CONTENTS

Letter from the Chairperson	ii
Membership	iii
Terms of Reference	iv
Glossary and Acronyms	V
Executive Summary and Recommendations	1
1. Introduction	31
2. Trends in the Use of Illicit Drugs in the Northern Territory	40
3. Prevention	70
4. Drug Treatment in the Northern Territory	94
5. Treatment - The Role and Practical Application of Pharmacotherapies	117
6. Priority Groups	151
Appendix A - Illicit Drug Taskforce Consultation Report	170
Appendix B - Summary of Submissions to Taskforce	212
Appendix C- Current Services and Strategies	222



3rd Floor Health House Darwin NT 0800 Telephone: (08) 8999 2631 PO Box 40596 Casuarina NT 0811 Facsimile: (08) 8999 2420 illicitdrugstaskforce@nt.gov.au

The Honourable Jane Aagaard, Minister for Health and Community Services, Parliament House, Darwin, NT. 31st May 2002

Dear Minister.

I have the pleasure to present to you the Report on Illicit Drugs in the NT as requested by you.

Basically you sought an investigation into the trends in the use of illicit drugs in the NT. The full Terms of Reference are set out in the attachment to this letter. In January 2002 you set up a Taskforce to deal with those Terms of Reference. Also attached is a list of the Taskforce Membership.

Pursuant to the Terms of Reference the Taskforce consulted widely and public participation was invited and encouraged. The public response was gratifying and consisted of written submissions and attendance at consultations. I thank all those who so generously gave of their time and experience.

I also thank the members of the Taskforce for their energy and dedication. Ms Linda Hipper has been invaluable as the Project Manager, ably assisted by Dr Anthea Duquemin and Ms Lindy Garling.

The problem of drug use in the NT is diverse, complicated and serious. Solutions vary, and different solutions may be required to meet different situations.

It would be naive to expect an immediate universally successful panacea. That acknowledgment cannot and must not encourage indifference. On the contrary, as this report sets out, there are many avenues which can be explored with success.

Yours sincerely,

Valerie Asche Chairperson of Taskforce

TASKFORCE ON ILLICIT DRUGS MEMBERS

Dr Valerie Asche Chairperson

Ms Pat Anderson

Chairperson

Northern Territory Aboriginal Health Forum / Head of NACCHO

Mr Frank Farmer Executive Director Northern Territory AIDS Council

Ms Denise Gilchrist

Director

Banyan House/Committee Member NTCOSS

Mr Nick Gill

Manager

Drug and Alcohol Services Association

Professor Margaret Hamilton

Director

Turning Point Alcohol and Drug Centre

Professor Richard Mattick

Executive Officer

National Drug and Alcohol Research Centre (NDARC)

Dr David Meadows

GP/AMA/TEDGP

Ms Susan O'Leary

Coordinator

Alice Springs Youth Accommodation and Support Services/

Member SAAPTAC

Mr Charles Roberts

Top End Users Forum and Executive Member AIVL

Dr Carol Watson

Planning and Evaluation Services

Commissioner Paul White

Northern Territory Police, Fire and Emergency Services

TERMS OF REFERENCE

AIM

To consult broadly with the community, frontline workers and experts, and draw on National and International best practice, to provide advice to the Minister on priority issues, durable strategies and directions for the Northern Territory.

- 1. Report on trends in the use of illicit drugs in the Northern Territory, particularly by:
 - Young people. The Australian Institute of Health and Welfare define young people as those aged 12 24 years. ¹
 - Drug using parents of children up to 12 years of age.
- 2. Advise on what is available and what should be practically applied in the Northern Territory setting, with a focus on the above priority groups.
- 3. Ensure an adequate spectrum of durable approaches and interventions through developmental, prevention, early intervention, crisis management, and recovery programs.
- 4. Advise on the nature and level of support available and what should be available to families who have a drug-using member.
- 5. Advise on the particular role and practical application of pharmacotherapies within the range of interventions in the Northern Territory setting.
- 6. Report to the Minister on progress as directed, and provide a final report which outlines findings and recommendations by the 31 May 2002.

¹ Moon, L., Meyer, P. and Grau, J. (1999). Australia's young people: Their health and wellbeing. Australian Institute of Health and Welfare: Canberra.

GLOSSARY¹ AND ACRONYMS

Abstinence

Refraining from drug use.

Age of initiation

The age of first experience of a situation. In relation to drug use it is the first use of a drug or substance.

AIDS (Acquired immunodeficiency syndrome)

A syndrome defined by the development of serious opportunistic infections, neoplasms or other life threatening manifestations resulting from progressive HIV-induced immuno-suppression.

Pharmacotherapies

Substitution treatments for opiate dependency, other than methadone-maintenance treatment. Some of these treatments are also being used for alcohol dependence. (eg. Naltrexone)

Best practice

On the evidence available, the best intervention to produce improved outcomes for an identified issue.

Benzodiazepines

One of a group of drugs used mainly as sedatives and muscle relaxants and for epilepsy. Benzodiazepines are also known as Central Nervous System Depressants (or CNS Depressants). Other examples of CNS Depressants are opiates and alcohol.

Blood-borne virus

A virus that can be transmitted from an infected person to another person by blood-to-blood contact, including through the re-use of injecting equipment.

Controlled substances

Psychoactive substances and their precursors that are subject to controls on their manufacture, sale and distribution.

Culturally responsive strategies

Strategies that take into account the practices and beliefs of a particular population group, so that the relevant initiatives are acceptable, accessible, persuasive and meaningful.

Demand-reduction strategies

Demand-reduction strategies seek to reduce the desire for and preparedness to obtain and use drugs. These strategies are designed to prevent the uptake of harmful drug use and include abstinence-oriented strategies aimed at reducing drug use. Their purpose is to prevent harmful drug use and to prevent drug related harm.

Detoxification

The means by which a drug-dependent person may withdraw from the drug's effects.

Drug

A substance that produces a psychoactive effect. Within the context of the National Drug Strategic Framework, 'drug' is used generically to include tobacco, alcohol, pharmaceutical drugs and illicit drugs. The Framework also takes account of performance- and image-enhancing drugs and substances such as inhalants and kava.

Drug dependence

Drug dependence is characterised by a strong desire to take a drug. Among the indicators of dependence are impaired control over drug use, a higher priority given to drug use than to other activities and obligations, increased tolerance, physical withdrawal symptoms, and repeated drug use to suppress withdrawal.

Drug-related harm

Any adverse social, physical, psychological, legal or other consequence of drug use that is experienced by a person using drugs or by people living with or otherwise affected by the actions of a person using drugs.

Drug-substitution treatment

Treatment involving the prescription of an alternative drug that is safer than a person's drug of choice. Methadone, as a substitute for heroin, is currently the most widely used drug substitute in Australia.

Drug User Groups

Drug user groups are organisations established by and for people who use drugs and their advocates. Drug user groups are traditionally geographically based with most States/ Territories in Australia having funded user groups. The exceptions are the Northern Territory and Tasmania.

Evidence-based practice

Evidence-based practice involves integrating the best available evidence with professional expertise to make decisions.

Harm reduction

The reduction of harm that may arise from the use of illicit drugs.

Harm-reduction strategies

Harm-reduction strategies are designed to reduce the impacts of drug-related harm on individuals and communities. Governments do not condone illegal risk behaviours such as injecting drug use: they acknowledge that these behaviours occur and that they have a responsibility to develop and implement public health and law-enforcement measures designed to reduce the harm that such behaviours can cause.

Harm minimisation

Harm minimisation is the primary principle underpinning the National Drug Strategy and refers to policies and programs aimed at reducing drug-related harm. It aims to improve health, social and economic outcomes for both the community and the individual and encompasses a wide range of approaches, including abstinence-oriented strategies. Both licit and illicit drugs are the focus of Australia's harm-minimisation strategy. Harm minimisation includes preventing anticipated harm and reducing actual harm. Harm minimisation is consistent with a comprehensive approach to drug-related harm, involving a balance between demand reduction, supply reduction and harm reduction.

Harmful drug use

A pattern of drug use that has adverse social, physical, psychological, legal or other consequences for a person using drugs or people living with or otherwise affected by the actions of a person using drugs.

Hazardous drug use is any drug use that puts the person using drugs, or those living with or otherwise affected by the actions of a person using drugs, at risk of these harmful consequences.

Hepatitis C Virus (HCV)

Hepatitis C, now identified as the virus causing over 80% of what was previously known as hepatitis non-A/non-B, is a virus that can lead to cirrhosis of the liver. In Australia over 80% of people with HCV acquired the virus through unsafe injecting drug use.

HIV

A human retrovirus that can lead to AIDS.

Illicit drug

A drug whose production, sale or possession is prohibited. 'Illegal drug' is an alternative term.

Inhalants

Substances inhaled for psychoactive effects-for example, glues, aerosol sprays, paints, industrial solvents, thinners, petrol and cleaning fluids.

Licit drug

A drug whose production, sale or possession is not prohibited. 'Legal drug' is an alternative term

Methadone Maintenance Treatment (MMT)

Methadone is a synthetic opioid. Methadone-maintenance treatment is the most widely used drug substitution treatment for opioid dependence in Australia.

Narcotic drug

A 'Narcotic drug' is usually used to refer to as opiate or opioid. It is also a preferred term in United Nations conventions, where it may be used to refer more widely to other drugs.

National Drug Strategy

The National Drug Strategy, formerly the National Campaign against Drug Abuse, was initiated in 1985, following a Special Premiers Conference. The Strategy provides a comprehensive, integrated approach to the harmful use of licit and illicit drugs and other substances. The aim is to achieve a balance between harm-reduction, demand-reduction and supply-reduction measures to reduce the harmful effects of drugs in Australian society. The Strategy promotes partnerships between health, law-enforcement and education agencies, drug users, people affected by drug-related harm, community-based organisations and industry, to reduce drug-related harm in Australia.

National Drug Strategy Household Survey

The National Drug Strategy Household Survey series has been the principal data-collection vehicle used to monitor trends and evaluate progress under the National Drug Strategy. The Surveys have been conducted nationally in 1985, 1988, 1991, 1993, 1995 and 1998 and provide data on behaviour, knowledge and attitudes relating to drug use among people aged 14 years and over.

National Illicit Drug Strategy

The National Illicit Drug Strategy, a Commonwealth government initiative, commenced implementation in 1998; it is a major component of the next phase of the National Drug Strategy. Funding for the National Illicit Drug Strategy is split between demand-reduction strategies, which are being implemented by the Department of Health and Aged Care and the Department of Education, Training and Youth Affairs, and supply-reduction strategies, which are being implemented by the Attorney-General's Department, the Australian Federal Police and the Australian Customs Service.

Needle and Syringe Programs

Authorised programs for distributing, disposing of or selling needles and syringes.

Non-medical use of drugs

The use of pharmaceutical drugs either alone or with other drugs in order to induce or enhance a drug experience.

Opioid

The generic term applied to alkaloids and their derivatives obtained from the opium poppy (Papaver somniferum), including methadone, morphine, heroin, codeine and thebaine.

Overdose

The use of a drug in an amount that causes acute adverse physical or mental effects. Overdose may produce transient or lasting effects and can sometimes be fatal.

Peer Education

In the context of the National Drug Strategic Framework and the National HCV and HIV/AIDS Strategies, Peer Education is the concept where like educates like. It is most commonly associated, in the past two decades, with issues relating to HIV/AIDS education for gay men, people with HIV/AIDS and other affected communities. In the context of the Taskforce on Illicit Drugs it is the education and support of people who use drugs by people who use drugs.

Performance- and image-enhancing drugs

A range of drugs used to improve physical or mental capacity or to influence body shape.

Pharmaceutical drugs

Drugs available through a pharmacy: over-the-counter and prescription medicines.

Polydrug use

The use of more than one psychoactive drug, simultaneously or at different times. The term 'polydrug user' is often used to distinguish a person with a varied pattern of drug use from someone who uses one kind of drug exclusively.

Population group

'Population group' can refer to an entire population group, as defined by geographical location, or to subgroups defined by geographical location, age, risk factor, or possession of a common condition or disease.

Prevention

Within the context of the National Drug Strategic Framework, prevention refers to preventing harmful drug use and preventing drug-related harm. Prevention includes preventing the uptake of illicit drugs.

Psychoactive effects

Effects that alter mental processes-mood, cognition, thinking or behaviour.

Psychostimulant

A drug that activates, enhances or increases neural activity. Caffeine, nicotine, amphetamines, cocaine and MDMA (ecstasy) are the psychostimulants most commonly used in Australia.

Psychotropic substances

In the context of international drug policy, 'psychotropic substances' refers to substances controlled by the Convention on Psychotropic Substances 1971.

Relapse

A return to drug use after a period of deliberate abstinence or controlled use.

Safe sex; safe sexual practice

Sexual activity that involves no exchange of body fluids such as semen, vaginal fluids or blood.

Steroids

A group of naturally occurring or synthetic hormones that may affect chemical processes in the body, rate of growth, and other physiological functions.

Supply-reduction strategies

Supply-reduction strategies are designed to disrupt the production and supply of illicit drugs. They may also be used to impose limits on access to and the availability of licit drugs-an example is legislation regulating the sale of alcohol and tobacco to people under the age of 18 years.

Therapeutic community

A structured residential environment in which people live while undergoing drug treatment.

Tolerance

Reduced effects following repeated drug use. Tolerance develops more quickly if use is frequent and heavy.

Uptake

The commencement of drug use.

Withdrawal symptoms

Symptoms that can occur when a person using a drug over a prolonged period reduces or ceases use.

Acronyms

AA Alcoholics Anonymous

AAFR Alcohol Awareness and Family Recovery

ABS Australian Bureau of Statistics

ADCA Alcohol and Other Drugs Council of Australia

ADIN Alcohol and Drug Information Network

ADS Alcohol and other Drug Services

AIDS Acquired Immune Deficiency Syndrome

AIVL Australian Injecting & Illicit Drug Users' League

ANCD Australian National Council on Drugs
ANSP Australian Needle and Syringe Program
ANSTI A New Start Towards Independence
AODP Alcohol and Other Drug Program

APU Alcohol Policy Unit

ASYASS Alice Springs Youth Accommodation and Support Services

BMT Buprenorphine Maintenance Treatment

BRADAAG Barkly Region Alcohol and Drug Abuse Advisory Group
CAAAPU Central Australian Aboriginal Alcohol Programs Unit
CAAODS Central Australian Alcohol and Other Drug Services
CAAPS Council for Aboriginal Alcohol Program Services

CDC Communicable Diseases Centre

CEO's Chief Executive Officers
CMS Corrections Medical Service

COAG Council of Australian Government
COLIE Coalition of Low Income Earners
DAAC Drug and Alcohol Advisory Committee

DARE Drug Abuse Resistance Education
DASA Drug and Alcohol Services Association

DCC Darwin City Council
DEU Drug Enforcement Unit

DEET Department of Employment, Education and Training DHCS Department of Health and Community Services

DIN Drug Infringement Notice

DUMA Drug Use Monitoring in Australia
EAS Employee Assistance Service
ECNs Established Crime Networks

FORWAARD Foundation of Rehabilitation With Aboriginal Alcohol Related Difficulties

GP General Practitioner

HCV Hepatitis C

HIC Health Insurance Commission
HIV Human Immunodeficiency Virus

ICD International Classification of Diagnosis
IDPCDP Illicit Drug Pre Court Diversion Program

IDRS Illicit Drug Reporting System

IDU Illicit Drug Use

IJIS Integrated Justice Information System

LAAM Levo-alpha-acetylmethadol

LC Life Choices

LWAP Living With Alcohol Program

LSD Lysergic Acid Diethylamide

MCDS Ministerial Council on Drug Strategy
MDMA Methylenedioxymethamphetamine
MMT Methadone Maintenance Treatment

NA Narcotics Anonymous

NATSIS National Aboriginal and Torres Strait Islander Survey

NDARC National Drug and Alcohol Research Centre

NDRI National Drug Research Institute

NDS National Drug Strategy

NDSHS National Drug Strategy Household Survey

NHCECR National Centre for HIV Epidemiology and Clinical Research

NHMRC National Health and Medical Research Council

NIROA Non Injectable Routes of Administration

NSP Needle and Syringe Program
NTAC Northern Territory AIDS Council

NTDE Northern Territory Department of Education

NTX Naltrexone Treatment OIC Officers in Charge

PADDA Poisons and Dangerous Drugs Act PBS Pharmaceutical Benefits Scheme

PWID People Who Inject Drugs RCT's Randomised Controlled Trials S4 Schedule 4 (medication) S8 Schedule 8 (medication)

SAAP Supported Accommodation Assistance Programs

SARC Sexual Assault Referral Centre

SBP School Based Police

STD Sexually Transmitted Disease
TC's Therapeutic Communities
TUF Top End Users' Forum
UK United Kingdom
US United States

WHO World Health Organisation