MINISTERIAL COUNCIL ON DRUG STRATEGY

JOINT COMMUNIQUE

15th May 2006

The Ministerial Council on Drug Strategy (MCDS), the peak national policy and decision-making body for licit and illicit drugs, met in Perth today to consider national drug issues. The Council comprises the Australian Government and State and Territory Health and Law Enforcement Ministers, including Justice and Police Ministers and the Australian Government Minister for Education.

Today's meeting was chaired by the WA Parliamentary Secretary to the Attorney General and Minister for Health and Electoral Affairs Minister, Ms Sue Ellery.

Issues discussed by the Ministers included:

National Cannabis Strategy:

Cannabis is the most widely used illicit drug in Australia and in response to this, Ministers today endorsed Australia's first National Cannabis Strategy 2006-2009 which will build on the achievements of the States and Territories. The Strategy has a strong prevention emphasis with a range of actions recommended to set national priorities for targeting cannabis production, supply and use. The Strategy focuses on reducing public acceptability of cannabis, research into usage rates and the link between cannabis use and poor mental health, providing education on the harms associated with use, a range of law enforcement supply reduction strategies, developing the capacity of the health sector to address cannabis problems and investigating and encouraging treatment of cannabis addiction, including diversion programs.

National Alcohol Strategy:

Ministers today endorsed the National Alcohol Strategy 2006-2009, which was developed as a response to the patterns of problematic alcohol use that have become prevalent in Australia. The aim of the new Strategy is to develop safer drinking cultures in Australia to produce healthier outcomes for all Australians. This will be accomplished through a coordinated approach that addresses intoxication; public safety and amenity; health impacts; Indigenous cultural place and availability. Council members have asked the Intergovernmental Committee on Drugs (IGCD) to identify four or five key actions areas to be dealt with as a matter of priority. The responsibility for implementing the recommendations is spread across the Australian and State and Territory Governments and across portfolios and stakeholder groups. The recommendations from the Strategy will guide the development and implementation of a policy framework to respond to alcohol-related harm in Australia. Each year approximately 3,000 people die as a result of excessive alcohol consumption and around 65,000 people are hospitalised.

Monitoring of Alcohol advertising:

Ministers received a report on the self-regulatory system for alcohol advertising, noting that since Ministers last discussed this issue, a number of improvements had been made. These included greater consideration of public health issues when reviewing alcohol-related

advertising complaints, increasing government involvement, inclusion of internet advertising in the Alcohol Beverages Advertising Code, a formal avenue for complaints regarding alcohol advertisements on the internet and a greater number of complaints on alcohol advertising being upheld.

Ministers agreed this work needed to continue and established a Monitoring of Alcohol Advertising Committee. The ongoing monitoring of the self-regulatory system for alcohol advertising will ensure that alcoholic beverages are advertised appropriately and according to community standards.

Standard Alcohol Drinks Logos Initiative:

Ministers endorsed a voluntary national standard drink logo for alcohol products, which was developed in partnership with the alcohol industry. Ministers also requested that the alcohol industry report back to Ministers in May 2007 on the industry's uptake of the logos. Having a standard drink logo on alcohol products promotes responsible alcohol consumption.

Fetal Alcohol Spectrum Disorder:

The incidence and prevalence of Fetal Alcohol Spectrum Disorder (FASD) in Australia, together with the risks associated with alcohol consumption during pregnancy, have resulted in significant debate among health professionals. In response Ministers commissioned a working party to progress this issue on a national level, which is led by the South Australian Government. Ministers received a presentation from Professor Carol Bower, Telethon Institute for Child Health Research and a member of this Working Group. Ministers noted the work in development including an audit of all activities currently being undertaken across governments, the development of specific initiatives to address the higher incidence of FASD in Indigenous Australians and improvements in the diagnosis and appropriate referral of children and adults with FASD.

Inhalants abuse:

Ministers received a report from the National Inhalant Abuse Taskforce, commissioned in 2003 to consider existing initiatives, programs and strategies, including current best practice, and to make recommendations for a national response to inhalant abuse. The report recommended a National Framework for Addressing Inhalant Abuse which includes the establishment of a National Inhalant Abuse Clearinghouse, the development of targeted information resources, the development of national treatment guidelines, increasing private sectors involvement in inhalant abuse initiatives and reducing the supply of abusable products. Ministers noted this important work and commissioned a Working Group to further progress this work.

Amphetamines:

Ministers commissioned the development of a national strategy to coordinate effort to reduce the harms of amphetamines and other dangerous pyschostimulants (ATS) noting that work is already underway to develop the law enforcement component of the national strategy. ATS is now recognised as the major illicit drug threat facing Australia, with the production and use of ATS posing significant health risks to users, illicit manufacturers, the general community and first responders attending clandestine laboratories. All jurisdictions have already instigated initiatives to target drugs such as crystal methamphetamine or 'ice' as well as 'speed'. This new national approach will take jurisdictional efforts to the next level. The Australian Government has committed \$34 million to combat the effects of pyschostimulants and some of this money will be used to fund the development of the strategy.

Clinical Guidelines in the treatment of opioid dependence:

Ministers endorsed a revision of the National Clinical Guidelines and Procedures for the use of Buprenorphine in the Treatment of Opioid Dependence, which have been in place since 2001 and are referenced by all States and Territories. The revision has been necessitated by the introduction of a new opioid pharmacotherapy, Suboxone®, which is now listed on the Pharmaceutical Benefits Scheme. The revision also reflects changes in research and clinical knowledge of pharmacotherapies use in the treatment of heroin dependence.

Precursor chemicals:

Ministers received an update on the achievements of the National Working Group on the Prevention of the Diversion of Precursor Chemicals into Illicit Drug Manufacture. This Working Group brings together 45 members from Australian Government, State and Territory law enforcement agencies, forensic and health services, and the pharmaceutical and chemicals industry. The Working Group focuses on implementing the Australian Government's \$5.4 million National Strategy to Prevent the Diversion of Precursor Chemicals into Illicit Drug Manufacture, with the goal of addressing gaps or weaknesses in the precursor chemical environment which may be exploited by illicit drug manufacturers.

Drink Spiking:

Ministers responded to the issue of drink spiking by commissioning the National Project on Drink Spiking in 2003 under a cost shared funding arrangement. Under this project, the Australian Institute of Criminology produced a report on the extent of drink spiking and associated criminal victimisation, which documented the current legislative and procedural arrangements and identified communication and educational initiatives in this area. At the meeting Ministers received a report on the development of awareness raising resources for police, liquor industry staff and hospital emergency staff. Ministers agreed that drink spiking posters and information cards should be disseminated to police, the liquor industry and hospital emergency departments.

National Aboriginal Workforce Program:

Ministers noted a presentation by the Western Australia Parliamentary Secretary to the Minister for Health and Ms Wendy Casey from the Western Australia Drug and Alcohol Office on the National Aboriginal Workforce Program previously commissioned by Ministers. The Program aims to reduce alcohol and other drug related harm through sustainable workforce development and capacity building in Indigenous Communities. Part of the project is the development of a National Indigenous Alcohol and other Drug Train the Trainer Program which has developed culturally secure resources for frontline workers to use in Indigenous Communities. The Drug and Alcohol Office, Western Australia leads this three year project in collaboration with Queensland, South Australia, Northern Territory, Tasmania, ACT and New South Wales. Minister also noted progress made by against improving indigenous data collection around drug and alcohol issues, indigenous smoking cessation, indigenous alcohol management programs and policing responses to indigenous communities.

Media contact: Kay McNiece 041213258