



2016 ACT Election Priorities Statement

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

September 2016

The Alcohol Tobacco and Other Drug Association ACT (ATODA) is the peak body for the alcohol, tobacco and other drug sector in the ACT. We are an evidence-informed organisation that works to promote health and well-being through preventing and reducing alcohol, tobacco and other drug related harms.

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, including methamphetamines ('ice').

The sector 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 much more can be done. This 2016 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 building a stronger, healthier Canberra, a place where people love to live.

An accompanying document that outlines the evidence and detail of each action within this document has been produced by ATODA and is available here:
<http://www.atoda.org.au/policy/2016-act-election-priorities/>

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:

Chief Executive Officer: Carrie Fowlie, carrie@atoda.org.au or 0406 585 020

Phone: (02) 6249 6358

Mail: PO Box 7187, Watson ACT 2602

Email: info@atoda.org.au

Visit: 11 Rutherford Crescent, Ainslie

Web: www.atoda.org.au

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, assessments and education.

- The number of arrests in the ACT for minor drug offences (including use and possession) has increased by 56% over the past 6 years.
- 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 (e.g. MDMA/‘ecstasy’).

- Arresting people for minor drug offences does not prevent or reduce drug use.
- 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 be cost-effective. The scheme diverts minor drug offenders away from the criminal justice system by way of imposing fines and avoiding a criminal record if the fines are paid.
- The current successful SCON scheme should be extended to cover all illicit drugs

3. Improve the justice system to reduce entrenched disadvantage

Action 3 Improve the fairness of the ACT justice system by implementing, and evaluating the application of, income-based fines for alcohol, drug and other offences.

- Fines in the ACT are regressive - meaning they disproportionately impact people who have a low income and are disadvantaged.
- For vulnerable Canberrans, an infringement notice can entrench social and economic disadvantage, and poor health - particularly as many fines relate to health-related behaviours such as drug dependence.
- The courts currently have limited discretion when applying financial penalties.
- A system of income-based fines should be implemented, such as those being used overseas, to ensure that penalties are more equitably applied as a proportion of a person's income, rather than creating insurmountable financial hardship.
- The new scheme would produce savings as it would reduce an individual's involvement in our already overburdened criminal justice system.

4. Drug Treatment: Lack of withdrawal ('detox') services

Action 4 Fill a major gap in the health service system by funding a new specialist outpatient withdrawal program for people dependent on alcohol and drugs including methamphetamines ('ice').

- Harms from methamphetamine ('ice') and demand for specialist drug treatment and support services have significantly increased in Canberra (including the need for specialist withdrawal services).
- The ACT does not have a structured, formalised outpatient (non-residential) withdrawal program for people to safely withdraw from alcohol and other drugs.
- This has created lengthy waiting lists and a bottleneck in people being able to access help through the specialist drug service system.
- Outpatient withdrawal services are cheaper than residential withdrawal and can be as effective for some people without requiring an expensive stay in hospital.
- A new outpatient withdrawal program for people dependent on alcohol and drugs should be established in the ACT.

5. Medicinal Cannabis: Compassionate access scheme

Action 5 Implement a compassionate medicinal cannabis regime in the ACT *as an interim measure* pending the development and registration of a comprehensive range of cannabis-based pharmaceutical products.

- A 2015 ACT Legislative Assembly Standing Committee report supported the implementation of an interim compassionate access scheme for medicinal cannabis (similar to those now operating in NSW and Victoria) pending the availability of nationally approved cannabis-based pharmaceutical products.
- This would enable timely access to medicinal cannabis for people suffering from debilitating diseases or side effects of treatment, for whom standard medical approaches have failed, while longer-term arrangements are finalised nationally.
- A compassionate medicinal cannabis regime should be implemented in the ACT that could be time-limited and, if implemented through legislation, could be subject to a sunset clause.

6. Road Safety: Effectively deterring motorists from drink driving

Action 6 Improve road safety by strengthening drink-driving deterrence through increased randomness and intensity of random breath testing (RBT).

- Alcohol is a major risk factor for motor vehicle crashes with 30% of crashes that result in death or serious injury nationally being alcohol-related.
- Over 1200 people are charged with drink driving per year in the ACT.

- Random breath testing (RBT) works and is highly cost-effective, but *only if its deterrence effect is maintained* - motorists need to believe they could be caught and therefore choose not to drink drive.
- RBT in the ACT needs to be implemented in a genuinely random way and testing rates need to triple to meet best practice standards (an average of one test per licenced driver should be conducted per year).
- ACT Policing should be resourced adequately to keep up with the required volume of *random* breath testing to meet best practice, maximise the deterrent effect and maintain road safety.

7. Drug Treatment: Need for a sustainable and viable specialist service system

Action 7 Protect and grow the ACT Government's investment in specialist drug and alcohol treatment and support by ensuring it is part of broader clinical services and health sector planning processes.

- Specialist drug treatment is an effective and high demand component of the ACT's health system.
- Historically, the ACT Government has not explicitly included these specialist drug services within its broader clinical services and health planning processes.
- Fluctuations in drugs and use patterns are common (e.g. we are currently experiencing the 3rd methamphetamine or 'ice crisis' in 20 years). This required the ACT Government to identify and allocate unplanned funds to expand capacity in specialist drug services to address unacceptable waiting periods in the 2012 – 2016 ACT Budget cycle.
- Specialist drug services should be included in long-term and evidence-based health planning processes of the ACT Government to mitigate the need for future significant unplanned expenditure.

8. Make affordable and effective healthcare available to disadvantaged people

Action 8 Prevent chronic disease and death among disadvantaged people who smoke by expanding their access to nicotine replacement therapy (NRT).

- While only 10% of Canberrans are daily smokers, disadvantaged sub-groups still have unacceptably high smoking rates – for example, 82% among people accessing drug treatment.
- Smoking is a leading cause of chronic disease and kills up to two-thirds of smokers.
- Disadvantaged smokers can and want to quit, but need access to more intensive healthcare interventions to help them do it.
- 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 disadvantaged clients of health services as part of routine care, including all drug treatment clients.

9. High Quality Healthcare: Establishing a Centre of Excellence

Action 9 Create a Canberra Centre of Excellence in Alcohol and other Drug Studies that builds on the existing expertise across our universities and specialist drug services.

- The ACT is an Australian leader in many areas of specialist drug treatment and support including drug treatment for families, drug diversion and opioid (e.g. heroin, oxycontin) overdose prevention; however, in other areas we are lagging behind (e.g. drug and alcohol clinical education).
- Some of Australia's top universities are based in Canberra, all of them contain alcohol and drug research expertise; however, none of them deliver alcohol and other drug study programs.
- Improving coordination across research efforts and delivering drug and alcohol study programs would enable the ACT drug and alcohol treatment sector to remain a national leader in delivering innovative and high quality services.
A position should be funded to work toward the goal of building a cross-university, nationally recognised, Centre of Excellence in Alcohol and other Drug studies in Canberra.

10. Cost-effective Health and Social Outcomes: Evidence informed drug policy and decision-making

Action 10 Develop, implement and evaluate an evidence informed, comprehensive and whole-of-government ACT Alcohol, Tobacco and Other Drug Strategy.

- The ACT has a reputation for being an Australian leader in developing, implementing and evaluating evidence informed drug policies.
- For over a decade, ACT Alcohol, Tobacco and Other Drug Strategy documents have guided this work and have resulted in tangible outcomes for preventing and reducing alcohol, tobacco and other drug related harms in the ACT.
- The ACT is currently operating in a drug policy vacuum as the most recent Strategy document concluded two years ago.
- A draft of the 2016-20 Strategy was released for public consultation in late 2015, but the draft has not been finalised.
- The ACT Government should finalise, make publicly available, implement and evaluate the whole of government ACT Alcohol, Tobacco and Other Drug Strategy.