History and development of Australian drug policy

The early days: ‘ignorance is bliss’

Before the twentieth century, European Australians knew very little of drugs other than alcohol and tobacco. These were the drugs that were common in England prior to the colonisation of Australia and they were brought with settlers and convicts who made the journey to the new continent.

Many other drugs were introduced to Australia by immigrants from other countries. For example, opium was introduced by Chinese immigrants during the gold rush. Cannabis had an interesting history, originally being brought out from Europe by the First Fleet in 1788, and established as vast plantations to provide hemp for rope, canvas and clothing. At this time, the plant’s potential as a psychoactive drug (a drug that can alter your thoughts, perception or actions) was largely unknown amongst people of European descent. During the 1930s, when the United States initiated an international education campaign concerning the perceived dangers of cannabis use, large wild hemp plantations were still to be found in Australia. However, when cannabis was established as a drug and subsequently outlawed, these plantations were located and destroyed.

Over the course of the twentieth century, other recreational drugs made their way to Australia and most have been illegalised fairly quickly.

The prohibitionist approach and zero tolerance

The official position towards drugs other than alcohol and tobacco in Australia has historically been to discourage all drug use, through illegalising the drug, prosecuting users and promoting abstinence. This policy is generally referred to as the ‘prohibitionist approach’, as the drugs targeted are prohibited substances. The ‘Drug Offensive’ media campaign, which was a major component of the policy adopted by the Commonwealth government during the 1980s (the National Campaign Against Drug Abuse), is an example of this approach. However, some people might be more familiar with the US ‘Just Say No’ campaign, which was championed by Nancy Reagan (wife of former US President Ronald Reagan).

The foremost goal of each of these programs was to discourage people from taking drugs, and to prosecute those who persisted to partake in the consumption, possession, provision or trade of illegal substances. There was very little room for tolerance of users or addicts, which is why modern variations of this stance are sometimes known as ‘zero tolerance’.
The impact of harm minimisation

In the 1980s, a new way of dealing with drug use emerged. The concept of ‘harm minimisation’ (sometimes called harm reduction) developed in response to the ever-increasing use of drugs in countries such as Australia and America, and the recognition by health workers and officials that drug use was most probably ‘here to stay’.

It seemed that the prohibitionist approach was not only failing to reduce drug use, but it was also neglecting the fact that some people had serious addictions to drugs. Individuals experiencing serious health, social and economic problems associated with problem drug use could not access assistance from services in the community without risking legal intervention, and subsequently suffered in silence.

Rather than attempting to eliminate drug use completely, initiatives based on the harm minimisation philosophy are aimed towards specifically reducing the potential harms associated with drug use. These might include encouraging drug users to only use in moderation, or to only use drugs in safe, comfortable environments (particularly relevant to hallucinogenic drugs, such as LSD).

Harm minimisation strategies consider much more than simply the potential health dangers of drug use. ‘Harm’ might also include:

- financial harms (such as spending large amounts of money on drugs)
- social harms (having difficulties finding or keeping work due to drug use)
- emotional harms (having problems with friends or family due to drug use).

It has been argued by some people that drug use in general can be considered a harm, and that a harm minimisation approach could include still focusing on the complete elimination of drug use – much like the goal of the earlier prohibitionist policies. This is reflected in our current drug policy, which incorporates three main points of focus within harm minimisation: harm reduction, supply reduction and demand reduction.
The national drug strategic framework

The current policy for dealing with drugs in Australia is outlined in a document called *The National Drug Strategic Framework 1998–99 to 2002–03: Building Partnerships* (the complete document can be found [here](http://www.health.gov.au/pubhlth/strateg/drugs/nds)). This document represents how the federal government has decided to approach drug use, and describes how different parts of our society can work towards the common goal of reducing the harm caused by drug use.

As the name suggests, an important goal of this policy is to ‘build partnerships’ between different bodies in our society, in order to address the reduction of drug-related harm from many avenues. The belief is that some aspects of drug use are more appropriately addressed at certain levels, and that the construction of partnerships between these levels will lead to greater empowerment, action and success. Some of these ‘partners’ include:

- different levels of government (federal, state and local)
- different government services (such as the health, justice and education departments)
- community organisations and research bodies
- industry and the workplace.

As mentioned previously, the overriding philosophy of our current drug policy (and most Australian drug policies since 1985) is harm minimisation. Within the National Drug Strategic Framework, this concept is defined as three main areas:

- supply reduction strategies (disrupting the production and supply of drugs)
- demand reduction strategies (preventing the uptake of harmful drug use)
- harm reduction strategies (reducing the specific harms that drugs pose to individuals or communities).

These three areas also define the statutory framework that exists in Australia by designating different areas of responsibility and regulation to different levels of government.