

Senate Community Affairs Committee

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH PORTFOLIO

Budget Estimates 2014 - 2015, 2/3 June 2013

Ref No: SQ14-000507

OUTCOME: 1 - Population Health

Topic: Drug rehabilitation services

Type of Question: Written Question on Notice

Senator: Xenophon, Nick

Question:

The 2013 UN World Drug Report found that drug use in Australia is rising or already at high levels in several areas, including the use of cocaine, cannabis, Amphetamine-type stimulants (or ATS) and new psychoactive substances (NPS).

- a) Is Australia's current approach to drug use effective enough to deal with this rise in usage?
- b) How can Australia's health system cope with this increase when funding is reduced?
- c) The Government's approach seems to be to return responsibility for health matters to the states, but drug use and addiction requires a national approach. How will the department deal with this?
- d) Sweden has responded to drug challenges by creating legislation that allows substances to be banned or restricted on the basis of the damage they cause to health. Have similar measures been considered for Australia?

Answer:

- a) Australia's approach to dealing with illicit drugs follows the overarching framework set out by the National Drug Strategy 2010-2015 (The Strategy). The Strategy is a product of agreement between the Commonwealth, state and territory governments, and extensive community and sector consultation. The Strategy strives for a balanced, evidence based approach to tackling drug use in the community that incorporates law enforcement, prevention, early intervention and health care strategies. The collaboration between health and law enforcement has been one of the major strengths of Australia's response to drug misuse since the inception of the first National Drug Strategy in 1985.

The key findings of the 2013 National Drug Strategy Household Survey indicate that overall use of illicit drugs including misuse of pharmaceuticals is stable. Use of illicit drugs in the last 12 months by people aged 14 years or older was 15.0% in 2013, compared to 14.7% in 2010, but this increase is not statistically significant. The proportion of people reporting illicit drug use has declined overall since 1998 (22.0%). Additional detail is provided at [Attachment A](#). For more information on the National Drug Strategy Household Survey, please see the following link

- b) The Department of Health is currently undertaking a review of the drug and alcohol prevention and treatment services sector. The review aims to identify current funding patterns, current and future service needs, service delivery gaps, and inform future priorities and planning processes. This will help focus future government funding activities to ensure resources are used as efficiently and effectively as possible to deliver quality, sustainable drug and alcohol services that respond to the needs of individuals, families and communities.
- c) See a) above.
- d) Australia is pursuing an approach based on a precautionary prohibition of the import of substances with a psychoactive effect but which do not have a legitimate use. The scheme will work in parallel with existing regulatory schemes and is intended to fill the gap between when New Psychoactive Substances first appear, and when they are placed under scheduled control. The *Crimes Legislation (Psychoactive Substances and Other Measures) Bill 2014* was introduced into the Parliament on 17 July 2014. This new legislation, when enacted, will prohibit the import of substances with a psychoactive effect which do not have a legitimate use.

ATTACHMENT A

Summary of recent^(a) illicit use of drugs, people aged 14 years or older, 1998 to 2013 (per cent)

Drug	1998	2001	2004	2007	2010	2013
Illicit drugs (excluding pharmaceuticals)						
Cannabis	17.9	12.9	11.3	9.1	10.3	10.2
Ecstasy ^(a)	2.4	2.9	3.4	3.5	3.0	2.5#
Meth/amphetamines ^(b)	3.7	3.4	3.2	2.3	2.1	2.1
Cocaine	1.4	1.3	1.0	1.6	2.1	2.1
Hallucinogens	3.0	1.1	0.7	0.6	1.4	1.3
Inhalants	0.9	0.4	0.4	0.4	0.6	0.8
Heroin	0.8	0.2	0.2	0.2	0.2	0.1#
Ketamine	n.a.	n.a.	0.3	0.2	0.2	0.3
GHB	n.a.	n.a.	0.1	0.1	0.1	*<0.1#
Synthetic Cannabinoids	n.a.	n.a.	n.a.	n.a.	n.a.	1.2
New and Emerging Psychoactive Substances	n.a.	n.a.	n.a.	n.a.	n.a.	0.4
Injected drugs	0.8	0.6	0.4	0.5	0.4	0.3#
<i>Any illicit^(d) excluding pharmaceuticals</i>	<i>19.0</i>	<i>14.2</i>	<i>12.6</i>	<i>10.9</i>	<i>12.0</i>	<i>12.0</i>
Misuse of pharmaceuticals						
Pain-killers/analgesics ^(c)	5.2	3.1	3.1	2.5	3.0	3.3
Tranquillisers	3.0	1.1	1.0	1.4	1.5	1.6
Steroids ^(c)	0.2	0.2	—	—	0.1	*0.1
Methadone ^(e) or Buprenorphine ^(f)	0.2	0.1	0.1	0.1	0.2	0.2
Other opiates/opioids ^(c)	n.a.	0.3	0.2	0.2	0.4	0.4
<i>Misuse of pharmaceuticals^(f)</i>	<i>6.3</i>	<i>3.9</i>	<i>3.8</i>	<i>3.7</i>	<i>4.2</i>	<i>4.7#</i>
Illicit use of any drug^(g)	22.0	16.7	15.3	13.4	14.7	15.0

* Estimate has a relative standard error of 25% to 50% and should be used with caution.

Statistically significant change between 2010 and 2013.

(a) Used in the previous 12 months.

(b) Included 'designer drugs' before 2004.

(c) For non-medical purposes.

(d) Illicit use of at least 1 of 12 drugs (excluding pharmaceuticals) in the previous 12 months in 2013; the number and type of drug used varied between 1993 and 2013.

(e) Non-maintenance.

(f) Did not include buprenorphine before 2007.

(g) Illicit use of at least 1 of 17 drugs in the previous 12 months in 2013; the number and type of drug used varied between 1993 and 2013.