

19 May 2006

STATEMENT TO THE ENQUIRY INTO AMPHETAMINES AND OTHER SYNTHETIC DRUGS

The New South Wales Users & AIDS Association Incorporated welcomes this opportunity to make a Statement to the Senate Enquiry into Amphetamines and other Synthetic Drugs.

Founded in 1989, NUAA is a peer based organisation whose mission is to advance the rights, health and dignity of people who use drugs illicitly, particularly those who inject illicit drugs.

This mission is consistent with the goals and principles underpinning the National Drug Strategy, the National Hepatitis C Strategy and the National HIV/AIDS Strategy. These national strategies compliment the public health approaches being implemented here in Australia and the World Health Organisation.

As articulated in the National Drug Strategy a *Harm minimisation approach does not condone drug use, rather it refers to policies and programs designed to prevent and reduce harm associated with both licit and illicit drugs and encompasses:*

Supply reduction strategies to disrupt the production and supply of illicit drugs and the control and regulation of licit substances;
Demand reduction strategies to prevent the uptake of harmful drug use, including abstinence orientated strategies to reduce drug use; and
Harm reduction strategies to reduce drug related harm to individuals and communities.

All health and law enforcement agencies in Australia have endorsed the approach and participate in programs delivered under the aegis of the Ministerial Council on Drug Strategy.

NUAA offers strong support for the development of healthy public policy – in NSW and nationally – consistent with recognised health promotion theory and principles with

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emphasis on preventing the spread of blood borne viruses and other harms associated with the use of illicit drugs.

NUAA is proud to have significantly contributed to Australia's record of having one of the world's lowest HIV rates among injecting drug users by providing safe injecting equipment, peer-based education/programs, informing public policy and referral/support to treatment.

Our members include people who use Amphetamines and other Synthetic Drugs within NSW.

Michael Lodge
General Manager

STATEMENT:

While NUAA does not condone or condemn the use of amphetamines and other synthetic drugs we do acknowledge the fact that use of these drugs is illegal and a potential risk to individual and community health.

We recognise that this Enquiry concentrates on one aspect of harm minimisation - *Supply Reduction*.

NUAA believes *supply reduction* strategies should not work in isolation from *Demand Reduction* and *Harm Reduction* strategies. By definition the objectives of each of the three approaches should be to minimise harms not exacerbate them.

All three components of harm minimisation need to be included in any workable policy or program around amphetamines and other synthetic drugs. Total eradication of illicit drug use through the exclusive use of supply reduction strategies is unlikely.

There is strong evidence that it is possible to minimise harms associated with the use of illicit drugs as part of healthy public policy where all three aspects of harm minimisation work cooperatively. The work of the National Drug and Alcohol Research Centre, the National Drug Research Institute, the National Centre for HIV Epidemiology and Clinical Research and the National Centre for HIV Social Research very clearly demonstrates the effectiveness of the Australian approach.

The risk of blood borne viruses through unsafe injecting of amphetamines

Research here in Australia and overseas clearly demonstrates the negative impact on rates of HIV and hepatitis C that ensue when supply reduction strategies are used in isolation from demand reduction and harm reduction strategies.

Inappropriate supply reduction strategies are often the cause of many injecting amphetamine users not accessing harm reduction and demand reduction services that provide peer based and other education around safe injecting techniques and access to treatment services.

NUAA therefore strongly urges the Enquiry not to recommend any course of action that may result in amphetamine users shifting from smoking the drug to injecting it.

In NSW, proposed amendments to the Drug Misuse and Trafficking Act would ban the glass pipes that are used to administer methamphetamines by smoking. The proposed amendments aim to deter the use of amphetamines by making it more difficult for the user to consume the drug.

However, glass pipes offer users an alternative to injecting methamphetamine and therefore substantially reduce the risk of blood borne infections and other harms associated with injecting drug use.

We draw to the Enquiry's attention the Hansard of the speech made to NSW Parliament on this subject by the leader of NSW Greens, the Hon. Lee Rhiannon MLC. (*see Attachment A*)

Providing equipment to reduce the spread of blood borne viruses among injecting amphetamine users

Safe injecting equipment is provided by Needle & Syringe Programs specifically to reduce the risk of spreading blood borne viruses among illicit drug users and the broader Australian community.

This has proved to be an outstanding success and NUAA requests the Enquiry to consider the provision of glass pipes through NSP's - rather than a ban - which will only serve to increase the demand among amphetamine users for needles and syringes and further stretch existing services.

Treatment options needed to reduce demand:

NUAA believes that treatment options reduce demand among many users who are experiencing problems related to their use and consequently contribute significantly to the overall policy goals. Effective, well resourced demand reduction strategies can enhance supply reduction strategies by bringing illicit drug users into contact with mainstream health services and specific harm reduction services.

Currently in Australia there are few targeted detoxification and rehabilitation services available to amphetamine and other synthetic drug users.

Pharmacotherapy treatments are even rarer, only really existing in a smattering of medical trials that have very limited capacity to impact on the current illicit using population. NUAA supports calls for a greater range of treatment services and for increased research on innovative treatment methods.

Supply reduction around precursor products:

NUAA is concerned that supply reduction around the precursor chemicals used in the manufacture of amphetamines and other synthetic drugs is likely to lead to the emergence of “substitute” precursors which may have a more adverse health affect than the banned precursors.

The introduction of substitute precursors also makes it hard for users to accurately measure the dose of the substance; increasing the risk of overdose or other harms.

There is no currently no funded harm reduction or demand reduction strategy to educate amphetamine users about the risks of new and emerging substitutes; which would be the consequences of a supply reduction strategy only.

Law enforcement and street based use:

NUAA's submission to the NSW Ombudsman on the Use of Drug Detection Dogs, found that law enforcement using drug detection dogs only, often increases the amount of the drug used in any one episode and the likelihood of consuming drugs in high risk environments, where overdose prevention and support services are not readily available.

NUAA therefore urges this Enquiry to consider the risks to the health of amphetamine users that could occur when supply reduction and law enforcement activity leads to risky patterns of use and other unintended consequences.

By working cooperatively with harm reduction and demand reduction services, law enforcement agencies can be better informed about dependency, poly drug use and emerging patterns of use. The National Police Research Institute should be resourced to develop effective integrated strategies that can be easily implemented in all jurisdictions.

NUAA would also like to draw the Enquiry's attention to the *“Evaluation of Australian Drug Anti-Trafficking Law Enforcement”* study which was a research project conducted on

behalf of the National Police Research Institute by Dr Adam Sutton and Dr Steve James in 1996. The study makes some very sensible and responsible recommendations about drug law enforcement in Australia and warns of the unintended consequences of indiscriminate targeting of individual users.

Conclusion

NUAA urges this Enquiry to make recommendations supporting the well tested policy approach of harm minimisation and reinforce the importance of ensuring co-operative strategies continue to underpin the Australian responses to drug use. The consequences of pursuing an exclusive zero-tolerance based, supply reduction strategy will be to increase the burden of preventable infectious disease throughout Australian communities.

ATTACHMENT A

Subject: Proposed ban on the sale of glass pipes:

The Hon Lee Rhiannon MLC:

If the bill is passed it will be an offence to sell, commercially supply, or display ice pipes in a shop for sale. A ban on possessing and selling ice pipes will not reduce the use of the drug known as ice.

The risk run by this bill is that ice users will turn away from pipes to more dangerous means of using drugs. Experts advise that this may take the form of injecting the drug or smashing up light bulbs to use them as a vessel to heat and inhale the drug. Both these alternatives carry the risks of spreading blood-borne viruses, including HIV, and hepatitis A, B and C. This proposal also carries the risk of infection if ice users are forced to re-use old and broken glass pipes. This bill also leaves open the question of what exactly is an ice pipe. The bill has a definition but it is not very helpful. The bill defines an ice pipe as:

(a) a device capable of being used for the administration of a prohibited drug by means of the smoking or inhaling of the smoke or fumes resulting from the heating or burning of the drug in a crystal or powder form, or

(b) a device that is apparently intended to be such a device but that is not capable of being so used because it needs an adjustment, modification or addition."

After reading that definition, one would have to say that we are not any wiser. The bill begs the question: How will it be proved in a court of law that somebody's pipe was intended for use for tobacco or ice? We face the same debacle with the banning of bongos for smoking marijuana. Lawyers tell us of the difficulties faced when trying to define a bong. Is a milk carton with two straws sticking out of it a bong? Our courts will hear similar arguments about ice pipes. As an eminent drug expert, Dr Alex Wodak, has advised, this is a nonsense on stilts. Shopkeepers who sell pipes will be unjustly caught by the provisions in the bill. Glass pipes are apparently on sale now in tobacconists, displayed alongside bongos, scales and lighters. One would have to say that it is grossly unfair for a tobacconist to face a two-year gaol term because he or she overlooks a glass pipe on display, or is ignorant about its use, or is unaware of the law.

A two-year gaol term is a long time. Arresting such a person will not save lives or change the pattern of drug abuse on our streets. The sad reality is that drugs are readily available

and are being used in our society, and they will continue to be used. The prohibition approach, which is reflected in legislation such as this, will do nothing to reduce drug use, save lives or make our community safer. The Greens would love a world that is free of drug abuse. However, we recognise that no matter what we say in this House and no matter how tough any legislation we pass, illicit drug use will continue. We must ensure that when drugs are used they are used as safely as possible to minimise harm to drug users.

Hansard: The Hon Lee Rhiannon MLC - [Legislative Council](#) » [07/03/2006](#) »