# Families and Friends for Drug Law Reform Submission on ACT Draft Alcohol, Tobacco and Other Drug Strategy 2010 - 2014

### General

Families and Friends for Drug Law Reform welcomes the opportunity to comment on the draft ACT Alcohol, Tobacco and Other Drug Strategy 2010-2014. It is particularly pleased that the ACT Government has continued with the use of such strategic plans and with the way in which they are developed, implemented, monitored and evaluated. Such a process has FFDLR's support and encouragement.

Families and Friends for Drug Law Reform's focus is on illicit drugs, thus comments here will have that primary focus.

The ACT Government's ongoing support and commitment for harm minimisation and its application of harm minimisation to this strategy is to be commended. However it is noted that application of harm minimisation principles are constrained by the overarching prohibition laws and policies which place a limit on the effectiveness to application of harm minimisation principles. It is also noted that there are conflicts within those principles and between the three pillars of the harm minimisation principles.

The use of evidence as a basis for the strategy is also to be commended.

While generally supportive of the guiding principles, Families and Friends for Drug Law Reform notes some examples of those conflicts:

- In respect of alcohol policies, commercial and other interests, limit the positive benefits that could flow to the community;
- Despite significant evidence from overseas experience of the positive benefits of diamorphine (heroin) on prescription under regulated conditions, it is not being implemented in Australia; and
- Even though, under the three pillars policy of harm minimisation, research shows that harm reduction has more positive outcomes, law enforcement receives the lions share of funding. No review with a view to more effective allocation of funding is proposed.

One would expect the strategy to identify, with an aim of overcoming all of the adverse consequences relating to alcohol and other drugs, including the laws and policies that unintentionally increase the harm, but current structures and political environments prevent that occurring.

The strategy does not acknowledge such limitations. It is imperative if we want to make significant progress to incorporate an appropriate statement acknowledging that there are limitations that are imposed by such matters that prevent the optimal outcome in respect of health and wellbeing for the community. And to address this issue a review of those harms should be incorporated in the strategy.

## Roadside drug testing

Families and Friends for Drug Law Reform does not at this stage support roadside drug testing. The primary focus of roadside drug testing, including alcohol breath testing, must be that of road safety.

Roadside testing for alcohol has scientifically determined levels above which the risk of an accident increases. But there is no such test for illicit drugs, nor are there levels specific to each drug, even though it is likely that low levels of some drugs in the blood have little or no impairment on driving.

Furthermore the roadside drug tests undertaken in other states are test for drugs for which there is little evidence (if any) linking their use with causes of road accidents.

It is clear that roadside drug testing at this stage would be a focus on the drug use and not road safety.

# Strategy Action Plan

In this section Families and Friends for Drug Law Reform has identified concerns with a number of specific actions outlined in the plan. These are itemised below. For the actions not referred to below Families and Friends for Drug Law Reform is generally supportive.

#### **Action 8**

As a road safety initiative, ACT Policing will continue breath testing of motorists in the ACT. This will be undertaken via random breath testing, targeted campaigns, and specific intelligence-led targeting of drink drivers'.

This action, for completeness needs to include a specific action for repeat offenders.

The method of evaluation does not provide a scientific measure of effectiveness of the random breath testing activity and has no place in this document which claims to be policies and actions based and evaluated on evidence. At best the measure is simply an opinion survey with all the flaws of that approach and does not indicate a measure of effectiveness. A better measure would be one that captured the number of tests administered, number of drivers over the limit, together with the time, day and location type on which the tests were administered. This then could be compared and contrasted with other available data such as accident rates etc.

#### Action 11

Reduce young people's exposure to alcohol advertising by working with the Australian Government and other state and territory governments to ensure alcohol products are not targeted to people younger than 18 years.

The reduction of exposure to alcohol advertising (and in fact the problematic use of alcohol) is not only a national problem, much can and should also be done within the ACT.

For example:

- reduced advertising outside shopping centres and outside the shops themselves,
- reduced advertising in local newspapers,
- reduce or eliminate happy hours,

- no alcohol advertising at sporting events in the ACT,
- reduced alcohol outlets,
- reduced hours for clubs and hotels, etc.

The problem of exposure is not only relevant to younger than 18 year olds but to the whole community.

The rationale should be "demand" reduction, not supply reduction. No reduction in the supply of alcohol is proposed here unless some of the examples given above are incorporated.

#### **Action 20**

ACT Policing will continue to target manufacturers and distributors of illicit drugs to reduce and disrupt illicit drug supply.

It is noted that reports of outcomes of arrests of distributors and of seizures of drugs simply identify the quantum or value of drugs seized and thus do not reach the street market. Such reports are inadequate and give no indication of the effectiveness but reflect only a belief that removal of a distributor and seizure of drugs must have had an effect. It is often not the case that lasting changes are effected.

The evaluation criteria should relate to the action, ie what reduction has been made to the supply of drugs. The proposed action simply reports police activity and is not an effective measure. A more effective measure would be how the targeted action by police has affected the availability of drugs in the street market.

See also comments under 'Proposed additional actions' where it is noted that there is an appearance of concentration of police activities on arresting drug users and not concentrating on supply reduction activities.

#### Action 21

ACT Government will work with other stakeholder agencies with a view to reforming legislation that improves law enforcement capability in targeting manufacturers and distributors of illicit drugs to reduce and disrupt illicit drug supply.

This action allows no scope for examining a wide range of alternatives for reducing drug supply. It assumes that toughening the laws and enabling more arrests (and perhaps an erosion of civil liberties) will lead to a reduction in supply. There is no evidence that tougher laws or increased arrests have had any lasting effect on the drug market.

Laws throughout Australia in relation to drug manufacture and supply have recently been strengthened following the implementation of the Model Criminal Code. Examination of data relating to the drug market shows that there has been no real change in supply of drugs.

The household survey indicates that demand is relatively stable and supply indicators can be found in the Australian Crime Commission reports and the Illicit Drug Reporting System. In those reports, more frequently than not, the price of drugs is reported as being stable or decreasing. Applying the laws of supply and demand means that the supply is either stable or increasing.

It is blind faith to assume that future tougher laws or increased ability to make arrests will make any long lasting difference. Any laws that increase risks of being arrested will be factored into the price of drugs, which in turn, provide a greater incentive to those tempted to manufacture or supply.

But, for example, what would be the effect on the illegal supply of drugs if those who were severely addicted were prescribed, under strict conditions, a drug that was the same or as near as possible to the drug to which they were addicted. It would reduce the demand somewhat and would reduce the number of suppliers who were supplying to support their addiction.

Switzerland and other countries that provide heroin on prescription under strict conditions are excellent examples of how the drug market and related crime rates can be influenced for the better by applying different approaches.

Some flexibility in this action is required and it needs to be reworded as suggested here:

ACT Government will work with other stakeholder agencies with a view to reforming legislation that improves the reduction of manufacturing and distribution of illicit drugs.

The evaluation should also be changed accordingly because the object is to reduce supply, not arrest people.

Proposed evaluation: Legislation reviewed and reformed. Supply of drugs on the street reduced as measured by for example price and availability.

#### Action 26

Should the rationale not be harm reduction?

#### **Action 28**

To provide better access to drug counselling, withdrawal, rehabilitation and relapse prevention services in collaboration with mainstream health services by: ...

It is suggested here to include a specific reference to a "more welcoming access" and specific reference to inclusion of "families and significant others".

#### For example:

To provide better and more welcoming access which also involves families and significant others to drug counselling, withdrawal, rehabilitation and relapse prevention services in collaboration with mainstream health services by: ....

#### Action 34

The evaluation of this action could usefully include "Increased effectiveness of diversion programs". A simple volume count of uptake of diversion programs is not sufficient to evaluate this action.

#### Action 38

ACT Department of Education and Training to be guided by ACT Secondary Student Drug and Health Risk Survey results to inform the development and implementation of curriculum drug education programs in schools.

This action could be improved and made more effective if the school drug education programs were guided by programs that have been rigorously evaluated and

demonstrated to have reduced or delayed the uptake of alcohol and other drugs. The action should read:

ACT Department of Education and Training and all ACT schools to be guided by alcohol and drug education programs that have demonstrated reduced or delayed uptake of drugs and ACT Secondary Student Drug and Health Risk Survey results to inform the development and implementation of curriculum drug education programs in schools.

Commensurate with this, an extra evaluation would be "A database of evaluated and effective alcohol and drug education programs compiled". This would bring forward to this current strategy an action that was not implemented in the previous strategy but is still considered to be worthwhile.

#### Action 42

It is important for this action that only effective programs that are objective and not sensationalist or exaggerate be used.

#### Action 51

To advocate for national and local early warning systems (capable of providing information with both strategic and immediate value) and contribute to the systems' development and implementation in collaboration with relevant organisations including consumer and community groups, police, ambulance, and health services.

This action should be to "Implement a local early warning system and advocate for a national system..." There seems to already be agreement to implement at a local level. Once implemented in the ACT it would be much easier to promote the idea at a national level.

#### Action 52

To advocate nationally for clinical trials of hydromorphone and heroin.

The evidence is readily available of the effectiveness of the provision of prescription heroin, thus it is unnecessary to undertake a trial. The action should be reworded as follows:

To seek permission from the federal government for the necessary drug importation and conduct of a program for diacetylmorphine prescription for those severely addicted to heroin and advocate nationally for clinical trials of hydromorphone.

The evaluation should then be changed to: "Approvals for importation and conduct of program given, program funded and clinical trials of hydromorphone funded."

#### **Action 54**

Should this not read "Undertake ..." rather than "Advocate for..."?

#### Proposed additional actions

#### Self administration, personal use and possession of small quantities.

The ACT arrests significant numbers of illicit drug users each year – some 87% of all arrests for drug offences. These people would be processed through the criminal justice system and a number may find themselves in the new ACT prison.

This is a significant cost to the community, the person and their family. The effectiveness of such an approach is at best doubtful. Indirect data such as the

household survey and the Illicit Drug Reporting System suggests that such arrests have little effect on the overall number of users or the drug market.

On the other hand if it was not an offence to use illicit drugs (provided there were no other offences) then it may be that those users who perceive that their drug use may be becoming problematic (and at a point where they may be tempted to venture into more serious and criminal activities) may not feel so constrained to seek help.

It is possible to signify society's disapproval of illicit drug use without resorting to the use of the more expensive criminal justice system. And there is a trend in overseas countries to remove criminal sanctions for person use of possession of small amounts for personal use. The Netherlands for example has also adopted a deliberate strategy to make drug taking boring, thereby removing its thrill and glamour.

In providing weight to the ineffectiveness of using the criminal justice system for a victimless crime and possibly a medical condition such as drug use a recent UK Justice Committee report, "Cutting crime: the case for justice reinvestment", recommended that prison populations in England and Wales be reduced by a third. The committee found that incarceration is a relatively ineffective way of reducing crime except for serious offenders, and the number of repeat offenders could be more efficiently reduced through rehabilitation programs such as housing, employment, education, and drug and alcohol services.

(http://www.publications.parliament.uk/pa/cm200910/cmselect/cmjust/94/9402.htm)

It is noted that the previous strategy included an action to consider decriminalising personal use of small quantities, and an action to remove the offence of self administration (actions 24 and 28 respectively). Those actions were not implemented and are not included in the current strategy but should be brought forward to this strategy with a view to both reduce harm and to free up valuable law enforcement resources.

If overseas evidence is any indication there would be little effect on the use of drugs (which could be held to a minimum by a publicity campaign) but it has meant that vital police and other law enforcement resources can be more vigorously and effectively applied to supply reduction.