

Congratulations to DFA's Patron!

Drug Free Australia extends sincere congratulations to **Dr Margaret Court** for being awarded an AO on Australia Day.



Dr Margaret Court

Dr Court has an extremely high profile and currently works tirelessly in the community, both within her home-state of Western Australia and nationally.

She grew up in Albury on the border of New South Wales and Victoria. As a teenager, Margaret went to Melbourne to develop her tennis career under the guidance of another Australian tennis great, Frank Sedgman, and trainer Stan Nicholes.

At 17 years of age she won her first Australian Championship title – the first of seven straight victories in her total of 11 National championships, and the beginning of an amazing career in which she amassed 62 Grand Slam titles, including 24 in singles. This remains a record for both men and women.

Margaret's other achievements include being the first Australian woman to win Wimbledon (in 1963) and being inducted into the International Tennis Hall of Fame in 1970. In 1993, Rod Laver and Margaret Court became inaugural players inducted into the new Australian Tennis Hall of Fame.

We are delighted that, as our Patron, she will play a significant role in our National Schools' Competition – "**Let's Keep Drug Free**". Students in Middle School Years 7-9 are coming up with **three ways why it's important to have a drug free Australia**. The winning entries will not only win prizes for themselves, but also generous 'sports packs' for their schools. Margaret Court will also include signed tennis racquets for state winners.

For more information about the competition, go to our website: www.drugfree.org.au



Margaret Court and aspiring entrants

From The Chair

Drug Free Australia is pleased to bring you this communiqué as part of the process of bringing a balanced and informative position on the harms of illicit drugs in our community and how they should be remedied".

Much has happened since our last edition and, in particular, I am pleased to announce details of our forthcoming International Conference:

'Exposing the Reality – a National and International Perspective on Illicit Drug Use' to be held in Adelaide from Friday 27th – Sunday 29th April, 2007.

This is a conference towards greater public awareness of the devastation caused by illicit drugs in this country and internationally. It will offer some constructive, workable prevention strategies to address key issues and will listen to public opinion on matters of urgent local concern. DFA Patron, and Australian Tennis Champion, **Dr Margaret Court MBE; PhdLLD (Hon) AO** will welcome delegates and comment on current issues, including 'drugs in sport'.

Keynote speakers include: Dr John Herron – *ANCD Chair*, Trevor Grice – *Author and Educationalist, NZ*; Kerstin Kall - *Chief Medical Officer Addiction Clinic, University Hospital, Norway*, Eva Brannmark, *Swedish Police Board, Sweden*, Dr Frans Koopmans - *the Netherlands*, David G. Evans: *Solicitor and Educational Specialist, USA*, Jay R. Bacik – *CEO, Life Education Australia*; Darren Marton – *Campaign Manager, The No-Way Campaign, NSW*.

This is not just a conference – but a catalyst for possible change in Australia's Drug Policy.

Craig Thompson
Chair, Drug Free Australia



Mr Craig Thompson
Chair, Drug Free Australia

Have your say... HOT TOPIC

Is there such a thing as Safe Drug Abuse?

Australia's policy of 'Harm Minimisation' has neglected drug prevention for over 20 years. That's why we have some of the highest drug abuse statistics in the world. This fact has been documented in numerous international journals, espoused at many public forums across the globe.

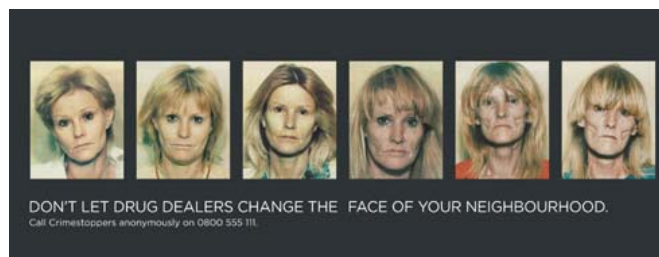
You may either email or post in your letters and articles to the address below. If you provide us with your name and contact details, we will definitely consider your contribution for publication in future newsletters.



Legalise Illicit Drugs? NOT ON YOUR LIFE!

Drug Free Australia opposes the legalisation of illicit drugs.

Apart from the personal impact on individuals, families and the wider community, it would only add to the already overburdened public health system – particularly our mental health capability. In addition, as Theodore Dalrymple (writer and physician) points out, instead of increasing our freedoms, drug legalisation would increase policing and monitoring in all walks of life.



Source: http://www.met.police.uk/drugs/three_stories.htm

Read more on page 2 ...

Don't legalise Drugs – by Theodore Dalrymple

The arguments in favour of legalising the use of all narcotic and stimulant drugs are twofold: **philosophical** and **pragmatic**. Neither argument is negligible, but both are mistaken, I believe, and both miss the point.

The **philosophic argument** is that, in a free society, adults should be permitted to do whatever they please, always provided that they are prepared to take the consequences of their own choices and that they cause no direct harm to others. In reality, addiction to most currently prohibited drugs cannot affect only the person who takes them.

In addition, the consumption of drugs has the effect of reducing one's freedom by circum-scribing the range of their interests. It impairs their ability to pursue more important human aims, such as raising a family and fulfilling civic obligations. Very often it impairs their ability to pursue gainful employment and promotes parasitism.

No culture that makes publicly sanctioned self-indulgence its highest good can long survive: a radical egotism is bound to ensue, in which any limitations upon personal behaviour are experienced as infringements of basic rights. Distinctions between the important and the trivial, between the freedom to criticise received ideas and the freedom to take LSD, are precisely the standards that keep societies from barbarism.

So the legalisation of drugs cannot be supported by philosophical principle.

What is the pragmatic argument?

The argument is that the overwhelming majority of the harm done to society by the consumption of currently illicit drugs is caused by their prohibition and the resultant criminal activity that prohibition always calls into being.

It stands to reason, therefore, that all these problems would be resolved at a stroke if everyone were permitted to smoke, swallow, or inject anything he chose. The corruption of the police, the luring of children of 11 and 12 into illegal activities, the making of such vast sums of money by drug dealing that legitimate work seems pointless and silly by comparison, and the turf wars that make poor neighbourhoods so exceedingly violent and dangerous, would all cease at once were drug taking to be decriminalised and the supply regulated in the same way as alcohol.

It is of course true, but only trivially so, that the present illegality of drugs is the cause of the criminality surrounding their distribution. Likewise, it is the illegality of stealing cars that creates car thieves. In fact, the ultimate cause of all criminality is law. As far as I am aware, no one has ever suggested that law should therefore be abandoned. Moreover, the impossibility of winning the "war" against theft, burglary, robbery, and fraud has never been used as an argument that these categories of crime should be abandoned.

In any case, there are reasons to doubt whether the crime rate would fall quite as dramatically as advocates of legalisation have suggested. Amsterdam, where access to drugs is relatively unproblematic, is among the most violent and squalid cities in Europe. The idea behind crime - of getting rich, or at least richer, quickly and without much effort - is unlikely to disappear once drugs are freely available to all who want them.

Therefore, since even legalisers would hesitate to allow children to take drugs, decriminalisation might easily result in dealers turning their attentions to younger and younger children, who - in the permissive atmosphere that even now prevails - have already been inducted into the drug sub-culture in alarmingly high numbers.

For the proposed legalisation of drugs to have its much vaunted beneficial effect on the rate of criminality, such

drugs would have to be both cheap and readily available. The legalisers assume that there is a natural limit to the demand for these drugs, and that if their consumption were legalised, the demand would not increase substantially. **But price and availability, I need hardly say, exert a profound effect on consumption: the cheaper alcohol becomes, for example, the more of it is consumed, at least within quite wide limits.**

It is therefore perfectly possible that the demand for drugs, including opiates, would rise dramatically were their price to fall and their availability to increase. And if it is true that the consumption of these drugs in itself predisposes to criminal behaviour (as data from our clinic suggest), it is also possible that the effect on the rate of criminality of this rise in consumption would swamp the decrease that resulted from decriminalisation. We would have just as much crime in aggregate as before, but many more addicts.



The intermediate position on drug legalisation, such as that espoused by Ethan Nadelmann, director of the Lindesmith Center, a drug policy research institute sponsored by financier George Soros, is emphatically not the answer to drug-related crime. This view holds that it should be easy for addicts to receive opiate drugs from doctors, either free or at cost, and that they should receive them in municipal injecting rooms, such as now exist in Zurich. **But just look at Liverpool, where 2,000 people of a population of 600,000 receive official prescriptions for methadone: this once proud and prosperous city is still the world capital of drug-motivated burglary, according to the police and independent researchers.**

In fact Britain, which has had a relatively liberal approach to the prescribing of opiate drugs to addicts since 1928 (I myself have prescribed heroin to addicts), has seen an explosive increase in addiction to opiates and all the evils associated with it since the 1960s, despite that liberal policy. A few hundred have become more than a hundred thousand. At the heart of Nadelmann's position, then, is an evasion. The legal and liberal provision of drugs for people who are already addicted to them will not reduce the economic benefits to dealers of pushing these drugs, at least until the entire susceptible population is addicted and in a treatment program. So long as there are addicts who have to resort to the black market for their drugs, there will be drug-associated crime. Nadelmann assumes that the number of potential addicts wouldn't soar under considerably more liberal drug laws. I can't muster such Panglossian optimism.

The problem of reducing the amount of crime committed by individual addicts is emphatically not the

same as the problem of reducing the amount of crime committed by addicts as a whole. I can illustrate what dsl mean by an analogy: it is often claimed that prison does not work because many prisoners are recidivists who, by definition, failed to be deterred from further wrongdoing by their last prison sentence. **But does any sensible person believe that the abolition of prisons in their entirety would not reduce the numbers of the law-abiding? The murder rate in New York and the rate of drunken driving in Britain have not been reduced by a sudden upsurge in the love of humanity, but by the effective threat of punishment. An institution such as prison can work for society even if it does not work for an individual.**

The situation could be very much worse than I have suggested hitherto, however, if we legalised the consumption of drugs other than opiates. Stimulant drugs such as crack cocaine provoke paranoia, increase aggression, and promote violence. Much of this violence takes place in the home, as the relatives of crack takers will testify. In claiming that prohibition, not the drugs themselves, is the problem, Nadelmann and many others - even policemen - have said that "the war on drugs is lost." But to demand a yes or no answer to the question "Is the war against drugs being won?" is like demanding a yes or no answer to the question "Has medicine won the war against death?"

The answer is obviously no, it isn't winning: and this is despite the fact that 14 percent of the gross domestic product of the United States (to say nothing of the efforts of other countries) goes into the fight against death. Was ever a war more expensively lost? Let us then abolish medical schools, hospitals, and departments of public health. If every man has to die, it doesn't matter very much when he does so. If the war against drugs is lost, then so are the wars against theft, speeding, incest, fraud, rape, murder, arson and illegal parking. Few, if any, such wars are winnable.

Even the legalisers' argument that permitting the purchase and use of drugs as freely as Milton Friedman suggests will necessarily result in less governmental and other official interference in our lives doesn't stand up. To the contrary, if the use of narcotics and stimulants were to become virtually universal, as is by no means impossible, the number of situations in which compulsory checks upon people would have to be carried out, for reasons of public safety, would increase enormously. Pharmacies, banks, schools, hospitals - indeed, all organisations dealing with the public - might feel obliged to check regularly and randomly on the drug consumption of their employees. The general use of such drugs would increase the locus staning of innumerable agencies, public and private, to interfere in our lives; and freedom from interference, far from having increased, would have drastically shrunk.

The present situation is bad, undoubtedly; but few are the situations so bad that they cannot be made worse by a wrong policy decision. The extreme intellectual elegance of the proposal to legalise the distribution and consumption of drugs, touted as the solution to so many problems at once (AIDS, crime, overcrowding in the prisons, and even the attractiveness of drugs to foolish young people) should give rise to scepticism.

Social problems are not usually like that. **Analogies with the Prohibition era, often drawn by those who would legalise drugs, are false and inexact:** it is one thing to attempt to ban a substance that has been in customary use for centuries by at least nine-tenths of the adult population, and quite another to retain a ban on substances that are still not in customary use, in an attempt to ensure that they never do become customary. Surely we have already slid down enough slippery slopes in the last 30 years with-out looking for more such slopes to slide down.

Focus on Youth – Jade’s story - Drugs - How to say ‘No’



Jade Lewis, former world class athlete, turned drug addict tells her story of addiction, to help prevent it happening to others and to give those afflicted hope for the future.

It started as harmless fun. The type of fun all your friends were having, but when Jade Lewis – a 16 year old state champion athlete with dreams of Olympics gold - first tried marijuana, she never imagined that she was taking her first step on the path of self destruction. Within six years she was a desperate heroin addict with a criminal record dragging her entire family into a pit of grief.

Jade was a well-adjusted middle-class teenager, with loving parents. But when the pressures of Year 11 began to hit home, Jade decided to take a break from athletics and concentrate on her studies. The void was filled by spending time with friends. “Innocently, I wanted to know what my friends were doing”, she says. “To go to a party and have some marijuana seemed harmless - it was not something that anyone forced on me”, Jade says.

You think that going to a rave is harmless, because there are so many thousands of people going who are taking drugs. Although I heard reports about people dying here and there, I never thought it would happen to me. ‘and that’s all part of the euphoria of drug taking”.

“Alcohol, marijuana, speed, LSD and ecstasy gave me a sense of escape,” Jade writes in her book ‘**Golden Haze**’.

Drugs lead her into a violent relationship, with a boyfriend who had introduced her to heroin. Within three months Jade was supporting her \$350 a week heroin habit with crime. The turning point was Mother’s Day 1999, when police interrupted their family lunch and charged Jade with 17 counts of fraud. It was the wake-up call everyone had been waiting for.

‘With a blinding flash I realised what my future held – drugs, jail and then an ugly death’.

Jade was admitted into Teen Challenge in Esperance, WA and after a long three-year battle, and ongoing heart break and anxiety for her entire family, she was healed. Jade believes that she is one of the few lucky ones to be successfully rehabilitated.

Jade will be speaking at the DFA Conference in Adelaide - April 27-29.

Life Education - Australia’s Preventative Drug Education Programs in Schools

We should never understate the very real and often tragic consequences faced by some young people and their families as a result of the use of illicit drugs. What is evident is the need for ongoing quality preventative education as a critical component of an overall strategy to address the issue.

Life Education Australia is a not-for-profit, non government community based organisation providing positive, preventative drug and health education programs in support of schools. It is the largest non-government provider of drug and health education throughout Australia reaching an estimated 750,000 primary and secondary school students each year. The program aims to empower young people to make better life choices for a healthy future, free from the harms associated with drug misuse.

Is drug education relevant to my child in pre school or primary school?

Life Education’s junior primary programs focus on **healthy lifestyles**, including knowledge of the

body, nutrition, personal safety, medicine safety, healthy foods and a positive self image. Health issues including passive smoking and peer pressure are introduced around years two and three as well as developing strategies to cope with bullying and developing support networks follow. Information about smoking is generally introduced in the middle primary years and information about alcohol is introduced in the upper primary years. In line with the principles of school drug education, young people at each year level are provided with the opportunity to develop and practise skills to act upon individual decisions relevant to their developmental stage.

How does Life Education support schools?

Life Education programs are designed to complement the work that teachers are doing in schools within their ‘whole of school’ drug strategy. The primary school programs are usually delivered in Life Education’s specially equipped mobile classrooms by qualified specialist drug and health educators. The lessons in the mobile

classroom are interactive and exciting learning experiences for students and are only one facet of what is offered.

In addition, Life Education provides professional development opportunities for teachers. At the pre visit meeting conducted within the school prior

to the visit of the educator in the mobile classroom, class teachers are able to identify the specific learning outcomes that they feel are most appropriate to their class needs. It is not a ‘one size fits all’ approach but rather a targeted approach to meet specific class and school needs.

Classroom teachers are also provided with teacher manuals to assist them with their programming and follow up activities.

Parent information sessions are offered at each and every school. An exciting new opportunity for families is the ‘Turn Up, Tune In, Have Fun’ Family Forums. The forums actively engage parents and their children in a fun night of family communication and activity surrounding drug and health topics.

Has Life Education been recently evaluated?

The most recent evaluation was in 2006, where an independent scoping study was commissioned by the Commonwealth’s Department of Health and Ageing. It measured the effectiveness of Life Education against the principles of school drug education. The report shows Life Education in a very positive light reflecting the significant developments that have occurred in recent years in linking the programs to State and Territory curriculum frameworks. The study recognises the effectiveness of the Life Education program as a comprehensive and complementary resource for schools – engaging not only the students in a fun interactive manner but also informing parents and engaging families. The full Erebus Report can be downloaded from the life education website **www.lifeeducation.org.au**



Life Education mobile learning centre

