



ACT
Government

ACT Health

The future of alcohol, tobacco and other drug policy in the ACT

Work over the next three years

Purpose of the session

- Reflect on what we've heard
- Highlight what we know and what we need to find out
- Set out forward work plan for ATOD policy and linkages between different pieces of work

SETTING THE SCENE

What we've heard – strengths

- Well-functioning, engaged treatment and support services
- Low AOD use relative to other jurisdictions
- Country-leading initiatives
- High levels of consumer satisfaction
- Second highest rate among Australian states and territories for diversion from criminal justice system for minor drug offences

‘ACT’s AOD rehabilitation services demonstrate on a daily basis that recovery from addiction is possible.’ – submission to Select Committee Inquiry.

What we've heard – opportunities

- Increase access to evidence-informed, effective and affordable treatment and support services, for people who use drugs, their families and carers
- Workforce sustainability
- Improve linkages between services, particularly AOD and mental health
- Access to community housing (e.g. post treatment)
- Increase proportion of diversions from criminal justice system
- Reduce harms from alcohol and tobacco – targeted responses
- Further work to prevent and reduce overdoses
- Strengthen data collection and analysis
- Infrastructure preservation and capacity
- Streamlining administration
- Funding – sustainability of services

Parliamentary Agreement and Election Commitments

- Set out a number of clear Alcohol and Other Drug priorities
 - Double the existing funding for services to address drug and mental health co-morbidity
 - Introduce permanent pill testing at all ACT festivals and other sites
 - Pilot a safe drug consumption site
 - Train GPs to better understand the medicinal cannabis scheme
 - Enhance drug diversion pathways for law enforcement
 - Work with Aboriginal Health and Community Services to deliver a culturally appropriate residential alcohol and other drug rehabilitation service for the ACT Aboriginal and Torres Strait Islander community
 - a multidisciplinary service to support young people who have mental health needs co-occurring with trauma, disability or drug and alcohol use

Parliamentary and Governing Agreement

- Parliamentary and Governing Agreement (PAGA), Appendices 1 and 2 = Agreed **Government** priorities
- Later PAGA Appendices 3 and 5 = **Labor** and **Greens** policy priorities respectively – subject to Budget considerations
- What does this mean?

Known Priorities

Known priorities for the next two years:

- New Alcohol, Tobacco and Other Drug Plan
- Commissioning
- Aboriginal and Torres Strait Islander Alcohol and Other Drug Residential Rehabilitation and broader Watson Precinct
- Fixed Site Pill Testing
- Medically Supervised Injecting Facility
- Drugs of Dependence Amendment Bill

FUTURE ACT BUDGET CYLES

Future ACT Budgets

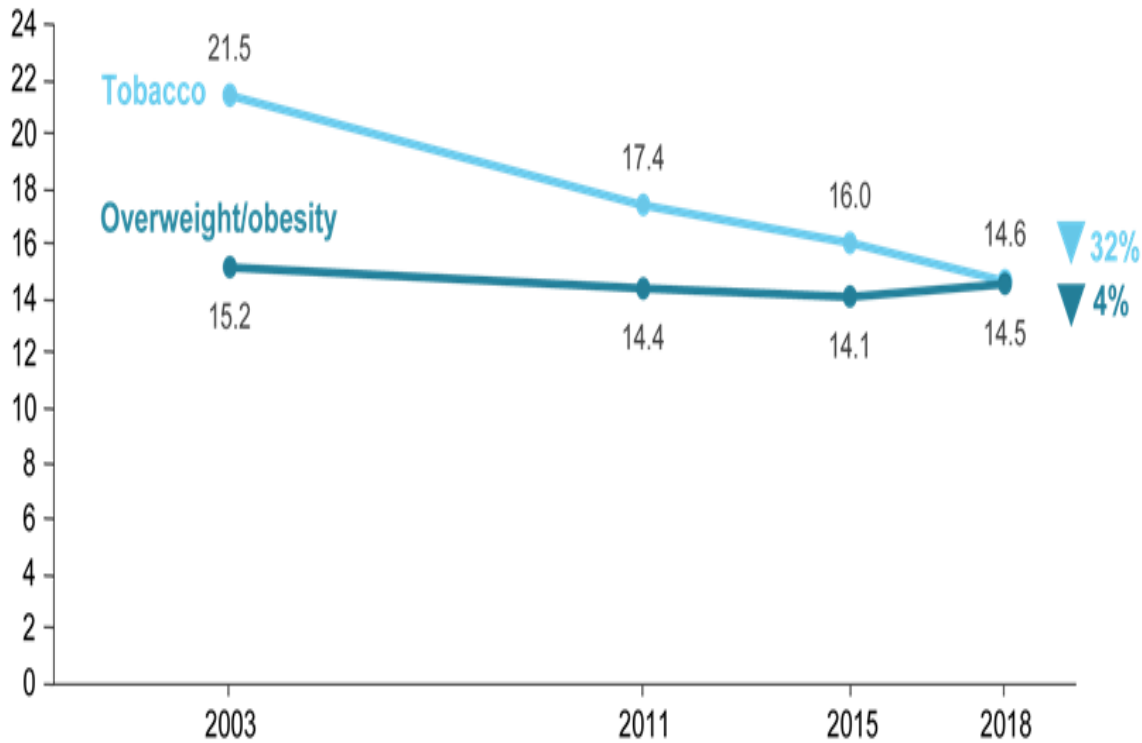
- May provide opportunities for further funding for services beyond the existing allocation
- Now is the time to start thinking about the next budget
- While budget considerations are confidential, we do want to work together on understanding the needs

ALCOHOL AND OTHER DRUG TREATMENT AND DRUG USE

Review of ACT Data

Tobacco use

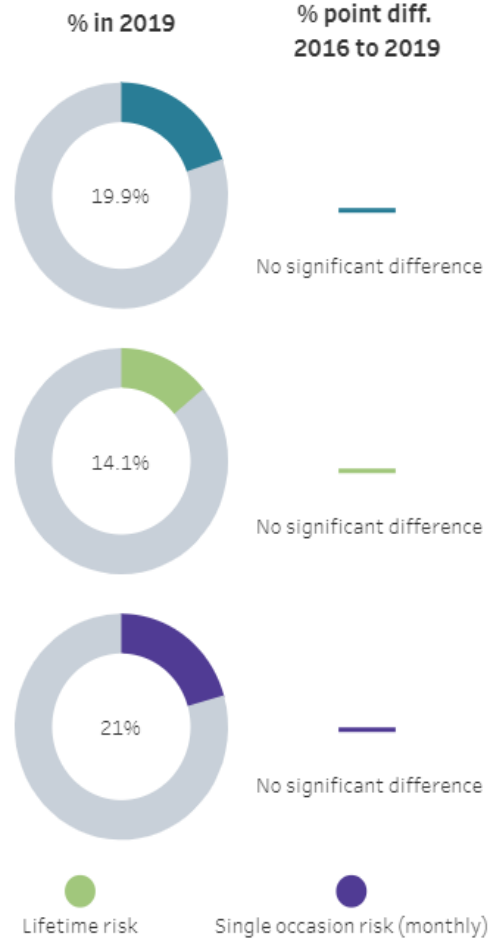
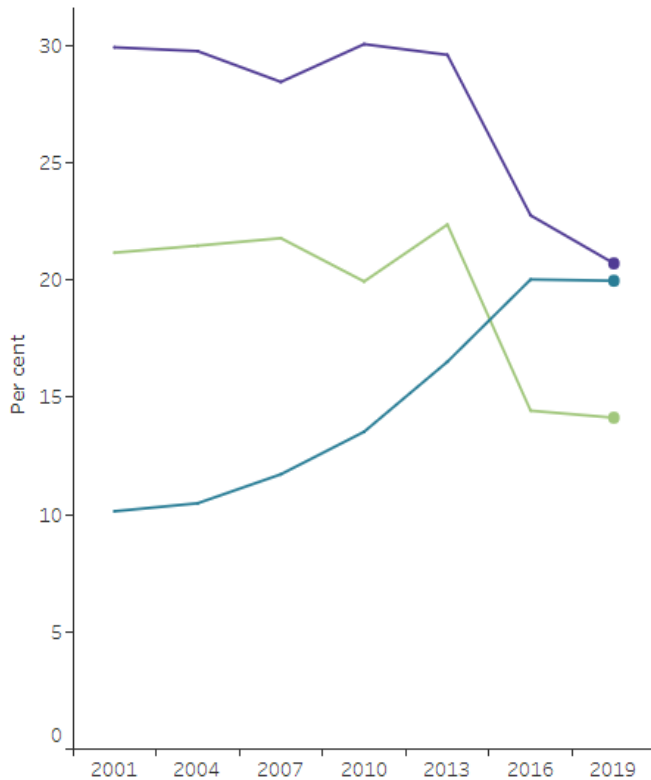
Age-standardised rate per 1,000 people



ACT Smoking Status	2001 (%)	2019 (%)	Change (%)
Never smoked (14+)	50	69	+19
Never smoked (18-24)	48	86	+38
Daily smokers (14+)	18	8	-10
Daily smokers (18-24)	31	10	-21
Ex smokers (60+)	47	31	-16

Alcohol consumption

Alcohol risk type, people aged 14+ in Australian Capital Territory, 2001 to 2019 (per cent)



ACT Drinking Status	2001 (%)	2019 (%)	Change (%)
2 standard drinks per day (14+)	21	17	-4
2 standard drinks per day (25-29)	24	18	-6
2 standard drinks per day (50-59)	22	21	-1
2 standard drinks per day (60+)	15	15	-
*Abstainer (14+)	17	24	+7
Abstainer (25-29)	9	24	+15
Abstainer (50-59)	17	17	-
Abstainer (60+)	27	24	-3



Select a status to highlight data for that category

Abstainer

Lifetime risk

Single occasion risk (monthly)

COVID-19 AOD snapshot

ACT COVID-19 Trends:

- Reduced consumption of recreational drug use during lockdowns, particularly for MDMA (ecstasy) and cocaine
- Increased use of cannabis during 1st lockdown and record use June 2020
- Rates of nicotine consumption remained high throughout 2020
- *Alcohol consumption trends were mixed (highest in June 2020), although accessibility increased due to on-demand alcohol
- **Heroin consumption reached a 4-year high August 2020.
- Perceived purity of ecstasy and cocaine was lower in 2021 than 2020.
- Perceived purity of heroin was higher in 2021 than 2020.

Table 1: Trends in alcohol consumption during COVID-19

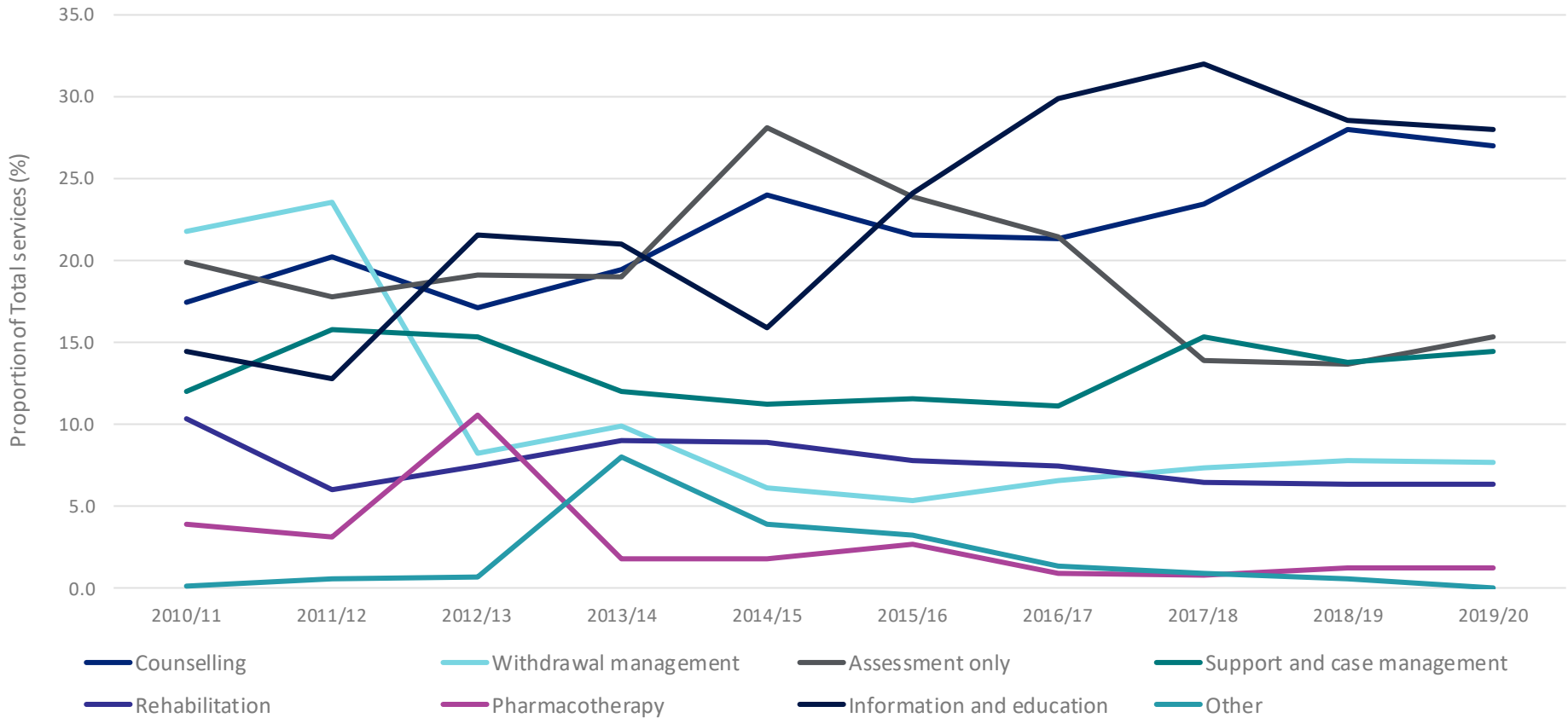
Decreased alcohol consumption during COVID-19	Increased alcohol consumption during COVID-19
<ul style="list-style-type: none">• Young people aged between 18-25• Young women aged 26-35• Men aged 51-65	<ul style="list-style-type: none">• Women aged 36-50• People experiencing high levels of stress• Men with a decrease in hours worked

Drug use and harm

- Use of all illicit drugs has reduced from 2001 to 2019 with the exception of cocaine (2001=1.5%, 2019=3.5%).
- There has been no significant change in the rate* of ambulance attendances related to drug use from 2015 to 2020.
- There has been no significant change in the rate of drug induced suicides, unintentional drug induced deaths and total drug induced deaths in the ACT from 2005 to 2019.
- Illicit drug use contributed to 2.7% of disease burden in 2015
- Rates of clients receiving pharmacotherapy treatment has not changed significantly from 2005 to 2020 in the ACT or Australia.

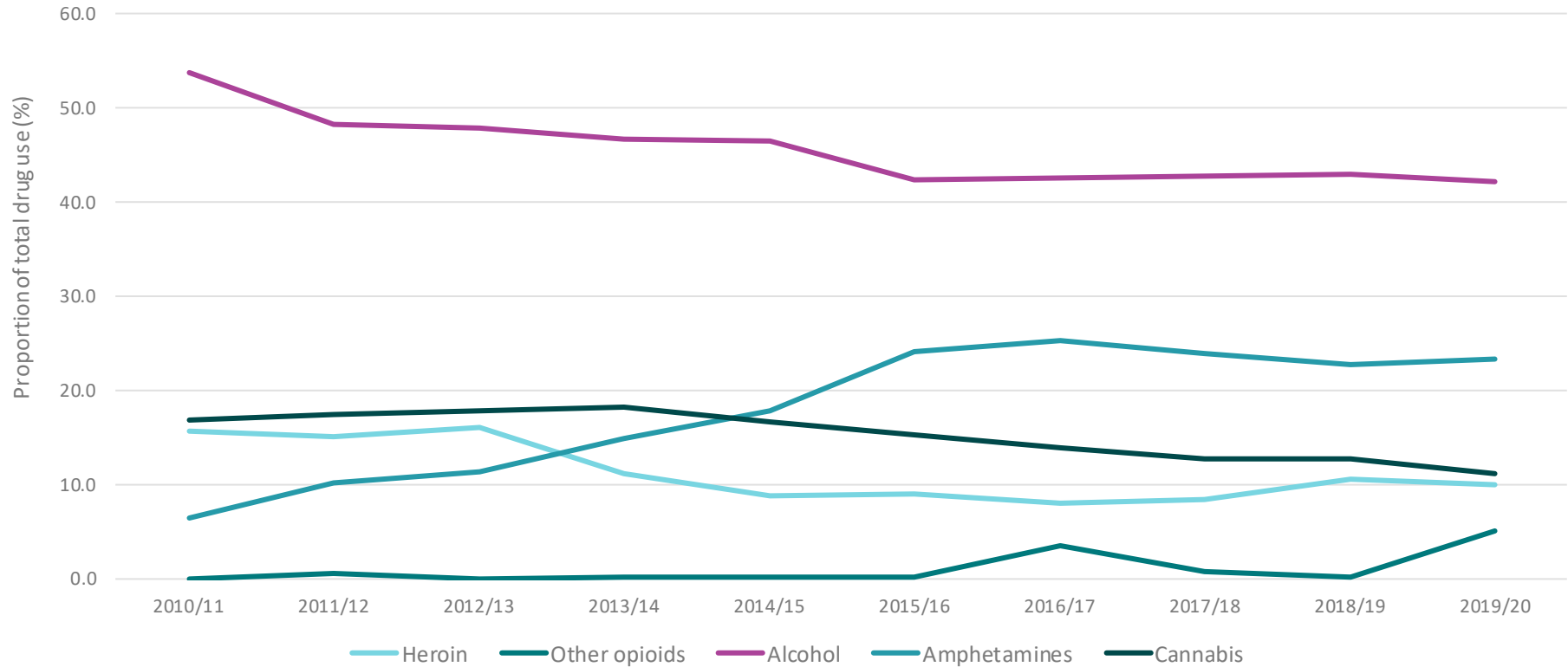
AOD treatment services

AOD treatment services, closed episodes in the ACT, 2010/11 to 2019/20



AOD treatment services

AOD treatment services - closed episodes for own drug use in the ACT 2010/11 to 2019/20



Context – treatment

Over the period 2015–16 to 2019–20 in ACT:

- **alcohol** remained the most common principal drug of concern in AOD treatment episodes (42%)
- **amphetamines** was the second most common principal drug of concern, but decreased from 25% in 2016–17 to 23% in 2019–20
- the proportion of closed episodes for **cannabis** as the principal drug of concern has steadily declined (15% to 11%)

Client profile

(based on a one day snapshot)

58.3% male
37.5 years mean age
31.0% Aboriginal and/or
Torres Strait Islander
20.4% with a disability
49.9% over 18+ with Year
10 or less as their highest
level of education

61.2% of adults are
parents
69.5% unemployed or not
working
30.1% homeless or at risk
of homelessness
88.6% living in the ACT
(1/5th in Tuggeranong)

75.3% said their drug use had reduced as a result of using
the service

Most frequently requested type of ancillary service –
housing (13.8%)

Postcode

Table A5.5: Proportion of closed episodes of care for the ACT, NSW and other states/territories (ACT, 2019-20)

(Source: ACT AODTS-MDS, 2019-20)

State/ Territory	Area	Frequency	Proportion (%)	Frequency	Proportion (%)
ACT	ACT-Belconnen	1113	17.3	5146	79.9
	ACT-North Canberra	1049	16.3		
	ACT-South Canberra	361	5.6		
	ACT-Gungahlin & Hall	521	8.1		
	ACT-Jerrabomberra & Majura	72	1.1		
	ACT-Tuggeranong	1090	16.9		
	ACT-Weston Creek & Molonglo Valley	311	4.8		
	ACT-Woden Valley	419	6.5		
	ACT-Shared postcodes 2618 and 2620*	146	2.3		
	ACT-No fixed address †	64	1.0		
NSW	NSW-shared postcodes 2618 and 2620*	371	5.8	1090	17.0
	NSW-Illawarra & South East NSW	411	6.4		
	NSW-Riverina	112	1.7		
	NSW-Central & Northern Sydney	47	0.7		
	NSW-Southern & South Western Sydney	43	0.7		
	NSW-Western NSW	24	0.4		
	NSW-Western Sydney & Blue Mountains	18	0.3		
	NSW-Hunter & Central Coast	21	0.3		
	NSW-North Coast & Mid North Coast	16	0.2		
	NSW -New England	10	0.2		
	NSW-No fixed address †	17	0.3		
	Other states/ territories	States and Territories other than NSW, including those with 'no fixed address' †	80		
Unknown/ Not stated/inadequately described		122	1.9	122	1.9
Total		6438	100.0	6438	100.0



Postcode by treatment setting

Table A5.6: Proportions of episodes of care for service users of ACT AOD services from within and outside the ACT, by treatment setting* (Source: ACT AODTS-MDS, 2019-20)

Location‡	Treatment setting		
	Non-residential treatment facility, Home, Outreach and Other†	Residential treatment facility	Total
ACT	87.7	12.3	100.0
Outside ACT (NSW & other states/ territories)	70.2	29.8	100.0
Not stated/ inadequately described/ unknown	92.6	7.4	100.0
Total	84.6	15.4	100.0

Table A5.7: Proportions of episodes of care for service users of ACT AOD services accessing various treatment settings, by postcode region* (Source: ACT AODTS-MDS, 2019-20)

Location‡	Treatment setting		
	Non-residential treatment facility, Home, Outreach and Other†	Residential treatment facility	Total
ACT	82.9	63.8	79.9
Outside ACT (NSW & other states/ territories)	15.1	35.3	18.2
Not stated/ inadequately described/ unknown	2.1	0.9	1.9
Total	100.0	100.0	100.00

NEXT ALCOHOL, TOBACCO AND OTHER DRUG PLAN

New Alcohol, Tobacco and Other Drug Plan – The National Context



Demand Reduction

Preventing the uptake and/or delaying the onset of use of alcohol, tobacco and other drugs; reducing the misuse of alcohol, tobacco and other drugs in the community; and supporting people to recover from dependence through evidence-informed treatment.



Supply Reduction

Preventing, stopping, disrupting or otherwise reducing the production and supply of illegal drugs; and controlling, managing and/or regulating the availability of legal drugs.



Harm Reduction

Reducing the adverse health, social and economic consequences of the use of drugs, for the user, their families and the wider community.

Drug Strategy Action Plan (DSAP) Review

- A policy review, co-drafted with ATODA and DSAP Advisory Group Research Advisor, to inform development of the new ATOD Plan
- Draft will soon be out for feedback
- DSAP Review and DSAP final progress report – expected by December 2021

Thoughts on Governance Model

- DSAP Advisory Group – engagement challenges
- Possible governance model for ATOD Plan:
 - Smaller ATOD Plan implementation group
 - Separate, broader AOD community of practice
 - Joint responsibility for implementation



Thoughts on ATOD Plan Structure

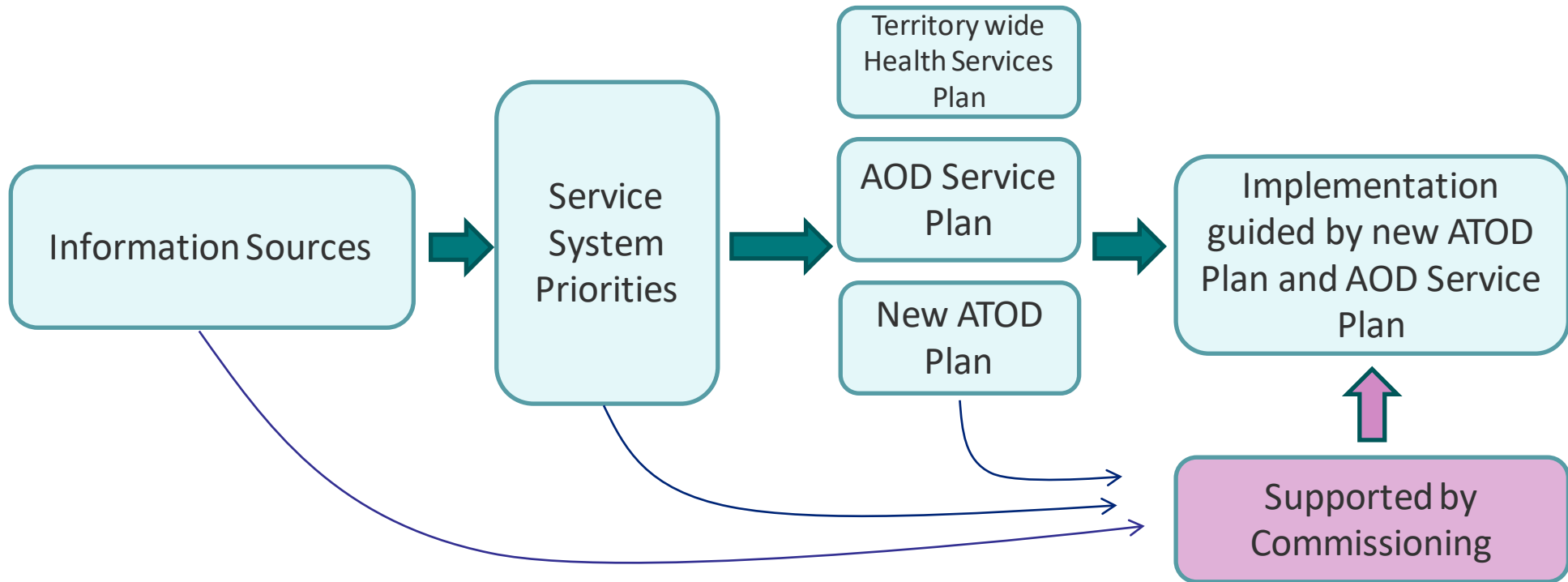
- Forward thinking strategic policy document
- Limited to 5 or 6 high level and measurable objective outcomes
 - Reflecting the National Drug Strategy but not bound or limited by it
- Identified key strategic actions to meet objectives clearly linked to outcomes
 - Will include already identified priorities and election commitments
- Does not include statements on business as usual
 - But can and should discuss improvements to existing systems and services, not just the new and novel

COMMISSIONING

Commissioning

- Short-term contract extension to allow for a full collaborative design process, within existing funding allocation
- Under priority areas set by new ATOD Plan
- System-wide needs assessment first, focusing on service types as set out in National Treatment Framework, Alcohol and Other Drug Treatment Services National Minimum Data Set
- Current Services not included in the National Treatment Framework remain important and will continue to be included in the commissioning conversation
- Where services can't be funded within existing allocation, Budget bids may be considered

Process and flow of evidence



How will we collaborate?

- You will have opportunities to input into these processes and shape the future of ACT ATOD policy through:
 - Discussion papers
 - 1:1 meetings and small groups
 - Workshops
- How we engage and the topics of the engagement will be decided mutually

Timeline for Commissioning

- Active consultation period - Nov 2021 to Sept 2022
- Contract discussions with existing providers - Nov/Dec 2021
- Finalise variations for existing providers - Dec 2021
- Consultation – Currently funded services - Jan 2022
- Consultation – Defining services needed - Jan/Feb 2022
- Consultation – Gap analysis - Mar/Apr 2022
- Collaborative Design - April to Sept 2022
- Tender process - Nov/Dec 2022
- Finalisation of Tender - Dec 2022 to February 2023
- Contracts Signed - June 2023
- Transition arrangements - July to December 2023

Benefits

- Efficiencies in use of the co-design work with the sector to inform multiple processes with internal connections
- A planned approach to funding and investment priorities for the sector
- Embedding this practice into ATOD policy annual processes, so you can provide input into Government processes in a coordinated and timely fashion

Questions/comments?

Contact Us
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