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Drug abuse is a serious national problem of many nations. Its causes are many and it transcends all racial or social barriers. Its victims are mainly the young. It is the most destructive disease ever known for it destroys its victims physically, mentally and morally. Our approach to the drug problem in Singapore is to reduce demand.

Because of the serious consequences that drug abuse have on the user, in particular the youths, the authorities in Singapore take a very serious view of the problem. No effort is spared to contain the problem and a number of agencies are brought together to tackle it.

The drug problem in Singapore dates as far back as the First Opium War in 1839. Opium smoking was prevalent among the early Chinese immigrants. It was only in 1946 that drug taking became an offence. However, opium taking was confined to the older immigrants and was not a very serious problem at that time. The Government started the Opium Treatment Centre which treated opium addicts through the replacement therapy method. Addicts were administered methadone or tincture of opium in progressively decreasing dosage until their craving disappeared.

The problem was contained until 1973 when there was a dramatic change in the local drug scene. Cannabis or ganja and MX reared their heads among a good cross-section of our youths. The Government took immediate action to review and update its laws to provide for stiffer penalties for pushers and traffickers and for the treatment and rehabilitation of drug addicts. In July 1973, the Misuse of Drugs

Act was passed by Parliament. The Opium Treatment Centre was renamed the Drug Rehabilitation Centre as it took on the treatment and rehabilitation of drug addicts who were consuming other drugs.

The law distinguishes between the consumer of drugs and the person who exploits the situation. The consumer is assisted through treatment and rehabilitation whilst the pusher or trafficker is punished severely and there are provisions in the Act which extend the death penalty in cases where a person is convicted of trafficking more than 15 grammes of heroin in pure content or more than 30 grammes of morphine. The Government is firm in its policy of punishing those who exploit the weaknesses of others.

The demand reduction of heroin consumers in Singapore had been achieved with some measure of success. The approach was through a special exercise code named "Operation Ferret" and a tough treatment and rehabilitation programme.

#### Operation Ferret

It was felt that as long as there were addicts, there would be demand for heroin. Despite all precautions taken, it was not possible to cut off supply totally. The approach was therefore to cut down the demand for drugs. Operation Ferret was aimed at disrupting the multiplier effect of addicts contaminating the innocent. In the exercise, as many drug addicts as possible were arrested and detained for treatment and rehabilitation. They were confined for long enough periods to isolate them from the drug and to prevent them from influencing new addicts. In this way, the demand for heroin was expected to be reduced. The Operation also yielded useful data on the addict population in Singapore and to put them on record for control purposes.

Various agencies were involved in the mammoth task of Operation Ferret. It also required the understanding and cooperation of the public, as there was a danger of indiscriminate arrests. Fortunately for us, there was no sympathy for abusers and the public appreciated the effort and accepted the situation very well.

Operation Ferret was an unqualified success. Figures showed that there was a slight reduction in the total number of heroin addicts

as well as those on the loose. One indicator was the ratio of "new" to "old" heroin addicts; defined according to whether they were already on record when arrested under Operation Ferret. The ratio declined from 2.2 : 1 in April 1977 to 0.2 : 1 in November 1978. The recidivistic ratio decreased from 4.6 : 1 in April 1977 to 1.5 : 1 in November 1978.

The objective of demand reduction was achieved in Operation Ferret. The continuing exercise was to step up the pressure and to minimise relapse rates. Thus a tough rehabilitation strategy was introduced in 1976.

#### Tough Rehabilitation Strategy

The effectiveness of treatment and rehabilitation of drug abusers must be viewed in relation to the basic social, educational, cultural and legal framework of a particular society. Public opinion against drug dependence must be strong and undivided or it will be difficult to implement programmes which will be successful. The success of drug rehabilitation and treatment depends to a great extent on the treatment and rehabilitation facilities as well as the co-operation of the public in the various process of rehabilitation.

In Singapore, the treatment of drug addicts is largely through the "cold-turkey" method. It was adopted on the belief that those who had gone through it will be less likely to suffer relapses. Those contemplating experimenting with drugs will be deterred by the description of the suffering of those who had previously been through the process. This has been found to be the most successful way of treating drug addicts. Of course precautions are taken when subjecting addicts to "cold-turkey". Medical opinion is obtained first.

The Drug Rehabilitation Centre also admits those who voluntarily turn up for treatment. The rehabilitation process includes detoxification, counselling and indoctrination by professional officers. They are subjected to strict discipline to inculcate good habits and social behaviour. In the final stage of rehabilitation, the addicts are put to work to inculcate good work discipline as it has been found that drug addicts on release seldom hold on to their jobs because of poor work attitudes and this contributes to their relapses.

Aftercare of the drug addicts has been found to be a very important element in the rehabilitation process. Because of the size of the problem, it was found that professional officers could not take on the excessive caseload of supervision and care of drug addicts after their release from the Drug Rehabilitation Centres. The Singapore Anti-Narcotics Association (SANA) which is responsible for the aftercare of drug addicts has a well set-up infrastructure to provide aftercare for drug addicts. SANA utilises the services of trained volunteers who assist in the aftercare programme of drug addicts. Thus between the Governmental agencies and voluntary sectors, the drug problem in Singapore has been contained.

With the sharp decline of narcotics use, new drug problems have become conspicuous. Psychotropic drugs are taken as a substitute for narcotics. However, there are sufficient measures to combat this new problem. Countries in our region are pressing hard for legislation to deal with drug trafficking, manufacture and cultivation. Presently all ASEAN countries have adopted the death penalty for major drug trafficking cases, but there can be further improvement in legislation against drug trafficking and especially drug cultivation and manufacture. Cutting off the source will have deadly effect on the situation. It is the cultivators and manufacturers of narcotic drugs, cannabis and some psychotropic substance which worry us most. No amount of vigilance can slow down the flow of drugs unless the source is to be eradicated or controlled.

We have spent a great deal of time in educating both the youths and the adults. However, it is a life-long battle for all. In the final analysis, the fight against drug abuse has no room for complacency. We have to be constantly alert to the development of new fads and be sufficiently expeditious in curbing them before they gain wider acceptance.

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