

Submission to the Inquiry on Crystal Methamphetamine (Ice)

June, 2015



NATSILS

**NATIONAL ABORIGINAL & TORRES
STRAIT ISLANDER LEGAL SERVICES**

Table of Contents

1. About NATSILS	2
2. Introduction	2
3. The nature, prevalence and culture of methamphetamine use in Australia, including in indigenous, regional and non-English speaking communities	3
4. Strategies to reduce the high demand for methamphetamines in Australia	4
5. Concluding Comments	6

1. About NATSILS

1.1. National Aboriginal and Torres Strait Islander Legal Services (NATSILS) is the peak national body for Aboriginal and Torres Strait Islander Legal Services (ATSILS) in Australia. NATSILS brings together over 40 years' experience in the provision of legal advice, assistance, representation, community legal education, advocacy, law reform activities and prisoner through-care to Aboriginal and Torres Strait Islander peoples in contact with the justice system. The ATSILS are the experts on the delivery of effective and culturally competent legal assistance services to Aboriginal and Torres Strait Islander peoples. This role also gives us a unique insight into access to justice issues affecting Aboriginal and Torres Strait Islander peoples. NATSILS represents the following ATSILS:

- Aboriginal and Torres Strait Islander Legal Service (Qld) Ltd (ATSILS Qld);
- Aboriginal Legal Rights Movement Inc. (ALRM);
- Aboriginal Legal Service (NSW/ACT) (ALS NSW/ACT);
- Aboriginal Legal Service of Western Australia (Inc.) (ALSWA);
- Central Australian Aboriginal Legal Aid Service (CAALAS);
- North Australian Aboriginal Justice Agency (NAAJA); and
- Victorian Aboriginal Legal Service Co-operative Limited (VALS).

2. Introduction

- 2.1. NATSILS submission to this inquiry has arisen from seriously held concerns about the prevalence of crystal methamphetamine (ice) use in Aboriginal and Torres Strait Islander communities and the response to this issue by the state and territories Governments and the Commonwealth.
- 2.2. In this submission it is argued that the issue of ice use needs to be addressed within the framework of justice reinvestment. The current approach to this issue places too much focus on law enforcement and not enough on prevention and treatment which are far more effective mechanisms for reducing drug use. This submission has drawn content from Victorian Aboriginal Legal Service Co-operative Limited (VALS) earlier submission to the Parliament of Victoria's Inquiry into the Supply and use of Methamphetamines, particularly ice in Victoria.¹

¹ Submission from the Victorian Aboriginal Legal Service, 'Inquiry into the Supply and use of Methamphetamines, particularly ice in Victoria' (13 October 2013). Accessible at: http://vals.org.au/static/files/assets/0b885b13/ParlInqu_into_Meth_sub.pdf

3. The nature, prevalence and culture of methamphetamine use in Australia, including in indigenous, regional and non-English speaking communities:

3.2. As highlighted in the National Drug and Alcohol Research Centre, UNSW Australia submission to this inquiry the prevalence of ice use and its related harms is not well captured in data.² In general, it is hard to identify how many people who are charged and/or sentenced are using ice at the time of the offence, or where ice use has contributed to their offending behaviour. Furthermore, justice data tends to mask the level of ice use because drug offences are often grouped together under a general drug offence category and drug offences are not generally the primary charge. As a result presenting data can seriously mask the actual level of ice use. The need for appropriate data and rigorous analysis was a key finding of the Parliament of Victoria: Law Reform, Drugs and Crime Prevention Committee from their inquiry into the supply and use of methamphetamine.³

3.3. Nonetheless, official national data sources have indicated that the overall use of methamphetamines has declined from 2001 to 2013 (respectively from 3.4% to 2.1% of the general population.⁴ These statistics indicate that caution should be employed so as not to overstate the extent of the issue in Australia. However, within that declining cohort, there has been an increase in those who consume methamphetamine at least weekly, doubling in the period between 2010 and 2013 from approximately 12.5% to 25% of all users.⁵

3.4. Overall there is a lack of reliable data on the use of ice in Aboriginal and Torres Strait Islander communities. Nonetheless, there has been a substantial amount of media reporting on the issue of ice use in Aboriginal and Torres Strait Islander communities.⁶ There has also been concern among ATSILS about the increasing use of ice in communities which is contributing to offending behaviour as well as increasing the complexity of client's needs.⁷

² Jenny Chalmers, Kari Lancaster, Marian Shanahan, Monica Barratt and Caitlin Hughes (On behalf of the Drug Policy Modelling Program, National Drug and Alcohol Research Centre) UNSW Australia, 'Submission to the Parliamentary Joint Committee on Law Enforcement inquiry into crystal methamphetamine' (10 June 2015) at 2-5.

³ Parliament of Victoria: Law Reform, Drugs and Crime Prevention Committee *Inquiry into the Supply and Use of Methamphetamines, Particularly Ice, in Victoria - Final report* (Parliament of Victoria, 2014).

⁴ AIHW 2014, *National drug strategy household survey detailed report 2013*, Australian Institute of Health and Welfare, Drug statistics series no. 28, Cat. No PHE 183, Canberra at 12.

⁵ *Ibid.*

⁶ See for example: Adam Harvey and Jeanavive McGregor, 'Ice addiction overtaking alcohol as biggest problem facing Indigenous Australians, rehab expert says' *ABC News*, 1 April 2015; Laura Murphy –Oates, 'Ice Sweeps through Kimberley Indigenous Communities' *SBS News*, 11 March 2015.

⁷ See for example, Submission from the Victorian Aboriginal Legal Service, 'Inquiry into the Supply and use of Methamphetamines, particularly ice in Victoria' (13 October 2013); Aboriginal Peak Organisations Northern Territory, 'Submission to the Northern Territory Legislative Assembly Select Committee on the Prevalence

3.5. However, while ice use is a serious issue in some Aboriginal and Torres Strait Islander communities NATSILS is concerned that if the issue is overstated or if there is a failure to see drug abuse within the wider socio-economic context in which it arises then poor policy recommendations may result. In NATSILS view, ice should not be separated from wider strategies to address drug and alcohol abuse. Rather, NATSILS argues that drug use, including ice, is best addressed through prevention, treatment and investing in building stronger communities as outlined in the following section.

4. Strategies to reduce the high demand for methamphetamines in Australia:

4.1. Australian governments spend an estimated \$1.7 billion on responding to illicit drugs every year.⁸ The majority of government expenditure is directed at policing and criminal justice system responses to drug offenders (64%).⁹ In NATSILS view this is a poor allocation of funds to addressing the complex issue of drug use, including ice. The need to refocus attention on prevention and treatment was made clear at the 2015 Australasian Drug Strategy Conference (March 2015) where Police Commissioners from every state stated that “they cannot arrest their way out of the problem” and that there is a need to put much greater emphasis upon prevention and treatment.¹⁰

4.2. NATSILS argues that ice (as well other drug addictions) should be treated primarily as a health issue and placed within a justice reinvestment approach. NATSILS view is that to address complex issues such as drug abuse and to achieve long-term sustainably safer communities, government reform needs to address the underlying causes of criminal behaviour through justice reinvestment measures. A justice reinvestment approach seeks to treat the underlying causes of offending to prevent crime before it happens and applies evidence-based treatment and economic rationality to dealing with those who continue to offend.

4.3. In particular when offenders are affected by ice there is a need for a greater emphasis on and investment in:

- Drug diversion schemes. These should be made widely available in all the states and territories and their use encouraged within the police force. The range of offences for which this form of diversion should be available should also be widened.

Impacts and Government Responses to Illicit Use of the Drug known as “Ice” in the Northern Territory’ (13 May 2015).

⁸ Jenny Chalmers, Kari Lancaster, Marian Shanahan, Monica Barratt and Caitlin Hughes (On behalf of the Drug Policy Modelling Program, National Drug and Alcohol Research Centre) UNSW Australia, ‘Submission to the Parliamentary Joint Committee on Law Enforcement inquiry into crystal methamphetamine’ (10 June 2015) at

5.

⁹ *Ibid*, at 5.

¹⁰ *Ibid*, at 6.

- Drug counselling, including both residential and community based rehabilitation options, psychological and psychiatric counselling, anger management and family violence counselling services.
- Increasing resources for prison support and through-care projects which provide intensive pre and post release case management.
- Culturally appropriate and safe programs for Aboriginal and Torres Strait Islander peoples, greater recruitment of Aboriginal and Torres Strait Islander health and justice workers and intensive training for service staff to ensure culturally competency.¹¹

4.4. Research from Deloitte Access Economics undertaken on behalf of the Australian National Council on Drugs supports the argument that drug diversion schemes would be substantially cheaper and more effective than prison. This report found that the total financial savings associated with diversion to community residential rehabilitation compared with prison is \$111 458 per offender.¹² The report concluded that, “[a]s the residential treatment scenario is lower cost and is associated with better outcomes than incarceration, it is clearly the more advantageous investment.”¹³ NATSILS concurs with this assessment and argues that more investment is needed in these vital services.

4.5. It is NATSILS experience that drug and alcohol treatment services are currently not available or equipped to adequately meet the specific needs of Aboriginal and Torres Strait Islander young people, women, those who have serious involvement in the criminal justice system, and those with co-morbidities (such as mental health issues). In this regard, it should be noted that Aboriginal and Torres Strait Islander people are at higher risk of complex trauma because of the legacy of colonisation, stolen generation policies, loss of land and ongoing racism and discrimination which places them at greater risk of drug abuse. Aboriginal community controlled health services (ACCHSs) are best placed to deal with the breadth of issues faced by Aboriginal and Torres Strait Islander drug users including poor physical health, risk of blood borne viruses, mental health problems (depression, anxiety and psychosis) and family issues including detrimental effects on children.¹⁴

4.6. Furthermore, while crisis intervention programs are the most obvious and critical need, broader community programs that invest in young people and build the strength of communities provide the best long term return on investment. For Aboriginal and Torres Strait Islander people, particularly young people, there is a pressing need for programs that

¹¹ Submission from the Victorian Aboriginal Legal Service, ‘Inquiry into the Supply and use of Methamphetamines, particularly ice in Victoria’ (13 October 2013).

¹² Deloitte Access Economics (National Indigenous Drug and Alcohol Committee, Australian National Council on Drugs) *An Economic Analysis for Aboriginal and Torres Strait Islander Offender: Prison vs Residential Treatment* (ANCD research paper 24, August 2012) at xi.

¹³ Ibid, at xi.

¹⁴ Aboriginal Peak Organisations Northern Territory, ‘Submission to the Northern Territory Legislative Assembly Select Committee on the Prevalence Impacts and Government Responses to Illicit Use of the Drug known as “Ice” in the Northern Territory’ (13 May 2015).

build strength and resilience through cultural identity. While all programs should be culturally safe, programs that focus on Aboriginal culture have been shown to have positive effects on self esteem and build aspirations for the future.

4.7. Conversely NATSILS would warn against:

- Drug testing being made a condition of receiving Centrelink payments.
- Extended police powers to conduct searches on people or vehicles.
- Mandatory sentencing for drug offences.
- Tough on crime approaches to tackling the complex issue of drug abuse.

4.8. In NATSILS view, such measures would be poor policy and allocation of resources that could be better diverted to prevention and treatment.

5. Concluding Comments:

5.1. Available data and the experiences of the ATSILS indicates that ice is a serious issue and causes serious harm in communities, particularly Aboriginal and Torres Strait Islander communities. Evaluating the extent of its prevalence and harm however, is difficult with current data and more effective data is needed in order to ensure that policy responses are evidence based.

5.2. NATSILS is concerned that punitive approaches to drugs are ineffective and don't address many of the issues which underlie addictions. In NATSILS view ice should be treated primarily as a health issue and placed within a new justice reinvestment approach that seeks to treat the underlying causes of offending. It is also pivotal that any strategy is an integrated response between Government departments, non-government organisations and the community.