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Drug Free Australia Limited A.C.N. 102 169 139

We are a not-for profit community based group of Australian organisations and communities, working for a Drug Free Australia.

Family and Community Affairs Committee
Substance Abuse Inquiry

Your Reference: Our Reference:

27-11-2002

Dear Committee members,

House of Representatives Standing Committee on Family and Community Affairs
Submission No: 293
Date Received: 27 Nov 02 .
Secretary: S.Fosbe

Thank-you for your invitation to address you today.

Attached is a brief outline of our organisation's background and major issues of concern relating to the inquiry's terms of reference.

Supplementary information is available to support this submission, but given the committee's schedule and the large volume of qualitative and quantitative scientific research already presented and the number of community responses available to both our organisation and to the committee today's submission seeks to summarise the priority issues of concern relevant to today's meeting.

Michael D. Robinson Managing Director Drug Free Australia Ltd.



Who is the DRUG FREE AUSTRALIA GROUP?

In September 2001

87 community organisations including heath professionals concerned parents and community leaders gathered at a meeting in Hurstville in Sydney to discuss their concerns about drug abuse and drug policy in Australia.

As a result of that meeting a national network of concerned organisations was formed to share information relating to trends in the community, professional health care and family support programs and provide greater access to relevant information and programs to interested groups and individuals.

In October 2002

The Drug Free Australia Group was formalised under the banner of Drug Free Australia Limited with the support of a growing number of affiliated organisations and concerned individuals both within Australia and internationally.

The Charter of this group includes a strong focus on supporting primary prevention, treatment, enforcement and interdiction as the tenants of effective drug policy. * see p.13.



Who is MICHAEL D. ROBINSON?

Michael Robinson was appointed Managing Director of Drug Free Australia Limited after a long association with affiliated community groups and having a strong businesses background which included actively supporting the Steering Committee to form the Drug Free Australia Group.

He has written a number of articles, independent reports and submissions on state and federal government policies including strategic blueprints and reviews of current law enforcement practices. He currently sits on the board of a number of community groups including Drug Free Australia Limited.

His background includes freelance journalism, radio commentator, as well as the Editor for the Sydney suburban newspaper The Canterbury Suburbia.

In 2001 he served the not for profit community's professional standards advancement in an honorary capacity working to cofound The Association Management Institute and assisted in the development of a number of training programs that are provided in conjunction with The Sydney Graduate School of Management and Royal Melbourne Institute (RMIT) of Victoria to promote further training and education for the volunteers, staff and executives of not for profit organisations, associations and charities in the not for profit sector.

He is married with 3 young children and has taken an active interest in parent and education issues for many years through an active community and church life. He also has Chaired the Education Committee for one community organisation for the past 3 years.

He has been actively involved with his local church, school and Parent and Citizens group.



ISSUES OF CONCERN.

- Consistent with Australia's laws and international agreements, Drug Free Australia Limited believes the interests of ALL persons in the Australian community are served in the absence of drug abuse, and strongly urge Australian governments to comply with those agreements including our Australian federal laws and the existing United Nations Conventions on narcotic drugs and psychotropic substances.

- We define drug abuse as;

"… any use of illegal drugs, or the inappropriate use of legal drugs or substances."

- We support laws, policies and practices aimed at preventing drug abuse, and strongly advocate comprehensive prevention of harm policies be adopted at the Federal Government level.



Review and Evaluation

There is significant community *concern* that the Federal 'harm minimisation' policy has been incrementally 'watered down' and subsequently (although perhaps well meaning) it has led Australia towards a practice of the '*supervision of harm*' and even in some places the '*normalisation*' of the harm of illicit and addictive drugs. A review and evaluation of the federal policy would identify the clear need to implement a national standard for the of prevention of harm through the adoption of **Harm Prevention** as the Federal Government policy on drugs.

We *support* the application of the highest scientific standards and ethics in all research, evaluation and application in the formulation of policies, primary prevention and treatment strategies. We urge this same standard be applied to all programs, and particularly those where federal money is being spent either directly or indirectly through federal or state government programs or third party activities. **eg Methadone program, Kings Cross Injecting Drug Use Room.*

To this point **we strongly urge** a thorough independent review of the implementation of the current drug policy with an aim to the adoption of an unambiguous and comprehensive policy of the prevention of harm, being consistent with international conventions, Australian Commonwealth law and the Australian community's desires.

We *support* the communities' access to accurate knowledge and skills to combat drug abuse, and to that end we strongly encourage all levels of government and Australian media to assist in this mission and discourage the glorification of drug abuse and present a consistent message.



Prevention of Harm

We *support* laws and policies aimed at preventing drug abuse. In this regard The Kings Cross Drug Use room and prevalence of long term maintenance of Methadone supply should be reviewed as they appear to be inconsistent with preventing drug abuse. Current policies provide families with inadequate skills or resources to address the family relationships of a toxic and addictive culture, where as the adoption of comprehensive prevention of harm policies would move government programs towards assisting families by providing consistent government programs from law enforcement, medical support, education programs, Heath-care responses and the funding and support for practical and effective prevention focussed programs including the practical support of families through programs such as the '*Tough Love'* program developed by the Tough Love organisation and the '*Parent to Parent'* Workshops run by Safe Passage and introduced to this month by Keep Our Kids Alive – I Say No to Drugs Inc.

We *agree* that substance abuse prevention means the promotion of life without drug abuse and this definition should govern all drug strategies and policies and we strongly support the primary prevention of substance abuse efforts worldwide. To that end we strongly urge the introduction of a Federal policy of HARM PREVENTION whereby community expectations are supported by a Federal government focus on effective and comprehensive prevention of harm in the areas of; supply reduction, law enforcement, interdiction, crime prevention, education, secondary and tertiary prevention including effective treatment and rehabilitation.



We **oppose** all strategies and policies that encourage, enable or sustain drug abuse. Community attitudes within Australia, and international data, shows that the prevention of harm is the only effective drug policy, but current policies continue to undermine this outcome.

The ongoing economic costs to society has often been estimated around \$30 billion or more per annum. While this figure does give some quantitative amount for statistical purposes, it must be recognised that for every dollar included there is some victim of crime, some family member who has experienced theft of precious family heirlooms or household items all for the purposes of trading for an addictive substance. Everyone of them is asking why the government has undermined their family and why government programs are focussed on helping children run away from home and take drugs rather than to support the family home and environment and not take drugs. While this could be debated extensively the bottom line is that there are many affected parents who do feel this way as they experience the outcomes of the current government policy.

The cost to the families affected is devastating, the cost on family structure and the fabric of our society almost repairable, particularly to those affected families. Perhaps if it were only one family involved in the trauma caused by the heartbreak, shattered dreams and personal terror it would still be too much. To see this story repeated across Australia, across every socioeconomic section of our community is a plea for help that cannot go unanswered, it is a plea that this committee is urged to hear and respond to be recognising the need to work towards a clearer and unambiguous federal policy.

The Australian community do not want the federal government to become the drug pusher any more than medical doctors condone the addictive use



of medicines. In the same way ... Australians should be able to expect government policies, practices and related activities to consistently work towards a policy of the comprehensive prevention of harms from drug abuse.

Example:

Speeding v. Doing speed.

A comparison of government policy and community expectations.

It is government policy across Australia to actively discourage speeding. All community attitudes and government activities are founded on a sound policy of the prevention of harm from speeding and this has been not only adopted uniformly with good reason, but is actively pursued with comprehensive education and law enforcement policies.

Parents and the community expect the law enforcement authorities to work consistently with the community's desire for the prevention of harm from the dangers of speeding.

Likewise the community has a strong and valid expectation that Federal policies will focus on the **prevention of harm** and that such a policy will be adopted at all levels of state and local government and all programs and activities funded by public monies will be consistent with that policy.

It should also be noted that there is currently no measure in place that tests and evaluates the effect of illicit drugs (including cannabis) on the road or in the workplace regarding either safety or compliance to federal laws. This is clearly an area that must be addressed as there are sufficient community concerns that illicit drug use may possibly be a related factor and to ignore this threat to community safety would not be an appropriate response.



Treatment and Rehabilitation

The lack of adequate treatment and rehabilitation places, and resources is a blight on Australian society.

Example:

The mother of a 15 year old girl realises after her daughter's second overdose that the family has a problem that has to be addressed.

Despite hospital urine tests (that the mother fought hospital staff to have processed) that clearly identify poly-drug use, the daughter denies using drugs, but a family counselling session identifies behaviour of concern as early as 11 years old. The family GP suggests methadone, but asking around the mother is concerned that the methadone program offers her daughter little real hope of a drug free future and there are no other alternatives available.

This mother attends a local parent support group and is put in touch with a friend of a friend who has a farm and has had positive results taking in addicts and providing a family network solution to this need.

The federal and state government programs have failed this family.

They have failed to help them to prevent the problem, they have failed to provide them with the strategies or skills to prevent or identify the problems underlying the addictive and toxic culture and they have failed the family in helping them when they sought treatment or rehabilitation.

Healthcare costs are in fact increased the longer drug abuse goes untreated, and the personal toll on parents and family members in stress and worry may not appear in any federal government report but is nevertheless quite real and having significantly devastating affect on the lives of Australians. While estimates of exact figures comparing the savings of early intervention with the higher costs of treating the hardened addict could be provided we also recommend thorough evaluation and review of the available data relating to this aspect of substance abuse.



We should not surrender to this threat, as some would suggest. Instead we must recognise that some members of our community are being threatened. A policy of harm minimised, is ultimately watered down to the practice of harm normalised. Government resources must be directed not only at primary prevention, but also towards secondary and tertiary prevention including effective abstinence based treatment and rehabilitation as supported by Australian law, international agreements, international data and Australia community attitudes as represented by the strong support Drug Free Australia has received.

As with some medical conditions such as cancer, terminal illnesses or debilitating injuries, deformities or mental obstacles our Australian society pulls out all stops to assist the afflicted person overcome the thing which has them in their grip. This resolve should be no less where an addiction has traumatised a member of our community.

Again we come back to the focus of Federal Government policy. Many centres and effective programs have been denied Federal government funds because of their abstinence - based approach of harm prevention.

A number of doctors, both GP's and researchers have conveyed stories of bureaucratic difficulties they have faced because they have adopted an unrelenting philosophy of abstinence from drug use in their programs and been told they 'must' implement the principles of 'harm minimisation' and its 'optional' drug use message.

Although they oppose this on scientific grounds, medical ethics and in response to community attitudes including the pleas of parents, they still face the obstacle of stubborn bureaucrats who demand nil variation from



Law Enforcement

It is inconsistent with federal laws and international agreements to;

- continue a with a policy that makes drug use optional for the abuser.
- Allow federal government or state government funds to be used in such a way as to undermine federal laws, or breach those laws. Eg. Kings Cross Drug Injecting Room a 'no go area for federal and state law enforcement officers and Federal Health Dept. providing training, videos, literature and resources to addicts to breach federal laws and international agreements.

We agree that substance abuse prevention means the promotion of life without drug abuse and this definition should govern all drug strategies and policies and we strongly support the primary prevention of substance abuse efforts worldwide.

We oppose all strategies and policies that encourage, enable or sustain drug abuse.

It is preferable both in social and economic measures to enforce the law within a comprehensive prevention of harm policy, to do otherwise even spasmodically has seen the societal and economic costs continue to escalate since the introduction of harm minimisation.



ATTACHMENT

CHARTER*

As the Commonwealth of Australia is a signatory to References A, B and C, Drug Free Australia declares that:

We support primary prevention, treatment, enforcement and interdiction as the three tenets of an effective drug policy.

We define drug abuse as any use of illegal drugs, or the inappropriate use of legal drugs or substances.

We believe the interests of all persons are best served by living in a society free of drug abuse.

We support the existing United Nations Conventions on narcotic drugs and psychotropic substances and urge governments to comply with them.

We support laws and policies aimed at preventing drug abuse.

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We agree that substance abuse prevention means the promotion of life without drug abuse and this definition should govern all drug strategies and policies and we strongly support the primary prevention of substance abuse efforts worldwide.

We oppose all strategies and policies that encourage, enable or sustain drug abuse.

We support the communities' access to accurate knowledge and skills to combat drug abuse, and to that end we strongly encourage the media to assist in this mission and discourage the glorification of drug abuse.

We support the application of the highest scientific standards and ethics in all research, evaluation and application in the formulation of policies, primary prevention and treatment strategies.

We commend the achievements and support the work of abstinence-based organisations to advocate, communicate and attain the goals of this Charter.

We seek prompt and coordinated action at local, national and International levels to achieve the goals of this Charter and invite others to join us in this vision and mission.

We dedicate this Charter to the health and well being of present and future generations.

* Substantially based on the "*Visby Accord*' reached by 100 Delegates from 25 Nations held at Visby, Sweden between 3-6 May 2001

- <u>References:</u> A. Single Convention on Narcotic Drugs, 1961
 - B. Convention on Psychotropic Substances, 1971
 - C. Convention against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances, 1988