STANDING COMMITTEE

2 3 MAR 2007

on Family and Human Services

Submission No: 66 Supp to Sub: AUTHORISED: 9/5/07

To: The Standing Committee on Family and Human Services Inquiry into the impact of illicit drug use on families.

To address the impact of the importation, production, sale, use and prevention of illicit drugs on families.

The following is a statement from a family in Sydney, New South Wales:

Con

8 3

In the late 1990's, when our two sons attended high school in Sydney, they were both introduced to illicit drugs AT SCHOOL. At the time, their father and mother, both loving and caring parents, had no idea this was happening; only years later when it was almost too late, did their children disclose this to them. The younger son was a witness to a knife attack in the schoolyard of Hunters Hill High School over a pot deal gone wrong (this incident was reported in the press at the time). Both boys smoked pot at school, and were shortly afterwards introduced to the drug heroin by a school friend (who has since died of his drug problem). The older son has been taking the substitute methadone for the past six years, and the younger son has struggled with various substances, but managed to quit the methadone after the death of his (above) friend last year; however it was a harrowing ordeal, and he is still recovering.

Aside from being alarmed by the lack of "duty of care" of schools in our society, we the parents are prompted from our own dismal experiences of the last ten years to ask this question: if we can't even keep illicit drugs from our youngsters at school, how can we expect to keep these same illicit drugs from society at large? Can we realistically expect that people will never want to take drugs other than the legal (and equally if not more lethal) ones of alcohol, tobacco and prescription medications – and if they do take other illegal drugs, should they be treated as morally corrupt criminals? This family's point of view is that the focus on abstinence-only, morality-based treatment and policies is FUTILE – instead, there should be a regulated public health approach to ALL drug-taking – and one which recognizes that in many cases drug addiction can only be managed, not cured forever through total abstinence.

1. The financial, social and personal cost to our family through having children who have taken and are taking illicit substances:

Our sons have mostly failed to gain employment because of the enormous physical and psychological problems associated with drug use, the ensuing lack of confidence and sense of social isolation through being branded a "drug addict" in the eyes of society. Help was never there for them in the first place, when they needed it, when peer pressure was stronger than anything else in their lives and the natural urge to be separate from parental authority triumphed. We look at it like this – they were too young to say no, but old enough to know that they should hide it! If these substances were controlled and regulated, they probably wouldn't have found their way into schools, where we thought our children were safe. They might have had to deal with all this at a later age, but at least then they would have been mature enough to make an informed decision.

Their father and I have been quite severely financially disadvantaged through having to support them as much as necessary through these difficult times, not wanting to desert them in their hours of need, wanting to keep them housed and cared for, always trying to instill in them a will to carry on with their lives, to not be overwhelmed with shame just because they rely on a drug that is illegal, and to find a reason to go on living.

2. The impact of "harm minimisation" on our family:

Without the methadone program, we doubt that our children would be alive now. However, we do find it difficult to understand how it is that private companies are profiting from methadone sales to our children, and seem to be making very little attempt to help them get off of it. Another problem associated with illicit drugs is for families to find factual information about the drugs such as heroin – whether it might be better from a health point of view to administer the actual drug under strict supervision and requisite counseling, rather than to substitute with a synthetic alternative that may be more detrimental to the body, and (some claim) even more addictive.

We have many questions which don't get answered simply because certain substances are illegal, and shrouded in secrecy.

3. Ways to strengthen families, such as ours, who have been coping with illicit drug use:

Support organisations such as Family Drug Support whose members consist of people such as our family, who feel that our children have become, effectively, foot soldiers in the "WAR ON DRUGS", a never-ending war which is being lost due to governments who are too afraid to see the reality in the world today. Drugs will remain ever-attractive to people, and more drugs are being created every day to attract them. The real criminals are peddling these drugs to ever-younger consumers wishing to escape their own reality. There needs to be drug policy reform - the current enforcement model is counterproductive to public and personal safety. It is totally hypocritical to reject a regulatory approach to illicit drugs, yet we regulate alcohol and tobacco, two highly addictive and dangerous substances. The war on drugs has become a war on drug addicts, but we forget that the drug addicts are ourselves, our families and our beloved children - so let us broaden our minds on this subject.

We hope that our heartfelt sentiments reach you there in Parliament. Sincerely,

Janice Swheeland

PETER G. SUTHERLAND (FATHER)

JANICE J. SUTHERLAND (MOTHER)