

Senator Penny Allman-Payne Chair, Senate Standing Committee on Community Affairs – References Committee PO Box 6200 Parliament House Canberra **ACT 2600** community.affairs.sen@aph.gov.au

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Dear Senator Allman-Payne

Thank you for the opportunity to make a submission to the Senate Standing Committee on Community Affairs inquiry into excess mortality. As the national peak body representing the alcohol and other drugs (AOD) sector in Australia, the Australian Alcohol and other Drugs Council (AADC) is particularly concerned about the increasing number of fatal drug overdoses in Australia and their contribution to excess deaths.

Drug-induced mortality, primarily drug overdose, is a leading cause of premature and avoidable death in Australia. Each year over 2,300 Australians lose their lives to fatal overdose, equating to an average of six deaths each day. ABS data, analysed by the National Drug and Alcohol Research Centre, reports that overdose deaths have increased by 3.5% each year since 2002.^{2 3} These deaths are concentrated among males aged 35-54 years, in areas of socio-economic disadvantage and, adjusted for population size, evenly distributed across metropolitan, regional and remote areas.⁴ While opioids, such as heroin and those found in prescription medications, are most commonly identified in overdose deaths, other medication classes such as anti-epileptic, sedative-hypnotic and anti-parkinsonism medications are increasingly contributing to overdose deaths. Importantly, 68% of these deaths have been found to be unintentional.⁵

Fatal and non-fatal overdoses are preventable. There is a significant body of evidence demonstrating the efficacy of harm reduction and treatment interventions which prevent overdose from occurring and reduce the likelihood of mortality when overdose does occur. Despite the efficacy of these health-focused interventions, funding for Australia's response to drug use is overwhelmingly directed towards law enforcement action. Of the \$1.7 billion which is allocated to

⁵ibid

¹ Penington Institute (2024). Overdose Early Warning Snapshot – May 2024. Melbourne: Penington Institute

² Australian Bureau of Statistics. (2023). Causes of Death. Accessed 6 May 2024 at https://www.abs.gov.au/statistics/health/causes-death_D

³ Chrzanowska A, Man N, Akhurst J, Sutherland R, Degenhardt L, Peacock A. (2023). Trends in overdose and other drug-induced deaths in Australia, 2002-2021. Sydney: National Drug and Alcohol Research Centre, UNSW Sydney.

⁴ ibid

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Australia's response to drugs annually, almost \$1.1 billion is directed towards law enforcement.⁶ This occurs at a time when fatal overdoses are consistently more than double Australia's annual road fatality toll and up to 500,000 Australians are unable to access treatment for an alcohol and/or other drug concern each year due to lack of system capacity.^{7 8}

The lack of system capacity within the AOD sector is compounded by the absence of a national governance structure with the ability to coordinate a holistic response to overdose and other AOD sector priorities across tiers of government and in partnership with the AOD sector. In addition, the National Drug Strategy 2017-2026 has not been evaluated at its mid-point to track progress against key objectives. Australia has previously been a global leader in its response to reducing harms associated with drug use and overdose through early introduction of Needle and Syringe Programs and supervised drug consumption rooms, yet progress has plateaued and overdoses continue to increase. While reforms such as the establishment of drug checking services in the Australian Capital Territory and Queensland and recent drug law reforms in a number of jurisdictions are welcome, there is slow, uneven progress across Australia and recent policy decisions such as the Victorian State Government abandoning plans for a second supervised drug consumption facility leave significant numbers of people vulnerable to preventable overdose. Additionally, even where there is national reform, such as introduction of the Take Home Naloxone Program, which provides opioid overdose reversal medication for free through community pharmacies, implementation is patchy with only 60% of pharmacies stocking the medication almost two years after the launch of the program.¹⁰

Australia has so far avoided the high rates and increasing excess deaths related to opioid overdose that have been present in North America for the past two decades. However, the increasing presence of the potent synthetic opioids, nitazines, in substances across Australia - occurring within an environment that lacks a coordinated, holistic response to overdose with coverage in all parts of the country - leaves Australia vulnerable to a significant further increase in overdose deaths. ¹¹ ¹²

⁶ Ritter, A., McLeod, R., & Shanahan, M. (2013). *Monograph No. 24: Government drug policy expenditure in Australia – 2009/10*. DPMP Monograph Series. Sydney: National Drug and Alcohol Research Centre. Note: up to date figures will be available in June 2024.

⁷ Penington Institute (2023). Australia's Annual Overdose Report 2023. Melbourne: Penington Institute

⁸ Ritter, A., Berends, L., Chalmers, J., Hull, P., Lancaster, K. & Gomez, M. (2014). *New Horizons: The review of alcohol and other drug treatment services in Australia*. Sydney, NSW: Drug Modelling Program, National Drug and Alcohol Research Centre, UNSW.

⁹ Chaohan, N. (2023, December 8). "Australia 'lags internationally' in harm reduction as drug overdose deaths continue to rise", *ABC Online*. Accessed 9 May 2024 at https://www.abc.net.au/news/health/2023-12-07/australia-lags-internationally-harm-reduction-drug-overdose/103013466

¹⁰ Thou, S. (2024, May 2). "Researchers urge more Australian pharmacies to stock anti-opioid overdose drug naloxone", *The Guardian*. Accessed 9 May 2024 at https://www.theguardian.com/australia-news/2024/may/02/researchers-urge-more-australian-pharmacies-to-stock-anti-opioid-overdose-drug-naloxone

¹¹ Davey, M. (2024, April 24). "Synthetic opioids: warning issued in NSW after nitazenes cause cluster of overdoses", *The Guardian*. Accessed 9 May 2024 at https://www.theguardian.com/society/2024/apr/25/synthetic-opioids-warning-issued-in-nsw-after-nitazenes-cause-cluster-of-overdoses

¹² Groves, E. (2024, May 19). " Canberra pill testing service CanTEST issues red alert after finding synthetic opioid N-pyrrolidino protonitazene in brown powder", ABC Online. Accessed 20 May 2024 at https://www.abc.net.au/news/2024-05-19/pill-testing-cantest-red-alert-synthetic-opioid-protonitazene/103866870

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To decrease the rate of fatal overdose and excess deaths, AADC recommends that:

- A national, sector inclusive governance framework for the AOD sector be established to
 ensure coordination in the development, implementation and funding of AOD sector
 priorities, and that a holistic response to overdose be developed as part of this.
- Evidence-based overdose death prevention responses be scaled up in partnership with people who use drugs, including (but not limited to):
 - Responses which reduce fatal outcomes from overdose such as increasing availability of supervised drug consumption services and the coverage of the Take Home Naloxone Program across metropolitan, regional and rural areas
 - Responses which reduce the risk of overdose occurring, such as increasing the
 accessibility and capacity of the Opioid Dependence Treatment Program,
 increasing the availability of drug checking services across metropolitan, regional
 and rural locations, and strengthening early warning systems for emerging drugs
 of concern
 - Responses which reduce vulnerability to overdose through reform to illicit drug laws which reduce the risk and impact of criminalisation, stigma and discrimination for people who use drugs, and through complementary resourcing addressing social determinants of health which increase vulnerability to overdose, such as housing.
- Funding stability, security and sustainability be established in the AOD sector through an increase in the quantum of core funding to the AOD sector in Australia to deliver enhanced capacity to meet current demand and need for specialist, quality services.

Thank you for the opportunity to provide input to the inquiry into excess mortality in Australia. If you have any queries or require any further information in relation to this submission, please do not hesitate to contact me directly on 0438 430 963 or via email at melanie.walker@aadc.org.au.

Yours sincerely

Melanie Walker

Chief Executive Officer

Australian Alcohol and other Drugs Council (AADC)