



Resiliency, Substance Use & Sustainable Development Goals

Dalgarno Institute



Address

PO Box 7005, Dandenong,
Vic, 3175
Australia



Phone

Phone: 1300 975 002



Online

Email: education@dalgarnoinstitute.org.au

Website: www.nobrainier.org.au
www.dalgarnoinstitute.org.au



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All the evidence is in and we now know Alcohol & Other Drugs (AOD) impact no less than 14 of the 17 Sustainable Development Goals, with [Alcohol leading the way](#), not least because it is culturally entrenched with the [highest rating of permission for use](#), being that it is a legal commercially promoted product. However, illicit substances are catching up, and obviously the pursuit of legalisation of such substances will only add to their enormous capacity to impede fulfilment of international sustainable development goals. (SDG's)

For this brief foray into this important issue, we are only going to focus on three of these goals, as time here would not permit even a cursory look at AOD impact on the 14 above mentioned related goals.



Again, **Illicit drugs** along with *misused prescription and legal substances* have a significant impact on the **Sustainable Development Goals (SDGs)**, specific ones focused on in this short treatise are 1,3 and 16.



SDG Goal 1: End Poverty in All Its Forms Everywhere

Target 1.4: Ensuring equal rights to economic resources and land ownership for all, especially the poor and vulnerable.

- Contrary to misconceptions, involvement in the drug market is often a sign of **poverty** rather than wealth. Small-scale farmers may grow drug-linked crops due to a lack of viable licit livelihood opportunities. These crops provide some level of livelihood security, as they are low-maintenance, non-perishable, and easily transportable to a profitable market. Of course, demand for this addiction for profit product fuels its own economic and agricultural system wrecking ball, and further entrenching these hapless collaborators in 'self-harm', by participating in the undermining of this and other SDG's.
- The ever-increasing production, trafficking, and consumption of illegal drugs create major economic, social, and political barriers to sustainable development. [These outcomes strain global efforts to eradicate poverty](#)².
- Alcohol has long been peddled, if not overtly, then tacitly as a *poor-mans anti-depressant* and even a 'right' for the hard labouring man. The subsequent reliance on this heavy natural resource using drug, and the health and well-being capacity diminishing it fosters only undermines this poverty erasing goal.



- **Structural Conditions Addressed by SDGs**

By working toward the accomplishment of the 17 SDGs, we can address structural conditions driving people to join illicit drug markets. As well as building psycho-social resilience to move away from self-medicating models of mental health will better serve the exit from poverty.

[These conditions include poverty, food security, gender equality, health protection, environmental sustainability, access to justice, and building effective institutions.](#)

In summary, not only is drug policy reform is essential for achieving the SDGs, but a stronger strategic development of See [Executive Summary - Mapping the Impact of Illicit Trade on the Sustainable Development Goals \(unctad.org\)](#)





SDG Goal 3:

Ensure Healthy Lives and Promote Well-Being for All at All Ages

One such goal utterly assailed by these toxins is Sustainable Development Goal Number 3. It is important to acknowledge that while a number of other factors can undermine these important states, it is substance use that has a more immediate and holistic impact on the human unit, when it comes to health and well-being decline.

Sustainable Development Goal 3 (SDG 3) is one of the 17 Sustainable Development Goals established by the United Nations in 2015. The official wording of SDG 3 is: "To ensure healthy lives and promote well-being for all at all ages." SDG 3 research focuses on key targets like: reducing maternal mortality, ending all preventable deaths for children under five, fighting communicable diseases, reducing mortality from non-communicable diseases, and promoting mental health — all with the aim of stopping needless suffering from preventable diseases and premature death. ([UN SDG 3: Good Health and Well-being | Scholarly Research | For Researchers | Springer Nature](#))



Target 3.5: Strengthening prevention and treatment of substance abuse, including narcotic drug abuse.

In so doing to also reform the misuse of Harm Reduction vehicles that have been hijacked to normalise substance use, rather than help prevent uptake or enable exiting from ongoing substance use – The substance use that perpetuates NCD's, (Non-Communicable Diseases) loss of productivity, and onerous public health system burden with all those attending economic harms.

Enablers and resources for achieving this SDG.

- [THE DECLARATION OF OVIEDO – Global Initiative of Drug Use Prevention](#)
- [The Global Position Paper on Recovery](#)
- [World Resiliency Day](#)





SDG Goal 16: Peace and Justice – Strong Institutions

“Compassion and a strong moral compass are essential to every democratic society. Yet, persecution, injustice and abuse still run rampant and is tearing at the very fabric of civilization. We must ensure that we have strong institutions, global standards of justice, and a commitment to peace everywhere.” [\(The Global Goals\)](#)

Substance use most quickly and directly negatively influences the above imperative aspirations. Substances act as moral disinhibitory, to the point where such 'immoral' states – the harmful conduct and behaviour of the substance users under the influence of psychotropic toxins – are now sought to be protected by law.

Compassion is the [sympathetic consciousness of others' distress together with a desire to alleviate it](#), is forfeited in drug induced carelessness, recklessness and even violence, and cares nothing for the physical, mental and emotional well-being of the drug taker or those in their orbit.

We will quickly look at just three, but ostensibly all targets of this SDG are influenced negatively by substance use.

- **Target 16.1: REDUCE VIOLENCE EVERYWHERE** – Significantly reduce all forms of violence and related death rates everywhere. (Violence by substance users is eclipsed by those producing and trafficking said substances and simply making the substance 'legal' has not 'shifted the needle' on this issue.)
- **Target 16.2: PROTECT CHILDREN FROM ABUSE, EXPLOITATION, TRAFFICKING AND VIOLENCE** – End abuse, exploitation, trafficking and all forms of violence against and torture of children. (Article 33 of International Rights of the Child is decimated by substance using culture. [This demographic above all, must be protected](#))
- **Target 16.3: PROMOTE THE RULE OF LAW AND ENSURE EQUAL ACCESS TO JUSTICE** – Promote the rule of law at the national and international levels and ensure equal access to justice for all law (including appropriate restorative justice for substance demand generating law breakers)

TRACIT continues to challenge this too,

Illicit trade – in all its forms [not least substances] stands in direct juxtaposition to SDG 16, by feeding violence and breeding corruption, undermining trust in institutions and the rule of law, and generating enormous illicit financial flows. Moreover, the links between illicit trade and organized crime are well established, from human trafficking networks and tobacco smuggling, to fuel theft by drug cartels and the involvement of the mafia and organized criminal groups in the trade of counterfeit and illicit products. Perhaps most frightening are links to terrorist financing that heighten threats to national and global security.





Australia, Substance Use & Sustainable Development Goals



To date, the only Report issued by the Australian Government on our progress with the Sustainable Development Goals (SDG) was released in 2018: [‘Report on the implementation of the sustainable development goals 2018’](#). This report acknowledged some of the movement toward agreed upon (but voluntarily pursued targets) and waxed cautious about shortfalls and opportunities for clear improvement.

Whilst it is vital to note again that alcohol and other drug use and misuse do negatively impact 13 out of the 17 Sustainable Development Goals, it was in SDG three of the report in which glaring omissions were evident.



1. To end poverty in all its forms everywhere!
2. End hunger achieve food security and improved nutrition and promote sustainable agriculture.
3. Ensure healthy lives and promote well-being for all at all ages.
4. Achieve gender equality and empower all women and girls.
5. Ensure availability and sustainable management of water and sanitation for all.
6. Ensure access to affordable, reliable, sustainable and modern energy for all.

9. Build resilient infrastructure, promote inclusive and sustainable industrialization and foster innovation.

10. Reduce inequality within and among countries.

11. Make cities and human settlements inclusive, safe, resilient and sustainable.

12. Ensure sustainable consumption and production patterns.

15. Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss.

16. Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

17. Strengthen the means of implementation and revitalize the global partnership for sustainable development



As mentioned, although the alcohol and other drug arena impacts generically almost all the SDG's, it is Sustainable Development Goal number 3 where the alcohol and other drug issue is specifically referred to: **ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING AT ALL AGES.**

In this section of the Australian report, the nation's successful war on Tobacco (a relentless and global leading stratagem) received an appropriate and proud mention, but by contrast references to alcohol and specifically our disastrous, 'permission enabled' illicit drug use issue – and its 'wrecking ball' effect on the welfare system, productivity and most disturbingly of all, our health system and its staff – ***"Patients under the influence of alcohol or drugs, including ice, and those with mental health issues are the most likely to become violent."*** – were nowhere to be seen¹



Alcohol

This is the other 'legal' drug that does cause the most significant harm to our communities, precisely because it is legal! According to World Health Organization (WHO) Global status Report on alcohol and health 2014 alcohol is a contributor to more than 200 health conditions and causes around 3.3 million deaths across the globe each year.²



When it comes to alcohol consumption in our nation, the data collected by Australian Bureau of Statistics puts our national consumption of pure alcohol per capita as 9.7 litres³. However, according to World Health Organisation data shared by The Telegraph in late 2016, we were at 12.2 litres per person annual consumption⁴. Either way, Australia is still in the top 20 countries in the world for alcohol consumption. However, improvements are being made to the long standing 'celebratory culture' around alcohol use and misuse. Public campaigns, advertising bans and other drinking-culture challenging work is in play, (at least in the last 10 years) all the commencement of what has been little more than a 'skirmish against' alcohol. However, a full blown 'war' on alcohol as it was with tobacco, is unlikely due not only to its amenity, but also the

economic contribution it makes to the economy. Even though, according to some estimates, alcohol has caused up to \$36 billion dollars in harm⁵ to our communities annually, its contribution to the economy still outweighs its harms, so that the 'economic' equation drives the 'net community benefit' model, regardless of the harms!

But what about the use of illicit substances? To point to the 'elephant in the room' it must be stated again that in 2014 Australia ranked number one in the world for illicit drug use⁶ per capita (and little has changed). Of course, references to these concerning and alarming statistics in relation to illicit drug use, were absent from the self-reporting document. But why are they? If we are proud of our health and community benefiting, and sustainable development goal reaching success on tobacco, why aren't we chewing at the bit to do the same with the other drugs, especially the incredibly harmful illicit drugs?



National Drug Strategy – Focus and Priority?

All three of these drugs are subject to our National Drug Strategy and it is three main pillars. The priority of which is firstly Demand Reduction, then Supply Reduction considered as the second most important, and with the important but now utterly dominating third pillar of Harm Reduction. It is clear in the drug issue and sustainable development goals, that leadership is the key. After decades of lobbying by academics, scientists and clinicians, once free from the propagandized persuasion and perfidious promotion of the Tobacco industry, governments realized that revenues from this drug were not covering the harms it sustained, and consequently went to war against it!

The alcohol industry still has sway in 'leading' the way the national drug strategy is employed with this legal drug, there are more and more 'alcohol challenging' groups and activities emerging in recent years. Yes, the long-

standing groups like the Dalgarno Institute have always 'waved the flag' (with little or no funding) but a number of new alliances have emerged to combat the impact of alcohol on community in the last 12 years in particular. Whilst these 'new kids on the block' have added momentum to our alcohol curtailing cause, and certainly whilst we are seeing demand diminishing, alcohol is not only a staple for social lubrication purposes, but also the preferred 'anti-depressant' of an ailing and self-medicating first world culture!

However, who and/or what is leading the policy on illicit drug use in this National Drug Strategy – it appears for certain that it is not anyone remotely interested in Sustainable Development Goals, or anyone interested in the reduction in the drug use – drug use that is actively undermining the potential achievement of 14 of those goals.



Leadership in Drug Policy – Who is in charge?

So, where is the leadership on this? Much of the leadership focus has been placed, not on reducing drug use or uptake, but only on assisting existing drug users; and a-growing number of new initiates which this 'permissive messaging' is fostering; to continue to use and increase their 'safer use' of illicit drugs. Predictably there is a continual increase in the incidence of drug abuse, that in turn inflicts harm (of various types) on individuals, families and their communities.

This leadership (or lack of) in this illicit drug use space is having little influence in the areas of primary prevention, drug use exiting recovery or serious supply reduction judicial actions (such as enforcement, diversion and the legal incentives to change); the focus instead is on mantras of inevitability, permission and even 'rights' to use these saboteurs of sustainable development goals, called 'drugs'!

The cognitive dissonance in this arena is breath-taking. Upon investigation it continues to appear that a single, well-funded, information and revenue controlling policy group hold sway of both National Drug Strategy Policy interpretation and implementation, regardless of the specifications and priorities. This misuse of just one pillar of a very sound three pillar national drug strategy is seeing the other two pillars of Demand and Supply Reduction, utterly undermined. Unsurprisingly, this subterfuge is key to creating a self-fulfilling propaganda prophecy of drug use proliferation (perceived or real), all attempting to foster 'normality' of recreational drug use and thus one that leads to an inevitable cry for legalisation and

regulation – all to be funded by the ever-increasing financial black hole that is a financially depleted 'health care' system.

The irony in all this is that the Sustainable Development Goals are also a casualty of such masterfully masked pro-drug agendas.

It is time our governments, policy makers, educators, medical practitioners, judiciary, policing, academics and scientific community did what was done with the tobacco issue. That is, call these substances out for what they truly are – life, health, family and community destroying toxins - and work collaboratively and as tirelessly in the one direction to see our communities educated and legislated away from these poisons. One Focus – One Message – One Voice: QUIT drug use! Prevent do not Promote!

It is also time the manipulative dissenting voices of those claiming rights without responsibilities were called to account, just as with the tobacco lobby.

It is time those who promote the 'right' to use psychotropic toxins, those who are the close cousins of the drug pushers – the permitters and promoters – were given the complete health and welfare 'bill' for all the harms, direct and indirect; confronted by all the grief these substances cause, and be compelled to pay for this damage out of their own pocket. Time for these peddlers to pay instead of using both taxpayer and the hard-working businesses of our nation to foot the bill for careless and sustainability damaging conduct! It is time to PREVENT not Promote!

Footnotes

1. <https://theconversation.com/violence-against-nurses-is-on-the-rise-but-protections-remain-weak-76019>
2. http://www.who.int/substance_abuse/publications/global_alcohol_report/msb_gsr_2014_1.pdf?ua=1
3. <http://www.abs.gov.au/AUSSTATS/abs@.nsf/productsbyCatalogue/48BD96605A358A0ACA256F16007D736D?OpenDocument>
4. <https://www.telegraph.co.uk/travel/maps-and-graphics/Countries-according-to-alcohol-consumption/>
5. <http://wardrugs nirvana.blogspot.com/2010/08/alcohol-abuse-costs-australia-36bn-year.html>
6. <https://www.dailytelegraph.com.au/news/nsw/australia-comes-top-of-global-list-for-recreational-drug-use-in-united-nations-2014-world-drug-report/news-story/764732bd5eb5037096389fcd55bfbcab>



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