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A Community Legal Centre

MEDIA RELEASE

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'The zero-intelligence Coalition when it comes to drugs'

The Prime Minister's announcement on Sunday that the coalition government if re-elected will invest 20 million dollars in quarantining welfare payments of drug offenders is just another example of the zero intelligence, zero compassion drug policy of this government in vying for good headlines. Similar diatribes of late have included backhanded recommendations to de-fund harm minimization programs such as needle and syringe programs and methadone/ substitution therapies, and to create presumptive adoption plans for children of illicit drug users reported to the Department of Human Services.

Sam Biondo, Executive Officer of the Victorian Alcohol and Drug Association (VAADA) says, "It is difficult to imagine where this sort of approach will end. What will be the broader impact of such hastily conceived policies both on the targets as well as the broader community. Will these changes in fact create more harms than they solve."

Jenny Kelsall, Acting Manager of VIVAIDS, the Victorian Drug User Organisation, agrees. 'We believe that these sorts of patronizing and highly discriminatory methods will merely add to the marginalization and stigmatization already experienced by drug users. There is no evidence to support this sort of arbitrary approach. We have to remember that drug users are members of the community too; we should be looking at enhancing the social capital of minority groups rather than pursuing this kind of social exclusion policy. Why should drug users be singled out for additional punishment above and beyond the sentences they receive from the judiciary system? '

So what will the new welfare plan mean for drug users (other than no tobacco or alcohol) and the community at large?

At the outset, the plan will entail diversion of significant funding to bureaucrats in administering the scheme. By definition those affected will be living below the poverty line, and in our experience, highly likely to be paying a significant portion of their income for sub-standard housing. We believe this money would be better directed towards under-funded services dealing with the root causes of problematic drug use, and with developing appropriate and effective responses.

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Secondly, we believe a big brother regime of state control such as this will create dependency, disempowerment and a significant loss of self-esteem for active and recovering drug users. Participation in economic life for welfare recipients as well as others is an important part of engaging with the community.

Trevor King, Deputy Director of Turning Point says, "The evidence is that "tough on drugs" policies are, in effect, tough on drug users and does not assist rehabilitation. It will have exactly the opposite effect and push people to even more desperate circumstances." For those in recovery, this kind of coercive policy approach is chronically undermining.

For those actively engaged in drug use, levels of desperation, vulnerability and marginality increase whenever zero-tolerance measures are engaged. Realistically, we also believe users will become much more likely to engage in unsafe and illegal activities such as unregulated sex-work, theft and low level trafficking in order to fund their habits.

These are very poor outcomes for the broader community as well as for the drug using community. Some may argue, why should my taxes pay for someone to take illegal drugs? In our view this is a dangerous simplification of a complex issue. Your taxes can pay for imprisonment versus recovery, increased policing versus improved opportunities, increased control versus increased health and empowerment. In the long term, it seems clear where you can get the best bang for your buck.

Evidence of the long term outcomes of zero tolerance policies are evident in the United States, with its booming prison population and endemic problems with community violence.

Fitzroy Legal Service endorses meaningful engagement with drug user issues. Important measures currently experiencing pressure include increased access to substitution therapies, rehabilitation services, prisoner education programs, refuges for women fleeing violence and the like.

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