

6th June 2000

Ms Shelly McInnis
Inquiry Secretary
Parliamentary Inquiry into Substance Abuse
House of Representatives
Standing committee on Family and Community Affairs
Parliament House
Canberra
ACT 2600

Dear Ms McInnis

It is with pleasure that I provide the Standing Committee with a submission by the Australian Drug Foundation. The Foundation welcomes this inquiry, as this is an issue of great concern to the Australian community

If you have any issues or require further information please do not hesitate to contact me or Ms Rosemary McClean on (03) 9278 8117

Yours sincerely

Bill Stronach
Chief Executive
Australian Drug Foundation

**Submission to
the House of Representatives Standing Committee on Family and
Community Affairs
from the Australian Drug Foundation
on Substance Abuse in Australian Communities**

The Australian Drug Foundation is a non-government, non-profit organisation that has been operating for 40 years. The organisation's mission is to prevent and reduce alcohol and other drug related problems in the Australian community through the provision of accurate information, proven education strategies and practical solutions in a professional manner. The concept of harm minimisation underpins the work of the ADF.

The ADF welcomes the opportunity to formally voice its continuing concern about the impact which drug use has on the Australian community. Despite all the efforts by the government and non-government sectors, the prevalence and degree of drug use continues to increase. It is particularly important that this Inquiry is considering all drugs, licit and pharmaceutical as well as illicit. It is our experience that the licit drugs, due to their widespread use, continue to cause more harm than the illicit drugs

The ADF does not collect or produce primary data relating to the level or effects of drug use therefore this submission does not attempt to present detailed statistics and figures. As an organisation we depend upon data generated from other sources to inform our work.

Some of the most useful data sources are:

- ❑ **The National Drug Strategy Household Survey series** – extremely important in gauging current levels of use and attitudes to drug use and, because it has been conducted periodically, in identifying emerging trends of drug use. The ADF urges the Government to continue its commitment to funding this survey.
- ❑ **The National Illicit Drug Reporting System:** a unique system collating data from a range of formal and informal sources to provide very early indicators of changes in availability and use of illicit drugs.
- ❑ **Research reports:** a communities understanding of, and therefore, ability to address, issues such as drug use cannot progress and develop unless there is a strong and well-resourced research programme. Of course once the research has been conducted dissemination of, and easy access to the findings is essential. The ADF Library, a specialist alcohol and drug library, services a wide range of professional, researchers, students and others. The Internet has become a valuable tool and its potential is continuing to be developed.

Through its work the ADF comes into contact with a range of indicators which demonstrate the impact that drug use is having on the community.

- ❑ **DRUGinfo:** The telephone information service operated by the ADF, this service receives calls from a wide cross-section of the community. The past twelve months has seen a significant increases in the number of calls relating to the illicit drugs, cannabis and heroin, and the number of calls from parents, partners

and others concerned about a family member's drug use. Again this reflects the level of anxiety present in the community. Attachment 1 illustrates the complexity and difficulty of just one of these calls.

- **The Internet:** the ADF uses the Internet extensively to both source and disseminate information. The ADF website www.adf.org.au is very popular. An indication of the impact which drug use is having on our society is the fact that the number of hits, which this website receives, has grown from 200,000 per month to over 800,000 per months over with a short period of time. This reflects the level of concern and anxiety that exists in the community with more and more people seeking information on the issues. A problem with the Internet is knowing which sites are credible or not. Soon the Australian community will have access to the Australian Drug Information Network (ADIN), a website that provides links to drug information sites which have been reviewed and accredited as reliable. The ADF is managing the development of this new service.
- **Schools:** The ADF works closely with schools both in researching and developing drug education strategies and resources, and providing training on drug issues for education personnel. Schools are increasingly having to respond to drug related incidents. A study by the ADF in 1997 revealed that half of all secondary schools surveyed had responded to at least one cannabis incident during the previous 12 months.

It is the ADF's belief that drug use will continue to impact negatively on the life of Australians, especially young people. Continued effort is required by all sectors of the community if we are to minimise this harm and help our young people to live healthy and fulfilled lives.

Attachment 1

A DRUGinfo story as recounted by the Information Officer

A 14 year old female rang the DRUGinfo line. At first, I could only hear the sounds of easy listening background music playing in the caller's house. The caller said nothing. I repeated my greeting, and again got no reply. I asked, "Is anyone there?" to which I received a faint "yes". Initially I thought it sounded like a very young child, around the ages of 8 – 10 years. I was then asked, "what do I do?". I stated what services DRUGinfo provides and asked if I could be of any help. The caller stated, "she needs to talk to someone". I let her know she could talk to me. She detailed how she was looking after her 3 younger siblings, 2yrs, 6yrs and 8 yrs, while her mother struggled with a heroin addiction. Her mother would be away from home sometimes up to 3 days. The caller also expressed a lot of anger at the men that would come home with her mother, describing them as "jerks". She then detailed how she hated changing nappies, but there was no one else to do that. She expressed sadness, anger and frustration as she explained her pain in trying to answer "where is mum?" and "why isn't mum here?" questions that her younger siblings constantly ask. She expressed the pain she felt for her siblings, stating, "they love her, what can I tell them, they want their mum". I was able to give the caller the number for Kid's helpline, and provide an ear. As we started to touch on what could be done, the caller stated she needed to go. It was clear that the caller was aware that any action may lead to some changes within the existing family dynamics and that she was not prepared to initiate these. It was apparent that the caller had an idea of what may happen if she were to do more than just express some of her concerns to an anonymous service. She had reached the boundary of what she was comfortable undertaking at this stage and decided to bring the call to an end.