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NDP Discussion
Sector and Services Policy
Policy Business Unit
Ministry of Health
PO Box 5013
Wellington 6145

A New National Drug Policy for New Zealand

The New Zealand Drug Foundation is pleased to submit on the new National Drug Policy discussion document. As the government's overarching strategy and action plan for responding to drugs and related issues this is an important document. The National Drug Policy sets priorities, guides government decision making and co-ordinates collaboration between government, providers, researchers, policymakers and the wider community. It can also help the public to better understand a complex issue and better support people to make positive changes in their own lives and communities. As such, it is important to get this policy right.

Rather than submitting on each of the questions provided by the Ministry, we simply table the consensus statements contained in the *Wellington Declaration on reshaping New Zealand's national drug policy* (attached). This document provides a comprehensive and collective vision for a new National Drug Policy and addresses most of the issues being investigated as part of this submission process – we didn't want to reinvent the wheel. Instead, we have focussed our submission on some of the key issues we feel are not well addressed by the discussion document.

New Zealand Drug Foundation position

Getting the new National Drug Policy Right

If it is to be successful, the National Drug Policy needs to be based on evidence. Policy which is disconnected from data risks being ineffective, irrelevant, and wrongly targeted – particularly when that policy is focussed on an issue that is often contentious and politically charged.

We are in a situation where a new National Drug Policy is being developed without any reflection on how successful (or otherwise) the previous policy was. Given the immense amount of time, money and resource that is spent in New Zealand's attempt to prevent and respond to drug-related harm, it is gravely concerning that we have no idea exactly what we have been getting for our investments. While question 7 of the discussion

document asks what should be measured to see if things are working, we would argue that our baselines are currently too weak to be particularly useful at present.

As such, the Drug Foundation recommends the new National Drug Policy prioritises the collection and sharing of robust data. This data needs to be widely accessible and capture the following:

- Up to date information on the levels and patterns of drug use in New Zealand, both overall and within particular population groups.
- The social and cultural contexts in which New Zealanders use drugs.
- The effects of drug use, including health, social and economic harms and benefits.
- The factors that influence drug use, including familial and socio-economic contexts and individual characteristics.
- Evidence on the effectiveness and cost effectiveness of policies and programmes aimed at reducing drug-related harms (including broader harms such as unemployment and criminal activity).

This evidence should be used in future to evaluate the success of the National Drug Policy and related strategies. The Drug Foundation notes with frustration that this was the point of the Evidence Online project that was supposed to be rolled out as part of the previous National Drug Policy. Despite the budget for this project existing it never managed to eventuate.

A successful National Drug Policy will be one that supports a wide range of people, communities and agencies to make a collective impact on these complex issues. That means the policy not only needs to provide clear direction to all stakeholders, but that direction needs to be shaped by all parties in a meaningful way. While the Drug Foundation is pleased that the Ministry has invited stakeholders to give feedback on this discussion document, the feedback we have received is that people found it hard to provide substantial comment on a document they feel lacks substance or a clear vision. The discussion document outlines that the results of this process will be used to provide recommendations to government, but that there is unlikely to be time for everyone to have a say once initial feedback has been given.

The Drug Foundation shares the concern of many in the alcohol and drug sector and wider community that this will be the only change for many people and organisations to have a say on such an important policy. The Drug Foundation also shares people's frustration that a significant amount of community-led work – work that was timed specifically to fit in with the National Drug Policy development process – is not reflected in this document.

This includes the time, energy and incredible wealth of knowledge shared by over 100 community stakeholders who gave up two days of their time to come together and produce the Wellington Declaration – a shared vision for the new National Drug Policy. The Drug Foundation encourages the Ministry to incorporate the collective vision contained in the Wellington Declaration into the new National Drug Policy. The Drug Foundation also

suggests that all efforts should be made to gather broad stakeholder input into future iterations of the new policy. People want to have meaningful input into this policy.

It is not just the community-led work that this consultation document fails to reflect. The vision and strategy provided in both the *Blueprint II: How things need to be* and *Rising to the Challenge: The Mental Health and Addiction Service Development Plan 2012–2017* is absent from the discussion document. Given the immense amount of expertise and consultation that went into both of these documents, we strongly recommend the principles and priorities they contain are incorporated into the new National Drug Policy. The Drug Foundation believes the life-course approach outlined by *Blueprint II* is a particularly useful framework for identifying the “critical points” where people are more vulnerable to drug related harm. This will help action plans and interventions to be better timed and targeted and assist in the effective co-ordination of inter-agency approaches.

Rebalancing the three pillars of the National Drug Policy

Despite the success of programmes such as the Needle Exchange Programme and alcohol and drug treatment New Zealand still tends to take an ‘ambulance at the bottom of the cliff’ approach to drugs and related issues. To date, the three pillars of the National Drug Policy have not been given equal priority or funding, with preventative and public health approaches receiving significantly less investment than enforcement related strategies.

The Drug Foundation believes that while enforcement related approaches can be successful – particularly in regards to supply reduction and enforcing regulations (e.g. around age restrictions) – rebalancing the pillars towards prevention, early intervention, treatment and harm reduction efforts would be of significant benefit to New Zealand. In regards to the question around how will we know when we’ve got the balance right, please refer to our comments around data collection and measuring the cost effectiveness of policy and practice.

Once again, the Drug Foundation urges the Ministry to rename the third pillar “harm reduction” rather than “problem limitation”. “Problem limitation” is not a well-recognised term and there is no evidence-based literature on its relevance within drug policies and more specifically as a pillar of harm minimisation. The feedback we have received from the sector and community, is that “problem limitation” it is a confusing term that does not resonate well. We also note that the term even seems to be confusing the Ministry’s National Drug Policy team given that treatment is being included under this pillar rather than under demand reduction.

By contrast, “harm reduction” is a widely used term and has been adopted within the wider harm minimisation philosophy. Policy makers, researchers, politicians, communities and services worldwide are aware of the term and its defining characteristics (for example incremental, sub-optimal gains that can be built on over time). Many international drug policies – for example Australia’s – have adopted this approach. Over the past 20 years harm reduction has contributed to major public health initiatives, notably needle and syringe exchange programs, methadone maintenance programs and smoke-free environments.

The outcomes the National Drug Policy should aim for

The Drug Foundation supports the continued focus on harm minimisation as the key principle of the National Drug Policy. We note that in the *Wellington Declaration* the agreed language was “the minimisation of drug related harm and the promotion and protection of health and wellbeing.” However, New Zealand is lagging behind many of its international peers in recognising that many of these harms are the result of policies and practices put in place to address drug use, rather than drug use itself. The most obvious of these is the criminalisation of people who use drugs and the negative consequences of such criminalisation in regards to recovery and help-seeking by individuals and family members.

The discussion document makes it clear that legislative issues will not be considered as part of this consultation process. However we note that the people and organisations who created the *Wellington Declaration* endorsed the Law Commission’s recommendations for reform of the Misuse of Drugs Act, which include *inter alia* a review of the current drug classification system, a mandatory cautioning scheme for minor drug offences and an improved medicinal cannabis system. The Drug Foundation also believes it is important for the new National Drug Policy to acknowledge the potential for policy related harms in order for it to aim to ensure these too are minimised.

Other key outcomes of the new National Drug Policy should be:

- The creation of a nation-wide culture that actively encourages help-seeking and recovery and does not stigmatise those who use or are dependent on drugs.
- People and agencies working together to prevent drug-related harm more effectively through ‘joined-up’ services where every door is the right door and support is timely, accessible and holistic, with a strong continuum of care. The investments made in one area are not undermined by the investments made in another and people no longer fall through the cracks.
- Individuals, families and communities have the knowledge, skills and support to make good decisions about drugs and take action to reduce drug-related harm in their own lives, families and communities. The decisions they make about drugs are based on good, evidence-based information which includes the risks involved, how to mitigate those risks and where to get help if they need it.
- Young people are supported to be resilient, and choose not to use drugs or wait until they are older to try them. Those who need help get it early on and this support is ‘wraparound’ and tailored to their needs. Young people stay engaged in education, regardless of their drug use.
- Those who do chose to use drugs are supported to minimise the harms of their drug use. Such support is non-judgmental, evidence-based and compassionate and provides seamless transitions into other types of service or support. People who use drugs are supported to be agents of positive change within their own communities.
- The socio-economic determinants of drug use, including poverty and social exclusion, are clearly acknowledged and taken into consideration in the development of all relevant policies and practices.

For a range of other potential outcomes, as well as emerging trends and ideas for action plans to support the policy, please refer to the *Wellington Declaration*.

The Drug Foundation appreciates the chance to submit on this discussion document Policy and looks forward to working with the Ministry to ensure that this important policy is robust and responsive. Please contact me if you require additional information or clarification on points raised in our submission.

Yours sincerely



Ross Bell
Executive Director

About the Drug Foundation

The New Zealand Drug Foundation was established in 1989. It is an independent trust with a national focus on minimising drug—related harm. This includes social and health harms caused by legal drugs, such as tobacco and alcohol, as well as illegal drugs, such as cannabis.

The Drug Foundation advocates evidence—based policy on these issues, and provides reliable and credible information to organisations and individuals. We take a lead role in networking and cooperation within the alcohol and drug sector.

The Drug Foundation recognises that drugs, legal and illegal, are a part of everyday life experience. Drugs, and their use, impact on many of us, and on the people we care about. Harms to individuals and families include injury, disease, social, personal and financial problems and a reduced quality of life. Harms to society include unsafe communities, increased need for law enforcement, and high health and economic costs. For these reasons, the Drug Foundation is committed to reducing drug use and its harmful consequences.

This commitment to reducing harm includes ensuring that any illicit drugs, if used, are used safely. Our focus is on advocating for policies that build a healthy society where there is the least possible harm from drug use. All efforts to control or reduce the harm from drugs must be evidence based, socially just and maintain the rights of individuals and the aspirations of communities.

The Drug Foundation provides leadership and representation for our nationwide membership of organisations and individuals working on alcohol and drug issues. The Drug Foundation is a member of the International Harm Reduction Association, the Global Alcohol Policy Alliance, the Vienna NGO Committee on Narcotic Drugs and the International Drug Policy Consortium.

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