The Guardian

The rising appetite for powerful drugs like fentanyl is a direct result of Australia's failing prohibition policies

By Greg Denham

August 30, 2022

Alarm bells should ring when Australian police announce in quick succession record seizures of <u>ice</u> and <u>fentanyl</u> at our border. The arrival of fentanyl is particularly concerning – this powerful synthetic opioid has led to the deaths of thousands of people <u>in Canada and the US over the past five years</u>.

A central nervous system depressant, fentanyl is estimated to be 50 times more powerful than heroin. The 11kg recently seized by Australian federal police is reported to be the equivalent of 5m "street hits". Fentanyl is a game changer but also part of a wider trend. Just as ice, a purer form of methamphetamine, is taking over from speed, the growth in more powerful drugs should be seen as a direct result of our failed prohibition policies. We are repeating history. The US ended its prohibition on alcohol in 1933 after a decade of disaster. One problem was that during prohibition, in order to avoid detection, bootleggers moving alcohol across state lines used far more concentrated and purer forms which led to massive increased health harms.

Sound familiar? As <u>Mark Thornton has written for the Cato Institute</u>: "Prohibition did not achieve its goals. Instead, it added to the problems it was intended to solve and supplanted other ways of addressing problems. The only beneficiaries of Prohibition were bootleggers, crime bosses, and the forces of big government."

Given our failure to learn the lessons of the past, the policy response to the fentanyl crisis is predictable. We will no doubt hear from politicians and law enforcement demanding more police, more invasive powers, tougher laws and longer jail sentences. The problem is, we've been taking this approach for more than 50 years and yet we know that drug seizures have little impact on drug availability. Despite what police and politicians tell us, drug prohibition, like alcohol prohibition, has failed. We need to change our game plan to counteract the potential disaster that faces our community.

A good start would be increased investment in prevention and harm reduction – eg injecting rooms. Redirecting resources away from the criminal justice system toward the health and education sectors, as Portugal did 20 years ago, has proven successful. Portugal now has one of the lowest overdose rates in Europe. Harm reduction programs such as supervised injecting sites, providing heroin on prescription and free access to treatments such as methadone will help avert a potential crisis. Overdose reversal drugs such as naloxone need to be distributed now to all emergency workers, including police.

But while increased health-focused responses are essential and will help stem the tide, tough questions also need to be asked about our policies and laws that perpetuate the myth that the war on drugs is winnable through prohibition. State governments, such as those in New South Wales and Victoria, need to act on the recommendations from experts and inquiries which they consistently choose to ignore because of their continued commitment to drug prohibition and veiled acceptance that drug users are necessary collateral damage in the war on drugs. It is time Australia had a serious conversation about the decriminalisation of all drugs.

On 31 August each year, International Overdose Awareness Day remembers those who have lost their battle with addiction, and the impacts that has on families and friends. Let's hope next year we are not faced with many more experiencing this loss through fentanyl.