

### What Should Be Done?

Victorians are justifiably concerned about the extensive misuse of drugs in our community.

Experimentation among young people is common, and the use of drugs such as cannabis appears high by international standards, despite prohibitionist laws and law enforcement. Emerging concerns about adolescent initiation into heroin and the proliferation of designer drugs reinforce community desire for more effective action.

There are risks involved with almost all drug use, and serious consequences from their misuse. The level and nature of the risk and the harm done varies with each drug and with the circumstances of use. While the problem is widespread, some groups are particularly vulnerable and require specific assistance.

While Victoria and Australia lead most of the world in responses to tobacco and alcohol abuse, and in tackling the demand as well as the supply side of the drug problem, our health promotion, education and treatment services lack a concentrated focus on illicit drugs. The current approach has little prospect of reducing the risks of misuse, or enabling early action if problems develop.

At the end of its short, intensive investigation, Council concluded that Victoria's response to illicit drugs should be remodelled and extended if current levels of use and the costs of misuse are to be reduced. The existing policy approach of harm minimisation provides the framework for a range of initiatives.

Earlier sections of this report demonstrate the complex and diverse nature of the problem that drugs create in our community. Council's response needs to take account of those differences. Its reform strategy provides an integrated set of actions that will enhance Victoria's response. While each component is important and valuable in its own right, greater benefit will flow from coordinated action across all areas.

Accurate information and knowledge are critical factors in the community's capacity to respond to drug use. They are also vital to each individual's ability to make reasonable decisions about his/her own behaviour in relation to drug use, and for parents to play a constructive role in discussing the issues with their children. Broadening the availability of accurate information and providing education in settings where it can be absorbed are critical elements of Council's overall strategy. Action in this area involves a long-term commitment to changing our community's attitudes and behaviours. Key elements of the strategy to achieve change have been modelled on alcohol and tobacco initiatives where health promoting information and education have made major contributions to Victorians' health.

### COUNCIL RECOMMENDS THAT:

**RECOMMENDATION 1:** The Victorian Government support a sustained and integrated information and education strategy that deals with both illicit and licit drugs such as alcohol and tobacco. (Section 3.5)

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Council wishes to ensure that all school children are provided with appropriate health education. Council is aware that quality material exists regarding licit drugs and believes that this should be expanded to effectively address illicit drugs.

**RECOMMENDATION 1.1:** Drug education should be included as a core component of the health curriculum in schools. (Section 3.5.)

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**RECOMMENDATION 1.2:** Action should be taken as a matter of priority to ensure sufficient teaching staff are trained in drug education. (Section 3.5.1)

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**RECOMMENDATION 1.3:** Guidelines on the approach to drug education to be used in schools should be circulated as a matter of urgency. The guidelines should be based on the principles detailed in the Get Real package recently prepared by the Directorate of School Education. (Section 3.5.1)

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Council believes it is important to ensure that the community is aware of, and able to gain access to, relevant and appropriate material and information on drug issues.

**RECOMMENDATION 1.4:** Targeted marketing strategies should be developed to improve community awareness of existing telephone information and advice services. (Section 3.5.1)

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RECOMMENDATION 1.5: Opportunities for the integration of the two specific drug telephone services should be explored and more consistent data gathering systems introduced. (Section 3.5.1)

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RECOMMENDATION 1.6: Arrangements for providing information to people from differing ethnic and cultural backgrounds should be enhanced. (Section 3.5.1)

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RECOMMENDATION 1.7: Printed materials should be reviewed and where appropriate for use in conjunction with other information dissemination activities, be translated into languages other than English. (Section 3.5.1)

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RECOMMENDATION 1.8: Media campaigns should be used to communicate major changes in policy and arrangements within Victoria. Where appropriate, this should be in cooperation with the Commonwealth Government. (Section 3.5.7)

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Council believes individuals, whose work brings them into contact with people who may use or misuse drugs, need particular knowledge and skills to communicate effectively and to offer appropriate support.

RECOMMENDATION 1.9: Course structure and content for selected tertiary courses should be amended to ensure that appropriate and relevant graduates have a basic knowledge regarding drugs and the harm minimisation framework. (Section 3.5.3)

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RECOMMENDATION 1.10: Expanded in-service training and professional development opportunities should be provided to assist various workers to communicate with and assist people dealing with drug issues. (Section 3.5.3.)

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RECOMMENDATION 1.11: Consideration should be given to including drug and alcohol studies within the Master of Public Health program. (Section 3.5.3)

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Council believes parents are in a unique position to convey information and to positively influence the behaviour of their children. Many parents have indicated that they believe that they are not well equipped for this task.

RECOMMENDATION 1.12: Strategies should be developed to provide information to parents to assist them provide information and support to their children. These strategies should include information about where they get further information, or personal assistance for themselves or for their children. (Section 3.5.5)

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Council understands that drug users are often ill informed about the harms that can result from their behaviour. Other drug users are often able to communicate effectively with each other and, to the extent possible, it is desirable that they share accurate information.

**RECOMMENDATION 1.13:** Peer education and outreach services should be developed in consultation with drug user groups. (Section 3.5.6)

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## EXPANDED SUPPORT AND TREATMENT

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Misuse of drugs brings about negative health and lifestyle consequences. Depending upon the drug/s involved and the circumstances of their use, these consequences can be serious. Drug dependence is commonly associated with deteriorating health and vulnerability. Drug dependence is very difficult to overcome. There are also costs in having a marginalised group in society. There are many services that have the capacity to support, advise and assist people who have drug problems. Their capacity needs to be strengthened. Priority attention should be paid to young people, and adults in contact with the corrections system.

### COUNCIL RECOMMENDS THAT:

**RECOMMENDATION 2:** The Victorian Government support the establishment of a Youth Substance Abuse Service. (Section 3.6)

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Council understands that young people who have problems with drug use commonly face other difficulties. These young people respond most effectively to support and assistance provided in settings with which they are familiar. However, the skills required to deal with the problems in these situations are not widely available.

**RECOMMENDATION 2.1:** A specialist outreach service should be developed to support vulnerable young people involved in substance abuse. (Section 3.6.4)

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**RECOMMENDATION 2.2:** The management and administration of the service should be developed in such a way as to ensure that it is effective at street level, and has the knowledge and technical backup to deliver high levels of drug expertise to the field. (Section 3.6.4)

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**RECOMMENDATION 2.3:** A flexible funding pool should be established to enable the outreach team to supplement the funding, on a case-by-case basis, of agencies dealing with serious drug misuse. (Section 3.6.4)

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**RECOMMENDATION 2.4:** Expanded training, professional supervision and consultation should be offered to a broader (but targeted) group of youth workers to expand the pool of workers skilled in drug and alcohol issues. (Section 3.6.4)

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Council is concerned that a small number of young people face very serious health effects as a result of drug misuse, and they require intensive and highly skilled assistance and support.

**RECOMMENDATION 2.5:** An intensive support residential facility should be established to care for young people experiencing acute toxic states. This facility should be managed by an agency with experience in drug and alcohol issues in association with an acute hospital. (Section 3.6.4)

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Council was advised that young people who use drugs often do so chaotically and with serious consequences for their health and wellbeing. The community knows relatively little about their circumstances or about service responses that would make a difference.

**RECOMMENDATION 2.6:** Services should be established to monitor, evaluate and research issues associated with youth substance abuse. (Section 3.6.4)

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#### **COUNCIL RECOMMENDS THAT:**

**RECOMMENDATION 3:** The Victorian Government substantially upgrade services for people who come into contact with the adult corrections system and who have serious problems resulting from their drug misuse. (Section 3.6.4)

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There are a considerable number of people coming before the courts because of drug offences or where drugs contributed to the commission of the crime. The courts have to make decisions about the most appropriate disposition in each case.

**RECOMMENDATION 3.1:** An independent and specialist court advice service should be established to provide pre-sentence advice regarding treatment of offenders to all courts as needed. (Section 3.6.5)

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Council believes that if a court includes a treatment requirement in an order, or the Adult Parole Board includes a treatment condition, the treatment should be provided through a community-based agency with relevant expertise.

**RECOMMENDATION 3.2:** An independent service should assess offenders and purchase treatment services for those given a community-based disposition with treatment conditions, and for those on parole with similar conditions. (Section 3.6.5)

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**RECOMMENDATION 3.3:** Community corrections staff should be deployed in ways that ensure the appropriate level of supervision is provided while people are subject to orders that include treatment requirements. (Section 3.6.5)

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Offenders sentenced to prison commonly have problems with drug use. Council believes prison provides a good opportunity to address the problems. Prisons themselves can also be places where high-risk drug use continues. Efforts should be made to minimise drug-related harms in this environment.

**RECOMMENDATION 3.4:** The range, quality and access to support and treatment services available in correctional institutions should replicate those in the community. (Section 3.6.5)

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Council believes that services developed in the correctional context face particular difficulties. It is important to ensure that they link to, and operate consistently with, the care model and standards that apply in the community.

**RECOMMENDATION 3.5:** The Justice Department should involve relevant external expertise across the government and community sectors in defining the service development strategies and priorities. (Section 3.6.5)

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#### **COUNCIL RECOMMENDS THAT:**

**RECOMMENDATION 4:** The Victorian Government support the continued development of appropriately designed drug and alcohol services. (Section 3.6)

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Council accepts that for individuals, effective treatment of serious drug use problems cannot rapidly solve the problem. People need assistance to overcome the immediate effects of the drugs, and they commonly need support, advice and practical assistance for some time thereafter. Some people need longer term, skilled, alcohol and drug interventions.

**RECOMMENDATION 4.1:** Following a review of existing post-withdrawal support and counselling services, appropriate additional services should be established. (Section 3.6.3)

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**RECOMMENDATION 4.2:** Steps should be taken, as a matter of urgency, to ensure the establishment of the further specialist methadone and withdrawal services already approved by the State Government. (Section 3.6.3)

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**RECOMMENDATION 4.3:** A review of the funding and related specifications for recently established withdrawal services should be undertaken in the near future. (Section 3.6.3)

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Experience in treatment agencies with problems due to the use of cannabis alone is limited. While the situation has been uncommon, data regarding the level of use in the community suggests that some people require assistance. Models of education and treatment used to assist people with problems that result from tobacco and alcohol use are most likely to be appropriate.

**RECOMMENDATION 4.4:** A trial cannabis treatment service for problem cannabis users should be established with suitable links to alcohol and tobacco services. (Section 3.6.3)

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Council accepts that methadone provides the only well-established pharmacological support service that assists opiate-dependent people to change their lifestyle and improve their health. Methadone is of vital importance in the Council's strategy. Additional options should be developed to complement methadone and expand the number of opiate-dependent people able to be supported and encouraged into treatment.

**RECOMMENDATION 4.5:** The development of the methadone program should continue and particular focus should be given to ensuring access for particular groups including rural and ethnic communities. (Section 3.6.3)

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**RECOMMENDATION 4.6:** Improved monitoring systems statewide and at the practitioner level, should be established as part of a quality assurance mechanism. (Section 3.6.3)

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**RECOMMENDATION 4.7:** Increased counselling services should be available on a non-compulsory basis to people involved with the methadone program. (Section 3.6.3)

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**RECOMMENDATION 4.8:** Priority should be given to developing research-based clinical trials on the use of pharmacological alternatives such as LAAM, buprenorphine and Naltrexone. (Section 3.6.3)

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**RECOMMENDATION 4.9:** Victoria should encourage the Commonwealth to support the Australian Capital Territory heroin pilot study and, if appropriate, the subsequent clinical trial of heroin prescribing. (Section 3.6.3)

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People held in police custody who also have problems with illicit drugs are vulnerable to complications arising from unsupervised drug withdrawal.

**RECOMMENDATION 4.10:** A review of police standing orders should be undertaken and followed by an assessment of practice to ensure that appropriate health care services are available to prisoners experiencing drug withdrawal. (Section 3.6.5)

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A range of health welfare and other community services makes important contributions to the support of people who use and misuse drugs. Council believes that it is important that these services are well supported and assisted to perform these tasks effectively.

**RECOMMENDATION 4.11:** The ambulance service should document and disseminate guidelines and protocols to assist ambulance officers in the post- acute management and care of people who have overdosed on drugs. (Section 3.6.2)

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**RECOMMENDATION 4.12:** Workers in the primary care and generalist health care facilities (particularly emergency care) should be made aware of the resources available to assist them to more effectively respond to the health and other care needs of individuals with drug problems. (Section 3.6)

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#### **COUNCIL RECOMMENDS THAT:**

**RECOMMENDATION 5:** The Victorian Government support the development of an Agency for Drug Dependency to provide leadership and coordination in this area. (Section 3.6)

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Council has proposed a number of major service provision initiatives to build on the existing services. It also proposes expansion of training, research and evaluation initiatives. The organisations involved need to collaborate in establishing and managing the service development.

**RECOMMENDATION 5.1:** The Agency for Drug Dependency provide appropriate organisational support to the Youth Substance Abuse Service and the organisation providing the adult corrections service. (Section 3.6)

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**RECOMMENDATION 5.2:** The Agency for Drug Dependency coordinate the organisations involved in research, training and other relevant initiatives. (Section 3.6)

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**RECOMMENDATION 5.3:** The Agency for Drug Dependency contribute to the development of improved state level systems links between drug services and other health, community services and law enforcement agencies. (Section 3.6)

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Law enforcement has an important role to play in the strategy proposed by Council. The role involves a different mix of activities and requires different approaches to users, traffickers and the community.

### COUNCIL RECOMMENDS THAT:

**RECOMMENDATION 6:** Victoria Police ensure that a comprehensive and coordinated strategy on policing in relation to the manufacture, supply and use of illicit drugs is documented and implemented across the force. (Section 3.7)

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Victoria Police policy supports the harm minimisation framework. Council supports implementation of this policy across all areas of the force.

**RECOMMENDATION 6.1:** Victoria Police should ensure harm minimisation strategies govern operational practice at all levels of the force. (Section 3.7)

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**RECOMMENDATION 6.2:** Victoria Police should document and disseminate material that describes the roles and responsibilities of various sections of the force in implementing police drug strategies. (Section 3.7)

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**RECOMMENDATION 6.3:** Victoria Police should ensure coordination of the activities of the Drug Squad, other relevant specialist squads, and operational police with respect to strategic planning, and recording, interpretation and circulation of critical information, and joint initiatives to reduce drug trafficking in Victoria. (Section 3.7)

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Council accepts that police, particularly those working at street level, face difficult challenges in dealing with drug problems.

**RECOMMENDATION 6.4:** Victoria Police should ensure that induction and in-service training for members of the force include theoretical and practical input on harm minimisation and Victoria's drug strategy. (Section 3.7)

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Council believes Victoria Police are enthusiastic about community involvement in law enforcement. Communities, including police, can play an important role in reducing use and harms from drugs.

**RECOMMENDATION 6.5:** Victoria Police should work collaboratively to enhance the operational integration between police, health and community agencies and education to ensure, at each level, effective action based on harm minimisation strategies and priorities. (Section 3.7)

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**RECOMMENDATION 6.6:** Victoria Police should ensure adequate resources are available for community policing. This will involve prevention and community involvement initiatives designed to reduce the use and harms of drugs. (Section 3.7)

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**RECOMMENDATION 6.7:** Victoria Police should ensure that career recognition is provided for members who are actively and effectively involved in harm minimisation and community work. (Section 3.7)

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Council believes that understanding the effectiveness and impact of the reforms outlined above is dependent upon monitoring and evaluation.

**RECOMMENDATION 6.8:** Victoria Police should upgrade and enhance existing monitoring and evaluation arrangements to include the impact of the strategy and guidelines referred to above. (Section 3.7)

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Council believes that there are opportunities to improve the systems by pursuing assets of people involved in the drug trade.

**RECOMMENDATION 6.9:** Victoria Police should investigate opportunities to enhance the use of data provided through AUSTRAC and other sources. (Section 3.7)

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**RECOMMENDATION 6.10:** Administrative arrangements and structures should be put in place to more effectively follow up confiscations ordered by the courts. (Section 3.7)

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Legislation plays an important, but subsidiary, role in constraining drug use, and specifies sanctions when prohibitions are broken. Widespread use of drugs, such as cannabis, highlights the limits of legislation and enforcement in suppressing use.

Development of Council's recommendations has been guided by the recognition that:

- Effective control regimes are likely to vary between drugs.
- Types of harms and patterns of use of specific drugs should guide drug policy and laws.
- Legislation must take account of problems of implementation and enforcement, and the likely effect on consumption levels and patterns of use.
- Harms caused by legislative control should not outweigh harms they prevent.
- Offences (such as burglary) committed to fund drug use should be dealt with by courts in the same way as currently occurs.
- Imprisonment of Victorians guilty of no offence other than drug use imposes heavy costs on the community and the individual with few identifiable benefits.

### COUNCIL RECOMMENDS THAT:

**RECOMMENDATION 7:** The Victorian Government amend the Drugs Poisons and Controlled Substances Act 1981. (Section 3.8)

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Cannabis use is relatively widespread in our community. Council believes that strategies to reduce use and misuse are most likely to be effective if use of cannabis is no longer a criminal offence but is regulated in a number of important respects. Education and treatment will be facilitated by this change and respect for the law may also increase.

**RECOMMENDATION 7.1:** Use and possession of a small quantity of marijuana should no longer be an offence. 'Small quantity' should be defined as no more than 25 grams (half the amount currently specified in the Act). (Section 3.8)

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**RECOMMENDATION 7.2:** Cultivation of up to five cannabis plants per household for personal use should no longer be an offence. 'Household' should be defined to exclude everything other than private residences. (Section 3.8)

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RECOMMENDATION 7.3: Sale of marijuana should remain an offence. Sale of small quantities by an adult to an adult should incur a caution delivered by Victoria Police for a first offence with, an adjourned bond the preferred penalty for a second offence. Maximum penalties for sale to young people should be maintained at present levels: up to 25 years gaol and a \$250,000 fine for quantities above 100 kilos and up to 15 years and/or a \$100,000 fine for quantities between 25 grams and 100 kilos. (Section 3.8)

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RECOMMENDATION 7.4: Provisions of the Summary Offences Act 1966 should be reviewed to ensure offensive behaviour under the influence of marijuana can be dealt with by police. Similarly, local government should establish bylaws that restrict consumption in public places. Such bylaws would reflect current restrictions on alcohol consumption. (Section 3.8)

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RECOMMENDATION 7.5: Legislation should be introduced to expunge all recorded convictions for possession and use of small quantities of marijuana. (Section 3.8)

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Council believes that all other currently illicit drugs should retain that status, however, enforcement should include greater emphasis on treatment and rehabilitation, particularly where drug use is the only offence.

RECOMMENDATION 7.6: Use and possession of heroin, cocaine, amphetamines, Ecstasy and cannabis products (including small quantities) other than marijuana, should remain an offence. Recommended penalties are:

- For adults, the penalty for a first offence should be a caution delivered by Victoria Police and referral to a drug assessment and treatment service. The preferred penalty for a second offence should be an adjourned bond. Bond conditions should be determined by the court following an assessment of suitability and likely benefit of participation in a treatment and rehabilitation program.
- For people up to age 18, sentencing options available to Children's Court magistrates require further consideration, but should empower magistrates to require young people against whom a charge has been proven to be assessed for treatment and, where appropriate, to complete a treatment and/or education program as a condition of an adjourned bond. (Section 3.8)

RECOMMENDATION 7.7: Penalties for bond breaches or subsequent drug-use offences by adults and juveniles should include escalating penalties for subsequent offences. Penalties should include, for example, fines and community based orders. Imprisonment should be used as a last resort penalty for drug users. (Section 3.8)

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RECOMMENDATION 7.8: Penalties available for drug trafficking are severe and should remain so. Investigation is required, however, of the levels and patterns of sentences actually imposed by courts for drug trafficking. Review findings should inform government decisions about whether penalties imposed by courts are appropriate. (Section 3.8)

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The Australian Government is a signatory to a number of international treaties that may affect the State Government's capacity to implement legislative reforms of the kind proposed.

**RECOMMENDATION 7.9:** Amendments to existing legislation in line with Council's recommendations should take account of international treaty obligations entered into by the Australian Government. A range of views has been put to Council about the practical implications of The Convention Against the Illicit Traffic in Narcotic Drugs and Psychotropic Substances 1988 in particular. Expert legal advice should be obtained by the Victorian Government to inform its decisions about legislative reform. (Section 3.8.4)

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Council believes that further investigation and action is required in response to serious concerns about risks to the community posed by drivers under the influence of drugs. Widely reported use of cannabis highlights this concern. Implementation of Council's recommendations should be considered alongside the forthcoming report of the Parliamentary Road Safety Committee.

**RECOMMENDATION 7.10:** Dangerous, reckless or careless driving and driving under the influence of a drug to such an extent as to be incapable of proper control of the vehicle are already offences under the Road Safety Act, 1986. Learner or provisional permit drivers found guilty of careless, reckless or dangerous driving while impaired by marijuana should be disqualified from driving for an extended period and required to participate in education programs. Protocols should be developed to assist policing of these provisions. (Section 3.8.7)

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**RECOMMENDATION 7.11:** Research should be funded to establish a test for short-lived metabolites of cannabis products in saliva or breath to allow, in due course, the introduction of roadside testing for cannabis in a manner comparable to alcohol breath testing. (Section 3.8.7)

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Council believes that the impact of changes to legislation must be carefully monitored. Council's proposal are steps consistent with an overall direction that accepts education, prevention, treatment and rehabilitation as the most effective instruments for achieving the dual objectives of reduced use and minimum harm associated with drug misuse.

**RECOMMENDATION 7.12:** The impact of the legislative changes made above should be monitored and, if implementation of Council's recommendations begins to realise the stated goals, consideration should be given to appropriate next steps. (Section 3.8)

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The proposals outlined in this report represent significant and complex reforms across various areas of Government and involve many community interests. They are carefully crafted but will require expansion and refinement before and throughout their implementation. Earlier recommendations involve action at all levels. Those actions need coordination and integration to achieve maximum effect.

### COUNCIL RECOMMENDS THAT:

**RECOMMENDATION 8:** The State Government encourage and support coordination of local responses, and establish statewide structures to monitor and advise on the further development of Victoria's drug response. (Sections 3.5.4 and 3.9)

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Community responses to Council's investigation demonstrate that community interest in the drug problem is high. Council believes that constructive initiatives to reduce use and harm can be built on this interest.

**RECOMMENDATION 8.1:** Funds should be made available to support proposals for local community initiatives that focus positively on responding to drug use and misuse. (Section 3.5.4)

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**RECOMMENDATION 8.2:** Guidelines to support the development of local action in responding to drug issues should be developed and widely disseminated. (Section 3.5.4)

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**RECOMMENDATION 8.3:** Local early warning and monitoring systems should be piloted to ensure that effective use of available information is maximised, and that users, local interest groups and broader policy makers are informed. (Section 3.6.4)

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Council believes that effective implementation of these and other potential initiatives will depend upon clear communication and integrated action across Government. The strategy, at all levels, will require monitoring and fine tuning over the next few years.

**RECOMMENDATION 8.4:** An expert reference group should be established to advise the Premier regarding illicit drug issues. (Section 3.9)

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**RECOMMENDATION 8.5:** The role of the reference group should include:

- Providing advice on implementation issues arising from this report.
- Preparing further advice regarding issues identified in this report but not subject to recommendation.

- Assessing the effectiveness of the implementation of recommendations and advising on refinements as necessary.
  - Developing proposals for evaluation and research.
  - Advising on options for further reforms as requested. (Section 3.9)
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RECOMMENDATION 8.6: The reference group should have access to appropriate support services. (Section 3.9)

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RECOMMENDATION 8.7: Membership of the Senior Officer Group that coordinates the Victorian Drug Strategy should be upgraded. (Section 3.9)

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Throughout this report comment has been made about the absence or unreliability of data and research in this area. Council believes that more confident policy formulation and program implementation will only be possible when better data is available.

RECOMMENDATION 8.8: Relevant government agencies, including Victoria Police, should introduce common core data sets and consistent collection arrangements regarding illicit drug issues. (Section 3.2)

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RECOMMENDATION 8.9: A system of regular service and program evaluations designed to take into account the cross-sectoral impact of services should be implemented. (Section 3.2)

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RECOMMENDATION 8.10: A research agenda should be developed that takes account of the Commonwealth research program in this area. (Section 3.2)

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Public recognition of high quality contribution to drug policy and service provision will enhance both the status of work and public acceptance of its importance.

RECOMMENDATION 8.11: That appropriate awards be created to recognise quality practice, achievements and contributions to the harm minimisation approach to illicit drugs. (Section 3.9)

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