

# [Illicit drugs in australia and problems caused criminology essay](https://assignbuster.com/illicit-drugs-in-australia-and-problems-caused-criminology-essay/)

Research by the Australian Institute of Criminology (2004) has outlined the impact of illicit drugs on society. Many people assume there is a direct correlation between drugs and crime and this research undertaken in fact shows that drug use and crime have similar origins. Origins such as poor social support systems, difficultly in school, association with deviant peer groups and lack of access to economic support systems are the main similarities with drug users and criminals. The results of this research have opened our eyes to the direct link and the magnitude of the illicit drug problem. It is not possible to quantify the exact cost of illicit drug use to the Australian community. However, some components can be measured directly, such as government expenditure through the National Illicit Drug Strategy (NDIS), but many of the social costs borne by the community, such as the extra cost of welfare, health and law and order services, can only be estimated. In addition, a number of costs associated with illicit drug use are not quantifiable, such as pain and suffering resulting from a reduced quality of life. Nevertheless a number of studies attempt to quantify some of the costs of drug use, including social costs. Many also examine how these costs compare with the costs of licit drug use in the community (Burton, K 2004). Statistics from the Australian Institute of Health and Welfare have discovered that Marijuana/cannabis accounted for 71% of illicit drug arrests in 2004-05. Further, in 2005, one in 10 prisoners was imprisoned for drug-related offences and finally in 2003-04, 88% of juvenile detainees had used an illicit substance 6 months prior to arrest and 70% were intoxicated at the time of offence.

The Australian criminal justice system currently has two approaches to the illicit drug (for clarification, the definition of Illicit Drugs means a drug whose production, sale or possession is prohibited) problem. Prohibition and harm minimisation which will be discussed below. In short, the main aim of prohibition of drugs is to implement legislation and laws as a common means of attempting to control drug use. On the other hand we have harm minimisation which includes a range of targeted strategies designed to reduce drug-related harm for particular individuals and communities. It aims to reduce the harmful consequences of drugs when consumption cannot be further reduced.

Drug laws have not stopped people using drugs, all it has done is create a multi-million dollar illegal market and fuel criminal acts to support such addictions. However, the economic costs associated with harmful drug use, including prevention, treatment, loss of productivity in the workplace, property crime, theft, accidents and law-enforcement activities, amount to over $18 billion annually (Collins & Lapsley 1996). Which proves that the drug prohibition is not effective and another approach needs to be introduced. Prohibition is increasingly regarded as flawed in principle and a resounding failure in practice (Wodak & Owens, 1996). When the drug laws in Australia were first introduced they came through prohibition instead of regulation. The argument was, that once something evil was banned, the problem was solved. This was not the case as banning such illegal drugs has only made the productions of same increase and created the role of drug traffickers and an illegal underworld to make and distribute such drugs through illegal avenues. As Wodak and Owens stated:

“ Focusing on drug use rather than drug-related harm is like concentrating on a mirage (p. 9)”

In summary, prohibition has been somewhat successful in raising the health, social and economic costs of drug use. However, each year with technological change, geopolitical developments and the new trade environment make the job of prohibition even harder.

On 2 April 1985 Australia officially adopted another view on illegal drugs and this approach was known as harm minimisation. This approach involves supply reduction, demand reduction and harm reduction. Harm minimisation has approached the drug use problem by introducing such schemes as information to drug users about how to safely use drugs and supervised injection rooms for users. Extensive consultation and collaboration between these services and police have been important in their success in reducing the spread of blood borne viruses in the community. Governments do not condone illegal risk behaviours such as injecting drug use: they acknowledge that these behaviours occur and that they have a responsibility to develop and implement public health and law-enforcement measures designed to reduce the harm that such behaviours can cause (Ministerial Council on Drug Strategy 1998: 46). Harm minimisation encourages change in our attitudes towards people who use drugs including those who are physically and psychologically dependant on illegal drugs. However, whether this is an effective approach is a common argument. One advantage is the fact that Australia does have the lowest reported rate of HIV infection in the world which is evidence alone that harm minimisation approach can work in the community. Harm minimisation can best be viewed in context of community safety and this is an approach to drug use to help keep people safe when they choose to use drugs.

One important policy intervention that has gained increased prominence in recent years is the diversion of drug and drug related (crimes committed while under the influence of drugs) offenders. Aimed at deterring, educating or treating the causes of drug dependence, diversion involves the use of the criminal justice system to provide alternative responses, including referral to drug treatment. The main aim of prohibition of drugs is to implement legislation and laws as a common means of attempting to control drug use. On the other hand harm minimisation recognizes the need to seek a balance between supply reduction (disrupt both the supply of illicit drugs entering Australia and the production and distribution of illicit drugs within Australia), demand reduction (reduce the desire for and preparedness to obtain and use drugs) and harm reduction strategies (reduce the impacts of drug-related harm on individuals and communities).

Recently harm minimisation took on another strategy known as a diversionary scheme. In April 2009 the Council of Australian Government (COAG) endorsed the National Illicit Drugs Strategy (NDIS) package, providing over $111, 536, 000 to create a ‘ tough on drugs’ initiative that gives priority to diverting illicit drug offenders into treatment. Guidelines were created for States and Territories to divert minor illicit drug offenders into assessment, education and treatment at many levels of the criminal justice system. The aim was to reduce the amount of offenders that appear before the court for possession of illicit drugs , provide incentives for minor offenders to address their drug use and increase access to drug education and treatment. This strategy is based on a harm minimisation approach which refers to policies and programs aimed at reducing drug-related harm and protecting the community and users. Dr Woolridge (past Federal Health Minister)1999 has stated that it is clinically proven that if you can reach a drug user before the addiction becomes full-blown that you have a better chance of stopping the drug use.

Taking this approach statistics have shown that as of July 2007, there were 51 programs that divert drug and drug related offenders:

\* 69% of programs have been introduced since 2000.

\* 59% were funded by the Coalition of Australian Governments’ Illicit Drug Diversion Initiative.

\* 31% involved police diversion, 22% court diversion, 18% drug court diversion and 29% were mixed.

\* 33% of programs targeted drug use/possession offence(s), 12% drug related offence(s) and 55% any offence(s).

\* 45% of programs targeted adults, 27. 5% youth and 27. 5% mixed.

\* 49% resulted in assessment and compulsory treatment, 17% assessment and voluntary treatment, 9% cautions and referrals to education sessions, 20% warning/formal caution/family group conference, and 8% a fine or optional attendance at an education session (Hughes & Ritter 2008)

To date each state and territory has created and implemented their own diversionary and harm minimisation measures to tackle the illicit drug problems. Each state and territory have varying programs which may be somewhat different to each of the other states. Some programs may be easier to access, others may only cater for a specific group (ie indigenous people or juveniles). However, they all have the same major programs available as outlined below.

According to the Australian Institute of Criminology there are 5 types of drug-diversionary programs currently in use across Australia. Within each of these areas of criminal justice there are a number of diversionary programs available. These initiatives can be divided into groups, depending on their position along the criminal justice continuum. Starting with the pre-arrest phase the most important diversionary measures is police discretion where officers can detect the offence but not lay charges and provide further information to the offender about how to manage and drug problems and refer them in the right direction. Other measures in place are infringement notices, informal warnings, formal caution and caution plus intervention (where counseling/information sessions must be attended). Police drug diversion -at the front end are the various police based drug diversion programs offer drug education and assessment for those individuals with minor possession offences relating to cannabis or other illicit substances.

Next step on the criminal justice continuum is the Pre-trial stage where a charge is made but before the matter is heard at court. Here we have options like treatment as a bail condition, conferencing or prosecutor discretion (where treatment is offered as an alternative to proceeding with prosecution). These programs are at court level and are primarily bail-based programs to provide assessment and short term treatment options for less serious offenders who criminal behaviour is related to their illicit drug use. The next stage is Pre-sentence which is after conviction but before sentencing, this stage includes such measures as delay of sentence where offender may be assessed or treated. Post-conviction/sentence includes the process of sentencing. Diversionary measures can include suspended sentences requiring complying with conditions such as treatment, avoidance of drugs and specific peer groups. At this stage offenders can also be referred to the Drug Courts which are judicially supervised and enforced treatment programs which offer long-term initiative treatment for offenders who drug dependency is a key contributor to their offending. The final stage where diversionary measures can be utlised is in the Pre-release stage which is prior to the release from goal on parole. Options here include transfers to drug treatment programs or early release to attend a supervised treatment program.

Even though the diversionary programs vary between jurisdictions, for example, in some states police can only caution first time offenders or juveniles and in other jurisdictions diversion is available for any offender caught with drugs, irrespective of age or criminal history. According to the National Illicit Drug Diversion Initiative (IDDI) the findings were generally very positive. Across all jurisdictions , the majority of people who were referred into the IDDI program did not reoffend in the 12 to 18 month period after their diversion. In most cases, those that did reoffend did so only once during this time. (Payne et al, 2008). The cost of the various police diversion programs is significant. However, if these initiatives are achieving such their objectives, such costs should be more than offset by the benefits of accruing to the community through a reduction of illicit drug use and related offending and reduced case loads for the criminal justice system.

There has been only one study (Baker & Goh 2004) that has examined the cost-effectiveness of diversion. The results demonstrated positive results in savings to the criminal justice system. In the first three years of operation it was estimated that over 18, 000 police hours were saved as a result of not having to charge offenders at the time of detection, prepare matters for court and attend subsequent hearings. Baker and Goh also calculated that the scheme resulted in total savings of well over $1million dollars during the first 3 years of operation.

In the years following the development of the IDDI, researchers (most notably the Alcohol and Other Drugs Council of Australia, ADCA), outlined the benefits of and challenges to expanding the drug diversion and harm minimisation approach. Over coming the political perception that drug diversion was a ‘ soft’ option (Hughes, C 2007). While the “ Tough on Drugs Diversion Initiative’ was seen by policy makers as heralding a more humane response and more harm minimisation approach, the expression and framing of the program was that this was not the case. As John Howard said:

“ in no way does it [drug diversion] retreat from our ‘ Tough on Drugs’ philosophy, our zero tolerance approach”.

So the point that the Government are portraying is that illicit drug use is still against the law however, if someone has psychological, health and social problems, you don’t belong in jail. If the problem is drug use, than that problem must be tackled in order to decrease the social impacts of illicit drug use and to prevent a new generation of drug-users committing drug related crime (Commonwealth Department of Health and Ageing, 2004). One of the positive outcomes of the harm minimisation/drug diversion initiatives is that is has now encouraged the collaboration of health and law enforcement services. Which were once two very separate divisions have combined forces to tackle the issue of illicit drug use and have broken down the barriers that once segregated the divisions as traditionally the health and justice systems have had little to do with each other with no referral pathway between them. Diversion programs are gradually changing this (Tresidder, J 2003).

In conclusion after observing that the prohibition of drugs has not made any significant impact on the use of illicit drugs in society the harm minimisation approach was initiated. This approach was further developed and the drug diversion scheme was created to target the problem in return for long term solutions to protect the drug users and community from each other. Research has shown that this has been successful to some degree however it has come across as somewhat contradictory to the “ tough on drugs” campaign that is portrayed in the media. There is many mixed messages being sent and portrayed about the approach to illicit drugs in the criminal justice system. To date the drug diversionary programs has been the only approach to illicit drugs that has made any headway and molded around the existing drug problems. It is a policy that is designed to reflect the variety of problems that drugs can cause and by treating the cause is the only way to tackle the problem.