



To:
Chief Minister
Treasury and Economic Development Directorate
By email only: budgetconsultation@act.gov.au

Submission to the ACT pre-budget consultation process 2024-2025

Alcohol Tobacco and Other Drug Association ACT

ATODA is the peak body for the alcohol, tobacco and other drug (ATOD) sector in the ACT. Our purpose is to lead and influence positive outcomes in policy, practice and research by providing collaborative leadership for intersectoral action on the social determinants of harmful drug use, and on societal responses to drug use and to people who use drugs.

ATODA's vision is a healthy, well and safe ACT community with the lowest possible levels of alcohol, tobacco and other drug related harms. Underpinning ATODA's work is a commitment to health equity, the social and cultural determinants of health, and the values of collaboration, participation, diversity, respect for human rights, social justice and reconciliation between Aboriginal and Torres Strait Islander people and other Australians.

ATODA welcomes the opportunity to provide a submission to the ACT Budget 2024–2025 consultation process. The work of the ATOD sector makes a critical contribution to the wellbeing of the ACT community, particularly to those vulnerable to lower levels of wellbeing in relation to health indicators and inclusion and belonging indicators. The ATOD sector is also critical to achieving the ACT Government's nation-leading ambition to situate drug use as a health, rather than a justice issue and we welcome the implementation of the *Drugs of Dependence Amendment (Personal Possession)* (drug law reforms) reforms in October 2023.

As we look to the coming financial year, ATODA encourages the government to continue to support the ATOD sector to navigate the changes that will arise from the invest and transition phases of the commissioning process. We also encourage the government to support tobacco cessation measures, particularly in diverse population groups with complex needs and address the public health harms that arise from e-cigarette use. The implementation of drug law reforms in 2023 was a significant milestone for the ACT, and ATODA is enthusiastic to support an effective monitoring and evaluation of the legislative changes over the coming year.

Unfortunately, housing affordability and availability is an issue that is increasingly impacting on the wider community. This remains a particularly stark challenge for people on ATOD treatment pathways and we urge the government to consider appropriate housing options for people with complex needs, including alcohol and other drug dependency.

Key issues 2024-25

1. ATOD Sector Funding and Commissioning

ATODA acknowledges the increased investment in the ATOD sector over recent years, including \$13 million for ATOD services in the 2022-23 budget, \$17 million allocated in the ATOD Commissioning Strategic Investment Plan (2023) and \$49 million over three years to deliver the new Watson Health precinct with a focus on Aboriginal and Torres Strait Islander peoples and young people. However, current funding levels continue to present challenges to meet increased demand for people seeking support for co-occurring needs including alcohol and other drug, mental health and other complex issues.

Given the impending potential changes to the specialist ATOD treatment sector in the ACT arising from the commissioning process in 2024 – it is not possible to make an assessment and recommendation around sector resourcing for the coming financial year.

Notwithstanding this, ATODA will continue to advocate for resourcing and support for the ATOD sector throughout the invest and transition phases of commissioning in 2024. It is imperative that all services receive adequate support in terms of information, timeliness and transition timeframes to ensure continuity of service, constructive engagement and workforce support as services transition to new contracts in the latter half of 2024.

Budget recommendation:

That the ATOD sector in the ACT receives continual funding based on projected community need for ATOD specialist treatment services, and that adequate support is given to all ATOD services as they transition to new service agreements to ensure the sector can continue to deliver optimal treatment and care for the ACT community.

2. E-cigarettes and tobacco cessation

The public health harms associated with the non-therapeutic use of e-cigarettes include respiratory disease (EVALI), nicotine dependence; poisoning; burns; seizures, throat irritation, cough, headache and nausea.¹ There is also strong evidence to suggest that never smokers who use e-cigarettes are three times more likely to take up smoking.² Limited evidence also indicates that former smokers who use e-cigarettes are more likely to resume smoking than those who have not used e-cigarettes.³

ATODA acknowledges that e-cigarettes may support smoking cessation for people who want to quit cigarettes and we also acknowledge the need for further research into the efficacy of e-cigarettes as a harm reduction method for individuals who would otherwise use tobacco cigarettes. However – we support the current prescribing model of nicotine containing e-cigarettes under the guidance of a

¹ Banks E, Yazidjoglou A, Brown S, Nguyen M, Martin M, Beckwith K, Daluwatta A, Campbell S and Joshy G. [Electronic cigarettes and health outcomes: systematic review of global evidence](#). Australian Department of Health. National Centre for Epidemiology and Population Health ANU, 2022.

² *Ibid.*

³ *Ibid.*

doctor or nurse practitioner to support smoking cessation. We welcome the expansion of authorised prescribers under the Special Access Scheme, noting this will make it easier for some people to seek cessation support. We also encourage further measures to improve access to tobacco cessation pathways that target diverse population groups.

ATODA welcomes the banning of the importation of single-use e-cigarettes that came into effect in Australia on 1 January 2024 as part of a broader vaping reform package being rolled out by the Commonwealth government. This harm reduction approach supports improved public health outcomes by removing unregulated, harmful e-cigarette products from retail settings and the black market in Australia. ATODA understands it will take some time for the import-ban to be evident in e-cigarette market supply and demand, however we support this concrete step towards situating e-cigarette use as a therapeutic, rather than recreational activity.

With regard to the current policy settings around e-cigarettes, ATODA does not support the criminalisation of individuals who purchase or use e-cigarettes or e-liquids outside of the prescription model. We strongly suggest that resources are instead directed towards population health campaigns with a focus on tobacco cessation and additional supports for people who want to quit non-therapeutic e-cigarette use.

Budget recommendations:

That the ACT Government:

- consider addressing the currently criminal penalty associated with possession of a nicotine containing e-cigarette without a prescription in the ACT. While this penalty may in practice not be enforced, it is nonetheless an anomaly in the context of the *Drugs of Dependence Amendment (Personal Possession) 2023* reforms;
- commit to implementation of key actions identified in Priority Area 5 of the *National Tobacco Strategy 2023-2030*; Strengthen efforts to prevent and reduce tobacco use among populations at a higher risk of harm from tobacco use and populations with a high prevalence of tobacco use;
- resource additional e-cigarette cessation supports for never-smokers to ensure they are able to access treatment for nicotine addiction and mitigate a potential increase in dual cigarette and e-cigarette users; and
- invest in a public health campaign/s focusing on tobacco and e-cigarette cessation that targets diverse population groups with higher rates of smoking prevalence.

3. Housing and Homelessness in the ATOD context

Housing is a fundamental determinant of health.

Housing supply and homelessness in the ACT has become a growing issue across the community due to increased cost of living, increased rental prices, increases in interest rates and overall decline in availability of low-cost housing stock. ATODA recognises that there will be submissions to this budget process from community housing peak organisations and we do not seek to replicate these.

However, we do wish to highlight the additional housing difficulties faced by people with complex intersectional needs in the ACT community. To this end, we refer to the [2022-23 pre-budget submission of the Housing for Health Group](#), which highlights the significant barriers to accessing

emergency accommodation and any form of ongoing housing for people with complex needs who are homeless, particularly people with serious mental illness and current substance use.

As a member of the Housing for Health Group – ATODA re-emphasises the critical need to government to consider how best to support people with co-occurring complex needs access secure, stable and ongoing housing and support. We note this group will be making an updated submission to the 2024-25 ACT pre-budget process.

Further, ATODA understands through representatives on our ATOD Workers Group, that ATOD services are under increasing pressure to link clients with housing options once a treatment pathway has been completed. Due to multiple challenges – this process is not always successful which creates the risk of service users being discharged into homelessness or unstable housing. Moreover, homelessness presents a significant barrier for service users seeking to engage with ATOD and mental health treatment programs.

Budget recommendation:

That the ACT Government engage with relevant peak bodies in 2024-25 with a view to inform a program of work to support the Housing First model in the ACT with a focus on marginalised and high-needs population groups.

This should be based around key principles including housing as a human right, separation of housing from treatment and support, person-centred planning and flexible wrap-around supports.

4. *Drugs of Dependence Amendment (Personal Possession) 2023* – ongoing monitoring and evaluation

ATODA welcomes the implementation of the *Drugs of Dependence Amendment (Personal Possession) 2023* legislation. It is a significant milestone for the ACT; leading the country in drug decriminalisation and situating personal drug use firmly as a health, not a criminal issue.

As we move into the next phase of the reform; monitoring and evaluation, ATODA strongly emphasises the need for a robust and transparent analysis. It is important for the sector and the community more broadly, to have a sense of the full impact of the reforms. Additionally, data collection and analysis are critical to understand resourcing needs across the ATOD sector in the ACT to continue to support drug decriminalisation. Of particular interest is the number of people who:

- have received the one-hour assessment at Canberra Health Services
- elected to pay the fine issued under the Simple Drug Offence Notice (SDON)
- chose to self-refer into further ATOD treatment services following their initial one-hour session.

In addition to the above specific indicators, we also suggest the below data sets could be used to provide further context around the monitoring and evaluation framework:

- AOD Treatment Services National Minimum Data Set (AODTS-NMDS)
- ACT Service Users Satisfaction and Outcomes Survey (SUSOS)
- ACT AOD Workforce Profile
- ACT Criminal Justice Statistical Profile
- Ecstasy and Related Drugs Reporting System (EDRS)

- Illicit Drug Reporting System (IDRS)
- National Notifiable Disease Data Systems
- Drug Related Deaths and Coronial Data Systems
- ACT General Health Survey
- ACT Ambulance and Hospital Data
- ACT Waste Water Analysis
- ACT Policing Data

Budget recommendation:

That the ACT Government continues to support the development of a robust and transparent monitoring and evaluation framework around drug decriminalisation in the ACT in partnership with the ATOD sector.

5. ACT Drug Strategy Action Plan implementation

ATODA notes the ongoing priority areas as stipulated in the ACT [Drug Strategy Action Plan 2022-2026](#) (DSAP). As stated in our 2023-24 budget submission, we welcome the extensive consultation with the ATOD sector which is reflected in the final content of the DSAP and the supporting implementation plan.

For the purposes of this budget submission, ATODA would like to highlight key priority areas for 2024-25:

- Strengthening support for people with complex and co-occurring needs
- Valuing peer support workers and people with lived experience

We note the acknowledgement of the peer workforce in the DSAP:

The ACT Government values the voices of people, families and carers with lived experience of ATOD use. People with a lived experience of drug use, their families and carers may be affected by a range of health, social and economic consequences. Increased capacity and capability of the ATOD workforce is required, including the maintenance and support of a peer workforce. We must also continue to develop more effective engagement of people with a lived experience in policy, planning and governance. (p.21)

ATODA is pleased to be co-chairing the Alcohol and other Drug – Mental Health Alliance (the Alliance) in partnership with the Mental Health Community Coalition (MHCC). In 2023-24 the Alliance will be progressing a workplan that focuses on the value of peer workforce and lived experience to support people navigate treatment pathways in both mental health and alcohol and other drugs. The Alliance is also considering advice to enhance training options for workers in each sector to identify professional skills development that can support people with co-occurring needs receive the care they need, whatever treatment pathway they may be on. Finally, the Alliance is also consulting with the Health Directorate on the development of the scoping study into people with co-occurring mental health and substance use needs.

The first year of the Alliance has established solid foundations for this cross-sectoral collaboration. Moving forward, ATODA strongly recommends ongoing funding of the Alliance to support further

information sharing, expert advice to government and collaboration with a focus on improving treatment journeys for people with complex co-occurring needs.

Budget recommendations:

That the ACT Government:

- provide ongoing resourcing for the ATOD-MH Alliance beyond the current end date of 30 June 2024 and continue to prioritise needs-based resourcing for people with co-occurring mental health and alcohol and other drug needs; and
- continues to work with the ATOD sector to prioritise establishment of formal pathways between treatment services and peer worker development programs.

Note: While the term AOD (alcohol and other drug) is commonly used to refer to the alcohol, tobacco and other drug sector, ATODA's preference is to use the term ATOD. This acknowledges the role that specialist service providers in this sector play in providing tobacco cessation support, and because tobacco use is the leading preventable cause of the burden of disease in Australia, contributing far more than alcohol or all illicit drugs combined.

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