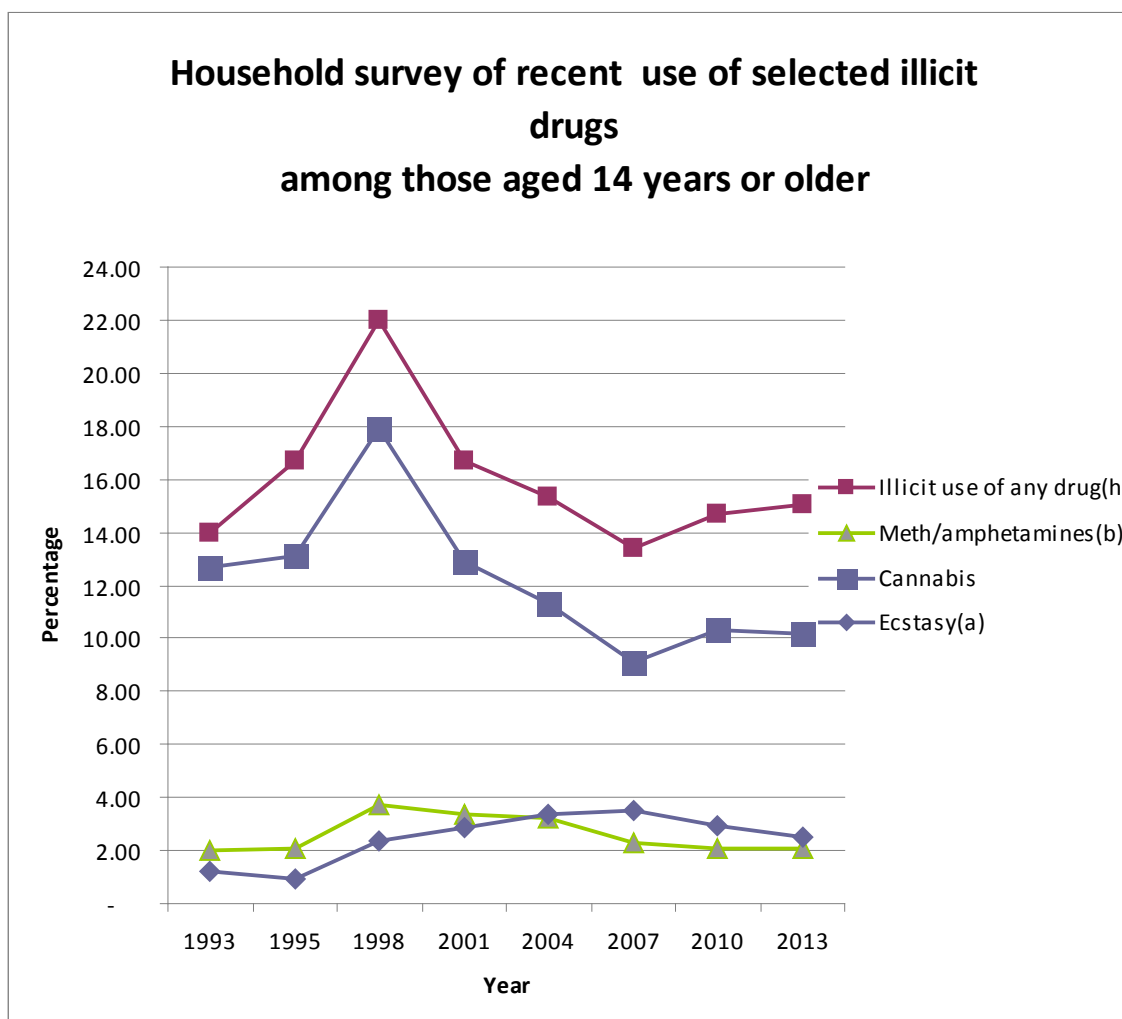
If supply reduction is successful there will be less use of the drug and fewer drug users. Stable or rising use shows that the supply reduction measures that have been applied have been ineffective. The same conclusions can be drawn if the illicit drug remains readily available or if the price is stable or falling. In accordance with economic principles, prices will rise only if the supply is reduced as law enforcement seeks to do. Other factors may, of course, be responsible for a reduction in supply, as of course occurred during the heroin drought of the turn-of the century which was chiefly if not entirely influenced by the shortage of product grown and produced in Burma where the Australian heroin market had traditionally sourced its supply. A shortage may also arise from market manipulation, that might well occur if an organised crime group succeeds in monopolising it. Purity is another enlightening indicator. If illicit drug vendors are under pressure from law enforcement, they will seek to maximise the return they can get from any given quantity of product. Cutting with other substances is a means of doing that. This is often seen in the retail sale of ecstasy or MDMA (*methylenedioxymethylamphetamine*). Analyses show that what has been sold and purchased as ecstasy often contains very little of that chemical. The more plentiful the supply of the drug concerned the less incentive there is for illicit drug suppliers to dilute or cut it. Any one of these market indicators can shine lights on what is happening in a black market. A combination of indicators pointing in the same direction produces a high level of confidence.

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Each of the indicators will be examined in the following paragraphs but it can be said with conviction here and now that they show that government efforts to control the supply of methamphetamine have been a dismal failure. Or in other words, that the millions spent on supply reduction have been a waste of taxpayers' money.

1. Level of use

Figure 1: Household survey of recent use of selected illicit drugs among those aged 14 years or older, 1993-2013



6. While there was no significant rise in meth/amphetamine use in 2013 (stable at around 2.1%), there was a change in the main form of the drug used. Among meth/amphetamine users, use of powder fell, from 51% to 29%, while the use of (or crystal methamphetamine) more than doubled, from 22% in 2010 to 50% in 2013.

For more than 20 years now the Australian Institute of Health and Welfare has surveyed the drug use of those 14 years or older in the general Australian

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population. The outcome of these surveys of usage within the previous 12 months (termed "recent use") by those aged 14 years old or older of methamphetamine and several other drugs from 1993 to 2013 is given in the following chart. In contrast to cannabis, the surveys show little change over this time in the use of methamphetamine. The 1993 survey found 2% of the population had used methamphetamine then and in 2013, 2.1%. Usage of methamphetamine never exceeded 3.7%. This was in 1998. The decline in usage from high points to the present might be claimed to the credit of supply reduction were it not for the fact that the most recent household survey disclosed that there has been a marked increase in the use of methamphetamine in its most potent form, namely so-called "crystal meths".

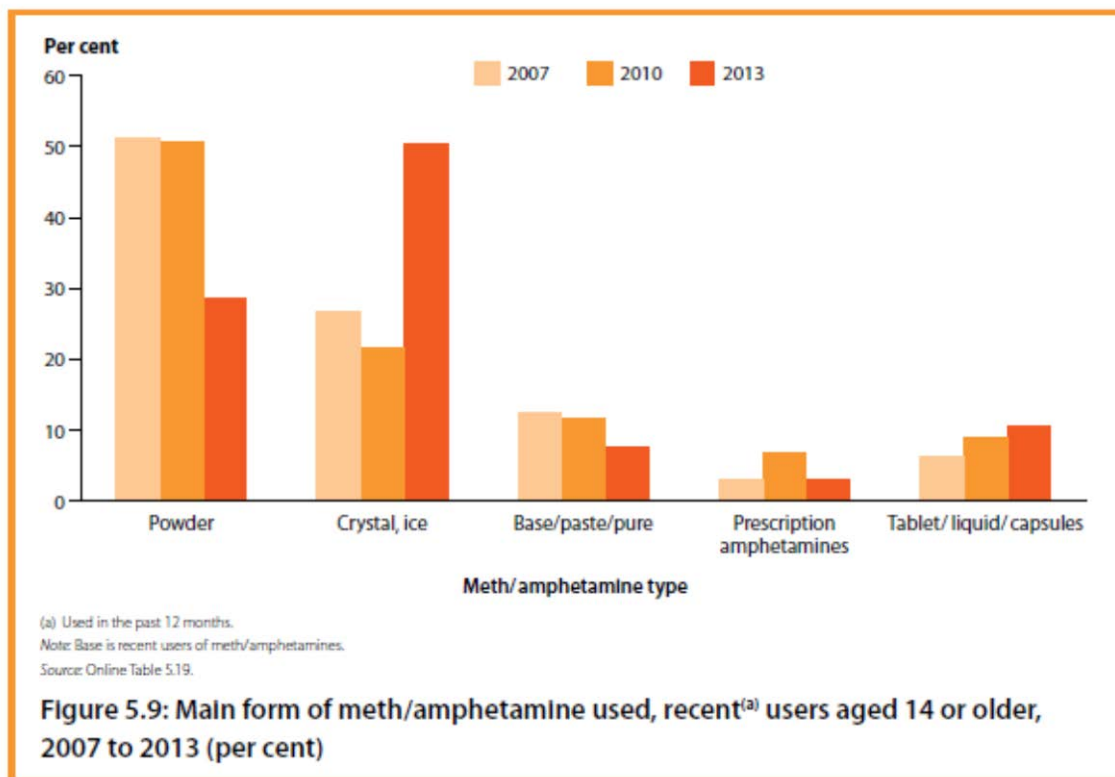
In the words of the 2013 household survey:

"While there was no rise in meth/amphetamine use in 2013, there was a change in the main form of meth/amphetamines used. Among meth/amphetamine users, use of powder fell from 51% in 2010 to 29% in 2013 while the use of ice (also known as crystal) more than doubled, from 22% to 50% over the same period. More frequent use of the drug was also reported among meth/amphetamine users in 2013 with an increase in daily or weekly use (from 9.3% to 15.5%). Among ice users there was a doubling from 12.4% to 25% (NDS 2013, p. 49).

This is illustrated in the foregoing chart.

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Figure 2: Main form of meth/amphetamine used, recent users aged 14 or older, 2007 to 2013 (per cent)



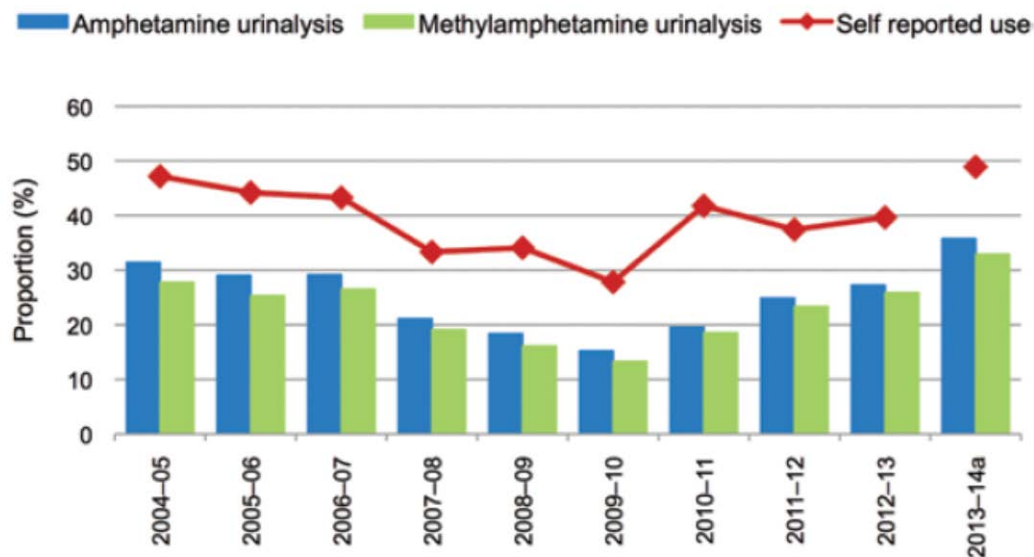
SOURCE: NDS 2013 figure 5.9 p. 62

The proportion of detainees testing positive via urinalysis for amphetamine increased this reporting period, from 27.3 per cent in 2012–13 to 35.8 per cent in 2013–14, the highest proportion reported in the last decade.

The proportion of detainees testing positive for methylamphetamine was also the highest reported in the last decade, increasing from 25.9 per cent in 2012–13 to 33.0 per cent in 2013–14 (see Figure 11).

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Figure 3: National proportion of detainees testing positive for methylamphetamine/amphetamine compared with self-reported use, 2004 – 05 to 2013 – 14
(Source: Australian Institute of criminology)



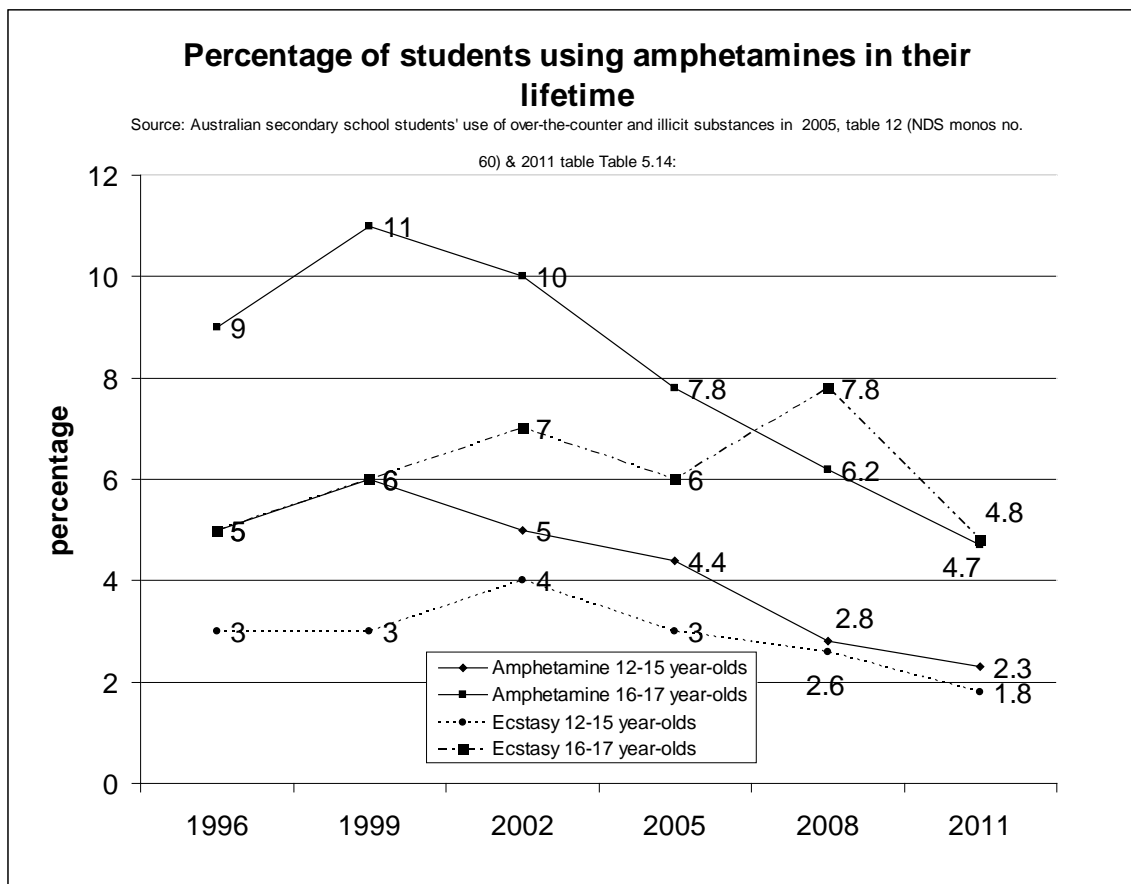
a. Urinalysis figures reported for 2013-14 reflect data collected in the third and fourth quarter of 2013 and the first quarter of 2014.

SOURCE: IDDR 2013-14 p. 44.

In contrast to the significant increase in usage within the general population and police detainees of the most potent form of methamphetamine (crystal meths or Methylamphetamine), a decline was detected in two other regular surveys. Firstly, the triennial schools survey conducted in 2011 in which, as the following chart shows, there was a significant reduction in secondary school "methamphetamine" use and, secondly, in a sample of regular ecstasy users surveyed for the most recent annual survey of ecstasy and related drugs (EDRS). This 2014 survey showed a reduction in all forms of methamphetamine use including ice. One wonders if this decline may just be an artefact of the sample surveyed.

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Figure 4: Percentage of secondary school students using amphetamines in their lifetime

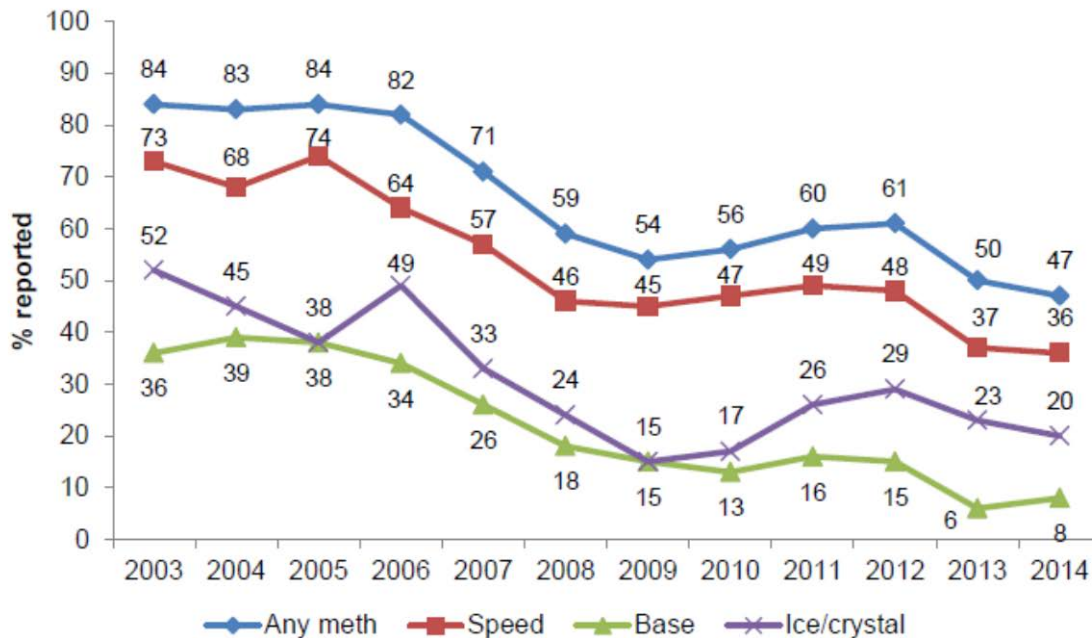


SOURCE: Secondary School Survey 2011, table 15.13, p. 76.

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Figure 5: Recent use of any amphetamine, speed powder, base and ice and bleak crystal methamphetamine, 2003 – 2014

Figure 3: Recent any methamphetamine, speed powder, base and ice/crystal methamphetamine use, 2003-2014



SOURCE: EDRS 2014 figure 3, p. 26.

2. Availability

Surveys of illicit drug users of the readiness with which those drugs are available can point to the cause of a shortage of supply: whether it has been induced by measures of supply reduction or by the shortage of product. Each year the National Drug and Alcohol Research Centre surveys a sample of people who "regularly inject drugs" and a second sample of those "engaged in the regular use of the drugs sold as ecstasy". Each sample group is asked questions about the availability of drugs including methamphetamine. In the case of Party Drug and EDRS surveys they have distinguished between the different forms of methamphetamine, namely powder, base and crystal ice. The following chart plots the responses about availability secured in the Party Drug and EDRS surveys since their inception in 2003. It shows that consistently some 60% or more of respondents were of the view that ice was "very easy" or "easy" to obtain. As early as 2003 when ice was still a new drug on the Australian scene, "the majority (78%) that commented believed [it] to be 'very easy' (32%), to 'easy' (23%) or 'moderately easy' (23%)¹ to obtain" (PDI 2003 p. 80). There is little

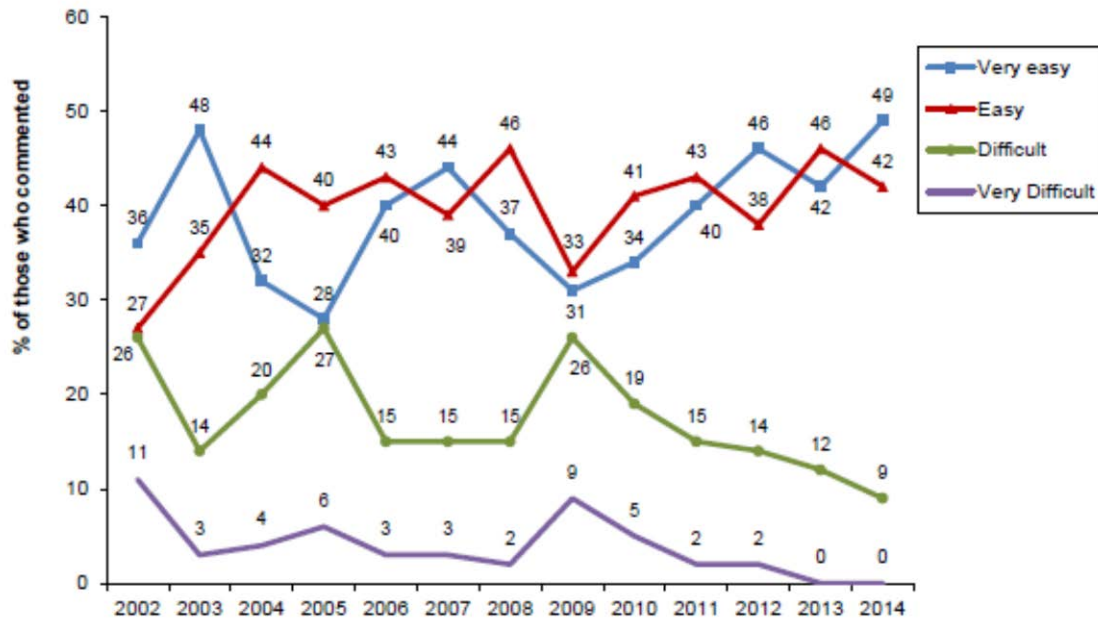
¹ The "moderately easy" measure was abandoned in the 2004 and subsequent surveys.

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more convincing evidence of the inefficacy of supply reduction than that in the most recent survey, conducted in 2014, 86% considered ice to be "easy" or "very easy" to obtain (EDRS 2014 table 66, p. 80).

Figure 6: Current availability of ice and bleak crystal, nationally, 2002 – 2014

Figure F9: Current availability of ice/crystal, nationally, 2002-2014



Source: IDRS participant interviews

Note: Methamphetamine asked separately for the 3 different forms from 2002 onwards. The response 'Don't know' was excluded from analysis

SOURCE: IDRS 2014 p. 62.

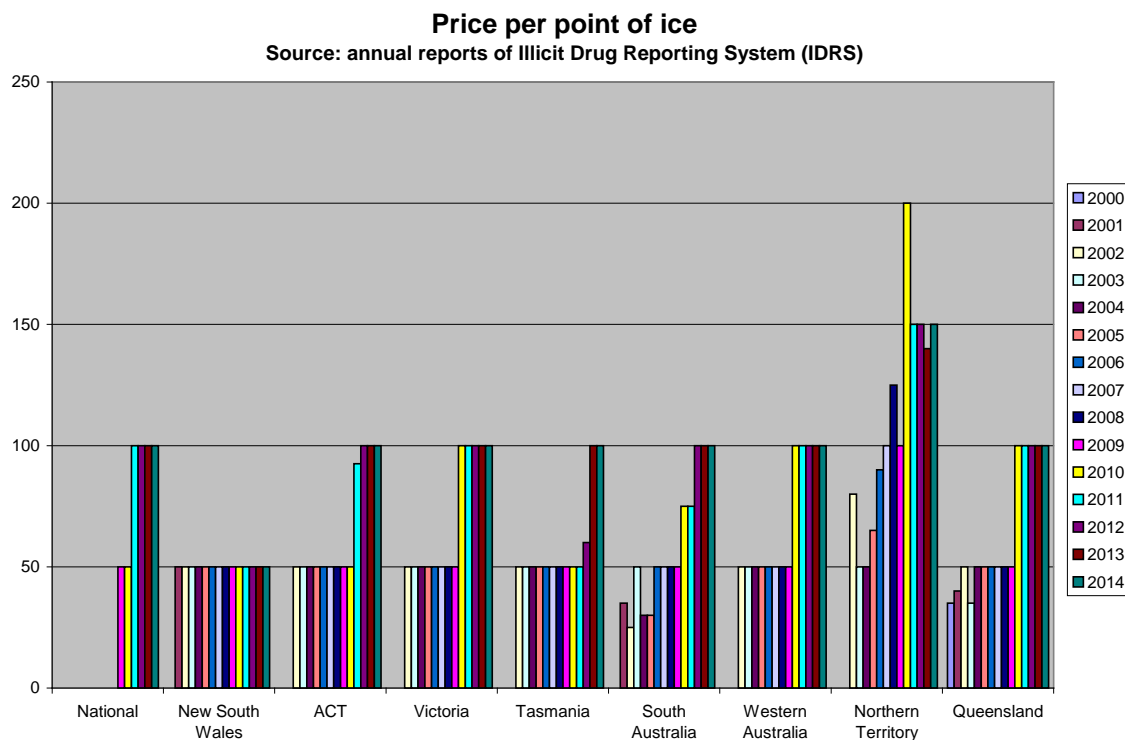
The same surveys also ask the sample group whether there has been any change in the availability of ice over the period surveyed. Around 80% of respondents consider availability to be either stable or easier (EDRS 2013 p. 73).

3. Retail prices

As recorded in annual surveys of the illicit drug reporting system, the median retail price of ice has remained remarkably stable for the past 15 years at \$50 a point (0.1 g) in the most populous jurisdiction of New South Wales. It also remained at \$50 or nearly so for a decade in Victoria, Western Australia and Queensland. In the past three or four years the price doubled in most states.

Figure 7: Median price per point of ice or crystal methamphetamine, 2000 – 2014

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SOURCE: Illicit Drug Reporting System surveys to IDRS 2014.

The following chart shows that the retail price of the much larger quantity of a gram has varied more erratically than the standard retail quantity of a point (0.1 g). Whether the law enforcement can take credit for the price increases can be judged by reference to the level of law enforcement success in preceding the price rises. See below at pp.14 ff.

Figure 8: Median price of ice/crystal per point and gram, nationally, 2001 – 2014

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Figure F3: Median price of ice/crystal per point and gram, nationally, 2001-2014



Source: IDRS participant interviews
Note: No data available for gram in 2001

SOURCE: IDRS 2014 p. 166

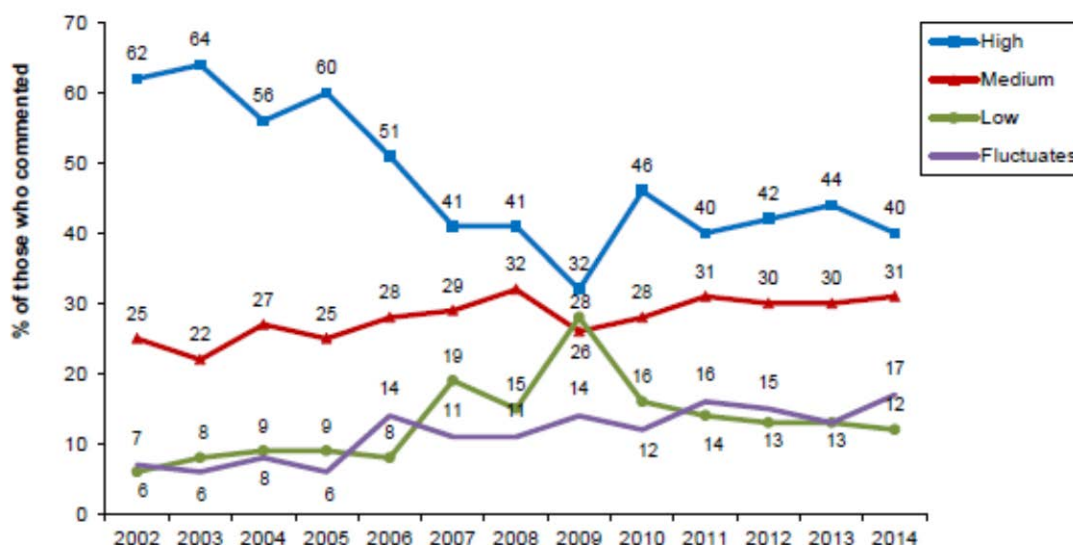
4. Retail purity

The Australian Crime Commission comments that methamphetamine in its various forms is characterised by “inconsistent purity” from the “presence of unknown chemical additives and dangerous production methods” (IDDR 2013-14, P.24). Even so, the surge in recent years in use of the purest form of methamphetamine, crystalline methamphetamine or ice, is strong evidence of the failure of supply reduction strategies.

Figure 9: Purity of ice/crystal nationally, 2002 – 2014

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Purity of ice/crystal, nationally, 2002-2014

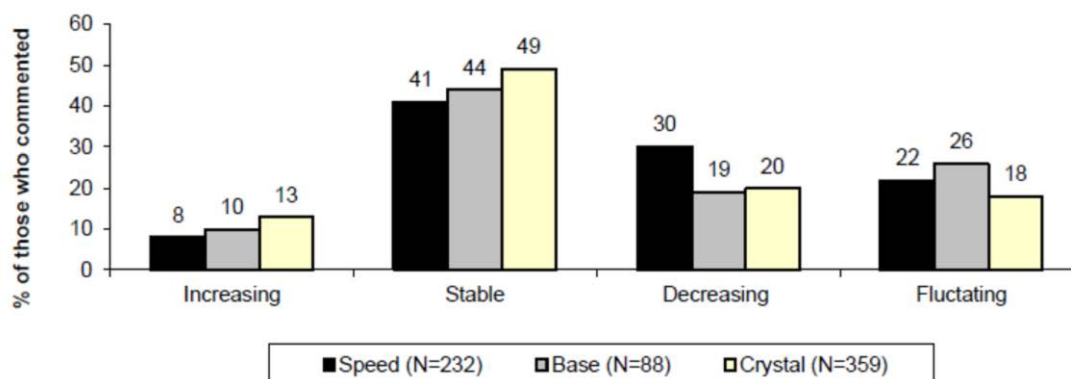


SOURCE: IDRS 2014 figure F6 p.164

The subjective assessment of users of the purity of the drug as gauged in the annual illicit drug reporting system shows an interesting decline in purity from the initiation of the surveys of ice in 2002 until 2009 followed by a rise in purity levels up to the present. The current situation is reflected in this chart from the most recent survey of the IDRS.

Figure 10: Participant reports of changes in purity of speed, base and ice/crystal among those able to comment, 2013

Figure 22: Participant reports of changes in purity of speed, base and ice/crystal among those able to comment, 2013



SOURCE: IDRS 2013 P. 59

The stability and even increase in purity of methamphetamine as analysed by samples seized domestically is consistent with the subjective view of drug users themselves. The most recent report of the Australian illicit drug reporting system,

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that in 2013 from which the preceding chart is copied, shows that over 60% of the sample of users surveyed believed that the purity level of methamphetamine was either stable or increasing.

B. Seizures and detections

We have already made the point that record traditional law enforcement measures like successes in drug seizures, suppression of clandestine laboratories and seizures of the proceeds of crime indicate that the illicit drugs trade is thriving rather than failing. In the words of Drs Adam Sutton and Steve James of the Criminology Department of the University of Melbourne, in an *Evaluation of Australian drug anti-trafficking law enforcement* undertaken with the co-operation of law enforcement agencies and published in 1996:

“Our evaluation demonstrates that to date there has been little capacity in the law enforcement sector to reliably and validly relate its activities to changes in drug markets. In part, this is a function of the traditional performance indicators adopted by drug enforcement agencies: the number, volume, and type of illegal drug seizures, and the number and type of drug-related arrests and convictions. These measures are well recognised as basically flawed indicators of effectiveness. They reflect more upon levels of law enforcement *activity* than they do ratios of interdiction and reduction, and therefore cannot be used as indicators of the effectiveness of agencies in reducing the total supply of illegal drugs. Similarly, asset confiscation is subject to the same problems as an indicator, in that increased asset seizures are likely to be functions of such factors as the useability of the relevant enabling legislation and the resources that law enforcement devotes to pursuing confiscation” (Sutton & James 1996, 107).

The recent extermination of rabbits on Macquarie Island illustrates the point. The cost of the elimination of the last rabbit pair was enormous and nothing to compare with the catch level when the program of eradication commenced. This proposition is not to deny that supply reduction measures can impact upon the illicit drug market. Indeed there is much evidence that it can.

1. Detections of clandestine laboratories

The chart below of laboratories detected evidences the degree of impact that law enforcement has. There was a slight reduction in detections around 2006 and 2007. This coincided with restrictions on the purchase from pharmacies of products like pseudoephedrine from which methylamphetamine could be produced using the hypo-phosphorous acid method. The Australian Crime Commission expressed this welcome result in the following terms:

“The number of clandestine laboratories detected in Australia has stabilised. This may be partially due to several initiatives designed to reduce diversion of pseudoephedrine from the licit market. Restrictions on the sale of pseudoephedrine are likely to result in increased importation attempts as criminal groups attempt to source offshore supply.

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Alternatively, criminals may resort to other crimes to source pseudoephedrine domestically" (IDDR 2005-06, p. 9 & see also p. 18).

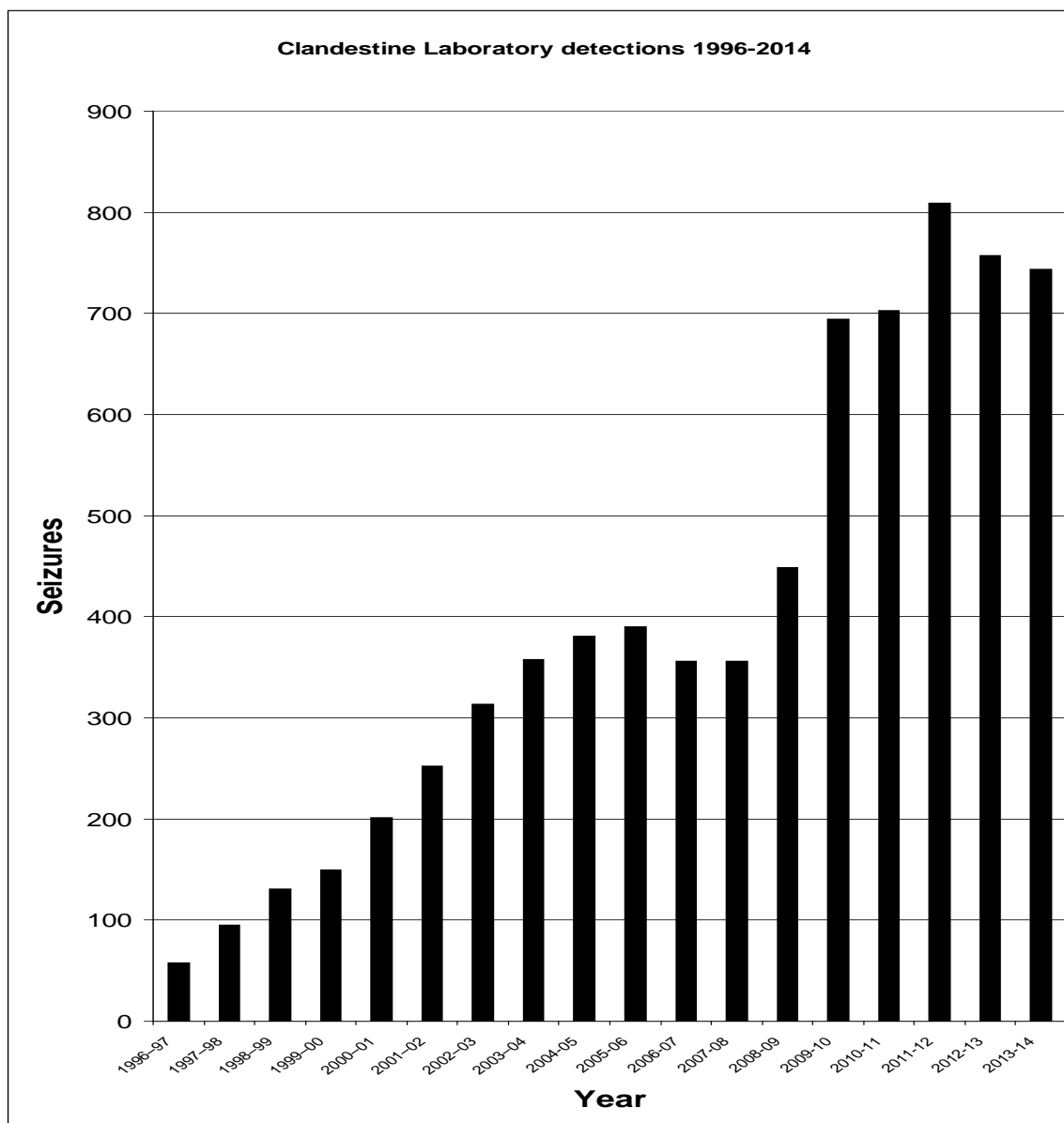
Similarly the local area policing by State and Territory law enforcement services is known to have suppressed street drug trading in particular areas but the action has succeeded only in displacing the problem to another neighbourhood. Such unintended consequences only go to demonstrate the resilience of the illicit drug market. Law enforcement has been likened to "squeezing the balloon".

Contraction at one point entails expansion of the market elsewhere (Secombe 1995). Such a perspective rather throws cold water on the understandable pride in law enforcement achievement proclaimed in the latest Australian Drug Data Report:

The number of clandestine laboratories detected nationally has increased 95.2 per cent over the last decade. Despite a decrease in the number of clandestine laboratories detected nationally this reporting period, the 744 laboratories identified in 2013–14 is the third highest number on record. (IDDR 2013-14, p. 6)

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Figure 11: Clandestine nine laboratory detections, 1996 – 2014



2. Total Seizures

In 2013–14, law enforcement agencies recorded more than 93 000 illicit drug seizures, with a combined weight of 27 tonnes and more than 110 000 arrests. These figures are all the highest on record. (IDDR 2013-14 p. 2).

3. Border seizures

The Australian Crime Commission summarised the detections of amphetamine type substances by Customs in 2013 – 14 as follows:

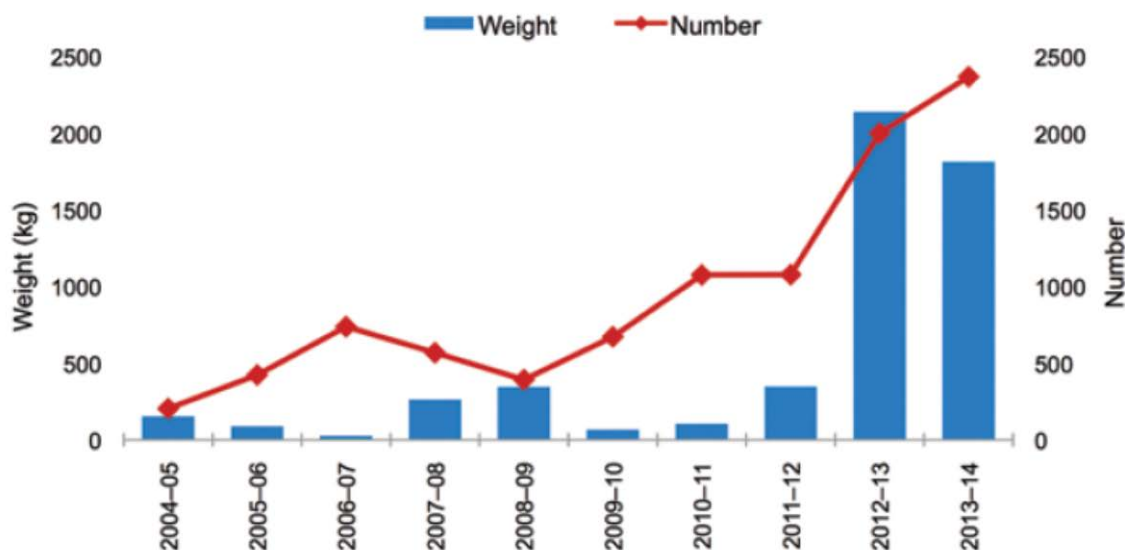
"The number of detections of ATS (excluding MDMA) increased 18.4 per cent this reporting period, from 1 999 detections in 2012–13 to 2 367 in 2013–14, the highest number on record. While the total weight of ATS

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(excluding MDMA) detections decreased 15.2 per cent in this reporting period . . . to 1 812.4 kilograms, . . . the second-highest weight on record." (IDDR 2013-14 p. 28).

Figure 12: Number and weight of ATS (excluding MDMA) detections at the Australian border, 2004 – 2005 to 2013-14

FIGURE 1: Number and weight of ATS (excluding MDMA) detections at the Australian border, 2004–05 to 2013–14 (Source: Australian Customs and Border Protection Service)



SOURCE: IDDR 2013-14 p. 28.

Customs observed in 2013 a change in the how Amphetamine-type stimulants detections were sought to be smuggled into the country thus illustrating the capacity of organised crime to adapt their methods of operation to take account of changing situations:

“The disruption of online markets for illicit drugs by ACBPS officers has resulted in a trend of declining detections through the international mail environment during the latter months of 2013, although this will remain a focus for the Service in 2014–15” (ACBPS 2014 p. xi).

Amphetamine-type stimulants (ATS) continued to be the most detected illicit drug at the Australian border, particularly methamphetamine, indicating popularity amongst Australia’s illicit drug consumption market. The majority of ATS detections occurred in the cargo and postal environments and, to a much lesser extent, the air passenger stream. For the second successive year, detection rates of ready-to-use ATS significantly increased, however overall weight decreased suggesting that drug syndicates may be attempting to import smaller quantities” (Custom 2013 Annual report p. 28).

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4. Level of seizure required to put drug dealers out of business

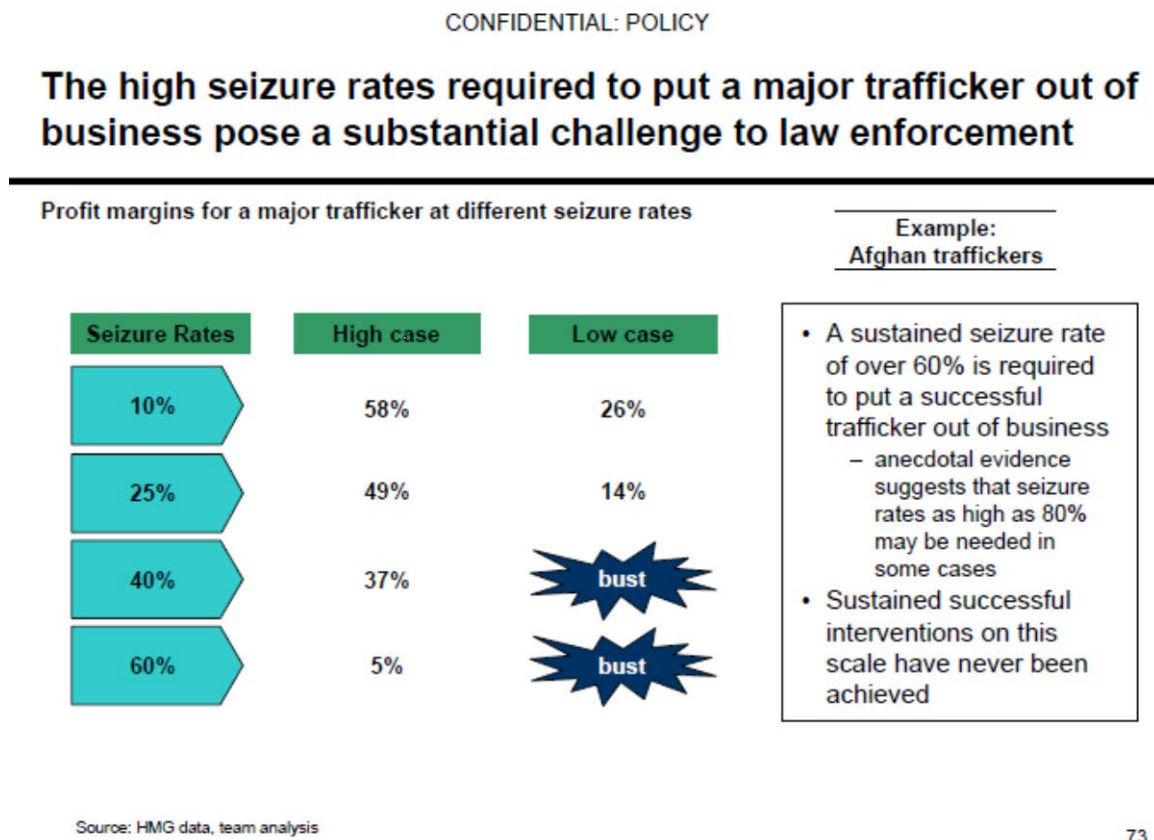
As the Australian Crime Commission observed, the illicit drug market reacted to the imposition of restrictions on the domestic sale of pseudoephedrine by sourcing that precursor from overseas. The spike in border seizures evident in figure 12 (p. 16) of precursors between 2007 and 2009 probably illustrates this. The illicit drug market is nothing if it is not malleable and adaptable. What law enforcement agencies have singularly failed to do is to identify what it would take to fatally wound the illicit drug market. The only serious effort that we are aware of to take this step was reported in a confidential briefing paper prepared at the instance of the Home Office in 2003 for the British Cabinet. The paper was leaked by *The Guardian* in 2005. To put a drug dealer out of business requires seizures at a sustained high level that have never been achieved. As the Home Office paper put it:

“A sustained seizure rate of over 60% is required to put a successful traffic out of business. Anecdotal evidence suggests that seizure rates as high as 80% may be needed in some cases. Sustained successful interventions on this scale have never been achieved.”

And it would indeed need to be higher than 80% in the case of cocaine where, as the Australian Crime Commission commented, “Organised criminals can achieve profit mark-ups of more than 6100 per cent compared with the wholesale cocaine price in Mexico” (ACC 2011).

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Figure 13: Seizure rates required to put a major trafficker out of business



SOURCE: United Kingdom (2003), p. 73.

What are particularly riling are, firstly, the tendency of law enforcement management to trumpet law enforcement "successes" as evidence of policy effectiveness in the regular plea for government resources and, secondly, the preparedness of their political masters to swallow this argument uncritically. In doing so, governments are rewarding failure rather than policy success. Even the nuanced Australian Crime Commission engages in this game. In a recent media release its director boasted that the record seizure of a precursor prevented the local manufacture of 4.5 tonnes of methylamphetamine and thus prevented the circulation of: "an estimated 45 million individual street deals, with an estimated value of \$3.6 billion" (AMC 2015). In the commercial world of organised crime, losses flowing from law enforcement are regarded as simply a cost of doing business. Drug use surveys (see pp. 14 ff) show a lack of responsiveness to law enforcement successes, demonstrating that the market demand is fully supplied. The principal concern of suppliers is to ensure that the retail price remains sufficiently high. Here lies the most bitter irony. The interests of both law enforcement and organised crime coincide in seeking to maintain a high cost of illicit drugs.

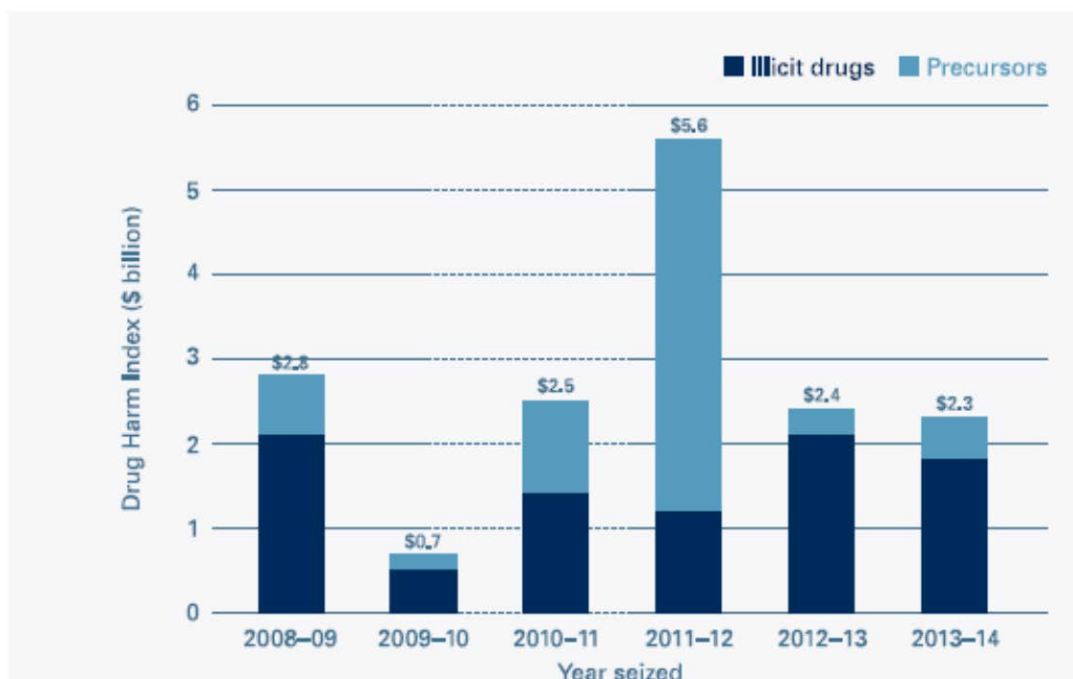
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5. Drug Harm Index

But it is the Australian Federal Police that refines this argument to the most extreme level through the elaboration of its so-called drug harm indicator which it claims highlights that “the social benefits derived from disrupting crime (through finalised drug and economic investigations) outweigh the costs of investigations, legal processes and detainment” (AFP 2013-14 p. 25). Its most recent Annual report states that the index shows: “. . . the potential harm that would have ensued if drugs seized at the border had reached the community. In 2013–14 it reached \$2.3 billion based on almost 8 tonnes of seizures” (AFP 2013-14).

Figure 14: Drug Harm Index of the Australian Federal police, 2008 – 09 to 2013 – 14

FIGURE 6 AFP DRUG HARM INDEX, 2008–09 TO 2013–14



Families and Friends for Drug Law Reform critically examined this index in its submission of March 2006 to the enquiry on amphetamines and other synthetic drugs of the Parliamentary Joint Committee on the Australian Crime Commission. Extracts from that critique bear repeating here:

131. The drug harms index is equally flawed because it is based on the level of seizures which, according to Sutton and James “reflect more upon levels of law enforcement *activity* than they do ratios of interdiction and reduction”. The foundation of the index being seizures is made clear in the 2004-05 AFP report:

“The index represents the dollar value of harm and cost to society that would have ensued had the seized drugs reached the community. The index includes both national drug seizures and

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international seizures destined for Australia where the AFP played a significant role. . . .

“It is estimated that in 2004-05 seizures of illicit drugs by the AFP saved the Australian community approximately \$668 million. The impact of these seizures is similar to the impact in each year since the introduction of additional funding for illicit drug investigations under the National Illicit Drug Strategy in 1998. The result for the current year represents an increase of 56 per cent over the previous year \$427 million)” (AFP 2005, 51).

[The application of the index from 2008-09 to 2013-14 from the latest annual report of the AFP is given in the following chart:]

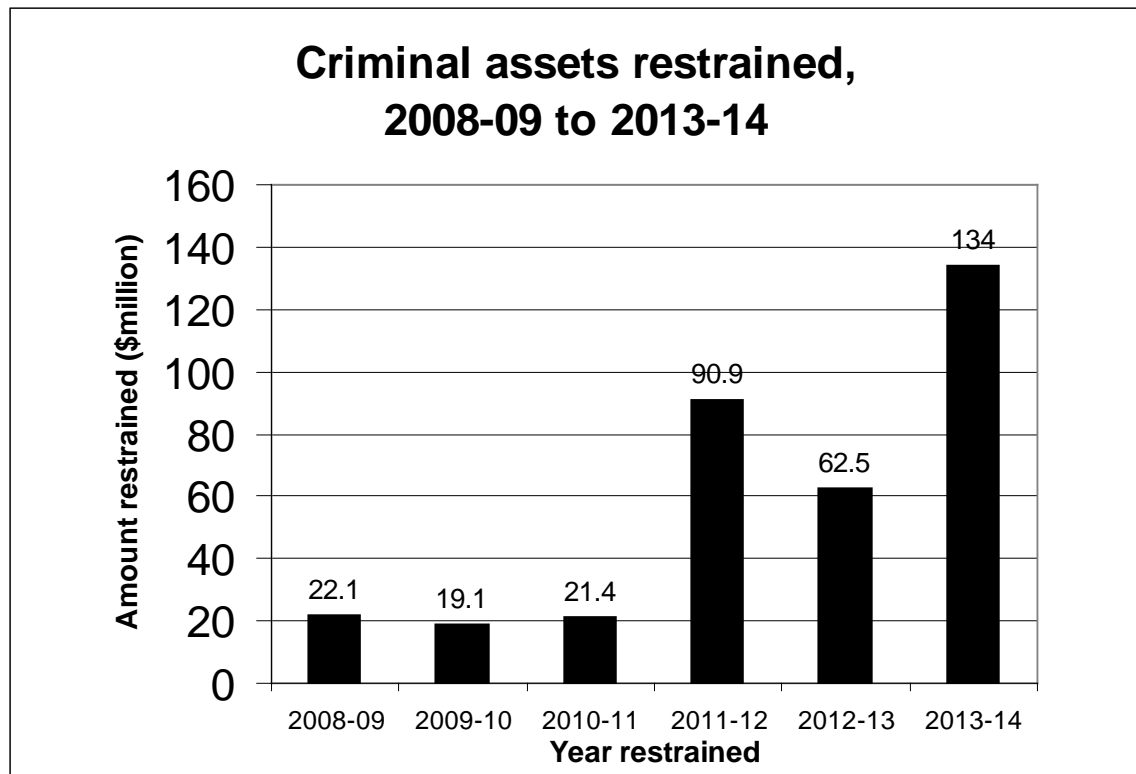
132. Measured by weight, something like 93% of the total quantity of AFP drug seizures in 2004-05 related to MDMA and methamphetamines (AFP 2005, 29). Thus, compared to other drugs, the bulk of the assumed harm prevented by virtue of drugs not reaching the streets would have been harm attributable to methamphetamine and ecstasy. At the same time we know from market indicators that law enforcement was not preventing a continuing rise in the availability of those drugs on the Australian market. The seizures thus constituted no more than the equivalent of a taxation on production that would have been factored into the price of the end product. In spite of the seizures, the Australian market was fully supplied.

C. Seizure of criminal assets

In an effort to undermine the black market economy, the Australian Federal police operates a criminal assets confiscation task force which in 2013 – 14 was responsible for restraining assets worth \$134 million. The AFP annual report does not specify the criminal activity from which these assets were derived (AFP 2013-14 p. 25) but it is likely that a high proportion of this amount represented the proceeds of illicit drugs since drugs are the most lucrative black market activity. The Australian bureau of statistics has supported research into the estimation of the size of the Australian illicit drug trade. This study estimated that in 2010 the trade in illicit drugs was worth \$7,574 million of which “amphetamines” represented \$1,188 million (Cullen & Gajewski 2012 p. 12). Even if all the \$134 million that the AFP confiscated in 2013 – 14 represented drug proceeds, this represents a mere 1.8 percent of the estimated annual value three years before of the black market economy for all illicit drugs and 11.3 percent of the amphetamines market.

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Figure 15: Criminal assets restrained, 2008 – 09 to 2013 – 14



SOURCE: AFP 2013-14 figure 7 p. 27.

D. Demand reduction

In the broad scheme of Australian drug policy, law enforcement serves the pillar of demand reduction as well as that of supply reduction. The foregoing analysis of market indicators shows that it has materially failed in its objective of supply reduction. The demand of the Australian drug market seems continuously to have been fully supplied. One might regard the drug policy as built upon an implicit covenant between governments and the people. For their part, the people are to renounce the use of illicit drugs. Four of their parts governments are to support potential users and their parents by ensuring that drugs are unavailable. Governments have clearly failed their part of the bargain. Whenever someone fails to fulfil a commitment they tend to attempt to spread the blame on others. Frequent targets are thus “irresponsible” drug users and “bad” parents.

1. Prohibition as an extreme form of nanny state paternalism.

At the heart of Australian drug policy is the prohibition of consumption of certain addictive substances. The law declares that people who use them or possess them for even their own use commit a crime; they are criminals. This is an ironic turn of events given that concern for the welfare of the citizenry (and particularly young people) is what motivated prohibition in the first place. This is a public

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health objective. It is unique in that no other public health objective relies upon deterrence of the target population by the criminal law. Indeed the the application of coercive powers of the state to determine what an individual may or may not ingest is fundamentally at odds with liberal principles of individual rights whereby people should be free to engage in self harming and liberty. The states should limit itself to ensuring that people are fully informed of the consequences of a dangerous activity. It is sometimes objected by those opposed to the choice of the individual in the matter of drug use that prohibition has as a communal objective; that its object is to prevent harm to the the family of drug users and to the community. The limits experience of the founders of Families and Friends for Drug Law Reform whose children died as a direct result of the intervention of law enforcement gives the lie to such an argument. The visitation of a severe harm (represented by the processes of the criminal law) in response to engagement in activity will that harms themselves benefits neither the drug use nor the community. Indeed the core of prohibition is a command that the overriding obligation on the individual is to become drug free. This insistence puts the dependent drug use at odds with other obligations in their life. And the obsessive focus on abstinence goes a long way to sabotaging the will and efforts of dependent drug users to check their habit. Just as law enforcement has been an ineffective supply reduction strategy, so it has been a largely ineffective strategy as a demand reduction mechanism.

The policy of deterrence of drug use is riven with the ambivalence of the original objectives of prohibition: concern for the well-being of drug users and the processes of the criminal law that presuppose the efficacy of fear of punishment and the application of punishment to those who defy the law and who happen to be caught.

2. Arrests

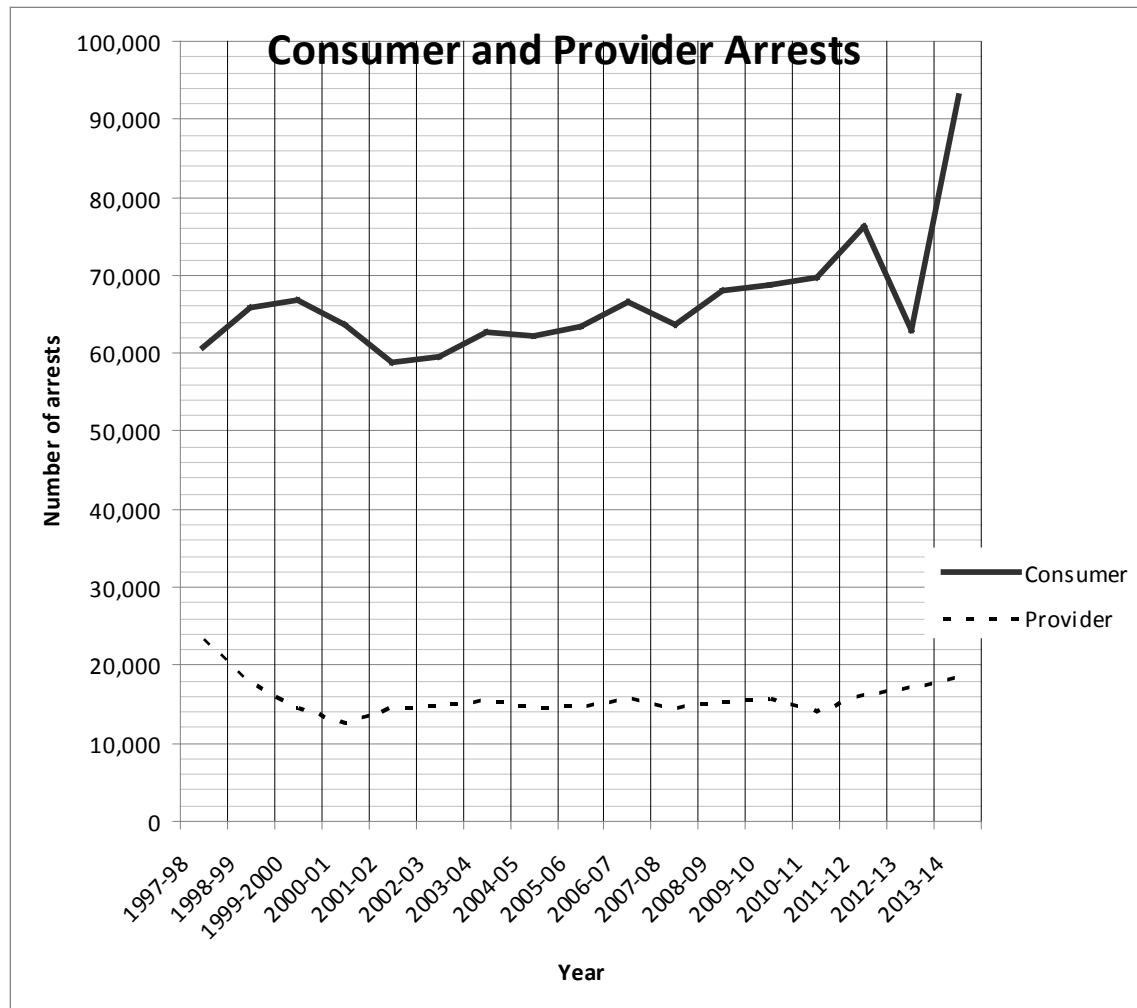
One frequently hears that law enforcement focuses upon catching and prosecuting suppliers rather than users. Such an approach is consistent with the overall drug strategy policy of harm minimisation. The reality though is that at least at the state and territory level most police and prosecutorial attention is given to consumers rather than to suppliers. The following chart of consumer and provider arrests drawing on data from the Crime Commission's illicit drug data reports shows little change in the number of provider arrests over the better part of three decades and that these provider arrests represent less than a third of the number of consumer arrests. There was a remarkable upturn in arrests in 2013 – 14 with a record 112 000 arrests (IDDR p. 204) with consumer arrests outnumbering provider arrests by 5 to 1. In the words of the CEO of the Crime Commission:

“While the methylamphetamine market is the primary concern, there was also a number of records reported across other drug markets. These include a record number of national amphetamine-type stimulant seizures and arrests, a record number of national cannabis arrests, a record number of national cocaine seizures and arrests, a record number of national steroid seizures and arrests, a record number of national

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hallucinogen arrests and a record number of national other opioid seizures. These figures are all the highest on record" (IDDR 2013-14 p.3). At the very least this represents a vast deployment of expensive law enforcement resources.

Figure 16: Consumer and provider arrests, 1997 – 98 to 2013 – 14



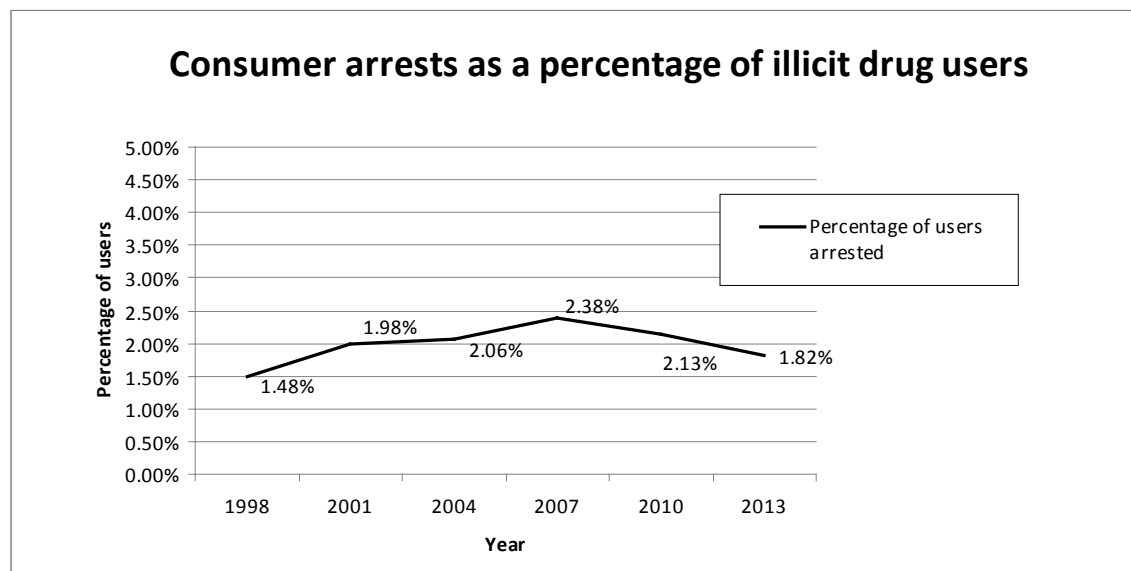
SOURCE: *Australian illicit drug reports 1997-2001* of the Australian Bureau of Criminal Intelligence & *Australian illicit drug reports and Illicit drug data reports* of the Australian Crime Commission.

For a crime control policy to be effective its administration needs to be swift and certain. As Mark Kleiman, a United States criminologist with a particular interest in drug policy has commented, the least total harm and cost from crime and crime control efforts combined demand "the minimum amount of punishment necessary to achieve any given level of crime control that in turn requires that most punishments be swift and certain rather than severe. Theory and evidence agree: swift and certain punishment, even if not severe, will control the vast bulk of offending behaviour" (Kleiman 2009, p.2).

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It is little wonder that the application of the criminal law to deter drug use has met with very little success. Punishment of illicit drug use is neither swift nor certain. Indeed the following graph of consumer arrests as a percentage of illicit drug users shows that the chance of being apprehended for drug use is vanishingly small at less than 2 in a hundred chances. Indeed the criminalisation of drug users is a bit like Russian roulette.

Figure 17: Consumer arrests as a percentage of illicit drug users, 1998 to 2013



	1998	2001	2004	2007	2010	2013
Users of any illicit drug converted from percentages in Household Surveys using ABS census data	4,093,672	3,218,875	3,049,703	2,790,898	3,229,855	3,473,505
Consumer and provider arrests	84,122	76,463	78,280	82,239	84,400	80,182
Consumer arrests	60,774	63,766	62,829	66,530	68,776	63,062
Percentage of users arrested	1.48%	1.98%	2.06%	2.38%	2.13%	1.82%

The chances of being caught are tiny but the consequences if one is caught can blight the life chances of young Australians. The harmful consequences that can flow from the application of the processes of the criminal law to young drug users were identified in studies comparing jurisdictions like South Australia applying an expiation notice system to personal drug use and those like Western Australia applying standard procedures of the criminal law.

The comparison found that those prosecuted in Western Australia were more likely to report negative employment consequences than those who received an expiation notice in South Australia. The difference was marked. Of the Western Australia group 32% identified at least one negative employment consequence

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and 16% of these were sacked as a result of the offence. In South Australia only 1.7% reported such a negative consequence.

In personal relationships only 5% of the South Australian group reported negative consequences compared to 20% of the Western Australian group. Whereas 16% of the West Australian group reported negative consequences in their accommodation, none of the South Australian group did so.

In contrast to the marked negative impact of the application of the traditional criminal processes in Western Australia compared to South Australia, the Western Australian process did not serve as a stronger deterrent against actual cannabis usage. (Lenton *et al.* 1998).

3. Drug education and media campaigns

7. Persuasion of people not to begin using drugs or to give up their use is another weapon that can be brought to bear in support of demand reduction. It is, however, a weapon that must be deployed with a great deal of care, for the sad fact is that most educational and media campaigns have been ineffective and a waste of money.

Good intentions are no guarantee that drug education and media campaigns will be successful. As always, the rule of thumb should be to do no harm. Unfortunately, ill-informed anti-drug strategies can cause harm. They can actually increase drug use. For example, a United States program, Project SMART (Self-Management And Resistance Training), implemented in the 7th grade “resulted in negative impacts on rates of marijuana incidence and prevalence, with [students who underwent the training] reporting significantly higher rates of use and greater rates of initiation at follow-up than their control counterparts” (Soole *et al* 2005 p. 18).

8. Even the Drug Abuse Resistance Education program, DARE for short, that is widely used in the United States and has been the model for many similar programs around the world has been shown to be useless if not worse in reducing drug uptake.

“There were four evaluations of the DARE curriculum [which were delivered by police officers], one being an evaluation of the DARE Plus curriculum, which took the original curriculum and added multifaceted family and community components. Overall, the three evaluations of the standard DARE curriculum failed to find evidence of the effectiveness of the program. The program failed to significantly impact either marijuana or other illicit drug use, either in the short- or long-term. Follow-up rates of hard drug use were almost identical amongst treatment and comparison youths. There was also very little evidence to suggest favourable impacts of the program on marijuana use trajectories, with one study suggesting a significant negative impact of the program on marijuana use rates. The added family and community components of the DARE Plus program failed to improve the effectiveness of the program, finding no significant impact on marijuana use rates. These findings align with findings of

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previous reviews and meta-analyses of the DARE program.” (Soole *et al* 2005 pp. 21-22).

9. According to evaluations, competence enhancement education programs tend to be the most effective in reducing uptake of drugs (Soole *et al* 2005 pp. 23-24 & 27).

“Competence enhancement programs emphasise the teaching of generic life skills such as communication skills, decision making, problem solving, coping skills and stress management, assertiveness, and other socially relevant skills such as those pertaining to dating and relationships. Programs adopting this approach may also include components highly similar to social influences programs such as refusal skills training, normative behaviour and identification of the social influence on drug use. However, many do not directly address drug use, instead addressing a variety of intermediate, interpersonal factors believed to be associated with drug use susceptibility” (Soole *et al* 2005, p. 17).

10. In addition, some social influence programs including an Australian one, the Illawarra Program, “showed significant positive effects on rates of marijuana use that persisted for three years after the completion of the program” (Soole *et al* 2005, p.22). In social influence programs “youths are educated about the influence of the media, peers, and adults on subsequent drug use.” (Soole *et al* 2005, p. 17).

11. The principles for drug education in schools contained in the Howard Government’s own National School Drug Education Strategy (Department of Education p. 8) seem consistent with these findings. For example, they state that:

- “Effective drug education should reflect an understanding of the characteristics of the individual, the social context, the drug and the interrelationship of these factors”;
- “Approaches to drug education should address the values, attitudes and behaviours of the community and the individual”; and
- “Drug education needs to be based on research, effective curriculum practice and identified student needs.”

Families and Friends for Drug Law Reform believes that this Committee would do well to reaffirm the principles of this education strategy.

Recommendation 1:

Governments should take steps to ensure that only effective school education programs are supported and that the principles for drug education in schools contained in the National School Drug Education Strategy are followed.

12. There is little evaluation on the extent that media campaigns impact on the uptake of illegal drugs. As the Australian National Council on Drugs put it in a position paper on methamphetamine, media campaigns have to be well thought out and targeted if they are not to backfire:

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“Media campaigns have been used successfully to reduce unhealthy behaviours (e.g. tobacco smoking), but their application in relation to illicit drug use is limited and unfortunately not well evaluated. Successful media campaigns are also expensive and require substantial planning and research. In particular, they require a segmented marketing strategy that identifies and successfully targets the ‘at-risk’ audience (e.g., use media channels that are accessed by drug users and a delivery that is appealing to this audience), research on the target audience to understand their attitudes, beliefs and values (including pre-testing of media campaigns), and most importantly, the campaign must receive adequate and sustained coverage. Media campaigns run the risk of unintended increases in drug use if they are not adequately researched and focus tested.” (DETYA 1999).

13. Again it must be stressed that even the most successful school education drug programs and media campaigns cannot prevent people using illicit drugs. All they can realistically hope to do is to influence a moderate percentage of their audience who might otherwise have taken up drugs not to do so. This is illustrated by the successful Illawarra program where students who received the program reported significantly less cannabis use than comparison students at each of the follow-up periods. At 7th grade 6% of the students who received the program reported having tried cannabis compared to 13% in the group that did not receive the benefit of it. In 8th grade the proportions were 12% and 31%, at 9th grade 23% and 40% and in 10th grade 27% and 41% (Soole *et al* 2005 pp. 95-96). Put in other words, even the best preventative programs will fall far short of ensuring that no young people use readily available illicit drugs. If young people and their families are not to be written off as non-persons, drug policy must reflect this reality. It is for this reason that the Commonwealth Government’s National School Education Strategy includes among its principles the statements that:

- “The emphasis of drug education should be on drug use likely to occur in the target group, and drug use which causes the most harm to the individual and society”; and
- “Objectives for drug education in schools should be linked with the overall goal of harm minimisation.” (DETYA 1999 p.8).

14. Families and Friends for Drug Law Reform has gained the impression from hearings to date of the Committee that members are attracted to media campaigns emphasising the dangers of illicit drug use so as to frighten people into not using them. We also sense concern about the use by public broadcasters such as the ABC of terms like “party drugs” in referring to synthetic drugs like ecstasy. We venture some observations on the effectiveness of scare campaigns and the influence of popular culture on drug use.

4. Scare campaigns

15. Given the waste of life that so often is associated with illicit drug use, Families and Friends for Drug Law Reform would support hard hitting media campaigns which are objective, carefully formulated and targeted. Like the

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Australian National Council on Drugs (see 28), we emphasise the danger that poorly formulated and targeted media campaigns will make the drug problem worse. The United States has a recurrent history of failed scare campaigns (Skager. pp. 166-90 at pp. 169-70 & 185). Reefer madness publicity of the Anslinger era has acquired a cult status. Consideration of the personality profile of those at greatest risk of drug use will show why strategies emphasising the dangers of drug use are ineffective for many. For “thrill seekers”, danger is a challenge. Painting drug use as boring would be a far more effective turn off for these people. The following explains the pitfalls of scare campaigns in a school context:

“Intuitive approaches have led in the past to the use of ‘scare tactics’ in drug education. ‘Scare tactics’ are based on the assumption that ‘if we could just show how risky it is - they wouldn’t do it’. Students, parents, and teachers are often convinced that confronting young people with the most severe harms will deter them from using drugs. However, programs that rely on ‘scare tactics’ have not shown a reduction in the incidence of harmful drug use. There may be a number of reasons why this is so. These include a tendency to believe in one’s own invulnerability - ‘this is not going to happen to me’ - and a poor fit between the young person’s observation or experience of drug use and the consequences shown in the ‘scare tactics’ program - ‘this is not what I have seen happening to others’. Many students have observed parents, peers, or community members using drugs such as cigarettes, alcohol, and cannabis without appearing to come to harm.

“A health-education program can work against its overt message by inadvertently reinforcing the behaviours it aims to work against. ‘Scare tactics’, for example, can inadvertently ‘glamorise’ risky behaviours. ‘Survivors’ or ex-addicts can gain a heroic status in the telling of their story. Thus ‘scare tactics’ may make certain behaviours more attractive or compelling, especially to those with something to prove, those with an adventurous streak, or to those who are driven to cause themselves harm.” (Cahill pp. 147-65 at p. 148).

16. Exaggerated scare campaigns pose other dangers. Firstly, they further push to the margins of society the already most stigmatised and disadvantaged members of the community (Nutt & Hulbert 2014). Secondly they can induce fear so intense that the capacity of parents to respond appropriately is paralysed. Parents are more likely than children to believe the worst about illicit drugs. This is evident from our experience in taking telephone calls from parents who have just come across evidence of drug use by their child. Wishful thinking that all has been well with a child whose behaviour has changed is often switched to a panic infused by the most lurid media accounts about drugs. This can lead to parents plunging into a response that has the effect opposite to what they dearly want by, for example, pushing their child closer to a peer group that regards drug use as cool. Where there is drug use, the best outcomes occur when the channels of

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communication are kept open. This requires reliable information and understanding which do not thrive in a climate of exaggeration and panic.

Recommendation 2:

Anti-drug media campaigns should:

(a) be carefully designed so as to have the desired impact on the target audience and not be shaped by what may seem convincing to those not in that audience; and

(b) not cause parents to panic or otherwise react in ways damaging to the well-being of their children who may use drugs.

5. Media influence

17. The influence of the mass media is pervasive. The extent to which it is a harmful influence is itself a matter of concern but whether an influence for good or ill, parents feel themselves singularly powerless in its presence. A British think tank describes the potentially baleful influence of the media in the following terms:

“Methamphetamine has become very much the ‘new drug menace’. In the US, for example, it has, to some extent, assumed the status in the drug war narrative formerly occupied by crack cocaine. As a result, media panic has generated hyperbolic accounts of the threat that it represents. It is important that such hyperbole obscures neither a realistic understanding of the serious usage-related problems facing a significant minority of its users, nor the fact that much of its use is largely non-problematic”
(Transform Drug Policy Foundation 2009, p. 138).

In the final resort it must lie with government to limit the media’s harmful influence. Families and Friends for Drug Law Reform is aware of debate about the extent that the mass media influences young people to use illicit drugs. (Dance et al. 2005 pp. 2-5). It would welcome research in this area but believes that the role of media in the promotion of alcohol is probably of greater concern to parents.

Illicit drugs (and other substances) are often referred to in popular films and music. Of the most popular home video rentals and music recordings in the United States of 1996 and 1997, 22 percent of movies and 18 percent of songs depicted or included references to illicit drugs (US 2002). This entertainment is distributed principally through commercial media.

III. DARING TO THINK THE UNTHINKABLE: CONSIDERATION OF THE ADOPTION OF A REGULATORY MODEL FOR ILLICIT DRUGS

If there is one message to take from this submission it is that the advent of crystal methamphetamine in Australia has been a development which Australian drug policy has been ineffective to prevent and wind back. This is the take home message from the application of the market indicators examined above. Rich and with an existing substantial population of drug users, Australia is an ideal country for business growth with a potential demand a new illicit drug that is cheap to

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produce. Australia's drug policy has served to facilitate the expansion. This is a development that is not unique to Australia.

18. Initially at least, purified potent crystalline methamphetamine was not manufactured in Australia. It was imported (McKetin & McLaren 2004, 4). The first mention in the *Australian illicit drug report* of the more potent forms of methamphetamine imported from South East Asian being found in Australia was in the report of 1996-97. "There are already signs," it noted, "of this occurring:

- there has been an increase in the number and size of seizures of ice (crystalline methylamphetamine hydrochloride);
- amphetamines in tablet form, manufactured overseas, are starting to appear in larger quantities in Australia;
- there has been an increase in the number of Customs seizures of amphetamines" (AIDR 1997, 56).

At the time "most ice available in Australia [was] believed to be imported from the Philippines" (AIDR 1997, 62).

A year or two after that first appearance, the then Commissioner of the AFP told a *Herald Sun* journalist that Asian crime syndicates had carried out marketing research that showed a bigger market for amphetamine-like substances in the form of swallowed pills than an injected drug like heroin:

"They are making speed pills that look like ecstasy and in many cases they attempt to pass it off as ecstasy. Some people might think these tablets are sexier than heroin. And the syndicates have their market research which tells them that these days people are more prepared to pop a pill than inject themselves,' he said" (Mr Keelty quoted in Moor 2001 p. 1)

As it turns out, crystal methamphetamine is a most adaptable drug. It can be administered by smoking, intranasally or by injection (AIDR 2002, 35). Apart from its much advertised negative effects, it reduces fatigue, produces euphoria and a heightened sense of well-being, increases talkativeness, alertness and energy and increases libido (Victoria Police, p. 1-42). It thus has a lot going for it in the eyes of a high proportion of young people who are typical risk takers or who lack self-confidence and see it as a crutch to overcome social awkwardness (Blue Moon Research & Planning Pty Ltd 2000).

So the advent of an attractive new drug like crystal methamphetamine repeated in Australia what has happened in many other countries and with many other drugs. Time and again prohibition has motivated organised criminals to replace existing drugs with more potent new ones which produce far greater harm. This occurred during alcohol prohibition in the United States when more concentrated spirits displaced less potent and bulkier beers or in Pakistan and hill tribe villages in Indochina where heroin rapidly displaced traditional opium smoking (Seccombe 1995).

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“The consequence of an illicit market governed almost exclusively by the need to maximise profits, is that it becomes increasingly dominated by the more concentrated, potent and risky drug products and preparations that offer the greatest profits—injected heroin, crack cocaine, and methamphetamine for example” (Transform Drug Policy Foundation 2009, p. 38).

1. Portuguese decriminalisation

If the committee has followed to this point the arguments in this submission, Families and Friends for Drug Law Reform invites it to take what might seem an unthinkable step to consider the possible appropriateness of recommending that the government consider adopting a regulatory approach to the management of illicit drugs similar to that implemented successfully in Portugal.

Paradoxically as it may seem, the adoption of a regulatory approach would ensure greater control by governments of methamphetamine than is available to them under the present system of prohibition. The reason for this is explained by a British drugs think tank:

“A crucial point to emphasise is . . . that public management of drug availability ensures that regulatory models and additional controls can be deployed differentially, at different levels of intensity, depending on the risks of a given product or activity. It is not just that the greater risks associated with a given drug and/or population of users (or potential users) justifies greater regulation on practical risk reduction grounds, but that the differential application of regulatory controls can create an availability gradient that corresponds to the risk gradient of different drugs/preparations, behaviours and environments in which they are consumed” (Transform Drug Policy Foundation 2009 p. 39).

19. In July 2001 Portugal decriminalized all drugs including cocaine and heroin thereby becoming the only state of the European Union to explicitly “decriminalize” drug usage. “Decriminalization applies to the purchase, possession, and consumption of all drugs for personal use (defined as the average individual quantity sufficient for 10 days’ usage for one person).” “Thus, drug possession for personal use and drug usage itself are still legally prohibited, but violations of those prohibitions are deemed to be exclusively administrative violations and are removed completely from the criminal realm. Drug trafficking continues to be prosecuted as a criminal offense” (Greenwald, 2009 p. 3).

20. A review carried out on behalf of the Cato Institute in Washington after seven years of operation of the legislation found:

“Those data indicate that decriminalization has had no adverse effect on drug usage rates in Portugal, which, in numerous categories, are now among the lowest in the EU, particularly when compared with states with stringent criminalization regimes. Although post-decriminalization usage rates have remained roughly the same or even decreased slightly when compared with other EU states, drug-related pathologies—such as

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sexually transmitted diseases and deaths due to drug usage—have decreased dramatically. Drug policy experts attribute those positive trends to the enhanced ability of the Portuguese government to offer treatment programs to its citizens—enhancements made possible, for numerous reasons, by decriminalization. . .

“The data show that, judged by virtually every metric, the Portuguese decriminalization framework has been a resounding success. Within this success lie self-evident lessons that should guide drug policy debates around the world. (Greenwald, 2009 p. 3).

2. New-found flexibility in international drug policy

In the past the anticipation of a strong negative reaction from the United States has been an important factor constraining thinking that dared to challenge a very narrow interpretation of the multilateral drug conventions to which Australia and most of the rest of the world is a party. This old thinking saw Prof David Penington, chairman of the Victorian Premier's drug advisory Council, and his deputy chair, Prof Margaret Hamilton summoned in January 1996 to Hobart to meet Bob Gelbard, President Clinton's Assistant Secretary of State for Narcotics and Law Enforcement where they were told what not to recommend in the reports they were preparing for the Liberal Victorian government. Gelberd told them that "the United States government viewed with concern any countries who appear to be or are actively considering liberalisation of drug laws." (Hamilton, p. 115). By virtue of extraordinarily important statements made in February this year, by the present holder of Gelbard's office and by the White House so-called drug czar, things have radically changed with the United States availing itself of the inherent flexibility of the drugs conventions.

In the course of a forum on 6 February entitled *What's Happening in U.S. Drug Policy at Home and Abroad?*, Ambassador William Brownfield identified four principles that should guide United States international drug policy. The principles point to the negotiating stance that the United States is likely to bring to the United Nations, Special Session on drugs of the General Assembly in 2017 (UNGASS). They reflect the view of the current Democrat administration. In the light of a strong libertarian strand within the Republican Party (represented by the likes of Ron Paul) and the rapid advances of reform of the criminal law motivated by the runaway costs and ineffectiveness of its vast punitive corrections system by Republican states like Texas, it is unlikely that a United States administration of either political stripe will continue pushing its notorious strong prohibitionist stance to drug policy:

1. The integrity of the drug conventions should be maintained. No "dramatic change" should be made to them in the 2017 UNGASS review.
2. A principle of flexibility. The drug conventions are very flexible. It is legitimate for states parties to take full advantage of this flexibility.

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3. Tolerance of different national policies. In exercise of the wide margin of appreciation that the conventions allow, a large number of countries are now trying different drug policies. This diversity should be tolerated.
4. There is a consensus that high level drug trafficking controlled by organised crime should continue to be targeted. Amb Brownfield made clear that the focus should be on high-level drug dealers and not users or user dealers.

The forum was hosted in Washington DC by the Centre for Strategic and International Studies (CSIS). The Acting, now confirmed, Director of the White House Office of National Drug Control Policy (Mr. Michael Botticelli) spoke at the same forum. He described himself as coming from a public health background and expressed the view that while he did not favour drug legalisation, he believed drug policy should be guided by public health considerations and particularly by the concept of recovery. The comments by the two principal speakers in the discussion with the audience that followed reveal recognition that drug policy is at the heart of efforts seriously underway in the United States to reduce the rates of incarceration and reform the criminal law. The audio of this forum is available on the websites of both the Department of State and the CSIS that hosted the forum (<http://csis.org/event/whats-happening-us-drug-policy-home-and-abroad>). The views expressed represent a major development in favour of the relaxation of the prohibitionist interpretation of the drug conventions and of United States policy that has for years promoted that restrictive interpretation of the Conventions.

24 June 2015

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