**A Drug Trend Practice in Australia – Pushing for the Permanent Permission Model: Legalisation of drugs and the undermining of children and vulnerable communities’ human rights.**

Gatekeepers of current Australian policy and key political actors are following the classic *Big Tobacco* and subsequential anarchist playbooks on *cannabis* as the thin end of the wedge to dismiss sound evidence, disparage opposition and defame challenges to their misuse of National Drug and National Health strategies. Subsequently putting the human rights of the nations children, along with the large and growing Recovery Community, at risk.

Yet, this comes as no surprise for those who have been paying even the slightest attention. Particularly aggressively pursued over the last two years, the ongoing cannabis (and subsequently, other illicit substance) liberalisation and legislative decriminalisation trajectory has become the expected standard operating procedure in recent years.

In Australia, a synoptic view of this core *strategy* consists of the following gradual but persistent elements that allow the *‘frog to stay in the pot,’* so to speak.

1. Providing mere lip service to Demand Reduction and Prevention strategies, even as a tokenistic gesture enshrining these as a [first priority pillar in the national drug strategy](https://d1r9bdsrv6vekg.cloudfront.net/images/resources/pdf/aod/NDS2017-26Final.pdf) – but in practice ignoring them.
2. Hijacking the entire three pillar Harm Minimisation policy platform with the heavy focus on Harm Reduction ***only*** ideology, so the three terms become interchangeable, with Harm Reduction and Harm Minimisation conflated as meaning the same thing.
3. Similarly, on the one hand setting [best practice Demand Reduction and Prevention](https://d1r9bdsrv6vekg.cloudfront.net/images/resources/pdf/aod/AODPrimaryPrevention.pdf) as priorities within policy documents as mere symbolism and then proceeding to either ignore their essential meaning and practice in practical application or redefining these terms to fit the Harm Reduction only interpretation mode for policy. The ultimate outcome ensures documented practices and principles are disempowered and/or so severely under-resourced that these policy areas are effectively, and in a practical sense, designed to fail.
4. By failing to enact policing of existing prohibitive laws and using this judicial educator for rehabilitation, not punishment, policy implementers have given a furtive *wink* to widespread cannabis use (and increasingly other drug use). Thus, effectively permitting more people to use with impunity, thus creating a tolerant drug use culture where ‘nobody really cares, just do it’. Consequently, further driving drug use toward the ‘critical mass’ statistic of about 15 percent of people actively consistently using the substance that leads to the public consensus stage of eliminating legislative barriers. The abandonment of any reference to drug use harms, [including criminal and community harming outcomes and actions due to using substances](https://www.dalgarnoinstitute.org.au/index.php/resources/media-releases/1020-ripple-effect-chem-sex-violence-road-toll-and-the-growing-failure-of-misused-drug-policy-reducing-or-increasing-harms), collapsing

these all into one category of [‘mental health’ data,](https://www.dalgarnoinstitute.org.au/index.php/advocacy/dalgarno-aod-policy/2058-who-mental-health-action-plan-2030-dalgarno-institute). In effect this frames all illicit drug use into problematic predisposition rather than a proclivity or subject of choice and consequently reduces ethical and social accountability for intentional and deliberate unsafe and unhealthy personal conduct. That is, it entirely removes agency.

1. Wherever possible weave a cloak of legitimacy around substances with ‘medical’ terminology and alleged health benefits (no matter how thin and unsubstantiated) to divert attention from the short- and long-term multiple substance harms particularly around cannabis and psychedelics – so the lay person begins to perceive these psychotropic toxins as somehow ‘safe’.
2. Within this medicinal value line of argument, aggressively promote emotive anecdotes that consistently [bludgeon evidence-based science into submission](https://www.dalgarnoinstitute.org.au/index.php/resources/next-phase-blog/1272-cannabis-as-medicine-pot-propaganda-emotive-anecdote-marketing-manipulation-and-the-side-stepping-of-science) and create an entire focus for a **‘vote for medicine’** framework. As the term ‘medicine’ increasingly becomes associated with a substance public perception builds to accept ‘It’s probably not that bad’. Something that is not hard to attain in a first-world Western context where self-medication is used to relieve boredom, insecurity, unhappiness and anything that generally feels ‘uncomfortable’.
3. Continue parroting old but familiar memes such as, *‘it’s just a plant.’*, the *‘war on drugs has failed’* (not that Australia ever had one) and proceed to create new memes such as *‘a war on cannabis is a war on me!’* with an easily sympathetic image of a ‘twenty-something young struggling mum’.
4. [silence dissenting voices by foisting speech codes on media and community](https://youtu.be/mkuUmwJVMyk?list=PLTMqlfT-1C1x7ekCSxIhF6HMjHBqMAK6n) that publicly [gag any legitimate censure and concerns there are about cannabis and other illicit substance use.](https://www.dalgarnoinstitute.org.au/index.php/advocacy/dalgarno-aod-policy/2010-the-unleashing-of-domestic-familial-intimate-partner-violence-the-drug-factor)
5. Divert attention away from personal agency and choice to victimhood. [Shift narrative from behaviour to ‘disease’ models only](https://www.nobrainer.org.au/images/resources/pdf/Drug_Use_Stigma_22-07-19.pdf), irrespective of whether it is initial or long-term use.
6. Focus on another public health target as ‘bad actors’ i.e. the entrenched public health wrecking ball drugs of alcohol and tobacco, to deflect off the shocking dangers of illicit drug use. Stroke this negative rhetoric, all the while divorcing the public from the staggering cognitive dissonance created but at the same time keep decrying the public health outcomes of tobacco and alcohol but keep insisting that adding more psychotropic toxins in the form of cannabis (and other drugs) to the public square will create no more ‘real harm’.
7. Once there is marked increase in the drug use with impunity, then ramp up the voices to **decriminalise drug use** – beginning with cannabis. Once successful, lean in harder on promoting the discredited [*‘Portugal Model’*](https://www.dalgarnoinstitute.org.au/index.php/advocacy/dalgarno-aod-policy/2063-false-claims-for-portugal-and-decriminalisation)..
8. Now, you have *primed* the oversubscribed and under-informed public for a series of ‘sentimental opinion polls’ on drug use legalisation replacing evidence-based policy.
9. At the height of [active discounting and/or burying of history](https://www.youtube.com/watch?v=7UScdK82aAo&list=PLTMqlfT-1C1x7ekCSxIhF6HMjHBqMAK6n), the so called ‘progressives’ are emboldened and fully backed with media sentiment, the push for the next ‘enlightened’ move is executed – the full decriminalisation and legalisation of psychotropic toxins.
10. A present reality that the Dalgarno Institute predicted – the legalisation of cannabis for recreational purposes is now on the State and National radar, largely and [ironically made possible](https://www.dalgarnoinstitute.org.au/index.php/resources/next-phase-blog/2037-earth-day-2023-dear-plant-e-weed-is-not-your-friend) through The [*Australian Greens*](https://greens.org.au/policies/drugs-substance-use-and-addiction) party.

If human rights of the most vulnerable in our communities’ matter, then the normalising or worse, legalising of drug use can be no part in any protective framework.

See also:

* [**Open Letter to Politicians on Decriminalisation**](https://www.dalgarnoinstitute.org.au/index.php/advocacy/isabella-s-list-updates/1384-open-letter-on-decriminalization-of-drugs-2020)
* [**Legalizing Harm – Why Legalizing Cannabis is a Huge Public Health and Well-being Misstep**](https://d1r9bdsrv6vekg.cloudfront.net/images/resources/pdf/aod/Legalising_Harm_24-02-23.pdf)

Shane Varcoe - Executive Director, Dalgarno Institute