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# THE TRUTH ABOUT MARIJUANA REFORM

A major overhaul of New Zealand's war on drugs is due this year, but few people would know one of the driving forces behind its main theme is billionaire currency trader George Soros. IAN WISHART backgrounds the debate on drug policy, and how it ties in with the agenda of one of the world's richest capitalists



To most New Zealanders, the war on drugs is a given. It's been with us since time immemorial, and generations have been educated about the dangers of narcotics, not just to immediate life and limb but also longer term effects like the dumbing down and mental illness associated with so-called 'minor' drugs like cannabis.

Sure, there are still drugs around, but as supporters of the status quo point out, that doesn't make a valid argument in favour of legalization of drugs, any more than the reality that rape still happens means we should give up and decriminalize sex offending as well.

Yet, ironically, there's a global push to inch governments towards legalizing drugs supposedly in the name of saving money, and wresting control of the drug trade from organized crime.

The issue hit the headlines this month when New Zealand fringe businessman Ken Morgan, now legally known as "Dakta Green" after a deed-poll moniker change, announced plans to set up a chain of can-

nabis clubs up and down the country known as "daktories".

"It is a warehouse in West Auckland that we've converted with couches and other comfortable laid-back type furniture so that people in the cannabis culture have a safe haven to come and gather and enjoy our pastime," Green told Newstalk ZB's Tim Dower.

"Get stoned?" queried Dower.

"That's part of it, there's a whole social atmosphere that goes on with people within our culture. It's not just about getting stoned. That raises all sorts of connotations that the media have perpetuated for years."

Morgan then boasted that members of his cannabis club included "doctors, lawyers, nurses, teachers, a court registrar, business people."

Morgan's candid admission goes to the heart of the legalizing drugs argument. Do people want to be treated in hospital by nurses or surgeons who still have cannabis in their systems (it can take weeks for the active ingredient in one joint, THC, to leave the body)? Do people in court, whether criminal or civil, want to be represented by a lawyer who regularly hangs out at a "daktory" getting stoned? In an emergency situation at school, would a teacher whose wits were still under the influence of cannabis be capable of making split second decisions that could save or kill the children in her care?

These are valid concerns, because the vast majority of people would readily acknowledge that drugs and alcohol affect mental capabilities.

Of course, the counter argument runs: "it's already happening". By virtue of our

modern culture, there's already a risk that your lawyer is a stoner, or that the truck driver overtaking you in his 18-wheeler is loaded to the eyeballs on methamphetamine to keep him awake on the long haul runs.

If it's already happening, then perhaps the horse on drug prevention has bolted and we should just accept it as a societal risk and move on.

The argument behind decriminalizing or even legalizing drugs is that money will no longer need to be spent in detection and enforcement, and can better be spent on educating people about "responsible" drug use. The argument also goes that decriminalizing marijuana will only legitimize what is already taking place behind closed doors, and not lead to a growth in marijuana use. Better education should soon lead to less, not more, drug use.

Interestingly, that's the same argument that was run in the Netherlands when authorities decided to allow cannabis to be sold back in the 1980s. So what happened?

"In the Netherlands, after the implementation of decriminalization in 1976, the prevalence of cannabis use among youth aged from 10 to 18 was only 4.2 percent," reported one favourable study ten years ago in the journal *International Social Work*.

By 1984, the number of children aged 12-18 who'd tried cannabis had crept up to 4.8%.

But by 1988, the figure had nearly doubled, to 8% and by 1993 it had almost tripled, coming in at 13.6%.

This was despite a ban on selling marijuana to people under 18. Much like New Zealand's failed experiment with lowering the drinking age, Dutch children found it easier to get hold of drugs from older friends. According to an IPS news report posted on America's *HuffingtonPost* blog late last year, Dutch teenage cannabis use has hit dizzying heights:

"The Trimbos Institute – the Netherlands Institute of Mental Health and Addiction – says cannabis use among school-goers has remained stable since 2003, but that 41 percent of boys and 30 percent of girls in the Netherlands had tried the drug by the age of 16.

"A 2007 survey by the European school project on alcohol and other drugs (ESPAD) suggested that 28 percent of children aged 15 and 16 in the Netherlands were regular cannabis users, similar to the figure in 2003. The Czech Republic had the highest prevalence with 45 percent, while Romania had the lowest, at 4 percent."



So from decriminalisation in 1976, youth cannabis usage in Holland has shot from 4.2% to around 35% who've tried it in 2009 by age 16, and 28% of 15 and 16 year olds are in the category of "regular cannabis users".

Even those figures don't tell the full story, because they are a national average across the Netherlands. In the few big cities in Holland, like Amsterdam, cannabis use in 1997 was 37% according to official figures, while dropping to a much lower 11% in the villages and small towns. The national average that year was 16%. In other words, if you live in a city in the Netherlands, cannabis use is far higher than the average figure.

The bitter irony is that in the US, where the Reagan administration had a "just say NO" anti-drug ad campaign underway in the eighties (which even played in New Zealand cinemas), cannabis use amongst 12 to 18 year olds fell from 23.6% in 1984 to 11.7% by 1993 – halving during the same period that Dutch dope use tripled under permissive new laws.

Back in the 1960s, official figures suggest only a few hundred thousand regular users of marijuana existed in the US. But as the Vietnam War era came to an end and the US was flooded with Asian cannabis, usage became so widespread, around 35% of the population, that President Jimmy Carter attempted to pass a federal law making possession of marijuana for individual use a misdemeanor, rather than a crime. His bid failed, but the ensuing public debate sent a message to the public that marijuana use privately was a nudge-nudge, wink-wink affair. The same era saw the tremendous popularity of the Cheech & Chong marijuana movie franchise. That, then, is the background as to why US drug use figures were much higher in 1984 than the Dutch figures – they'd sprung from a decriminalization attempt and an already permissive social view of the drug.

In the Netherlands today, whilst that country is held up as a poster child for cannabis decriminalization, regulators are now considering a crack-down, as IPS reports.

"Residents are increasingly concerned that school-age children are being harmed by the long-standing policy of tolerance towards limited use of soft drugs. Children as young as 12 are 'feeling pressured to try marijuana,' as one parent put it. In response, government officials at both the municipal and national level are now taking steps to revise the country's drug strategy.

"In June, the port city of Rotterdam ordered the closure of coffee shops within 250 metres of high schools and some primary schools. Coffee shops are licensed to sell cannabis, besides drinks and snacks. The mayor's office cited a 'worrying rise' in the use of soft drugs by youths in vulnerable situations. The measure affected 16 of the city's 62 coffee shops.

"We talked with the schools and parents and they welcomed the closure of the coffee shops', says Richard Anderiesse, spokesman for Rotterdam's Social Safety Department. 'The main goal is that we don't want youngsters under 18 years old to use soft drugs in the vicinity of schools, so we make it harder for them to buy the drugs', he told IPS.

"Amsterdam is also taking the same strategy and, at the state level, lawmakers are debating whether to revise the distinction between hard and soft drugs and whether to appoint a drug czar to oversee policy. New rules are expected to be outlined this autumn, and they will most likely include a national policy to close coffee shops located near schools, Anderiesse said."

But it's not just Dutch teenage drug use that's the problem under the permissive regime. Organised crime effectively took control of supplying the many coffee houses that sell cannabis, and have used their networks to turn Holland into a major transshipment point for harder drugs like heroin, cocaine and the amphetamines.

"These criminals could not have wished for a better and more stable market for their product than the Dutch coffee shops," writes Dutch lawyer and journalist Sanne Bloemink, now based in the US. "As a consequence, the Netherlands has unfortunately obtained a key role in the international drugs trade.

"I'm Dutch, born and raised in Amsterdam, so I know a thing or two about the use of marijuana. The Netherlands, my country, has long been known for its recreational marijuana use but, ironically, citizens of that country are now moving somewhat in the opposite direction."

Salon magazine found the same thing when it investigated in 2000:

"Unofficially, police authorities allow 'ethical dealers' – individual small-scale suppliers untainted by international trafficking rings – to handle transactions [supplying coffee shops]. But an Amsterdam city official, speaking on condition of anonymity, told me he believes that 90 percent of smoking coffee shops in the city are controlled by organized crime.



**Amsterdam  
Coffee Shop  
"Fantasio"**  
Where it is  
legal to smoke  
Cannabis and  
where the youth  
of the city  
meet to discuss  
drugs, music  
and politic /  
NEWSCOM

"This is where tolerance and ambiguity become dangerous. 'The front-door/back-door policy has created an enormous amount of organized crime in Holland', confirms reporter Kurt van Es, a drug specialist at Amsterdam's top daily *Het Parool*, and pro-legalization author of a book on smoking coffee shops and soft drugs. 'The Dutch have become the Colombians of marijuana and hash trafficking in Europe'."

In other words, the Dutch experiment with decriminalizing marijuana use hasn't worked, at least as far as Dutch citizens are concerned.

In New Zealand, cannabis legalization lobby NORML has run the line that cannabis use leads to a reduction in aggression and that this is a positive that will benefit New Zealand society.

The same line was run 10 years ago by an angry Joris Vos, Dutch ambassador to the US, responding to a critical report of Dutch drug policy in the December 1999 issue of the journal *Foreign Affairs*, by Larry Collins.

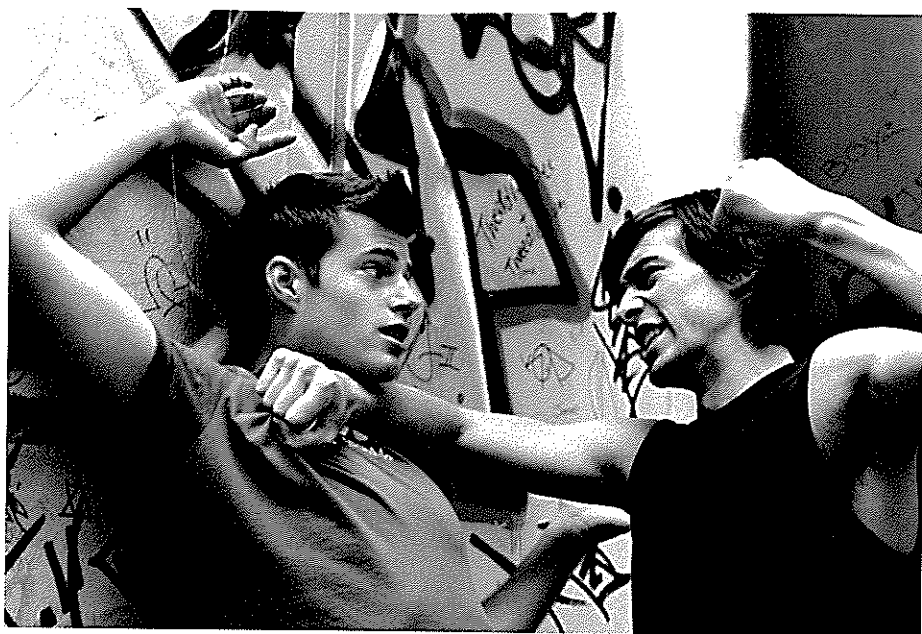
"Collins reports an increase in cannabis use among youth in major Dutch cities, from which he infers that the 'skyrocketing' rise (for which no figures are provided) in violent crime in those cities is due to increased cannabis use. But it has been scientifically established that cannabis does not evoke aggression, making Collins' linking of both (possibly untrue) observations highly questionable.

"The drug policy of the Netherlands has evolved over the years with the consent of the Dutch people, who are, for the most part, satisfied with the results. Although our approach may differ from other countries', our goals are the same: reducing drug use and the harm it causes both the user and society," huffed the Ambassador.

But if scientists were not aware of the link between dope and violent behavior ten years ago, they are now, and ironically it's a major Dutch study that provided the proof.

That major report, published in the *British Journal of Psychiatry* in 2006, examined 5,500 students between 12 and 16, and found:

"This study shows that at young ages the use of cannabis is already strongly associated with delinquent and aggressive behaviour, even after controlling for strong confounders such as alcohol use and smoking. The strength of the associations increased with higher frequency of use, and significant associations were only present among those who



## Study shows that at young ages the use of cannabis is already strongly associated with delinquent and aggressive behaviour, even after controlling for strong confounders such as alcohol use and smoking

had used cannabis recently (lifetime cannabis users who had not used the drug during the preceding year were not at higher risk compared with those who never used cannabis)."

In other words, a positive correlation exists between recent use of cannabis, and aggressive or delinquent behavior. The study concluded:

"In a country with a liberal drug policy like The Netherlands, cannabis use is associated with aggression and delinquency."

When added to the context of a massive increase in teen cannabis use in Holland, despite a law prohibiting sale to minors, the scientific studies add up to a potentially large increase in youth crime.

For his part, researcher Larry Collins who'd written the investigative piece that offended the Dutch government in 1999, hit back at the ambassador's claims that he had no evidence of a youth crime wave.

"I did not 'report' an increase in cannabis use among Dutch youth. I cited, first, sta-

tistics compiled by the Dutch Alcohol and Drug Information Center, which showed a 25 percent increase in the number of people asking for help in dealing with a cannabis problem in 1997, and second, J. A. Wallenberg, the director of the Jellinek Clinic and probably the Netherlands' leading expert in the treatment of addiction of all kinds.

"The ambassador wants statistics? *The Telegraf*, an Amsterdam newspaper, published Dutch Ministry of Justice figures on January 29, 1997, showing that the number of juveniles involved in acts of violence had risen 85 percent in a decade. As I wrote, it was senior police officers in Amsterdam and The Hague — not me — who attributed much of that growing juvenile crime problem to persistent soft-drug users. This is due not so much to aggressiveness while the user is under the influence of marijuana but rather to the socially disruptive lifestyles that regular and heavy soft-drug use can produce.

"There is no sound statistical basis for the



ambassador's statement that 'the Dutch people are for the most part satisfied with the result' of Dutch drug policy. No nationwide poll or referendum has ever been taken to determine what percentage of the population approves, disapproves, or is indifferent to the Netherlands' drug policy. One referendum of registered voters was taken on the subject in the Dutch-Belgian border town of Hulst — admittedly a special case, as the community is regularly invaded by Belgian hash smokers. Still, 96 percent of those polled wanted all the community's drug-selling 'coffee shops' closed — hardly a ringing endorsement of the nation's drug policy.

"Finally, the ambassador's letter fails to address the principal thrust of the article — namely, that the Netherlands' tolerant drug policies have turned his charming country into the drug-dealing capital of Europe," exclaimed Collins.

But Ambassador Vos wasn't the only one taking a crack at Collins' analysis of the

Dutch law. Two social scientists, "experts" in the field, laid into him as well.

"Collins attributes a 'skyrocketing growth in juvenile crime' and 'acts of violence' to Dutch drug policy, arguing that marijuana use is most prevalent in big cities — as is violent crime. But correlation is not causation. There is more of every 'sin' in every big city, and crime has also increased in countries with harsh drug laws," wrote the scientists.

Again, Collins hit back.

"The letter from Craig Reinerman and Peter Cohen should be considered in the light of Cohen's statements in the Dutch press advocating the legalization of all drugs, including heroin, LSD, and Ecstasy. The Center for Drug Research, with which both authors are affiliated, is an active champion of such a policy.

"In view of Reinerman and Cohen's concern for the statistics published by the government-funded Trimbos Institute, they might wish to contemplate this one, published in the institute's January 14, 1999,

Hard Drug Policy Paper: 'Drug use is considered to be the primary motivation behind crimes against property.'

"I did not attribute the 'skyrocketing growth in juvenile crime' and 'acts of violence' to drug use. The police officers in Amsterdam and The Hague who have to deal with the problem did."

This, then, is the background against which Dutch drug policy can be measured. Yet if you listened to the submissions of cannabis reform lobby NORML to the New Zealand parliament, you'd believe the Netherlands were a shining light for New Zealand to emulate.

Around 53% of the submissions to the 2003 inquiry into cannabis law reform recommended adopting the Dutch system, but NORML's Chris Fowlie says in a NORML analysis that this is an underestimation.

"However the report largely ignores a further 1,978 postcard submissions, which supported Dutch-style coffeeshops. These were not included in the committee's analysis of



submissions. If they were, the number wanting change would have risen from 78.6 per cent to 95 per cent. The number in favour of licensed coffeeshops would be 90 per cent, rather than the 53.6 per cent recorded in the report."

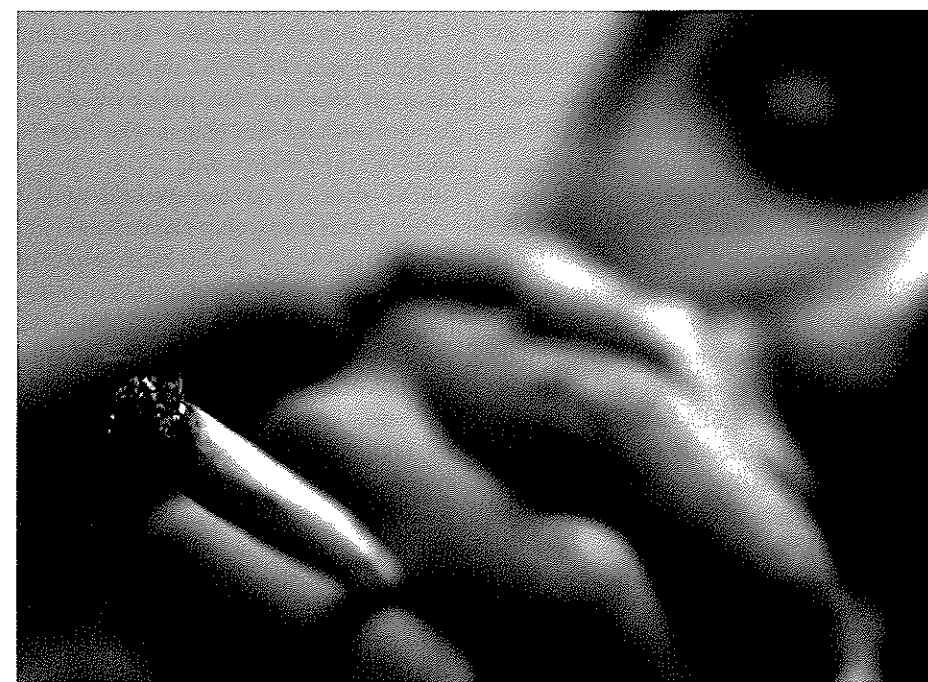
Fowlie's analysis claimed the Dutch policies had "resulted in very low levels of cannabis use among youth", but that fails to acknowledge while overall youth rates might be lower than some other countries, the rate of increase of cannabis use among Dutch teenagers is far higher since decriminalization, than elsewhere.

Again, the baseline NORML preference is for either decriminalization or legalization, with emphasis then on "treating" people with cannabis problems, rather than prosecuting.

"One of the themes emerging from the expert submissions is the view that policies should avoid criminalising non-problematic cannabis users. The report confirms various social harms result from giving criminal convictions to occasional cannabis users, and says the law 'should therefore contain options for dealing with minor cannabis use, which avoid criminalisation'.

"Several mechanisms are recommended, including:

- cautioning for first offenders
- diversion to education programmes or treatment
- expiation of repeat offences through fines (with flexible payment option) or compulsory education."



But who pays for all this? The current process of a slap on the wrist with a wet bus ticket, and a \$200 fine plus court costs, can actually be viewed in one sense as revenue neutral and possibly even positive for taxpayers. But hiring yet more liberal "drug educators" and sending people on to courses at taxpayer expense, where the consultants are charging real-world fees and billing them back to the government, shifts the financial burden from the cannabis user to the wider society.

And there's no clear evidence that liberal drug education courses work fantastically well. One such programme, High on Life, was tested in Wanganui and Taranaki before being given wider usage. Only a third of those attending the "harm minimization" course felt sufficiently motivated by it to provide feedback to researchers. While feedback from the one-third who did bother was largely positive, there's no way of knowing what those who voted with their feet thought.

The 2003 NZ parliamentary inquiry found no evidence that decriminalization led to an increase in cannabis uptake, but despite this recent news reports have linked a British decision to downgrade the seriousness of cannabis offences with a big upsurge in crime and child slavery:

"Figures obtained by *The Independent on Sunday* reveal that, as organised criminals push cannabis production to record levels, at least one child a week is being found by

police raiding cannabis factories. Experts warn that children as young as 13 are being smuggled from south-east Asia to work as "slaves" for gangs in dangerous conditions, being kept captive in towns and suburbs across the UK. They believe there has been a five-fold increase in the trade in the past 12 months.

"Police believe organised crime gangs, largely Vietnamese, have moved quickly to dominate the UK cannabis market after declassification in 2004 increased the potential rewards of growing and selling the drug and decreased the risks of punishment.

"Gangs can reap up to UKP300,000 profit a year from a three-bedroom house converted into a cannabis factory. Children are brought in by gangs to tend the plants. Many have been found unable to escape through doors or windows sealed and wired to give off dangerous electric shocks. Others fear reprisals against relatives if they try to escape.

"Police are currently raiding up to three houses a day where children are being discovered. 'There is clear evidence that there are young people who are trafficked, bought and sold, for the purpose of forced labour in cannabis production in the UK', said Christine Beddoe, director of the campaign group End Child Prostitution, Child Pornography and the Trafficking of Children for Sexual Purposes (Ecpat). 'In the past 12 months there has been a 500 per cent increase in the number of cases being reported to us. We now get told about one young person every week being removed from a cannabis factory. But nobody knows the true scale of the problem'."

In another unwanted side-effect, the nudge-nudge approach to cannabis possession in the UK is now alleged to be fuelling a "youth crime wave".

"In some areas," reported the *Independent on Sunday*, "nine out of 10 take the drug – and those who work with them say the situation is out of control. Cannabis use among Britain's young offenders is...up by 75 per cent in some areas and fuelling a crime epidemic, with youngsters stealing to fund their addictions, according to two studies.

"A national survey of Youth Offending Teams indicates that two-thirds of them have seen an increase in cannabis use of between 25 per cent and 75 per cent since David Blunkett, the then Home Secretary, downgraded the drug to class C in 2004. Some 90 per cent of all young offenders are using cannabis in some areas, a far

greater proportion than the general youth population.

"Research carried out by King's College London has indicated that 25 per cent of young offenders in Sheffield have turned to crime to fund their habit. This contrasts with previous government research which said that "cannabis use was unlikely to motivate crime".

"A rise in young people smoking cannabis openly has led to a rise in the fear of crime in the community, leading Sheffield's police chief to warn of the threat that cannabis poses to the 'fabric of society'. Fifty out of 51 of the youth courts in England and Wales are so alarmed that they have written to Jacqui Smith, the Home Secretary, urging an upgrading of cannabis back to class B."

But the British government has only itself to blame. It long ago swung in behind the "harm minimization" policy now gaining ground in New Zealand, and just as sex education here has seen a massive increase in sexually transmitted diseases, and a lower drinking age has seen more drunk 12 year olds hospitalized, so too in Britain has the "harm minimization" policy sent mixed messages to young people, as columnist Melanie Phillips points out:

"Yet drug education guidelines provided by the Government's curriculum authority use the phrase 'informed choices' over and over again; even at age 11, children are encouraged to make 'informed choices'.

"Drugscope, says Mrs Brett, constantly states in its information materials that cannabis is not physically addictive, which is untrue. Its website contains very few facts about the harm the drug can do.

"One of the booklets about cannabis, distributed by Drugscope, shows a picture of two young chaps in a field of cannabis plants. One of them is wearing a cap with the logo, 'Have fun, take care'. What sort of message does that send?"

"Whatever Mr Blunkett thinks he is doing by downgrading cannabis, there is no doubt that a sea-change has taken place in government which has swung behind the 'harm reduction' agenda promoted by drug legalisers," warned Melanie Phillips.

Indeed, the harm reduction/harm minimization approach has become dominant across a range of sectors. It is heavily present in sex education where taxpayer-funded consultants have handed out flavoured condoms to schoolgirls and boys. Unsurprisingly, teen sex is now far more widespread than it was two decades ago, but the overemphasis

## Health Matters

# Drug rankings differ

An evidence-based system proposed by British researchers for ranking a drug's harmfulness rates marijuana as less harmful than many legal drugs.

## What research says

Rates drugs on a scale of 0 to 3 for three factors in each of three categories; higher numbers equal more harmful rating

Factors	Heroin	Cocaine	Alcohol	Tobacco	Marijuana	Total
						(Out of possible 9 points)
Physical harm • Acute, chronic, intravenous	2.78	2.33	1.4	1.24	.99	8.32
Risk of dependency • Pleasure, psychological dependence, physical dependence	3.0	3.0	1.93	2.21	1.51	6.89
Social costs • Intoxication, social harm, health-care costs	2.54	2.17	2.21	1.42	1.5	5.54
						4.87
						4.0

## What laws say ...

### ... in the U.S.

Under the Controlled Substances Act of 1970, marijuana is classified as a Schedule I substance\*

### Some of the drugs included in Schedule I (a felony)

- Heroin
- LSD
- Ecstasy
- Marijuana

\*High potential for abuse; no currently accepted medical use; lack of safety for use under medical supervision

### ...and in the U.K.

Some claim the ABC system does not give specific information about a drug's risks

Class A (most harmful) category	Class A/B	Class C
• Heroin • LSD • Crystal meth	• Amphetamines	• Marijuana
• Cocaine • Ecstasy • Magic mushrooms		• Ketamine

Source: BBC, Medical News Today, Advisory Council on the Misuse of Drugs  
Graphic: Lee Hulteng

© 2010 MCT

on minimizing 'harm' by using a condom has seen STD rates go through the roof, because as the World Health Organisation was forced to acknowledge, condoms don't actually protect against most sexual diseases.

A successful argument could, and has, been made that 'harm minimisation' in a sexual context is a failure. The idea is also used in government-funded alcohol treatment programmes, where people with alcohol problems are encouraged to consider the immediate impact of getting sloshed, as opposed to the long term health impacts. Of course, for many alcoholics, reducing

harm merely by "drinking less" is an ideal but unattainable goal: one drink quickly becomes ten. The only answer for alcoholics is detox and abstinence; selling them anything less is a recipe for relapse, and more taxpayer funds on consultations and further detox.

In drug education, and the ever-present wish by marketers to distill complex issues down to slogans and soundbites, a pamphlet published by the New South Wales Education Department highlights why harm minimization can easily be interpreted by teenagers as a nudge-wink approach to drug use.

"The aim of harm reduction is to reduce harmful and hazardous drug use, and promote responsible and safer use of drugs."

The devil in the detail is the implied belief that drug abuse is safe and controllable. Some drugs just are not. Heroin, crack cocaine, methamphetamine – all can hook users incredibly quickly, sometimes from just the first taste. Marijuana can cause psychosis the first time it's used, in some people. Some narcotics are as controllable as a game of Russian Roulette where there's three bullets in a six shooter and the participant is required to pull the trigger three times, if possible.

So if harm minimization as epitomized by the Netherlands experiment has failed, what has worked?

Ironically Sweden, another bastion of progressive liberal thought, is the poster child for a successful anti-drugs policy. Unlike the Netherlands, there is a total ban on canna-

of expert commissions, the vision has not been found to be obsolete or misdirected. As shown in this report, the prevalence and incidence rates of drug abuse have fallen in Sweden while they have increased in most other European countries. It is perhaps that ambitious vision that has enabled Sweden to achieve this remarkable result."

How remarkable?

In a 1999 pan-European study of teen cannabis use, 28% of 15 and 16 year old Dutch children had used the drug; only 8% of Swedish children had tried it.

Which brings us back to that Dutch study from 2006 published in the *British Journal of Psychiatry*. That study also finds a correlation between teenage dope smoking and poor performance at school:

"After adjustment for confounders, the association between cannabis use and attention problems was significant. It is therefore not unlikely that cannabis use is associated

prides itself on having a socially progressive outlook, the figures certainly suggest we've become what we promote.

One who does attribute his murderous violence to his cannabis habit is Paul Ellis, who told Donna Chisholm in a *Metro* article last year that 10 years of heavy marijuana use turned him into a killer:

"You don't just wake up one day and you're fully blown mad. You become mad, slowly...I had reached the point where I had pretty much burnt myself out. I'd just finished a relationship so I was going to work and coming home and spending time by myself. I ended up not really having anyone to talk to and it became a pretty lonely existence. I had physical symptoms. I was sick, I had diarrhoea. I don't know if my body was saying 'I've had enough'. That kind of lifestyle is pretty unhealthy no matter how you look at it. Any addiction that starts to take over your life, starts pretty much to drag it down.

"I started to notice most things in my life- relationships with people, my work, my family- all started to become neglected, apart from my addiction. And I think that is how addictions go; it takes over. I spent more time by myself with my drugs. I started to notice something wasn't right with me. There was a change in my thinking. I started to fall into Paranoia."

So how, then, does all this tie in with billionaire George Soros?

Well, a funny thing happened on the way to the major review of New Zealand's drug policy. Exactly a year ago, the New Zealand Drug Foundation hosted a major international conference on drug policy, with a raft of overseas "experts".

Except, as the *New Zealand Herald* revealed, the conference was largely subsidized by George Soros' Open Society Institute, or more specifically its Global Drug Policy Programme.

"It's a new programme, we would have been one of their first recipients, and we would have got the grant in December last year," NZ Drug Foundation director Ross Bell told *Investigate* last year.

Soros is a huge campaigner for the legalization of drugs, and has poured massive amounts of money into propaganda aimed at convincing politicians to follow his ideas.

"Launched in 2008," explains the Soros website, "the Global Drug Policy Program aims to shift the paradigm away from today's punitive approach to international drug policy, to one which is rooted in public health

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bis in Sweden, where authorities administer a 'Zero Tolerance' approach, much like New Zealand's approach to drink-driving by teens. Admittedly, the Swedes have adopted one of the sensible aspects of the harm minimization programme – better rehabilitation procedures to help young people kick the habit, but they have not minimized the criminality of marijuana use.

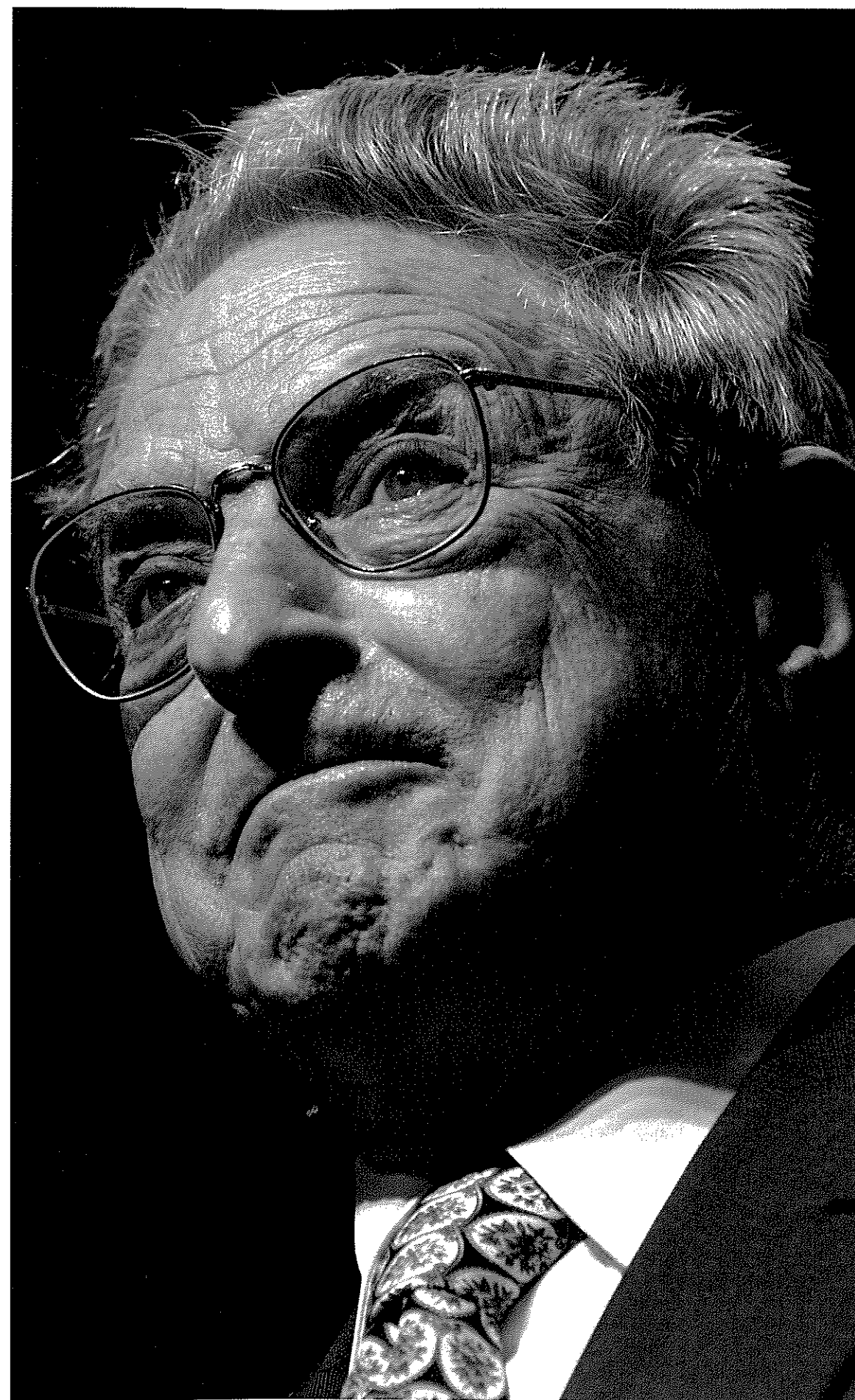
In a 2007 analysis of Sweden's tough anti drugs approach, the United Nation's narcotics division reported:

"There has been criticism, and the vision of a drug free society that is guiding policy measures has, on occasion, been derided as 'unrealistic', 'not pragmatic' and 'unresponsive' to the needs of drug abusers... The ambitious goal of the drug-free society has been questioned not only outside the country but in Sweden itself, as a number of research papers on the subject attest.

"Nevertheless, despite several reviews

with poor school performance. Additional analyses showed that those using cannabis reported lower-than-average school performance significantly more often than those who did not use cannabis (13% and 4% respectively)."

Another risk factor, then, to take into account if New Zealand's drug laws are liberalised like Holland's. Part of the problem, however, is that a lot of damage to young people has already been done. Twenty years of publicity campaigns by pro-reformers, coupled with a reduction in police attention on marijuana crimes (except where it is for supply), have sent the same nudge-wink message bedevilling Britain, with the result that cannabis use among New Zealanders is the highest in the OECD – 22% of people over 15 have tried the drug at least once, compared to Australia in second place with 17.9%. Sweden, incidentally, has a national cannabis use figure of 2.2%. New Zealand



**Soros is a huge campaigner for the legalization of drugs, and has poured massive amounts of money into propaganda aimed at convincing politicians to follow his ideas.**



and human rights. The program strives to broaden, diversify, and consolidate the network of like-minded organizations that are challenging the state of international drug policy. The program's two main activities consist of grant-giving and, to a lesser extent, direct advocacy work.

"At present, global drug policy is characterized by heavy-handed law enforcement strategies which not only fail to attain their targets of reducing drug use, production and trafficking, but also result in a documented escalation of drug-related violence, public health crises and human rights abuses. The UN High Level Meeting in March 2009 – at which a Political Declaration was drawn up following a cursory review of the past decade of international drug policy – did not bring any major break-throughs. However, the Vienna consensus was broken for the first time by a group of 26 countries who stressed their commitment to harm reduction."

**P**lainly, Soros is pleased that his money is beginning to have an effect in swinging political opinion his way.

Among the GDPP's aims is the idea of forcing reform, and treating drug production as a human right and an industry:

Decrease the high levels of incarceration and forced institutionalization of drug users and to ensure the principle of proportionality by supporting drug policy reform at national and international levels.

Increase the availability of effective and evidence-based drug treatment for drug users both in prison and out, and insist on better guidelines from the UN on defining evidence-based treatment and pain management.

Generate more in-depth economic analysis on drugs-related issues, and to scale up the debate about the economic costs of current drug policies.

Document and challenge law enforcement strategies which contribute to the violation of human rights and to create a network of law enforcement and legal experts who support an evidence-based approach.

Document the human rights violations of farmers involved in drug production and to advocate for a rights-based approach to illicit drug production.

Increase drug users' involvement in the global debate on drug policy and ensure that the voices of drug users are present at the national and international levels.

The NZ conference received \$35,000 from the Soros entity, and most of the speakers at

the event turned out to be regulars on the Soros-funded harm minimization speech circuit.

Professor Scott Burris of Temple University in the States, whose biography acknowledges "the Open Society Institute" as a sponsor of his work on drug policy.

Professor Steve Allsop, whose work on harm minimization has been favourably quoted on the Soros website.

Deborah Peterson Small, who spent eight years working for the Soros-funded Drug Policy Alliance before setting up her own organization, Break The Chains.

In her bio she writes: "Ms. Small is a nationally recognized leader in the drug policy reform movement and has been a major catalyst in engaging communities of color and their leaders to address the negative impacts of the war on drugs in their communities."

If it sounds like Soros paying for his propagandists to come to New Zealand and spread their message, you'd probably be pretty close to the truth. The New Zealand taxpayer also bore some of the costs of the talkfest.

Interestingly, an Australian federal parliamentary investigation by the Family and Human Services Committee in 2007 found drug policy there was being captured by what it calls "drug industry elites", and it named the Australian Drug Foundation, the Australian National Council on Drugs and a number of other entities – some of whom attended the NZ Drug Foundation conference, as culprits.

"From the evidence taken by the committee in the course of its inquiry it has become quite evident that there is no universally agreed definition of harm minimisation. It clearly means different things to different people. The greatest point of difference in illicit drug policy is between those who see minimising harm as a means of achieving the illicit drug user being drug free and those who see continued use as acceptable. The term harm minimisation has been captured by those who consider themselves to be the policy elite, who want so-called reform of drug laws, such as calling for cannabis to be treated like other legal drugs and therefore legalized and taxed and treated like any other commodity. The committee considers this to be a pro-drug stance. These people also share the view of the international movement funded by George Soros to change international treaties outlawing some drugs.

"The committee considers that the involvement of the 'drug industry elites' in the development of national illicit drug pol-

icy is undermining the implementation of the Commonwealth's stated 'zero tolerance' approach to illicit drugs. The committee believes the Commonwealth needs to wrest back control of illicit drug policy development from the states and territories and the drug industry elites.

"Many of the key national illicit drug policy documents are developed by the drug industry elite."

The Australian report notes that the fox is in charge of the hen house, because 'harm minimisation' programmes become long term treatment programmes for drug addicts and make-work schemes for the "elites", "who have a vested interest in supporting harm minimization approaches that do not necessarily lead to the cessation of drug use. The committee was told that the soft harm minimisation workforce was likely to cost around \$500 million annually."

That's good money if you can get it, and there are signs of similar things, albeit on a New Zealand scale, taking place on this side of the Tasman.

The Ministry of Health, for example, part funds the New Zealand Drug Foundation. Two executives of the Ministry of Health, Matthew Allen and David Clarke, quit in 2001 and ended up setting up their own consultancy business on healthy policy on drugs, alcohol and tobacco. Controversially, these two men received more than \$1.3 million dollars in public funding over just a few short years, most of it in contracts never put out for tender, despite public service policy requirements.

Allen & Clarke have not only worked for the Ministry of Health, they have also worked for the Drug Foundation. NZDF director Ross Bell told Investigate last year that it was a requirement of the \$35,000 Soros sponsorship that NZDF provide a written report on the conference. Lo and behold, the written report is entitled "Beyond 2008, New Zealand Consultation Report" and it's written by Allen & Clarke.

Specifically, it says Allen & Clarke helped organize the conference:

"The meeting was organised by the New Zealand Drug Foundation, and facilitated by Ross Bell (Executive Director of the New Zealand Drug Foundation), and Brigid Borlase (Allen & Clarke). This report has been written by Allen & Clarke for the New Zealand Drug Foundation."

The report notes that participants were urged to lobby for a more "progressive" drugs law in New Zealand.

"The Misuse of Drugs Act (1975) is currently being reviewed; a move which the panel and meeting participants felt is well overdue. Speakers encouraged participants to get involved in the review and use the opportunity to support movement toward a more progressive regulatory framework for drug control policy in New Zealand."

Specifically, the conference was briefed about the Law Commission's review of drug laws, which coincidentally is expected to be released as a public discussion document this coming month. There are strong hints in the Allen & Clarke report as to what it will contain:

"They noted that the review will provide the opportunity to begin dialogue on issues that are of concern for the Government, the judiciary, the drug control and treatment sector and the public. The issues include the types of controls and penalties that should be applied to drug-related offences; the ways that drugs should be categorised; dealing with new substances; enforcement powers; and which agencies should be responsible for administering the legislative regime.

"The Commission presenters noted that criminalisation and enforcement are only parts of drug control; however they are high profile parts with significant impacts on those involved. While the terms of reference of the review specifically exclude tobacco and alcohol, the Commission is interested in ensuring that a revised legislative structure for drug control reflects the linkages between illicit drugs and other licit substances.

"Participants welcomed the opportunity that the review presents, and noted that there may be the opportunity to make innovative changes that better reflect a harm minimisation approach. Participants also noted the importance of taking part in consultation opportunities, and entering into debate to encourage informed discussion of legislative frameworks for drug policy.

"The Commission will develop an issues paper, followed by a consultation process. The Commission representatives noted that they welcome suggestions from NGOs and communities on who they should consult with, and the most appropriate means of consultation.

"Participants reported that New Zealand's drug policy and the international Conventions are geared too much toward supply control, with negative consequences."

You can probably see where the review of drug laws is heading.

Allen & Clarke's reports on the overhaul



**The greatest point of difference in illicit drug policy is between those who see minimising harm as a means of achieving the illicit drug user being drug free and those who see continued use as acceptable**

of New Zealand's national drug policy will be integral when the Government comes to consider the issue later this year. And Allen & Clarke favour harm minimization programmes, as it lists expertise in the area on its website: "health promotion initiatives ranging from tobacco and drug control and harm minimisation strategies".

In a 2003 report compiled for the Ministry of Youth Development, entitled "Effective Drug Education For Young People", Allen & Clarke abandon any pretence about their own feelings on drug policy:

"The overall objective of any drug education programme should be a net reduction of drug-related harm. This means that a harm minimisation approach should be adopted for drug education. Harm minimisation can include a number of objectives, including abstinence or reduction in use. However, harm minimisation also emphasises realistic, evidence-based strategies, and there is evidence that "drug education programmes having [the goal of abstinence] consistently fail to produce behavioural effects" (WHO 2002). While abstinence should be available as an option for young people, drug education programmes should have other harm

minimization objectives as their focus."

In other words, push abstinence or "reduction in use" to one side, in favour of a managed pathway.

Sound like a make-work scheme for bureaucrats and NGOs, at a high cost to the taxpayer?

But why would a character like George Soros have an interest in legalizing drugs and "harm minimization"? Soros would argue he has philanthropic motives, others say it's purely business. Legalising narcotics worldwide would allow business financiers like Soros to control large chunks of the drug trade, "legitimately". They could own the opium poppy fields, pay poor peasants to harvest, control distribution and supply of drugs to market in "coffee houses" or, as NZDF director Ross Bell told Newstalk ZB this month, even "supermarkets".

So when the drug policy discussion document is released next month, you'll know where they're coming from, and what they want.

Bell, incidentally, insists he doesn't want drugs legalized, but does want the issue debated publicly.

Looks like he got his wish. □