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## **Inquiry into the impact of illicit drugs being traded online**

Dear Secretary,

The Board of Harm Reduction Australia (HRA) thanks the Commonwealth Government for the invitation to submit to this inquiry and commends its investigation into online illicit drug trading. Our submission is focussed on the following two terms of reference:

- E. the dangers of purchasing drugs online, including the chemical content of 'recreational' drugs
- F. the impact of legislation and policies that seek to decriminalise drug use and possession on the online availability, quality control and the capacity of law enforcement agencies to police illicit drugs;

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## Background

In 2015, HRA was formed by a group of professionals concerned about drug policy in Australia. For over thirty years, Australia's National Drug Strategy has been Harm Minimisation and this is recognised in Victoria's Department of Health and Human Services' 'Alcohol and Other Drug Performance Management Framework 2018' as well as the National Drug Strategy document for 2017 - 2026.<sup>1 2</sup> Of Harm Minimisation's three strategies, harm reduction is evidenced as the most effective in terms of health outcomes and cost-effectiveness, compared to supply and demand reduction.<sup>3 4</sup> HRA understands the complexities of drug use and is advocating for the safest, most effective ways to protect the wellbeing of individuals, families and communities. We aim to ensure drug policies first and foremost do no harm and provide real benefit to Australian society through sensible and humane responses to drug use.

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<sup>1</sup> Department of Health and Human Services, 'Alcohol and Other Drug Performance Management Framework' (Sep 2018) <<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/aod-performance-management-framework>>

<sup>2</sup> Federal Government (2017) 'National Drug Strategy 2017 - 2026' *Department of Health* (online: 14/12/2021 <https://www.health.gov.au/resources/publications/national-drug-strategy-2017-2026>)

<sup>3</sup> Wodak, A 2011, 'Demand reduction and harm reduction', *Global Commission on Drug Policy*, available online: [http://www.globalcommissionondrugs.org/wp-content/themes/gcdp\\_v1/pdf/Global\\_Com\\_Alex\\_Wodak.pdf](http://www.globalcommissionondrugs.org/wp-content/themes/gcdp_v1/pdf/Global_Com_Alex_Wodak.pdf)

<sup>4</sup> Wodak, A., Symmonds, A., Richmond, R. 2003, 'the role of civil disobedience in drug policy reform: How an illegal safer injection room led to a 'Medically Supervised Injecting Centre' *Journal of Drug Issues*, available online: <http://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.817.6061&rep=rep1&type=pdf>

**1.0 We recommend that the decriminalisation of all drugs in the context of possession charges - drug trafficking and distribution remains within the justice system - and people caught with a personal quantity of currently illicit drugs receive referrals into Alcohol and Other Drug (AOD) counseling - with optional referrals to assist third party individuals (family and friends).**

## 1.1 International context

### 1.1.1 Online illicit drug trading

For at least the last decade, online illicit drug trading has expanded to fundamentally change the sale and distribution of black market substances across the globe. It presents a number of challenges to law enforcement agencies: anonymity; non-traceable payment systems, enlarging markets; and improving knowledge dissemination of specific drugs.<sup>5</sup> Modalities commonly used are darknet websites, cryptocurrencies, encrypted messaging apps and social media platforms including Instagram, and snapchat.<sup>6</sup>

Such online technologies have led to climbing fentanyl accessibility and in turn overdose deaths in North America.<sup>7</sup> Street-based fentanyl distribution is seeping into Europe and further identified in Australia masquerading as heroin and other more reliable drugs, including illegally sold prescription medication<sup>9</sup>.

The Australian problem is not as extensive as North America's, yet within a COVID context, drug importation and exportation patterns remain disrupted, keeping suppliers desperate to meet demand.<sup>10</sup> Such supply shortages could result in localised distributors, switching to more available synthetic opioids and novel active substances to satisfy customers. Research indicates that Australia often follows the drug consumption trends of North America and are worried that this situation could lead to an increase in fentanyl-related overdose deaths currently seen overseas.<sup>11</sup>

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<sup>5</sup> Phair, N. (2016) 'The online environment: A precursor for illicit synthetic drug law enforcement' *National Drug Law Enforcement research fund* (online 2/21/2021: <https://www.aic.gov.au/sites/default/files/2020-05/monograph70.pdf>)

<sup>6</sup> Moyle, L., Childs, A., Coomber, R., & Barratt, M. J. (2019). # Drugsforsale: An exploration of the use of social media and encrypted messaging apps to supply and access drugs. *International Journal of Drug Policy*, 63, 101-110.

<sup>7</sup> Ciccarone, Daniel The rise of illicit fentanyls, stimulants and the fourth wave of the opioid overdose crisis, *Current Opinion in Psychiatry*: July 2021 - Volume 34 - Issue 4 - p 344-350

<sup>8</sup> Lokala, U., Lamy, F. R., Daniulaityte, R., Sheth, A., Nahhas, R. W., Roden, J. I., Yadav, S., & Carlson, R. G. (2019). Global trends, local harms: availability of fentanyl-type drugs on the dark web and accidental overdoses in Ohio. *Computational and mathematical organization theory*, 25(1), 48-59.

<sup>9</sup> New South Wales Government (2020) Warning Heroin may contain dangerous synthetic opioids fentanyl and acetyl fentanyl' (online 2/12/2021: <https://www.health.nsw.gov.au/aod/public-drug-alerts/Pages/heroin-may-contain-fentanyl-acetylfentanyl.aspx>)

<sup>10</sup> Pardo, B., Hulme, S., Taylor, J. (2021) 'Australia contained COVI-19 early on, can it do the same with Synthetic Opioids?' *RAND Corporation* (online 2/21/2021: <https://www.rand.org/blog/2021/04/australia-contained-covid-19-early-on-can-it-do-the.html>)

<sup>11</sup> Hanson BL, Porter RR, Zöld AL, Terhorst-Miller H. Preventing opioid overdose with peer-administered naloxone: findings from a rural state. *Harm Reduction Journal*. 2020;17(1):1-9.

## 1.1.2 The decriminalisation of currently illicit drugs

In 2001 before the challenges of online illicit drug trading, Portugal decriminalised all illicit drugs in the hope of warding off a pervasive street-based drug market posing significant threats to public health.<sup>12</sup> The results show significant reductions in overdose deaths and less contact with the justice system for people otherwise not involved in other illegal activities apart from personal use.<sup>13</sup> Notably, it did not result in an increase in substance use across the population as stated by critics at the time.<sup>14</sup> A longitudinal study revealed the rates in which young people took up risky drug using practices also significantly decreased, thought to be due to the novelty of drug use, having worn off on younger audiences.<sup>15</sup>

The Portugal model involves people who encounter law enforcement officials with a personal amount of drugs to be sent to the '*dissuasion commission*' for a counselling referral instead of a courtroom.<sup>16</sup> Those who once had a street-based substance dependence report having had their "*life*" back, where they can maintain employment, support their family and not have to engage in illegal activities to raise enough money to avoid another painful drug withdrawal.<sup>17</sup> Their police force recognises the positive outcomes of the policy now, which includes a reduction in drug-related crime, but at the time, they resisted reform.<sup>18</sup>

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<sup>12</sup> Turner, L. (2018) "Could the controversial 'Portugal method' end the war on drugs?" *A Current Affair* (Online 2/12/2021: <https://fionapatten.com.au/news/controversial-portugal-method-end-war-drugs/>)

<sup>13</sup> Phair, Above n. 5.

<sup>14</sup> Hughes, K. (2010) 'What can we learn from the Portuguese decriminalisation of illicit drugs?' *British Journal of Criminology* (online, 2/21/2021: file:///C:/Users/User/Downloads/What\_Can\_We\_Learn\_From\_The\_Portuguese\_Decriminaliz.pdf)

<sup>15</sup> Greenwald, G. (2009) 'Drug decriminalisation in Portugal: Lessons for creating fair and equitable drug policies' *Cato Institute* (online 2/21/2021: <https://www.cato.org/white-paper/drug-decriminalization-portugal-lessons-creating-fair-successful-drug-policies>)

<sup>16</sup> Turner, Above n. 12.

<sup>17</sup> Turner, Above n. 12.

<sup>18</sup> Phair, Above n. 5.

### 1.1.3 Aligning with recent United Nations High-Level documentation: The UNODC Synthetic Drug Strategy 2021-2025, and the United Nations System Common Position on Drug Policy

The United Nations Office of Drugs and Crime have recently released the current *UNODC Synthetic Drug Strategy (2021)*<sup>19</sup>, which highlights the need to enable early detection and prompt responses to emerging threats related to synthetic drugs through established early warning systems, to prevent crises before they occur. This documents also prioritizes the need for science-informed health responses to synthetic drugs, by improving the participatory role of civil society in addressing synthetic drug situations, including communities of people who use drugs, and promoting non-stigmatizing attitudes in this arena. Public-facing early warning systems are emerging across Australia, such as the Commonwealth Government funded Prompt Response Network<sup>20</sup>, a health-led system that brings together state and territory networks sharing information on emerging drugs across the country, in collaboration with people who use drugs. These health-led systems must receive continued funding into the future to ensure they can reduce the harms associated with emerging drugs as they occur in Australia, including illicit drugs being traded online. The *United Nations system common position supporting the implementation of the international drug control policy through effective interagency collaboration (2018)*<sup>21</sup> supports the promotion of alternatives to conviction, including the decriminalisation of drug possession for personal use.

## 1.2 Australian context

Australia aligns with much of the rest of the world in respect to the challenges presented by the illegal online drug trade. The illicit policy environment is thought to encourage stigma and discrimination for people who are mentally ill and socially and economically disadvantaged.<sup>22 23 24 25</sup> It does this by insinuating that drug

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<sup>19</sup> UNODC Synthetic Drug Strategy 2021-2025. Available from:

<https://syntheticdrugs.unodc.org/syntheticdrugs/en/strategy.html>

<sup>20</sup> NCCRED: The Prompt Response Network (2021). Available from: <https://nccred.org.au/collaborate/prompt-response-network/>

<sup>21</sup> UN System Chief Executives Board for Coordination (2018). United Nations system common position supporting the implementation of the international drug control policy through effective interagency collaboration. Available from: <https://unsceb.org/united-nations-system-common-position-supporting-implementation-international-drug-control-policy>

<sup>22</sup> Lee, N & Bartle, J. (2021) "The police new scare campaign won't stop people from using drugs. But it will increase stigma" *The Conversation* (online 29/11/2021: <https://theconversation.com/the-polices-new-scare-campaign-wont-stop-people-from-using-drugs-but-it-will-increase-stigma-171303?fbclid=IwAR1iusqdvJ4P-v0uXkFx53p6DvNu2KOq9tummyBlxnL07TKoKMHsmzyQNjZk>)

<sup>23</sup> Fair Treatment (2021) 'tell the AFP Commissioner to end the stigma and fear mongering!' (online: <https://mailchi.mp/d16240790096/afp-commissioners-disgusting-stigma?e=af64298fd0>)

<sup>24</sup> Lancaster, K., Seear, K., & Ritter, A. (2017) Reducing stigma and discrimination for people experiencing problematic alcohol and drug use' *Drug Policy Modelling Program, National Drug and Alcohol Research Centre, University of NSW* (online 2/12/2021: <https://ndarc.med.unsw.edu.au/sites/default/files/ndarc/resources/Reducing%20stigma%20and%20discrimination%20for%20people%20experiencing%20problematic%20alcohol%20and%20other%20drug%20use.pdf>)

<sup>25</sup> AIVL (2011) 'Why wouldn't I discriminate against them?' A report of stigma and discrimination towards the injecting drug user community' *Australia Injecting Drug Users League* (online 2/12/2021: <https://www.yumpu.com/en/document/read/50188513/why-wouldnt-i-discriminate-against-all-of-them-a-report-on-aivl>)

dependency is a personal and moral failing<sup>26 27 28 29 30</sup> rather than a complex normalised activity particularly in younger demographics.<sup>31 32 33</sup> This age group is also at an increased risk of overdose<sup>34</sup> and engages in higher rates of social media use.<sup>35</sup> Data indicates that there is a positive correlation between the frequency of social media use and the likelihood of seeing drugs advertised online<sup>36</sup>.

Treating this issue within the legal system arguably supports the view that younger people including university students and adolescents are deserving of a criminal record. This limits life options in respect to ongoing access to employment, overseas travel and charitable volunteering<sup>37</sup>

Multiple officials in the Australian criminal justice system have come out publicly calling for an entirely new approach to illicit drug use. Former Victorian Police Chief Commissioner, Ken Lay publicly stated that we cannot “*arrest our way out of*” this problem and criminalisation had failed at eradicating drugs from society<sup>38</sup>. The Australian Lawyers Alliance (ALA) this year released a report, ‘*Doing more harm than good - the need for a health focused legal response to drug use*’ arguing an urgent case towards a health and social-based framework:<sup>39</sup>

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<sup>26</sup> Lee & Bartle, Above n 19.

<sup>27</sup> Fair Treatment Above n 20.

<sup>28</sup> Lancaster, Seear, & Ritter, Above n 21.

<sup>29</sup> AIVI, Above n 22.

<sup>30</sup> Greenwald, Above n. 14; Lee and Bartle, Above n 16; Lancaster, Seer, and Ritter, Above n. 18.

<sup>31</sup> Australian Institute of Health and Welfare (AIHW) (2020) National Drug Strategy Household Survey DSHS 2019 Main Report (Report edition: 16 Jul 2020), p.35 <https://www.aihw.gov.au/reports/illicit-use-of-drugs/national-drug-strategy-household-survey-2019/contents/table-of-contents>

<sup>32</sup> Kari Lancaster, Alison Ritter, Francis Matthew-Simmons (2013) Young people's opinions on alcohol and other drugs issues. National Drug and Alcohol Research Centre, University of New South Wales p.141:

<https://ndarc.med.unsw.edu.au/sites/default/files/newsevents/events/RP27-young-peoples-opinions.pdf>

<sup>33</sup>Fildes, J., Liyanarachchi, D., Perdriau, A., Plummer, J. and Wearing, A. (2019) Close to home: young people and the impact of alcohol and drug use by family and peers. A 2018 Youth Survey report. Mission Australia: Sydney, NSW.

<sup>34</sup> Man, N, Chrzanowska, A., Sutherland, R., Degenhardt, L & Peacock, A. (2021) ‘Trends in drug related hospitalisations in Australia 1999 - 2019’ *National Drug Research Centre* (online 2/12/2021: <https://ndarc.med.unsw.edu.au/resource-analytics/trends-drug-related-hospitalisations-australia-1999-2019>)

<sup>35</sup> Auxier, B., Anderson, M. (2021) ‘Social Media use in 2021’ *PEW Research Centre* (online 12/2/2021: <https://www.pewresearch.org/internet/2021/04/07/social-media-use-in-2021/>)

<sup>36</sup> McColloch, L., & Furlong, S. (2019) ‘Selling drugs in the age of social media’ *Volteface* (online 2/12/2021: [https://volteface.me/app/uploads/2020/08/Volteface-\\_-Social-Media-report-DM-for-Details.pdf](https://volteface.me/app/uploads/2020/08/Volteface-_-Social-Media-report-DM-for-Details.pdf))

<sup>37</sup> National Criminal Lawyers (2021) ‘The effects of having a criminal record in Australia’ *National Criminal Lawyers* (online 2/12/2021: <https://www.nationalcriminallawyers.com.au/the-effects-of-having-a-criminal-record-in-australia/>)

<sup>38</sup> Dmytryshchak, G. (2017) “‘We probably weren’t brave enough on injecting rooms” say Victoria’s former Policy Chief Ken Lay’ *The Age* (online 29/11/2021: <https://www.theage.com.au/national/victoria/we-probably-werent-brave-enough-on-injecting-rooms-says-victorias-former-police-chief-ken-lay-20170722-gxgn84.html>)

<sup>39</sup> Australian Lawyers Alliance (2021) ‘Doing more harm than good - the need for a health focused legal response to drug use,’ *Australian Lawyers Alliance*, (online 29/11/2021: <https://www.lawyersalliance.com.au/documents/item/2064>)

*“Current policies target and stigmatise drug users. This sends drug users, fearful of law enforcement, underground. Users then become reliant on drug suppliers not just for the drugs themselves, but also for any information about what they are taking and how they should take it. This reliance fuels a dangerously unregulated drug market, and people – of all ages and backgrounds – are dying as a result.”*

There are many Barristers and Police Officers - some below - who support a health, welfare and indeed, human rights-based approach of drug use to be shifted outside of the justice arena entirely:

- Greg Barns SC, author and political commentator<sup>40</sup>
- ALA, a not-for-profit national membership of lawyers<sup>41</sup>
- Nicholas Cowdrey AO QC, former Director of Public Prosecutions in NSW<sup>42</sup>
- Tim O’Connor, former Head the NSW Crime Commission<sup>43</sup>
- Mick Palmer AO, former Commissioner of the Australian Federal Police<sup>44</sup>
- Robert Richter QC, adjunct Professor of Law at Victoria University and Victorian President of the Australian Drug Law Reform Foundation<sup>45</sup>
- Greg Denham, former Victoria Police Detective and former Executive Officer of the Yarra Drug and Health Forum<sup>46</sup>
- Ken Lay, former Victorian Police Chief Commissioner<sup>47</sup>

Last year, drug related arrests hit a record high of over 166,000 - one person being arrested every 4 minutes for possession charges in Australia, none of which for selling or distribution.<sup>48</sup> HRA wonders if this suggests that people who use drugs and their families are somehow responsible for the drug problem, when in reality, arrests barely scratch the surface of organised crime syndicates<sup>49</sup>. Tim O’Connor, the now retired Head of the NSW Criminal Investigations Unit is quoted in the Sydney Morning Herald:

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<sup>40</sup> Gregorie, P. (2021) ‘Lawyers call for drug law reform: an interview with ALA’s Greg Barns’ *Sydney Criminal Lawyers*, (online 29/11/2021: <https://www.sydneycriminallawyers.com.au/blog/lawyers-call-for-drug-law-reform-an-interview-with-alas-greg-barns/>)

<sup>41</sup> ALA, Above n 36.

<sup>42</sup> Harm Reduction Australia (2020) ‘Nicholas Cowdrey’ (online 29/11/2021: <https://www.harmreductionaustralia.org.au/nicholas-cowdrey/>)

<sup>43</sup> Hunter, F. (2021) ‘Organised crime is overpowering authorities in drug war, says veteran investigator’ *Sydney Morning Herald* (online 29/11/2021: [https://www.smh.com.au/national/nsw/organised-crime-is-overpowering-authorities-in-drug-war-says-veteran-investigator-20211026-p593cv.html?fbclid=IwAROKPS0zKwG3lgIB-GS\\_uIOILZJxeBqg\\_-AoRm6T5AyC0o7UUB07Oa--skl](https://www.smh.com.au/national/nsw/organised-crime-is-overpowering-authorities-in-drug-war-says-veteran-investigator-20211026-p593cv.html?fbclid=IwAROKPS0zKwG3lgIB-GS_uIOILZJxeBqg_-AoRm6T5AyC0o7UUB07Oa--skl))

<sup>44</sup> Harm Reduction Australia (2020) ‘Mick Palmer’ *Harm Reduction Australia* (online 29/11/2021: <https://www.harmreductionaustralia.org.au/mick-palmer/>)

<sup>45</sup> Harm Reduction Australia (2020) ‘Robert Richter’ *Harm Reduction Australia* (online 29/11/2021: <https://www.harmreductionaustralia.org.au/robert-richter/>)

<sup>46</sup> Harm Reduction Australia (2020) ‘Greg Denham’ *Harm Reduction Australia* (online 29/11/2021: <https://www.harmreductionaustralia.org.au/greg-denham-2/>)

<sup>47</sup> Dmytryshchak, Above n 35.

<sup>48</sup> Australian Criminal Intelligence Commission (2021) *Illicit Drug Data Report* (online: 29/11/2021: [https://www.acic.gov.au/sites/default/files/2021-10/IDDR%202019-20\\_271021\\_Statistics.pdf](https://www.acic.gov.au/sites/default/files/2021-10/IDDR%202019-20_271021_Statistics.pdf))

<sup>49</sup> Australian Criminal Intelligence Commission, Above n 45.

*“Even if law enforcement agencies had significantly more funding and brought to justice kingpins who use global and technology advanced networks to orchestrate major imports, other figures would step in to satisfy the market. [...] The definition of insanity is doing the same thing over and over again and expecting a different result. It’s clearly not working. Drugs are probably worse now than they ever have been.”*<sup>50</sup>

After O’Connor’s resignation, the Australian Federal Police released a social media campaign challenging people who use methamphetamine and cocaine to *“have a conscience.”*<sup>51</sup> The campaign received heavy criticism for being insensitive towards the realities of substance dependence and its medical status as a diagnosable mental health disorder.<sup>52 53</sup> It is thought that shaming drug-related issues results in individuals becoming too afraid to disclose their substance use to friends, family and G.P. 's, which can lead to further isolation, helplessness and drug use.<sup>54 55</sup>

Rather than focusing public resources in an attempt to control online drug trade through a traditional prohibition approach, an alternative, moderated approach that accepts we can’t ‘police our way out’ provides the opportunity for education and health service referrals. A decriminalisation approach could work towards rehabilitating the causes underlying people’s substance use and not unconsciously make it harder for those affected to access support.<sup>56 57</sup> HRA recommends the removal of all criminal sanctions for those caught with a personal quantity of illicit drugs. Similar to Portugal, for people who are in active use, we support a public health response and referrals to AOD counselors and harm reduction programs over a criminal conviction.

AOD counseling referrals are thought to be more effective than referring to compulsory, abstinence-based treatment or rehabilitation services that often do not result in the person becoming drug-free.<sup>58 59</sup> Public health AOD counseling is evidence-based and works with the person to manage triggers and external circumstances to build capacity for change.<sup>60</sup> HRA believes AOD counseling at a community health service, utilising the stages of change model<sup>61</sup> and motivational interviewing techniques<sup>62</sup> is appropriate for people

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<sup>50</sup> Hunter, Above n 40

<sup>51</sup> Australian Federal Police (2021) *Facebook* (online: <https://www.facebook.com/AusFedPolice/posts/250331850466480>)

<sup>52</sup> Lee & Bartle, Above n 19.

<sup>53</sup> Fair Treatment Above n 20.

<sup>54</sup> Lee & Bartle, Above n 19.

<sup>55</sup> Fair Treatment Above n 20.

<sup>56</sup> Lancaster, Seear & Ritter, Above n 21.

<sup>57</sup> AIVL, Above n 22.

<sup>58</sup> Sindewald, L. (2017) ‘AA is not an evidenced based treatment’ *The Fix: addiction and recovery straight up*, (online 2/21/2021: <https://www.thefix.com/aa-is-not-evidence-based-addiction-treatment>)

<sup>59</sup> Radcliffe, S. (2018) ‘Should people with addictions be force into rehab?’ *Healthline* (online 2/21/2021: <https://www.healthline.com/health-news/people-with-drug-addictions-forced-into-rehab>)

<sup>60</sup> The Australian Government (2004) ‘6.3 Counselling models used in AOD work’ *The Department of Health* (online 2/12/2021: <https://www1.health.gov.au/internet/publications/publishing.nsf/Content/drugtreat-pubs-front7-fa-toc~drugtreat-pubs-front7-fa-sectb~drugtreat-pubs-front7-fa-sectb-6~drugtreat-pubs-front7-fa-sectb-6-3>)

<sup>61</sup> Prochaska, J. O., & DiClemente, C. C. (1983). Stages and processes of self-change of smoking: Toward an integrative model of change. *Journal of Consulting and Clinical Psychology*, 51(3), 390–395.

<sup>62</sup> Miller, W. & Rollnick, S. (2012) *Motivational Interviewing, Third Edition, helping people change*.



wanting to gain more control over their substance use compared to the spiritual-based programs of Narcotics Anonymous (NA) and Alcoholics Anonymous (AA).

HRA also recommends, if a person is found to possess a personal amount of currently illicit drugs, or otherwise, that services and the police reach out to their family and friends to provide referrals into education and counseling support about the person experiencing dependence. We know through a handful of Australian research that if the family is engaged and connected to the person, there are better outcomes for all - the user and the family more broadly.<sup>63 64</sup>

A good example of a program delivering this sort of support is Family Drug Support Australia, a national not-for-profit that runs a 24/7 support line for family members - not the substance user - as well as family support groups and psychoeducational programs<sup>65</sup>. If a warm referral was offered to the family or close friend of someone using alcohol and/or other drugs, their social network would be better at maintaining a connection over time, regardless of setbacks and lapses.<sup>66 67</sup>

## **2.0 We recommend enhancing existing harm reduction education in the form of state-based, take-home naloxone programs to be expanded nationwide.**

Existing take home naloxone programs operate in a number of Australian states and territories and are cost and prescription free, which is beneficial to all people engaged in opioid use.<sup>68</sup> HRA suggests that the Commonwealth Government's current take-home naloxone pilot be expanded to all states and territories, and not just support programs in NSW, SA and WA alone. An expanded Commonwealth take-home naloxone program should also recognise and financially support the implementation and expansion of peer-led programs around the country, with current programs showing success in reaching populations of people who inject drugs who may not otherwise attend mainstream health services<sup>69 70</sup>. We further suggest that training programs for the use of naloxone should be offered to people who use opioids and third parties such as their friends and families.

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<sup>63</sup> Gethin, A., Trimmingham, T., Chang, T., Farrell, M., & Ross, J. (2016) Coping with problematic drug use in the family: an evaluation of the stepping stones program. *Drug and Alcohol Review* (online: <https://pubmed.ncbi.nlm.nih.gov/26365113/>)

<sup>64</sup> Daghli, A (2021) 'Stepping stones study - the family perspective' *Vimeo* (Online 2/21/2021: <https://vimeo.com/626541357/0c23def3c6?fbclid=IwAR1pcjTjkUQw64G7LE-OKOei5XSCIL7JG8pm3Xmz4rB5gAAU6whE9tAbwZc>)

<sup>65</sup> Family Drug Support Australia (2020) 'Family Drug Support Australia: Support Line 1300 368 186, *Family Drug Support Australia* (online 2/21/2021: <https://www.fds.org.au/>)

<sup>66</sup> Gethin, Trimmingham, Chang, Farrell, & Ross, Above n 60.

<sup>67</sup> Daghli, Above n 61

<sup>68</sup> Australian Government (2020) 'About the take home naloxone program' *Department of Health* (online 2/21/2021: <https://www.health.gov.au/initiatives-and-programs/take-home-naloxone-pilot/about-the-take-home-naloxone-pilot>)

<sup>69</sup> Dwyer, R., Olsen, A., Fowlie, C., Gough, C., van Beek, I., Jauncey, M., Lintzeris, N., Oh, G., Dicka, J., Fry, C. L., Hayler, J., Lenton, S. (2018) An overview of take-home naloxone programs in Australia. *Drug and Alcohol Review*, 37(4), 440-449 <https://doi.org/10.1111/dar.12812>.

<sup>70</sup> CREIDU (2021). National Naloxone Reference Group: Summary of take-home naloxone in Australia (16 August 2021). Available from: [https://creidu.edu.au/system/resource/100/file/NNRG\\_THN\\_20210817.pdf](https://creidu.edu.au/system/resource/100/file/NNRG_THN_20210817.pdf)

Previous research has shown that an effective way to administer naloxone training is by delivering peer-based education to people who use opioids and others who may be there in the unexpected event of an opioid overdose<sup>71</sup>. Peer-based programs are often associated with lower costs as well as having the effect of increasing confidence and a willingness to use the naloxone amongst drug-using cohorts.<sup>72</sup>

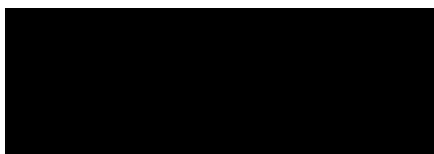
## Conclusion

We reiterate that health should be paramount. Illicit drug policies and practices should aim to reduce harm, treat drug use and support people and families in our communities. A prohibitionist approach has proven ineffective at delivering on such objectives and the expansion and utilisation of online technologies, and its complex challenges, is a testament to this. The black market has instead continued to profit from supplying and distributing currently illegal drugs to buyers all around the world. A decriminalised policy response would allow the Australian Government to protect the health and safety of valuable members of the community, reduce their contact with the justice system and improve social cohesion for all.

We are grateful to the committee for their role in establishing this inquiry and acknowledge the unique challenges in confronting a policy area, where public perception, political narrative and practicalities can all present obstacles to reform. We hope the committee will carefully consider the evidence and that the final report will be able to help shape inspired policy change in the future.

HRA would welcome the opportunity to elaborate on this written submission and provide a verbal presentation to inquiry committee members.

Yours sincerely



Gino Vumbaca OAM  
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President & Co-Founder  
Harm Reduction Australia

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<sup>71</sup> Lewis, D. A., Park, J. N., Vail, L., Sine, M., Welsh, C., & Sherman, S. G. (2016). Evaluation of the overdose education and naloxone distribution program of the Baltimore Student Harm Reduction Coalition. *American journal of public health*, 106(7), 1243-1246.

<sup>72</sup> Lewis, Park, Vail,, Sine, Welsh, C & Sherman, Above 66.