



2020 ACT Election Priorities Statement

6 Point Action Plan: To prevent and reduce alcohol, tobacco and other drug harms

August 2020

The harms from alcohol, tobacco and other drugs continue to impose heavy costs, in personal and financial terms, on individuals, families and the ACT community. The alcohol and other drug sector in the ACT (including prevention, treatment and harm reduction services; researchers; consumers; families; and policy workers) continues to play a key role in reducing the harms associated with drug use.

The specialist alcohol and other drug service system, in particular, has proven itself efficient and effective in reducing the demand for more expensive acute health and criminal justice services, improving the wellbeing of Canberrans and saving lives. But more must be done. The specialist alcohol and other drug service system is experiencing a funding and infrastructure crisis as a result of chronic and historical underfunding. This crisis has been heightened by the ongoing impacts of the COVID-19 pandemic and the protracted period of uncertainty this has placed on AOD services as an essential component of the ACT's health system.

This 2020 ATODA Election Priorities Statement will, if implemented by the new Legislative Assembly, go a long way towards strengthening the ACT's responses to alcohol and other drugs, contributing to COVID-19 related recovery efforts for Canberrans experiencing disadvantage, and ultimately build a stronger, healthier Canberra, a place where people love to live.

ATODA staff will be pleased to provide this document and detailed briefings to Members of the Legislative Assembly, representatives of political parties and individual candidates, upon request, regarding any aspects of this Election Priorities Statement. To make general enquiries or to arrange a briefing, please contact us:

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1. Law Enforcement: Increase diversion into treatment for minor drug offenders

Action 1: Reduce drug related offending by enabling ACT Policing to divert more people found committing minor drug offences (e.g. using or possessing small quantities of drugs) into specialist drug treatment, assessment and education.

- The number of arrests in the ACT for minor drug offences (including drug use and possession) has increased markedly in recent years. The impacts of the partial legalisation of cannabis early this year are not yet known, as the arrest data have yet to be published.
- Diversion is cost-effective, produces better outcomes for individuals and the community, and reduces the demand on the criminal justice system.
- The work of ACT drug treatment services has directly reduced crime in the Territory.
- More minor drug offenders should be diverted from the criminal justice system into specialist drug assessment, education, and treatment.

2. Law Enforcement: Fine instead of charging young people for using drugs

Action 2: Reduce the number of young people with criminal records by expanding the ACT's existing Simple Cannabis Offence Notice (SCON) scheme to cover all illegal drugs.

- Arresting people for minor drug offences does not prevent or reduce drug use or drug-related harms.
- Young people with criminal records for minor drug offences have fewer work and life opportunities.
- The ACT's SCON scheme has been externally evaluated and found to achieve positive outcomes, and to be cost-effective. The scheme has diverted many cannabis offenders away from the criminal justice system by way of imposing fines and avoiding a criminal record if the fines are paid. The SCON scheme currently applies only to people under 18 years of age who have been apprehended for minor cannabis offences.
- The current successful SCON scheme should be extended to cover all illicit drugs, in the form of a Simple Drug Offence Notice (SDON) scheme.

3. Drug Treatment and Support: A sustainable and viable specialist service system

Action 3: Double the funding for the ACT alcohol, tobacco and other drug sector to meet demand. Protect and target this investment by ensuring the ACT AOD service system is an inherent and prioritised sub-sector within systematic health service planning.

- Specialist drug treatment is an effective and high demand component of the ACT's health system.
- The specialist alcohol and other drug service system in the ACT, and nationally, operates within the context of chronic and historical underfunding. The compounding effect of a number of years of resourcing below demonstrated community demand without cost benchmarking has resulted in a significant undersupply of alcohol and other drug treatment capacity. The COVID-19 pandemic is further impacting on the service system's ability to meet demand.
- Modelling indicates that treatment places need to double to meet demand.
- Doubling treatment investment could ensure that all those who could benefit from treatment can access it, and that appropriate services are available to meet the needs of priority populations.
- Specialist alcohol and other drug treatment is core business for the publicly funded health service system, meaning that treatment planning and investment needs to be undertaken with a long-term view.
- Historically, the ACT Government has not explicitly included these specialist drug services within its broader health planning processes. This deficiency has been highlighted by the COVID-19 epidemic.

- Specialist drug services should be included, and prioritised as a sub-sector, in the long-term and evidence-based health planning processes of the ACT Government to mitigate the need for future significant unplanned expenditure.

4. Drug Treatment and Support: Address the infrastructure crisis faced by the service system

Action 4: Undertake an urgent co-designed infrastructure audit of the entire specialist alcohol and other drug service system to inform infrastructure needs in the immediate-, short-, medium-, and long-term. Develop an infrastructure implementation plan for the specialist alcohol and other drug service system that is informed by the infrastructure audit.

- The sector is facing an infrastructure crisis with infrastructure that is ageing, and in some instances not fit for purpose. For example, services are provided in poor quality, aged buildings that now require significant ongoing maintenance and upgrades. Poor work health and safety conditions for service consumers and staff are prevalent. Significant barriers exist to access for people with disabilities.
- The ailing physical infrastructure of the sector risks being perpetuated by, or compromising the ability to deliver on, flagship AOD policy initiatives including the ACT Drug and Alcohol Sentencing List.
- The need for an infrastructure audit, and the implementation of infrastructure solutions over time, has been raised for several years, including through ATODA's submissions to the ACT Budget and the ACT Drug Strategy Action Plan, and in meetings with ACT Health executives, but the infrastructure crisis remains.
- When funding bodies have offered additional funding, they have explicitly not provided for the development of new infrastructure or improvements to existing infrastructure. This is perpetuating, and making worse, problems in the specialist alcohol and other drug service system.

5. Smoking Cessation: Make affordable and effective smoking cessation healthcare available to disadvantaged people

Action 5: Prevent chronic disease and death among people in alcohol and other drug treatment who smoke by expanding their access to nicotine replacement therapy (NRT).

- While only about 10% of Canberrans are daily smokers, disadvantaged sub-groups still have unacceptably high smoking rates: 77% among people accessing drug treatment.
- Smoking is a leading cause of chronic disease and kills up to two-thirds of smokers. People in drug treatment are more likely to die from a smoking-related disease than from their substance use disorder.
- People in drug treatment who are cigarette smokers can and want to quit, but need access to more intensive healthcare interventions to help them do so.
- NRT (e.g. gum, patches) is highly cost-effective – it increases the chances of a successful quit attempt by 50 to 70%.
- Complete courses of comprehensive NRT (including non-patch options) should be made freely available to all drug treatment clients as part of their normal care.

6. Drug Overdoses: Reducing the risk of drug overdose and associated morbidity and mortality

Action 6: Maintain and selectively enhance key evidence-informed interventions that have been demonstrated to reduce the risk of drug overdose, and its associated morbidity and mortality, including pill testing and take-home naloxone.

- The ACT has been a national leader in researching and in implementing evidence-informed interventions to reduce the risk of drug overdose, and its associated morbidity and mortality. Prominent among these is 1) the trial, and subsequent rollout, of the take-home naloxone program, and 2) the music festival-based pill

testing trials. Both sets of interventions have been evaluated and found to be effective public health initiatives.

- Both the pill testing and take-home naloxone programs need to be maintained, and selectively expanded, so that they can more adequately meet their potential.
- Two trials of pill testing at the Groovin' the Moo music festival have been successfully implemented; this intervention should now be funded by the ACT Government as part of its routine public health services. Additional pill testing services need to be provided, for example at fixed sites in Canberra and/or via mobile services.
- The naloxone program saves lives. Significant scope exists to expand it, with the aim of everyone who uses high potency opioids (on prescription or illicitly) having access to naloxone for use in case of an overdose.

About ATODA

The Alcohol Tobacco and Other Drug Association ACT (ATODA) leads and influences positive outcomes in policy, practice and research, as the peak body for the alcohol, tobacco and other drug sector in the ACT.

ATODA works to provide alcohol, tobacco and other drug related expertise in the areas of policy; sector workforce development and capacity building; research, data and evaluation; health services planning; coordination and partnerships; training and education; communication; information and resources.

ATODA's work is underpinned by a commitment to health equity, social and cultural determinants of health, the values of collaboration, participation, diversity, human rights, social justice and reconciliation between Aboriginal and Torres Strait Islander people and other Australians.

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