
AUSTRALIAN PARLIAMENTARY GROUP FOR DRUG LAW REFORM

& AUSTRALIAN DRUG LAW REFORM FOUNDATION

E-NEWSLETTER – NOVEMBER 2009

About the Groups

The Australian Parliamentary Group on Drug Law Reform

The Australian Parliamentary Group on Drug Law Reform (APGDLR) is a cross party group of 100 MP's from our State and Commonwealth parliaments. The group was set up in 1993 after a meeting in Canberra convened by Michael Moore (ACT Assembly) and Ann Symonds (MLC, NSW).

The Australian Drug Law Reform Foundation

The Australian Drug Law Reform Foundation was established in 1994 when a significant number of people in the community endorsed the Charter for Reform that had been developed by the Parliamentary Group.

The Charter for Reform sets out a series of principles that seek to encourage a more rational, tolerant and humanitarian approach to the problems created by drugs and drug use in Australia.

The APGDLR and the ADLRF meet at least once a year to hear from experts in the field, to share information about what is happening in our jurisdictions and to plan future work. The group also produces occasional newsletters on issues relating to drugs in Australia and international developments.

If you would like more information about the Parliamentary Group or the Foundation or would like more information please contact Dr Mal Washer MP 02 6277 2114 or email Mal.Washer.MP@aph.gov.au or Penny Sharpe MLC on 0292302741 or email Penny.Sharpe@parliament.nsw.gov.au Australian Parliamentary Group for Drug Law Reform

AUSTRALIA

Return on Investment 2:- Evaluating the Cost Effectiveness of needle and syringe programs in Australia. – The National Centre in HIV Epidemiology and Clinical Research, University of NSW – published by the Department of Health and Ageing – This report can be read in full at the following link.

<http://apo.org.au/research/return-investment-2-evaluating-cost-effectiveness-needle-and-syringe-programs-australia-200>

Here is a link to a piece published recently in the Herald Sun which will be of interest–

Prohibition fails

<http://www.heraldsun.com.au/opinion/prohibition-has-failed/story-e6frfhqf-1225782648311>

Police Chief says legalise and regulate all illicit drugs

“LEGALISE all drugs: the war on drugs just has not worked,” is the message that former police chief from San Diego and Seattle is conveying on his Australian tour.

Dr Norm Stamper, author of the book “Breaking Ranks” is in Australia to encourage the Government to resist the path taken by the US and find a better way of dealing with illicit drugs.

Dr Stamper argues that it is time to reflect on President Richard Nixon’s “war on drugs” and ask what it has achieved. He is a key adviser to LEAP (Law Enforcement Against Prohibition), a group of about 16,000 US criminal justice professionals who are fed up with the damage caused by this failed strategy. He says: “I want to learn from what is happening in Australia and also explain and outline the mistakes the US has made.

“I would hate to see Australia going down the same track as the US where the war has clearly been lost”.

Australia has not been quite as simple-minded as the US on this issue – our governments have, at least, invested substantially in treatment and in harm minimisation programs. These have been extraordinarily successful in reducing the damage associated with the use of illicit drugs compared to countries that have slavishly followed the US model.

The difficulty for Norm Stamper is that his message challenges our intuition. We all know and understand that the illicit drugs are dangerous for health. We understand the damage that alcohol and tobacco, the currently legal and widely available drugs, do to our community. Our gut reaction is that if we did not prohibit cannabis, heroin and ice the situation would get much worse.



The reason that his message is counter-intuitive is it seems that making such drugs legal will surely create even more problems.

Norm Stamper’s point is that current policies have increased such burdens and he points to the US to give examples of police corruption, colossal investment in the prison system, drug-related violence and a drain on community resources to argue that there has to be a better way.

He points to the US expenditure of \$69–70 billion each year on a war that has caused tens of millions of Americans to be incarcerated for non-violent drug offences.

Research from the US National Council on Crime and Delinquency in 2006 demonstrated that the US incarcerates at a rate four to seven times higher than other western nations such as the UK, France, Italy, Australia and Germany – but Norm Stamper warns that we are on the same slippery slope. The majority of people in western nations who are in jail are there for drug-related crime.

The nub of Dr Stamper’s argument is that the process of prohibition actually does more damage than the drugs themselves. That is why he advocates for government control, including controlled outlets and taxation. His approach will certainly mean less drain on

Community coffers in the long term and has the potential to undermine the illicit drug trade. And that is why he is in Canberra to meet with politicians and policy makers in the hope that a new approach can be developed limit the harm and to minimise corruption, misery and a massive tax burden.

By Michael Moore who is a foundation member of APGDLR and former member of the ACT Legislative Assembly. He was an independent minister for health in the Carnell government.

UK NEWS (From the October 2009 TRANSFORM Newsletter)

Legalisation Increasingly prominent in UK media

In the past couple of months we have seen a plethora of articles in UK newspapers calling for an end to prohibition (albeit mostly in the Observer and Guardian).

The articles are written by a variety of people including a former chief constable, a well-known British philosopher and the former President of Brazil not to mention a number of journalists.

This increase in the number of articles in the British press reflects a change that is going on globally. As [a number of Latin American countries move towards decriminalisation](#), it is sad that the UK government is so far behind in its thinking.

First up was [Simon Jenkins in the Guardian](#) who argued that the War on Drugs was '**moral idiocy**' and praised the Latin American governments for their courage in admitting that current policy has failed.

He said, 'The underlying concept of the war on drugs, initiated by Richard Nixon in the 1970s, is that demand can be curbed by eliminating supply. It has been enunciated by every US president and every British prime minister. Tony Blair thought that by occupying Afghanistan he could rid the streets of Britain of heroin. He told Clare Short to do it. Gordon Brown believes it to this day.'

This concept marries intellectual idiocy - that supply leads demand - with practical impossibility. But it is golden politics. For 30 years it has allowed western politicians to shift blame for not regulating drug abuse at home on to the shoulders of poor countries abroad. It is gloriously, crashingly immoral.'

Days later in [The Observer](#), [Fernando Henrique Cardoso](#), former President of Brazil, summarised the report he and the former presidents of Colombia and Mexico co-authored.

'It is time to admit the obvious. The "war on drugs" has failed, at least in the way it has been waged so far. In Latin America, the "unintended" consequences have been disastrous. Thousands of people have lost their lives in drug-associated violence. Drug lords have taken over entire communities. Misery has spread. Corruption is undermining fragile democracies... The core conclusion of the statement is that a paradigm shift is required away from repression of drug users and towards treatment and prevention. The challenge is to reduce drastically the harm caused by illegal narcotics to people, societies and public institutions.'

British philosopher [John Gray got in on the act in The Guardian](#) a few days later arguing that '**the case for legalising all drugs is unanswerable.**'

He wrote, '**The fact is that the costs of drug prohibition now far outweigh any**

possible benefits the policy may bring. It is time for a radical shift in policy. Full-scale legalisation, with the state intervening chiefly to regulate quality and provide education on the risks of drug use and care for those who have problems with the drugs they use, should now shape the agenda of drug law reform.'

Just days later, the [Executive Director of the UNODC](#) wrote an article in the *Observer* disputing these arguments. He initially focussed on the claim made by John Gray and many others including Transform, that the costs of prohibition outweigh the benefits.

Costa wrote, '**Some even say that the costs of prohibition far outweigh the benefits (although there is no body count of people who haven't died thanks to drug control versus those who have been killed in the crossfire).'**'

He then went on to argue that, '**Maybe western governments could absorb the health costs of increased drug use [that he assumes would occur once drugs were legalized], if that's how taxpayers want their money to be spent...But what about the developing world? Why unleash an epidemic of addiction in parts of the world that already face misery, and do not have the health and social systems to cope with a drug tsunami? ...Critics point out that vulnerable countries are the hardest hit by the crime associated with drug trafficking. Fair enough. But these countries would also be the hardest hit by an epidemic of drug use, and all the health and social costs that come with it. This is immoral and irresponsible.'**

A few months ago we had a [comment posted on the Transform blog](#) refuting this argument.

'Was it just me or did someone else pick up the massive contradiction underlying the WDR's main argument for continued prohibition? In section 2.1 of the report, the UNODC crowd pretty much concedes that a legalize-tax-and-regulate framework would work...but only in developed countries. Developing countries are thought unable to impose meaningful taxes and regulations on a legal drug industry, and therefore, would see their consumption levels explode. Thus, global prohibition must continue for the sake of poor countries (the condescension is almost unbearable)....

Yet those same developing countries are expected to, simultaneously,; a) successfully interdict supply; b) reform police forces and judicial systems; c) fight corruption in the face of massive illegal profits; d) address the problem of slums and dereliction in cities; e) close open drug-markets; f) provide universal access to drug treatment; etc. etc. If the governments of developing countries are considered too weak to tax and regulate small national drug markets, why would anyone think them capable of performing that daunting list of tasks? The contradiction is so glaring that my eyes hurt.'

On the same day, and in the same newspaper, that Costa wrote his piece, [Tom Lloyd, a former chief constable](#), argued that the War on Drugs was a '**not only very expensive and misdirected activity, but counterproductive and harmful'**.

He went on to call on '**police leaders throughout the world to challenge the status quo and focus resources on serious, organised criminals, not blighted users, and to focus on harm reduction not some pie-in-the-sky dream of a drug-free society. Where they lead, politicians will follow.'**

In the same edition of *The Observer* there was a [leader article](#) calling for '**a new drugs policy'** and arguing for an honest evaluation of the current drugs laws.

'The entire framework of the debate must change. In Britain, we operate with laws that start from the premise that drug use is inherently morally wrong, and then seek ways to stop it. Instead we must start by evaluating the harm that drug use does, and then look for the best ways to alleviate it; and we must have the courage to follow that logic wherever it leads.'

This has been Transform's position from the start. Now is the time to assess the impacts of the current policy and look to a future where drug use is not a moral issue but a public health issue where drugs are controlled and regulated by governments not gangsters.

Other great stories have appeared in:

- [The Financial Times - Why it's time to end the War on Drugs](#)
- [New Scientist -Better World - Legalise Drugs.](#)

There have been a lot more articles over the past couple of months calling for change. Please see our miniblog: <http://delicious.com/Transformminiblog> for a wide selection of other stories.

Heroin Prescribing

Transform welcomed the results of the heroin prescribing trials announced this month ([as reported by the BBC](#)), and the understanding that these pilots would be rolled out further still - perhaps to four or five new locations.

Let us hope that these trials pave the way to more discussion on how best to control and regulate drug supply and use, beyond the limited numbers able to avail themselves of medicalised heroin. And that those members of the medical establishment who have held this initiative back, feel their consciences pricked and support a scheme that could save the lives of hundreds more in the future.

More on the story can be found here:

<http://transform-drugs.blogspot.com/2009/09/heroin-trials-welcome-but-wait-has-cost.html>

<http://www.time.com/time/health/article/0,8599,1926160,00.html?xid=rss-topstories>

High Society: Britain's drug taking clubbers

Dr Fiona Measham and Dr Karenza Moore, criminologists from Lancaster University, published research today in the Journal of Criminology and Criminal Justice, looking at how drug-induced dancing and socialising has become part of modern culture.

They discovered evidence that almost all Britain's thousands of clubbers routinely take drugs, in particular cocaine (tried by 83% of people), cannabis (93%) and ecstasy (85%). Eight in ten had taken a drug within the previous month, and nearly two in three of those questioned has taken, or were going to take, drugs on the night they were surveyed.

They conclude:

'We would like to see a sensible debate about drugs without the shock, horror bit - if only because of the sheer numbers we see involved... We need a more sophisticated but also more realistic response. If people have a choice they don't really want to break the law. That's where the debate needs to take place'

[The research was reported in the Times here.](#)

Wave of Decriminalisation across South America

At the end of August both Mexico and Argentina enacted legislation to decriminalize personal possession of small quantities of all drugs. We've reported the story in more detail [on our blog](#). Previous blogs on the story can be read via the links below:

- [Argentina Supreme Court to Decriminalise all drugs today](#)
- [Drug decriminalisation in Argentina? \(April 08\)](#)
- [Argentine president calls for decriminalisation of drug use \(Aug 08\)](#)

Related coverage:

- [Mexico decriminalises personal drug possession](#)
- [Former Latin American presidents call for a paradigm shift](#)
- [Honduran president calls for legalisation of drugs](#)
- [Mexico's opposition calls for legalisation of drugs](#)

Further reading:

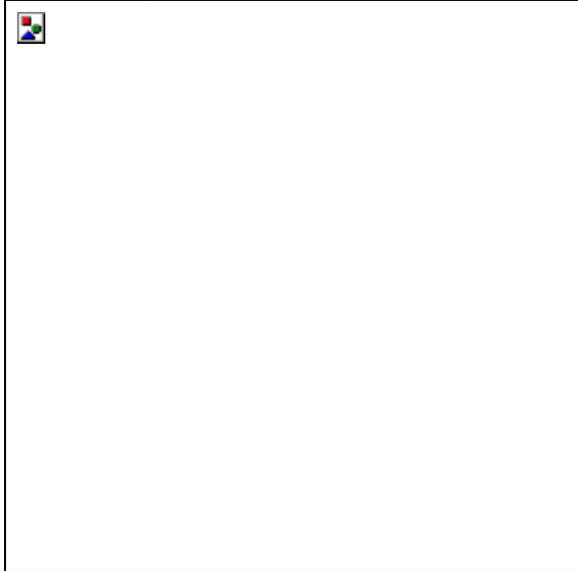
[Drug policy reform in practice](#) - useful new briefing from TNI on decriminalisation and other forms of reform in Europe and the America's

[**thanks to Stop the Drug War**](#) and [**Cato@Liberty**](#)

Book of the Month

The Candy Machine: How Cocaine Took Over the World

We'd like to recommend *The Candy Machine: How Cocaine Took Over the World* by Tom Feiling as our book of the month.



Here's a review by Transform volunteer David Hart below:

The author of this book makes plain in his introduction that he was less interested in the opinions of experts and celebrities than he was in hearing the viewpoint of the ordinary people involved in the cocaine trade, from peasant coca farmers through to urban crack smokers, in the interests of presenting as authentic a picture as possible of the impact of cocaine on society.

The book is divided into three sections. The first charts the history of the cocaine trade from the **conquistadors** to the present, as well as the increasing levels of repression the US government has employed against it.

The second analyses the cocaine trade's impact on those countries that produce it or through which it is trafficked, focussing on Jamaica, Mexico, and of course Colombia, asking why that country is the only one in the world to be a producer of cocaine, cannabis and heroin (apparently a combination of proximity to trade routes, a long tradition of lawlessness, economic inequality and chronic underinvestment in the rural economy). In all cases Feiling attempts to show how the economic circumstances of these producer/transit countries makes the cocaine trade so powerful that law enforcement efforts are doomed never to be able to do more than inconvenience it, let alone eradicate it. Indeed, the level to which Colombia's government, police and judiciary are complicit with the cocaine traffickers is truly spectacular.

A salutary warning of the likely consequences of continuation of current policies is the incipient transformation into narco-states that afflicts those countries in West Africa which have become transit hubs for cocaine entering Europe; Feiling notes that the cocaine trade offers prospects for economic development that international neo-liberal financial policies have failed to provide for these states with weak government and scant resources, and is therefore unlikely to be effectively opposed by the local population.

The third section concerns prospects for the future. There is detailed analysis of the demand for cocaine and why it is so persistent, as well as the health consequences for different forms of the drug, which concludes that problematic use, especially of crack, is usually a symptom of underlying emotional problems, sometimes but not exclusively associated with poverty and deprivation, noting that the 'career' of the average cocaine user is far shorter than that of typical heroin or alcohol users.

In the chapter analysing the arguments for legalisation and where they are coming from, we hear from Jack Cole of the group [Law Enforcement Against Prohibition](#), and Sir Keith Morris [now a Transform supporter], whose experience as the UK's ambassador to Colombia has led him to come out against the war on drugs - both indicative of the fact that even those charged with defending prohibition can draw their own conclusions when exposed to the consequences.

Discussion of cocaine rarely makes much mention of coca leaf tea/chewing, but here we are told of the Colombian coca-leaf drink producers who had to fight a lawsuit to be allowed to use the word 'coca' in the name of their product, and of the [WHO report](#) (it was [suppressed by the USA who threatened to withdraw funding](#)) that found that chewing coca leaves had negligible health risks.

The book concludes that, while those in charge of drug policy are '**unwilling to admit their addiction to...the illusion of control**', change is unlikely to come from above unless prohibition becomes financially unviable, but in the US there is already widespread change underway at state or city level, and that whatever drug policy is in place, the problems of compulsive use will not go away until '**nations produce responsible citizens with stakes in conventional society**'.

That is not in itself a comforting thought, but hopefully this book will help spread the reform message a little further; certainly it's a well researched and informative work for those interested in the subject.

- The Candy Machine has also been reviewed by [The Guardian](#) and [The Telegraph](#)
- The Home Affairs Select Committee is looking into the cocaine trade at present. Transform has sent in [a submission](#) and is expected to be called to give evidence later this year.
- Transform is pleased to announce the launch of our Amazon Associate bookstore. We've now assembled a list of some of the best books available about drug policy and drug law reform, which can be found [here](#).
- All books listed have a link to www.amazon.com where the book is available to purchase.
- Buy books through our site and you'll even be helping Transform make some money as we receive a 10% donation of the cost of the book at no extra cost to you.

Please send an email to info@tdpf.org.uk to recommend books, or if you'd like to review any of the books listed.

UNITED STATES OF AMERICA

Given media comments on the efficacy & safety of implant naltrexone the paper on oral vs. implant naltrexone has now been published in the prestigious international Journal, Archives of General Psychiatry (66, 10 2009) If you would like to read the whole article please access the attached pdf file [G.K.Hulse, Professor of Addiction Medicine, University of Western Australia, School of Psychiatry & Clinical Neurosciences, Unit for Research and Education in Drugs and Alcohol, D Block,](#)



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Dr Alex Wodak (Director Alcohol & Drug Service, St Vincent's Hospital, SYDNEY AUSTRALIA) writes: I hope you enjoy this recent piece from the Wall Street Journal - which until recently never ran a piece which questioned the War Against Drugs

Decriminalizing drugs can boost corporate profits and state tax revenues *By Paul B Farrell, MarketWatch (Wall Street Journal)*

You can access the whole article at the following link.

<http://www.marketwatch.com/story/end-the-war-on-drugs-start-the-legalization-2009-10-13?pagenumber=2>

Dr Wodak has also provided the following. He says the video is well worth watching.

Newsweek

Prohibition Fighter

As a Harvard grad, former Princeton professor, and the son of a respected rabbi, Ethan Nadelmann might seem like an unlikely advocate for legalizing marijuana. But when you meet him, it all makes a lot of sense.

By [Daniel Lyons](#) | Newsweek

<http://www.newsweek.com/id/217570>

Oct 15, 2009 Ethan Nadelmann was sitting in a small plane flying low over the remote, hilly farm country of Mendocino County, north of San Francisco, surveying small clusters of marijuana plants scattered among the woods and fields. "You'll see eight plants in somebody's backyard," Nadelmann says. "Or you'll see six or 12 or 22 out in a field. You see greenhouses in the middle of nowhere. You see tarps."

You don't see rolling fields of weed, just lots and lots of small clusters and they're all over the place and they're all over the place. Indeed, in California marijuana is a booming business. Some reckon the state's annual harvest is worth \$14 billion, more than agriculture and wine combined. The local police know who's growing the stuff but can't or won't stamp it out because, frankly, the local economy depends on it. "It's big enough and legitimate enough that trying to wipe it out doesn't make sense not from a law enforcement perspective or a political perspective, and certainly not from an economic perspective," says Nadelmann.

The answer? Regulate it and tax it, he says. As Nadelmann, director of the New York-based **Drug Policy Alliance Network**, sees it, the entire "war on drugs" is a colossal failure, a waste of time and money that has caused far more harm than drugs themselves.

For the past two decades, Nadelmann has made this argument without much success. But lately people have been more receptive. In California, where medical marijuana is already allowed, there's now a push for full legalization, with proponents arguing that the move could bring in billions in tax revenue to the struggling state. Suddenly, Nadelmann is in

demand. Recently he's appeared on *The Colbert Report*, *Fox & Friends*, and an Anderson Cooper special about marijuana. He consults with Rep. Barney Frank, who is pushing to relax marijuana laws. The folks at the National Organization for the Reform of Marijuana Laws worshipfully refer to him as "our drug czar."

Nadelmann doesn't quite cringe when he hears endorsements like that, but neither does he entirely fit in with his comrades in the drug-legalization lobby. Yes, he admits to smoking pot occasionally. But you won't see him posing in *High Times* with an armload of giant buds, and he's not some wild-eyed stoner on a quixotic quest to legalize grass. In fact, he's a wonky, 52-year-old former Princeton professor, a studious kid who grew up the son of a respected rabbi in Yonkers, N.Y., and who graduated from Harvard with honors. Nadelmann went on to earn a master's degree from the London School of Economics, returning to Harvard to garner both a doctorate and a law degree before settling into a teaching gig at Princeton.

In other words, he's about as mainstream as it gets. Had he stuck with the law, today he'd undoubtedly be a partner at some big firm. Had he stuck with Princeton, he'd likely be tenured, with an easy courseload and heaps of time to write books. Instead, he's cranking out position papers from a cramped office on 36th Street in New York City, and every time he goes on TV he endures a bunch of stoner jokes so he can patiently explain that his crusade has nothing to do with drugs, per se, and everything to do with civil liberties. "I try to make the jokes work in my favor," Nadelmann says. "It's part and parcel of the evolution of public opinion. If you can joke about something, it's a way of saying it's not a serious issue. And if it's not a serious issue, then why are we arresting 800,000 people a year? Why are there 50,000 to 100,000 people behind bars on any given night for marijuana?"

So he grins and bears the jokes, and then emphasizes, again and again, that his crusade has nothing to do with liking pot personally. The idea is not that drugs are good but that prohibition is bad. Nadelmann argues that marijuana prohibition is as counterproductive as alcohol prohibition was in the 1920s, and that we'd all be better off if the government would just regulate and tax it. Ironically, this would give the government more control over the drug, not less. "It's commonly assumed that prohibition represents the ultimate form of regulation," Nadelmann says. "But, in fact, prohibition represents the abdication of regulation. It's the total absence of it."

Nadelmann stumbled into the drug-policy reform movement almost by accident. In 1988 he published an article in *Foreign Policy* that criticized the way the United States and other countries were dealing with drugs. This was the era of "just say no," and the article provoked a huge controversy. Here came this mainstream figure, a 31-year-old Princeton professor, saying that the government's approach was all wrong. Suddenly, Nadelmann found himself on TV debating the drug warriors and loving every minute of it. That's when it hit him. "It just kind of dawned on me that this is what I was meant to do," he says. "This was an area where my attraction to scholarship and teaching could be linked to what I regarded as a fundamentally moral struggle."

In 1994, with funding from George Soros, Nadelmann left Princeton to start a think tank that evolved into the Drug Policy Alliance Network. Today, the group gets about a third of its \$9 million annual operating budget from Soros. The rest comes from foundations and individual donors.

At its deepest level, Nadelmann sees his crusade as a civil-rights issue: the state should not be telling people what they can and cannot do with their bodies, as long as they aren't harming others. The same argument underpins the gay-rights movement and Nadelmann has, in fact, taken a page from proponents of gay marriage, working state by state to change laws, hoping that eventually the federal government gets dragged along. "The last place to look for leadership on this is the White House," Nadelmann says. "It will have to bubble up in popular culture, at the state level, in ballot initiatives and legislative reform." Right now,

about 40 percent of the public supports treating marijuana like alcohol and tobacco (versus 20 percent in the 1980s). Nadelmann estimates that change won't come until that figure approaches 60 percent. Sure, the Obama administration has made some noise about shifting resources toward treatment instead of incarceration, and about not busting medical-marijuana dispensaries. And sure, taxing marijuana like alcohol and tobacco could bring in \$6.7 billion a year in federal tax revenue, says Jeffrey Miron, an economist at Harvard who has studied drug prohibition and believes it's a losing battle. Nevertheless, "Obama won't touch this issue with a thousand-foot pole," Miron says. "It would be political suicide."

Maybe that's a good thing. Certainly, there are strong arguments against the legalization of marijuana. There's the one about pot being a "gateway drug," a slippery slope that leads to more addictive and damaging substances. "Since legalization of marijuana, heroin-addiction levels in Holland have tripled and perhaps even quadrupled by some estimates," the U.S. Drug Enforcement Administration claims [on its Web site](#), under the heading "Europe's More Liberal Drug Policies Are Not the Right Model for America." Or, as former U.S. drug czar William Bennett put it during a recent debate with Nadelmann on CNN, "More kids are screwed up by marijuana than by any other drug. I see no reason to make it more available to them."

Nadelmann firmly believes that people who get messed up with cocaine or heroin would likely do so even if marijuana did not exist. And he argues that although legalization or decriminalization may well lead to greater numbers of people using drugs, that would still be preferable to the situation we have today. Is it better to have a million heroin addicts committing crimes, dying of overdoses, and getting HIV and hepatitis from dirty needles, he asks or 2 million using legal heroin and able to live somewhat normal lives?

"We're really following in the footsteps of other movements for individual freedom and social justice in this country," Nadelmann says. "The drug-policy reform movement in 2009 really stands where the gay-rights movement was in the 1960s or the civil-rights movement was in the 1940s, or where the women's rights movement was in the early part of the 20th century. We're standing at a moment where the majority sympathizes with some of our objectives and a growing minority sympathizes with our core beliefs. And there's a growing disjunction between public opinion and what the political establishment will say and do."

Maybe we're just tired of swimming against the tide. We've been fighting the war on drugs for nearly 40 years the phrase started with Richard Nixon in 1971 and we're currently spending \$44 billion a year on drug enforcement, prevention, and treatment. Meanwhile, our prisons are bursting. In 1980 there were 50,000 people in U.S. jails and prisons for drug offenses; today there are 500,000 drug offenders behind bars. "We lock up more people on drug charges than all of Western Europe locks up for everything, and they have 100 million more people than we do. We have less than 5 percent of the world's population but we have almost 25 percent of the world's incarcerated population. We rank first in the world in per capita incarceration, and the drug war is the No. 1 driving factor," he says.

Another factor is that marijuana, which may have seemed scary back in the 1970s and 1980s, doesn't seem quite so bad now that we've got bigger things to worry about like terrorism and war and bank failures and millions of people losing their jobs and homes. Given all that, who cares if the neighbors want to fire up a few bong hits on a Friday night? In fact, who can blame them? Nadelmann, for one, believes we're on the cusp of real change. "If somebody had told us 30 years ago that the Soviet Union would cease to exist, or that a black man would be elected president of the United States, we would have thought they were crazy," he says. "The fact is, we get used to change happening very slowly, and then all of a sudden it happens faster than we could ever have imagined. For the first time," he adds, "I really feel that the wind's at my back and not in my face."

Find this article and the online video at <http://www.newsweek.com/id/217570>

WRITING LETTERS TO THE EDITOR WORKS!

DrugSense FOCUS Alert #416 - Wednesday, 7 October 2009

September ended with 1,805 letters published in support of drug policy reform. If the trend continues this will be the largest number of published letters since 2005. Please click this link to see the counts <http://www.mapinc.org/lte/> as shown in our published letters archive.

Please check out the Published Letters Awards page <http://www.mapinc.org/lteaward.htm> and the letter of writers recognized for the best letter of the week at http://www.mapinc.org/lte_awards/weekly.php We will leave it up to you to speculate as to why there is a surge in LTE writing this year.

Most drug policy reform organizations encourage writing LTEs, for example:How To Mount An Effective Letter Writing Campaign http://norml.org/index.cfm?Group_ID=3464

Letters to the Editors <http://ssdp.org/resources/media.php> Letters to the Editor How-To <http://www.safeaccessnow.org/article.php?id=310>

How to Write Letters to the Editor <http://www.druglibrary.org/schaffer/activist/howlte.htm>

Tips from MAP's most successful letter writers include How to Write a Letter to the Editor <http://www.mapinc.org/resource/how2lte.htm> and Tips for Getting Letters to the Editor Published <http://www.mapinc.org/resource/tips.htm>

As suggested by MAP's top letter writers recent newspaper opinion items make the best targets for your letters. These may be found at <http://www.mapinc.org/opinion.htm> Other recent articles which could be letter writing targets may be accessed from the MAP home page www.mapinc.org

Since you are reading this you have the best tool to write LTEs already - internet access. Please help sustain the activism represented by all the reform oriented letters published so far this year.

Your letters to the editor are always helpful. Even if a newspaper does not publish your letter you have let that newspaper know that the issue you write about is important to you.

Prepared by: Richard Lake, Senior Editor www.mapinc.org

CANADA

Pubdate: Mon, 28 Sep 2009

Source: Vancouver Sun (CN BC)

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<http://www.canada.com/vancouver/sun/letters.html>

Author: Ian Mulgrew, Vancouver Sun

PRINCE OF POT'S SENTENCE REEKS OF INJUSTICE AND MOCKS OUR SOVEREIGNTY

Emery's Jail Term Longer Than for Some Violent Crimes After two decades as Canada's Prince of Pot, Marc Emery will surrender himself today in B.C. Supreme Court and become the country's first Marijuana Martyr. Emery will begin serving what could be as long as five years behind bars as Uncle Sam's prisoner for a crime that in Canada would have earned him at most a month in the local hoosegow. It is a legal tragedy that in my opinion marks the capitulation of our sovereignty and underscores the hypocrisy around cannabis.

Emery hasn't even visited America but he was arrested in July 2005 at the request of a Republican administration that abhorred his politics. He is being handed over to a foreign government for an activity we are loath to prosecute because we don't think selling seeds is a major problem.

There are at least a score of seed-sellers downtown and many, many more such retail outlets across the country. In the days ahead, once the federal justice minister signs the extradition papers, Emery will be frog-marched south to Seattle where his plea bargain will be rubber-stamped and he will be sent to a U.S. penitentiary.

For comparison, consider that the B.C. Court of Appeal last year said a one-month jail sentence plus probation was appropriate punishment for drug and money-laundering offences of this ilk. The last time Emery was convicted in Canada of selling pot seeds, back in 1998, he was given a \$2,000 fine.

In July, his co-accused Michelle Rainey and Greg Williams were given two years probation for conspiracy to manufacture marijuana.

They were indicted along with Emery for their role in what the authorities described as a \$3-million-a-year business. Rainey, 38, worked for Emery from 1998 to 2005, helping him operate the B.C. Marijuana Party and his mail-order business.

The 54-year-old Williams took phone orders. Emery flouted the law for more than a decade and every year he sent his seed catalogue to politicians of every stripe. He ran in federal, provincial and civic elections promoting his pro-cannabis platform.

He championed legal marijuana at parliamentary hearings, on national television, at celebrity conferences, in his own magazine, Cannabis Culture, and on his own Internet channel, Pot TV. Health Canada even recommended medical marijuana patients buy their seeds from his company.

From 1998 until his arrest, Emery even paid provincial and federal taxes as a "marijuana seed vendor" totalling nearly \$600,000. He was targeted because of his success, targeted as surely as pot comic Tommy Chong -- who spent nearly a year in U.S. jail because his son ran a company selling glass pipes.

Emery challenged a law he disagrees with using exactly the non-violent, democratic processes we urge our children to embrace and of which we are so proud. "The same seeds I sold are being sold right in America," Emery complained. "The people in California are doing it the same way I did so there's a terrible hypocrisy at work here."

He's right. Emery recently wrapped up a 30-city "farewell tour" of speaking engagements across Canada. And, he's banking on the transfer agreement that allows Canadians convicted and jailed in America to serve their time here and take advantage of our very liberal early-release laws. If that happened, he could be out within a few years. But Ottawa has regularly rejected drug offenders for the program and I doubt Emery will find any

sympathy. I suspect he's likely to moulder in a violent, overcrowded U.S. jail for probably his full five-year sentence.

"I'm going to do more time than many violent, repeat offenders," he noted. "There isn't a single victim in my case, no one who can stand up and say, 'I was hurt by Marc Emery.' No one." He's right again.

Emery is facing more jail time than corporate criminals who defraud widows and orphans and longer incarceration than violent offenders who leave their victims dead or in wheelchairs.

Whatever else you may think of him -- and I know he rankles many -- what is happening to him today mocks our independence and our ideal of justice.

Prepared by: Richard Lake, Senior Editor Drugsense - Donations to support this service can be made by accessing the following link: <http://www.drugsense.org/donate.htm>

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UNITED KINGDOM

The results of the UK heroin trial - known as 'RIOTT' - were released recently

http://news.bbc.co.uk/2/hi/uk_news/8255418.stm

The study sent a message that rigorous scientific research can help find more effective ways of dealing with problems The results seem to be consistent with similar randomised controlled trials in Switzerland, the Netherlands, Spain, Germany and Canada [MCDS approved an Australian heroin trial by a 6:3 vote on 31 July 1997 but Cabinet voted to not proceed on 19 August 1997]

Ever wondered how to define harm reduction but too embarrassed to ask?

Here is the official definition from the International Harm Reduction Association

What is Harm Reduction?

A position statement from the International Harm Reduction Association

Harm reduction refers to policies, programmes and practices that aim to reduce the harms associated with the use of psychoactive drugs in people unable or unwilling to stop. The defining features are the focus on the prevention of harm, rather than on the prevention of drug use itself, and the focus on people who continue to use drugs.

Harm reduction began to be discussed frequently after the threat of HIV spreading among and from injecting drug users was first recognised. However, similar approaches have long been used in many other contexts for a wide range of drugs. Harm reduction complements approaches that seek to prevent or reduce the overall level of drug consumption. It is based on the recognition that many people throughout the world continue to use psychoactive drugs despite even the strongest efforts to prevent the initiation or continued use of drugs. Harm reduction accepts that many people who use drugs are unable or unwilling to stop using drugs at any given time. Access to good treatment is important for people with drug problems, but many people with drug problems are unable or unwilling to get treatment. Furthermore, the majority of people who use drugs do not need treatment. There is a need to provide people who use drugs with options that help to minimise risks from continuing to use drugs, and of harming themselves or others. It is therefore essential that harm

reduction information, services and other interventions exist to help keep people healthy and safe. Allowing people to suffer or die from preventable causes is not an option. Many people who use drugs prefer to use informal and non-clinical methods to reduce their drug consumption or reduce the risks associated with their drug use. This short statement sets out the main characteristics of harm reduction. This statement is designed to be relevant to all psychoactive drugs including controlled drugs, alcohol, tobacco and pharmaceutical drugs. The specific harm reduction interventions may differ for different drugs. Readers can refer to the IHRA website (www.ihra.net) for more detailed guidance on harm reduction interventions.

Definition

'Harm Reduction' refers to policies, programmes and practices that aim primarily to reduce the adverse health, social and economic consequences of the use of legal and illegal psychoactive drugs without necessarily reducing drug consumption. Harm reduction benefits people who use drugs, their families and the community.

Principles

The harm reduction approach to drugs is based on a strong commitment to public health and human rights.

Targeted at risks and harms

Harm reduction is a targeted approach that focuses on specific risks and harms. Politicians, policymakers, communities, researchers, frontline workers and people who use drugs should ascertain: What are the specific risks and harms associated with the use of specific psychoactive drugs? » What causes those risks and harms? » What can be done to reduce these risks and harms? Harm reduction targets the causes of risks and harms. The identification of specific harms, their causes, and decisions about appropriate interventions requires proper assessment of the problem and the actions needed. The tailoring of harm reduction interventions to address the specific risks and harms must also take into account factors which may render people who use drugs particularly vulnerable, such as age, gender and incarceration.

Evidence based and cost effective

Harm reduction approaches are practical, feasible, effective, safe and cost-effective. Harm reduction has a commitment to basing policy and practice on the strongest evidence available. Most harm reduction approaches are inexpensive, easy to implement and have a high impact on individual and community health. In a world where there will never be sufficient resources, benefit is maximised when low-cost/high-impact interventions are preferred over high-cost/low-impact interventions.

Incremental

Harm reduction practitioners acknowledge the significance of any positive change that individuals make in their lives. Harm reduction interventions are facilitative rather than coercive, and are grounded in the needs of individuals. As such, harm reduction services are designed to meet people's needs where they currently are in their lives. Small gains for many people have more benefit for a community than heroic gains achieved for a select few. People are much more likely to take multiple tiny steps rather than one or two huge steps. The objective of harm reduction in a specific context can often be arranged in a hierarchy with the more feasible options at one end (eg measures to keep people healthy) and less feasible but desirable options at the other end. Abstinence can be considered a difficult to achieve but desirable option for harm reduction in such a hierarchy. Keeping people who use drugs alive and preventing irreparable damage is regarded as the most urgent priority while it is acknowledged that there may be many other important priorities.

Dignity and compassion

Harm reduction practitioners accept people as they are and avoid being judgemental. People who use drugs are always somebody's son or daughter, sister or brother or father or

mother. This compassion extends to the families of people with drug problems and their communities. Harm reduction practitioners oppose the deliberate stigmatisation of people who use drugs. Describing people using language such as 'drug abusers', 'a scourge', 'bingers', 'junkies', 'misusers', or a 'social evil' perpetuates stereotypes, marginalises and creates barriers to helping people who use drugs. Terminology and language should always convey respect and tolerance.

Universality and interdependence of rights

Human rights apply to everyone. People who use drugs do not forfeit their human rights, including the right to the highest attainable standard of health, to social services, to work, to benefit from scientific progress, to freedom from arbitrary detention and freedom from cruel inhuman and degrading treatment. Harm reduction opposes the deliberate hurts and harms inflicted on people who use drugs in the name of drug control and drug prevention, and promotes responses to drug use that respect and protect fundamental human rights.

Challenging policies and practices that maximise harm

Many factors contribute to drug-related risks and harms including the behaviour and choices of individuals, the environment in which they use drugs, and the laws and policies designed to control drug use. Many policies and practices intentionally or unintentionally create and exacerbate risks and harms for drug users. These include: the criminalisation of drug use, discrimination, abusive and corrupt policing practices, restrictive and punitive laws and policies, the denial of life-saving medical care and harm reduction services, and social inequities. Harm reduction policies and practice must support individuals in changing their behaviour. But it is also essential to challenge the international and national laws and policies that create risky drug using environments and contribute to drug related harms.

Transparency, accountability and participation

Practitioners and decision makers are accountable for their interventions and decisions, and for their successes and failures. Harm reduction principles encourage open dialogue, consultation and debate. A wide range of stakeholders must be meaningfully involved in policy development and programme implementation, delivery and evaluation. In particular, people who use drugs and other affected communities should be involved in decisions that affect them.

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IHRA: PROMOTING HARM REDUCTION ON A GLOBAL BASIS

What is Harm Reduction? A position statement from the International Harm Reduction Association, International Harm Reduction Association, London, United Kingdom, September 2009.

DrugSense FOCUS Alert #414 - Friday, 18 September 2009 Marijuana specific magazines have been around, and come and gone, since Michael R. Aldrich, Ph.D., published the first magazine "The Marijuana Review" in the early 1970s. These magazines reach an audience which believes marijuana should be legal.

It is when mainstream magazines publish articles which may lead those skeptical about legalization to become legalization supporters that reform progress is made. On the news stands now and until September 28th is a good example, the current issue of Fortune. You may read the article as printed at <http://www.mapinc.org/drugnews/v09/n872/a03.html> The dozen photos and three graphics with the article may make it worth buying. Please consider writing a LTE to the magazine.

News and forthcoming events



The **5th Australasian Drug Strategy Conference (5th ADSC)** is **being held from 8th to 11th March, 2010** at the **Melbourne Convention Exhibition Centre** and will deal with how alcohol and drugs have a significant and dramatic impact across all aspects of the community.

The **Australasian Drug Strategy Conference (ADSC)** was first held in 1999 and is now recognised as Australasia's pre-eminent law enforcement drug strategy conference. Being held every two to three years, the conference attracts hundreds of delegates and international speakers.

This **5th ADSC** conference will provide an important opportunity to hear and learn from a full range of law enforcement, justice, customs, health, academic and community agencies. Naturally, this will also be an opportunity for all Australasian Agencies to showcase their latest innovations.

Please visit the [conference website](http://www.adsc2010.com) for more information regarding the conference program and important dates. We look forward to welcoming you to Melbourne, Victoria for the *5th Australasian Drug Strategy Conference* in March 2010. www.adsc2010.com

ANNUAL GENERAL MEETING

Twenty five members of Parliament and other interested people attended the Annual General Meeting held in Parliament House Canberra on 27th October 2009. The guest speaker Dr Norm Stamper spoke of the work of Law Enforcement Against Prohibition (LEAP) which has 17,000 members who have experience in law enforcement. Those listening to Dr Stamper were very interested in the history of the "drug wars" and the outcomes from current policies in the US. After his presentation a number of questions were put to him.

The APGDLR moved to approach the New South Wales Government to attempt to expedite the finalisation of the 8 year trial status of the Medically Supervised Injecting Centre (MSIC) and is making approaches to the New South Wales Premier and Leader of the Opposition.

**Dr Mal Washer MP (02 6277 2114) and Julia Irwin MP (02 6277 4300) Rob Oakeshott
(02 6277 4052) Parliament House, Canberra – Co-Chairs, Australian Parliamentary
Group for Drug Law Reform**