

2022

**THE LEGISLATIVE ASSEMBLY FOR THE
AUSTRALIAN CAPITAL TERRITORY**

**ACT DRUG STRATEGY ACTION PLAN 2018-2021:
PROGRESS REPORT 2020-21**

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9 June 2022**



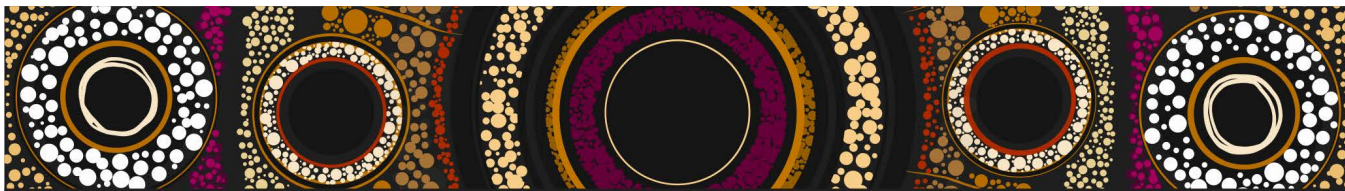
ACT
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ACT Health

ACT Drug Strategy Action Plan 2018–2021: Progress Report 2020–21

June 2022





Acknowledgment of Country

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Foreword by the Minister for Health

Rachel Stephen-Smith MLA



This is the second and final progress report on the Drug Strategy Action Plan 2018-2021. The report highlights the constructive steps we

have taken to minimise harms from alcohol, tobacco and e-cigarettes, pharmaceuticals and illicit drugs between July 2020 and December 2021. This includes work carried out by Government, non-government and private sector providers such as pharmacies and general practitioners.

The report highlights that of the 43 actions outlined in the Plan, 42 have been completed or partially completed. This is an incredible achievement during a period where COVID-19 has impacted the sector, demonstrating our commitment to improving the health and wellbeing of some of our most vulnerable community members through a harm minimisation approach.

The COVID-19 pandemic has emphasised the importance of working collaboratively to respond to challenges facing our community. Staff from alcohol and drug services were at the forefront of providing outreach, practical and emotional support to disadvantaged Canberrans during periods of COVID-19 lockdown and isolation and also played a key role in helping these people to get vaccinated.

In addition to facing the challenges of the pandemic, new initiatives to provide treatment to people with alcohol, tobacco and other drug problems, to alert the community to risks of alcohol, drug and other drug use, and to address

co-occurring issues that impact people with alcohol and other drug problems has continued throughout this period.

Several significant investments have been made in 2020 and 2021 in projects for new alcohol and other drug services. The ACT Government has committed to building a community-controlled Aboriginal residential rehabilitation service at Watson as part of a new mental health and alcohol and drug precinct which will also include a rebuilt youth residential rehabilitation service on the same site. The Government also invested in Australia's first fixed-site pill testing pilot to take place in 2022 and has committed funding to investigating in more detail a potential supervised injecting facility.

In 2021, the Alcohol, Tobacco and Other Drug Association ACT (ATODA), funded by the ACT Government, has also been working in collaboration with the Office of the Coordinator-General for Family Safety and ACT Health to embed the ACT Government domestic and family violence capacity-building approach within the Alcohol Tobacco and Other Drug sector.

Even during the incredibly challenging environment, the progress made against key actions outlined in the Plan has been extremely encouraging and only possible through the dedication, caring and expertise of our alcohol and other drug sector workforce. This progress, leading the nation in many areas, will be built upon through the next Drug Strategy Action Plan currently under development, continuing our work to minimise the harm caused by drugs and alcohol on individuals, families and the community.

Rachel Stephen-Smith MLA
Minister for Health

Introduction



Purpose

This is the second report on the ACT Government's progress in implementing the *Drug Strategy Action Plan 2018-2021 (the Plan)*. Three progress reports were originally intended to be produced for 2019, 2020 and 2021 (the Plan having been finalised in December 2018). However, the release of the 2019 report was delayed by the COVID-19 pandemic, and the first report in the series therefore covered both 2019 and the first six months of 2020.

The current report therefore also describes progress over 18-months from July 2020 to December 2021 and will be the final report for the current Plan. The first section of this report provides background information, the second part outlines the most significant achievements, and Appendix 1 contains a table which summarises work against each of the 43 Actions contained in the Plan. Previous activity is also summarised alongside more recent activity in the Appendix to this report, or you can look at the earlier report [online for further information](#).

The ACT Government is working with community sector partners to develop a new alcohol and drug action plan for 2022 and beyond.

Background

Many people equate 'drugs' only with illegal drugs. However, legal drugs, alcohol and tobacco cause more health problems in our community. Therefore, the objectives of the action plan are to minimise harms arising from the use of all drugs, including alcohol, tobacco and related products, as well as illicit (illegal) drugs, and illicitly-used drugs: the latter include pharmaceuticals used for non-medical reasons.

Multiple national strategies underpin the ACT's plan, including the:

- *National Drug Strategy 2017–2026*
- *National Alcohol Strategy 2019–2028*
- *National Framework for Alcohol, Tobacco and Other Drug Treatment 2019–2029*
- *National Quality Framework for Drug and Alcohol Treatment Services*

The ACT Government is committed to working within the Australian national harm minimisation approach to drug policy. This approach is described in the National Drug Strategy 2017–2026. Harm minimisation includes the three pillars of:

- Supply reduction (for example, police seizures of illicit drugs, or restrictions on sale of alcohol and tobacco)
- Demand reduction (for example, drug treatment, or controls on alcohol and tobacco promotion). Providing coordinated psychosocial support is a vital element of this approach as well as use of effective medications.
- Harm reduction - a pragmatic approach to reducing harm from continuing drug use, for example providing sterile injecting equipment to prevent the spread of HIV and Hepatitis C, or providing community members with emergency response training and take-home naloxone to reverse an opioid overdose.

Scope of report

This report outlines progress in achieving commitments contained in the Plan. The purpose of the Plan was primarily to describe new ACT Government commitments to reduce harms from alcohol, tobacco and other drugs, aligned to the *National Drug Strategy 2017-2026*. Because several sub-strategies of the National Drug Strategy had not been finalised in 2018, it was envisaged that adjustments would need to be made by 2021 to prevent the Plan from becoming outdated, and that another alcohol and other drug plan would be needed from 2022 to 2026.

The Plan deliberately did not set out to describe in detail the vital and continuing work of ACT alcohol, tobacco and other drug treatment services because the aim was to include new activities, and also to cover the broad range of supply reduction, demand reduction and harm reduction initiatives. It is also beyond the scope of this progress report to describe the daily clinical work that occurs in both ACT Government and non-government services in Canberra to treat and support people with alcohol and other drug problems. However, the Government fully acknowledges the skill, dedication and commitment of this workforce, and how every day the sector works to protect and enhance the health and wellbeing of our community, including some of its most disadvantaged members.

More information and statistics on alcohol and other drug topics in the ACT, including treatment information, can be found on the Australian Institute of Health and Welfare's alcohol, tobacco and other drugs [webpage](#).¹ The Alcohol, Tobacco and Other Drug Association ACT provides a comprehensive [directory](#) of alcohol, tobacco and other drug treatment services on its website.

An important contextual factor which will be covered in more detail in developing the next iteration of the action plan is the *ACT Wellbeing Framework*, which was released in March 2020. The framework comprises twelve domains of wellbeing which reflect key factors that impact on the quality of life of Canberrans. Indicators of progress are grouped under each domain and will help the Government and the community to know where wellbeing is improving or diminishing in the ACT over time. Alcohol, tobacco and other drug use and dependence have an important impact not only on the wellbeing domain of 'Health', but also on several other domains such as 'Safety', 'Living standards', 'Social Connection' and 'Economy'. Wellbeing outcomes are not the same for everyone in the ACT community, and so the Wellbeing Framework also aims to consider impacts on specific groups including: Aboriginal and Torres Strait Islander peoples; carers; children and young people; culturally and linguistically diverse people; LGBTIQ+ people; older Canberrans; people with disability and across gender.

¹ <https://www.aihw.gov.au/reports/alcohol/alcohol-tobacco-other-drugs-australia/contents/introduction>

Collaboration and partnerships

Key alcohol tobacco and other drug services are provided by a combination of government and non-government providers, including peer workers. While Canberra Health Services is the largest single provider of alcohol and other drug treatment, the ACT Government acknowledges the significant contribution of the non-government sector, which includes nine of the ten specialist alcohol and drug service providers. The close collaboration and co-design of initiatives between the Government and non-government organisations is fundamental to the operation of the specialist alcohol and other drug treatment and support sector, and has been critical to achieving the milestones described in this report. During the life of the Plan, the ACT Health Directorate (ACTHD) has collaborated with ACT Government directorates and non-government organisations to deliver the Plan priority action items. These organisations, services and representative bodies include:

- ACT Policing
- ACT Aboriginal and Torres Strait Islander Elected Body (ATSIEB)
- ACT Government Analytical Laboratories
- Alcohol Tobacco and Other Drug Association ACT (ATODA)
- Australian National University
- Canberra Alliance for Harm Minimisation and Advocacy (CAHMA)
- Canberra Health Services (CHS)
- Capital Health Network (CHN)
- CatholicCare Canberra and Goulburn
- Chief Minister, Treasury and Economic Development Directorate (CMTEDD)
- Coordinator-General for Family Safety
- Directions Health Services
- Drug Policy Modelling Program, University of NSW
- ACT Education Directorate
- Families and Friends for Drug law Reform (FFDLR)
- The Foundation for Alcohol Research and Education (FARE)
- Gugan Gulwan Aboriginal Youth Service
- Health Care Consumers' Association (HCCA) of the ACT
- Hepatitis ACT
- Interchange Health Co-operative
- Justice and Community Safety Directorate (JACS)
- Karralika Programs
- Mental Health Community Coalition ACT (MHCC)
- Pharmacy Guild ACT
- Public Health Association of Australia (PHAA)
- Salvation Army Alcohol and Drug Services
- Ted Noffs Foundation
- 360Edge Consultants
- Toora Women Inc
- Winnunga Nimmityjah Aboriginal Health and Community Services.
- Transport Canberra and City Services
- Youth Coalition ACT

Many of these organisations are represented on the ACT Drug Strategy Action Plan Advisory Group (the Advisory Group). The Advisory Group has been an important mechanism for collaboration across the ACT Government and the non-government sector. The Advisory Group ensures the ACT Government makes informed decisions on the implementation, monitoring and evaluation of actions of the Plan. Governance arrangements for the next action plan are currently being considered.

Progress on priority actions

Alcohol

Alcohol is the most widely used drug in our community. In 2015, 4.5 per cent of the disease burden in Australia was due to alcohol use, making it the sixth leading risk factor for preventable illness, injury and death. Alcohol has disproportionately negative impacts on younger adults. In the ACT, alcohol is the leading risk factor for preventable disease, injury and death among men aged 15–24 years (13.0 per cent), and men aged 25–44 (12.0 per cent). Alcohol is also the second leading risk factor for preventable disease, injury and death among females aged 15–24 (5.8 per cent).²

While the ACT's alcohol consumption levels are near the national average, a significant proportion of people in our community continue to drink at levels that put them at risk of harm.

Alcohol data

- The National Drug Strategy Household Survey 2019 indicates the ACT has the lowest proportion of lifetime risky drinking over the past year among Australian states and territories at 14.1 per cent compared with the national average of 16.8 per cent. The rate of lifetime risky drinking in the ACT has reduced from 21.7 per cent in 2007.
- There appears to be a gradual decline in short-term risky drinking in the ACT, which is down from 28 per cent in 2007 to 21 per cent in 2019. There may be a trend to a decline in short term-risky drinking (at least monthly) between 2016 (22.7 per cent) and 2019 (20.7 per cent), but this was not statistically significant.
- However, wastewater (sewage) analysis over the lifetime of the Action Plan shows overall higher levels of alcohol consumption in the ACT in 2021 than in 2018.
- Alcohol remains the drug that is most likely to bring people into drug treatment in the ACT, with 42.2 per cent of closed³ treatment episodes in 2019-20 being mainly for alcohol problems. The next most commonly nominated drug was amphetamines (including methamphetamine), accounting for 23 per cent of closed episodes.

Our achievements: alcohol

✓ *Completion of Healthy Canberra Grants*

In 2019, the ACT Government awarded more than \$2 million in grant funding for new community and educational projects to reduce harms from alcohol. Several campaigns and initiatives funded under the Healthy Canberra ACT Health Promotion Grants Program were completed during 2021 following delays in 2020 due to COVID-19.

2 Australian Institute of Health and Welfare (2019). *Australian Burden of Disease Study: Impact and causes of illness and death in Australia 2015*. Available at: <https://www.aihw.gov.au/getmedia/c076f42f-61ea-4348-9c0a-d996353e838f/aihw-bod-22.pdf.aspx?inline=true>

3 'Closed' treatment episodes are courses of treatment that finished during that financial year. Treatment episodes can finish for several reasons, including being successfully completed, but also because a person discontinued or changed treatments.

Reduce Your Risk – alcohol and cancer campaign

The Government funded the Foundation for Alcohol Research and Education (FARE) to run the ACT's first-ever campaign about the link between alcohol use and cancer. The FARE Reduce Your Risk campaign was launched in July 2021 and completed in September 2021. However, information resources remain available.

Before the campaign, ACT survey results showed people in the ACT had a low awareness of the link between alcohol and cancer. Only 27 per cent were aware of the link between alcohol and breast cancer; 46 per cent of the link between alcohol and colon cancer, and 28 per cent between alcohol and cancers of the head and neck.

The campaign used materials developed in Western Australia and adapted for the ACT which have been researched and shown to be some of the most impactful alcohol health messaging internationally. The campaign also took into account new Australian alcohol consumption guidelines released by the National Health and Medical Research Council.

The [*Reduce Your Risk website*](#) was the first component of the campaign to go live, to support health professional engagement in the month leading up to the launch of the public campaign. The website went live on 25 May 2021.

A range of campaign resources were distributed via media, including TV advertisements, resources for GPs, bus stop advertisements, and social media activities.

FARE Ripple campaign

The Government also funded FARE to run the Ripple campaign, a three-year project supporting women aged 40-65 in the ACT to reduce the amount of alcohol they drink. FARE partnered with the Centre for Alcohol Policy Research (CAPR) at La Trobe University for this project which had two main components:

1. A randomised control trial (RCT) that tested the efficacy of a web-based intervention to support women to reduce their alcohol use.
2. A health promotion campaign that focused on raising awareness among the target audience of the benefits of reducing alcohol use.

Ripple was launched by the Minister for Health on 30 March 2021, and women were enrolled in the trial from launch day. Over eight-weeks Ripple content reached nearly 195,000 people through paid Facebook advertising and resulted in 3,700 visits to the study page on the website. The website had a total of 8,667 page views overall, including 4,040 views of the study page. Other strategies used included:

- Broadcast of Ripple videos in General Practitioner's surgeries, where it reached nearly 150,000 waiting room visitors.
- Mailout of 4,000 flyers promoting the Ripple study to General Practice surgeries, hospitals, community health centres and other community groups.
- Stakeholder engagement with more than 60 ACT groups and individuals working with the target audiences.

FARE will also report on data obtained through the randomised control trial (RCT) that tested a web-based intervention to support women to reduce their alcohol use.

Third of Men Campaign

The Third of Men campaign (TOM) was targeted towards Canberran men drinking at risky levels. Local research showed that there are many men across the ACT who want to drink less alcohol, with 31 per cent of those surveyed wanting to reduce their alcohol intake over the next 12 months. TOM is a health promotion campaign supporting men to reduce their drinking and raising awareness of the Australian guidelines to reduce health risks from drinking alcohol.

The campaign features a series of animated characters called Tom who deliver values-based messages about the benefits of reducing alcohol consumption, a website with tools to help men track and reduce drinking, resources about reducing risks when drinking, and opportunities to connect with the broader TOM campaign community.

The campaign used a social-norms and stages-of-change approach to:

- support men taking steps to reduce the amount of alcohol they drink;
- motivate men who might consider doing so; and
- encourage men to think about the benefits of drinking less alcohol.

The TOM campaign grant concluded in January 2021 and the evaluation found:

- TOM reached more than 99,000 men in the ACT, and nearly 33,000 men engaged with its social media content, approximately 35 per cent of men in the target group.
- The pilot project demonstrated that an online approach to engaging and supporting the target audience (ACT men aged 25 to 55 years) to reduce their alcohol consumption can be effective and is cost effective.
- Qualitative evaluation with the pilot participants demonstrated that the campaign tools and information were very worthwhile.
- Pilot participants experienced a number of benefits, including increased energy and financial savings.
- Respondents to the post-campaign survey reported a range of health and social benefits that align with those promoted through the project.

The TOM [website](#) remains live and can still be accessed.

PARTY program

The Government provided additional funding to expand the Canberra Health Services PARTY program. PARTY is an acronym for Prevent Alcohol and Risk-related Trauma in Youth.

The PARTY Program Canberra was originally run out of The Canberra Hospital. The aim is to give school students information about trauma that helps them recognise potential injury-producing situations, make prevention-oriented choices and adopt behaviours that minimise unnecessary risk. Sessions engage students with emergency service professionals, doctors, nurses, therapists and people who have experienced trauma.

The hospital-based program saw extremely high demand. The additional funding has built the capacity of the program to also be delivered within schools as well as in hospital, so that more students can benefit from the program.

Canberra Health Services has continued to deliver the PARTY Outreach Program to senior high school students. COVID-19 restrictions have led to delays and some modifications to the Program's delivery but with the additional funding more than 20 sessions have still been delivered to approximately 2,160 students.

Australian Red Cross Save-a-Mate (SAM)

Despite being significantly impacted by COVID-19 restrictions within schools, the Australian Red Cross Society has delivered 17 Save-a-Mate (SAM) workshops with up to 20 people in each one, funded with a grant from ACT Health Directorate.

The SAM program is an alcohol and other drugs education program, which aims to equip young people and persons at risk with the knowledge and skills to prevent, and to recognise and respond to AOD emergencies through a harm reduction framework. SAM is unique in its combination of alcohol and other drug education with basic first aid overdose response training.

Winnunga Nimmityjah Reducing Alcohol Related Harm for Aboriginal and Torres Strait Islander Peoples

Despite significant program delays due to COVID-19, Winnunga Nimmityjah Aboriginal Health and Community Services (AHCS) has progressed delivery of the program in the following ways:

- Winnunga Nimmityjah AHCS staff are being trained in alcohol screening, brief interventions, treatment, and services.
- Program material is being tailored to ensure culturally appropriate content and delivery and is currently tested by Aboriginal staff at Winnunga Nimmityjah AHCS as well as through individual interactions with clients.

By consulting with clients and continuing to tailor the delivery of the program as well as content, through the feedback received, a feeling of client ownership of the program material is hoped to be created.

SoBar – Not So Straight Up

SoBar – Not So Straight Up is a program run by Meridian and funded by ACT Health which aims to reduce alcohol-related harm within the LGBTIQ+ communities in the ACT through increased awareness of the health and wellbeing impacts of alcohol. It also aims to challenge the social norms around drinking behaviour and alcohol culture. The program focused on increasing awareness of the health and wellbeing impacts of harmful alcohol use, changing social norms influencing risky drinking behaviour and alcohol culture, and supporting access to suitable treatment and self-help options. The evaluation of the SoBar – Not So Straight Up Program was conducted in two parts: a process evaluation assessing the quality of activities delivered and an impact evaluation assessing the impact of the activities.

The Not So Straight Up grant concluded on 30 June 2021 and the evaluation found:

- The campaign was highly effective at reaching LGBTIQ+ people with messaging that challenged social norms around alcohol within LGBTIQ+ communities, raised awareness of the health and wellbeing impacts of harmful drinking and promotes strategies for addressing risky drinking behaviour.
- The program increased LGBTIQ+ people's access to resources through the development and distribution of resources and information through its social media and website presence and through educating people through SMART recovery therapy sessions.
- SMART sessions were effective at increasing clients' access to inclusive services to address risky drinking and alcohol issues.
- SoBar – Not So Straight Up reached 8,790 people through the online campaign, and 200 people in its SoBar pop-up stall at CBR Fair Day 2019, exceeding the target of 20 per cent of Canberra's LGBTIQ+ population.
- The program delivered LGBTIQ+ alcohol and other drugs (AOD) awareness training to 17 organisations from the AOD sector. The training was highly relevant to participants with 91 per cent (n=43) rating the training as relevant or very relevant to their needs.
- The LGBTIQ+ AOD awareness training was effective in supporting services to offer inclusive services to LGBTIQ+ people, 95 per cent (n=43) of training participants thought the training would contribute a great deal or a lot to their service being more inclusive of LGBTIQ+ people.

Due to the effectiveness of the SMART sessions, Meridian has invested in training additional facilitators so that the sessions can continue to be delivered beyond the life of the grant.

✓ *Pregnant Pause – be a hero, take zero Campaign*

The Pregnant Pause – be a hero, take zero Program (the Program) built on the success of the past Pregnant Pause – swap the pub for your bub Program, by focusing on creating supportive environments to help women have alcohol-free pregnancies. In 2020, the National Health and Medical Research Council (NHMRC) changed its guidelines to Reduce Health Risks from Drinking Alcohol and recommended that “to prevent harm from alcohol to their unborn child, women who are pregnant or planning a pregnancy should not drink alcohol.” Drinking alcohol during pregnancy increases the risk of miscarriage, stillbirth, premature birth, low-birth weight, and Fetal Alcohol Spectrum Disorder (FASD).

The Program was active between June 2020 and June 2021. The objectives and strategies used throughout the Program focused on encouraging the ACT community to create environments where alcohol-free pregnancies are encouraged and women are supported, rather than placing the onus for change on women themselves.

Despite the challenges presented by the COVID-19 pandemic, the Program was featured in local media, related campaigns, and events. Advocates for the program, or Community Heroes, featured in a range of content that promoted their involvement in the Program, which was then re-shared on Pregnant Pause social media channels.

With the help of these organisations, the Program reached 721,178 social media users on Pregnant Pause social media platforms. Content partnerships were developed with local media outlets Her Canberra and Canberra Mums and a health media company Tonic Media, achieving broad reach across new audiences:

- Flyers were displayed and videos screened in 63 medical centres across the ACT, reaching 294,000 people
- Her Canberra EDM content achieved 9,944 opens
- Canberra Mums Facebook content reached of 55,155 women.

Local media outlets RiotACT and Canberra Times covered the launch of Pregnant Pause on 18 June 2020. A highlight of this was when Community Hero, Karinya House, promoted their involvement in a Canberra Times article.

The existing Pregnant Pause website was updated with a live feed of Pregnant Pause's Instagram account to show the community in action and prompt people to follow and share Pregnant Pause content. Following the website refresh, the visitor bounce rates dropped, which indicates that the website redesign was more engaging and prompted users to navigate through more pages, rather than exiting quickly. The traffic to the Pregnant Pause website achieved over 18,000 visits across the life of the Program.

Data obtained in May 2021 through a YouGov Galaxy poll of adults in the ACT indicated awareness was consistent with 2020 levels in the percentage of people aware of a range of health consequences of drinking alcohol during pregnancy. This poll also confirmed the already very high level of awareness among the ACT population of the guideline that women who are pregnant or planning pregnancy should not drink alcohol. Data collected in 2019 showed that awareness in the ACT of the Guideline on pregnancy, was 82.7 per cent. This increased to 96 per cent at the start of the Program.

✓ *Completion of the Driving Change research study*

Driving Change: Using Emergency Department Data to Reduce Alcohol-Related Harm (Last Drinks) is an Australian multi-site national study led by Deakin University. The Canberra Hospital and Calvary Public Hospital emergency departments began collecting data in August 2018 and the project was completed in 2021.

The study identifies the most common sources of alcohol-related incidents resulting in emergency department presentations, which can then be targeted through public health interventions. ACT Health is now undertaking geospatial mapping of data from the study to build a better picture of where alcohol-related harms occur in the ACT.

✓ *Canberra Health Services Alcohol and Drug Services' outpatient alcohol withdrawal program*

Canberra Health Services Alcohol and Drug Services has commenced an Outpatient Alcohol Withdrawal Program.

The program is now offered as an option for people with mild to moderate alcohol withdrawal symptoms by medical and nursing staff at Canberra Health Services' Alcohol and Drug Services' Withdrawal Unit. The treatment program requires daily

review by the withdrawal unit clinical team, and supervision by their support person whilst the person is withdrawing at home.

Eligible people can also be provided with a combination of both inpatient and outpatient withdrawal management. For example, two days in the inpatient withdrawal unit and then complete the rest of their withdrawal management as an outpatient. This provides choice and flexibility for people requiring alcohol withdrawal management.

✓ *Improved ACT Health website alcohol information*

ACT Health Directorate has revised and updated its [alcohol information website](#), which went live in October 2021. The site now provides information about the effects of alcohol on health, ways to reduce drinking to reduce the risk of harm, and specific information for people who are pregnant or trying to become pregnant, and children and families. Information is also provided for licensed premises and events where alcohol is served. Contact details are also now provided for support services and resources.

The site includes updated information on risky drinking based on the updated National Health and Medical Research Council guidelines on alcohol, which were released in December 2020.

✓ *Alcohol Responsible Promotion Guidelines review*

A review of the Liquor (Responsible Promotion of Liquor) Guidelines 2012 (the Guidelines) continues to be led by Access Canberra. A discussion paper was released in August 2021 with submissions closing on 15 October 2021. Access Canberra is considering the range of views that it received and plans to have the revised guidelines published in early 2022. The review is expected to result in modernisation and simplification of the Guidelines for all users, while providing straightforward information to business and industry to assist in meeting their obligations under the *Liquor Act*.

Delayed actions

Some alcohol-focused actions have been delayed due to the COVID-19 pandemic. Government messaging on alcohol to young people, and the review of the relationship between alcohol and domestic and family violence, will be further considered in the context of the next Action Plan.

Looking forward: 2022 actions on alcohol and related products

✓ *Alcohol supply and alcohol home delivery*

The Government is monitoring emerging evidence on the impacts of online alcohol orders and home delivery on health and wellbeing.

Tobacco and related products

The decline in tobacco use Australia-wide and in the ACT is a significant public health success. Fewer young people are now taking up smoking in Australia than at any time since official surveys began in the early 1980s. However, despite these declines tobacco still remains the leading cause of preventable disease and death in the ACT and Australia-wide. Currently around one in 10 Canberrans smoke on a daily or occasional basis.

The rate of daily smoking more than halved in the ACT between 2001 (18.4 per cent) and 2020 (8.2 per cent). While current smoking rates are much lower than comparable rates in the past, the rate of daily smoking remains high when compared to consumption of other drugs. For example, 4.4 per cent of people said they drank alcohol daily (2019) and nationally around 1.6 per cent of people use cannabis daily. Long-term continued tobacco use kills one in two long term users prematurely, and those who die prematurely lose on average 20 years of life.

ACT wastewater analysis shows that nicotine consumption increased during 2019 and 2020 but fell back to previous levels in 2021. National research indicates that the rise in nicotine levels in 2020 may have been linked to more people spending more time at home during the 2020 pandemic period and having more opportunity to smoke larger quantities during the day. However, nicotine was also detected at higher levels in Canberra in 2019, but the reason for this is currently unclear.

Unfortunately, the Australian Secondary Students Alcohol and Drug Survey which was due to be conducted in 2020 has been postponed to 2022 due to COVID-19. Only limited recent information is therefore available on e-cigarette use among secondary school students. However, anecdotal evidence indicates that e-cigarette use is a growing concern in school settings. The ACT Government is also concerned that while smoking rates have fallen, the increasing use of e-cigarettes among young people is likely to be harmful and also a potential pathway into tobacco smoking.

While smoking rates in the general community have fallen over time, smoking rates have tended to remain higher among people experiencing various forms of disadvantage. This is demonstrated by smoking rates in specific community groups. Compared to the Australian national average daily smoking rate of 11 per cent the daily smoking rates among some specific cohorts are:

- 26.5 per cent – people with year 11 or less education;
- 18 per cent – least advantaged 20 per cent of population;
- 5 per cent – most advantaged 20 per cent of the population;
- 24.9 per cent – Aboriginal and Torres Strait Islander peoples;
- 20 per cent – people diagnosed or treated for mental health conditions; and
- 16 per cent – daily smoking among homosexual and bisexual people.

ACT data is not readily available to directly compare with national figures, but the smoking rates among more disadvantaged groups are likely to resemble national patterns, broadly speaking. The Service Users' Satisfaction and Outcomes Survey 2018, a survey of alcohol and other drug treatment clients in the ACT by the Alcohol, Tobacco and Other Drug Association ACT, found that 76.9 per cent of ACT alcohol and other drug treatment service users said they were smokers when they first accessed the service. Encouragingly 13 per cent of these people reported quitting smoking after coming into contact with the service, and 44 per cent reduced their smoking.

Our achievements: tobacco and related products

✓ *E-cigarette policy*

The Plan commits to monitoring the emerging evidence regarding the health risks associated with the use of electronic cigarettes (e-cigarettes). In November 2020, the ACT Government provided a submission to the Select Committee on Tobacco Harm Reduction noting the importance of protecting tobacco control achievements and prioritising protection of children and young people, and also calling for regulation of non-nicotine e-cigarettes.

In August 2021, the ACT Legislative Assembly passed a motion stating that the Government would continue to develop programs that educate and inform Canberrans about the risks of e-cigarettes and would review relevant legislation to ensure current arrangements are contributing to minimising harm being caused by e-cigarettes and vaping.

The ACT Education Directorate distributed e-cigarette resources provided by ACT Health to schools during 2021.

ACT Health has worked with other states and territories and the Therapeutic Goods Administration (TGA) to plan and roll out the 1 October 2021 changes resulting from the TGA decision making import or purchase of nicotine vaping products prescription-only. In October 2021, a large number of illegal nicotine vaping products were seized in a joint operation by the TGA and ACT Health Directorate from three Canberra businesses. Samples of the seized products were tested by the TGA and all were found to contain nicotine. Especially concerning was that two-thirds of the products were not labelled as containing nicotine.

Nicotine vaping products are prescription-only medicines, so it is illegal for Australian retailers other than pharmacies to sell them, even if the consumer has a valid doctor's prescription. These measures help prevent the uptake of e-cigarettes by young people, while permitting adult smokers in conjunction with their medical practitioner to use them to assist with smoking cessation where appropriate.

Also of great concern was that two-thirds of the products seized contained one or more of eight ingredients that are prohibited by law in nicotine vaping products as they pose known health risks when inhaled. Six prohibited ingredients were found, including the flavouring agent diacetyl, which when inhaled can cause irreversible lung damage.

Since 1 October 2021, nicotine vaping products supplied in Australia have required a doctor's prescription and must also meet specific labelling, packaging and ingredient requirements laid out in a TGA product standard. None of the products seized met these requirements.

ACT Health and the TGA are continuing their investigations regarding these and other illegal nicotine vaping products.

✓ *New funding programs to reduce smoking*

The rollout of projects funded under Healthy Canberra Grants: Focus on Reducing Smoking-Related Harm was delayed during the COVID-19 pandemic and commenced in 2021. The focus of the grants was on increasing smoking cessation among disadvantaged and priority groups in the ACT.

The Cancer Council ACT's Tackling Tobacco in the ACT program was launched in June 2021 after the COVID-19 pandemic delayed its implementation. While unable to engage actively with the community, Cancer Council ACT linked with Cancer Council NSW to undertake staff training and to develop program materials.

The Directions Health Services' (Directions) Butt it Out! program was also delayed by the COVID-19 pandemic. Directions has been coordinating training in tobacco cessation screening protocols, support practices, and program evaluation tools for all client-facing staff. Additionally, Directions have recruited a Program Coordinator and ANU Research Assistant to undertake program evaluation co-design and planning.

The Worldview Foundation pre-release non-indigenous supplement, along with post release activity support project, has been impacted due to Worldview staff being unable to provide face to face training within the Alexander Maconochie Centre (AMC). The program has been modified and adapted to an online format, which will be delivered within the AMC on computers. Development of the online modules has taken time, however, following user testing the modules are planned to go live in 2022.

✓ *Safer Baby Bundle*

The Canberra Health Services' Safer Baby Bundle is a national initiative to reduce stillbirth by 20 per cent across Australia. One of the elements of the bundle is smoking cessation during pregnancy. ACT Health has provided eight carbon monoxide meters for use in maternity services at Calvary Hospital and Centenary Hospital for Women and Children to support quitting. Carbon Monoxide meters can both help to confirm that people are smoking and can help motivate quitting by providing direct feedback on the benefits of stopping smoking by demonstrating a reduction in carbon monoxide when people breathe out where smoking has reduced.

Other tobacco initiatives

The Guide to Sale of Smoking Products in the ACT was revised and the updated guide was published in 2020.

A Tobacco & E-Cigarette Prevention Community of Practice of government and nongovernment stakeholders has been established.

Looking forward: 2022 actions on tobacco and related products

E-cigarettes

ACT Health is collaborating with ANU's National Centre for Epidemiology and Population Health on monitoring of e-cigarette harms to young people.

ACT Health is developing co-design initiative to reduce uptake of e-cigarettes by young people.

Tobacco

Work has commenced to identify potential regulatory options to further reduce smoking in the ACT.

Healthy Canberra tobacco grant programs which were delayed by COVID-19 will continue.

Illicit and illicitly used drugs

Illicit drug use is a risk factor responsible for about 2.6 per cent of the total disease, injury and death (burden of disease) in the ACT. A disproportionately high level of impact from illicit drug use falls on our young people.

Illicit drugs data

- The National Drug Strategy Household Survey 2019 indicated that the ACT had the lowest rate of self-reported recent illicit drug use of any Australian jurisdiction, with 14.6 per cent of people saying they had used an illicit drug in the last year. There appeared to be an increase in illicit drug use from 12.9 per cent in 2016.
- Aboriginal and Torres Strait Islander Australians were 1.4 times more likely to have used illicit drugs compared to non-Aboriginal Australians in 2019.
- Compared to people without mental health conditions, the National Drug Strategy Household Survey 2019 found that people with a mental health condition were 1.7 times more likely to have used an illicit drug in the past 12 months (26 per cent compared with 15.2 per cent).
- ACT wastewater analyses for 2021, indicate recent falls in the levels of consumption of several illicit drugs in the ACT during 2020-21, including cocaine, methamphetamine and MDMA ('ecstasy'). Only cannabis use has increased in 2021, reflecting a nationwide trend. Cannabis use in the ACT in August 2021 was in the mid-range, slightly above the capital city average, but below the regional average. Levels of heroin consumption fell to low levels in early 2021 but increased to more usual levels later in the year.
- The recent falls in drug consumption are encouraging at face value, but caution needs to be taken in interpreting drug supply trends during the COVID-19 pandemic period when the supply of illicit drugs is likely to have been disrupted. The Australian Criminal Intelligence Commission has concluded that COVID pandemic conditions have led to drug market disruption in 2020-21, contributing to relatively sustained decreases in illicit drug consumption, complemented by law enforcement activities and seasonal factors. However, cannabis consumption nationwide notably bounced back in late 2021.
- Methamphetamine (ice) and amphetamine (speed) use appears to have fallen to low population levels in Canberra. The 2019 household survey records meth/amphetamine use as 0.3 per cent in the ACT in 2019, compared with 1.1 per cent in 2016, and 4.5 per cent in 2001. Wastewater analysis also shows a lower level of use of meth/amphetamine in the ACT compared to many other parts of the country.
- Despite the low levels of use among the population as a whole, 23 per cent of non-pharmacotherapy-based closed treatment episodes provided by specialist treatment services in 2020-21 were to help with meth/amphetamine use. This is likely to indicate that people who continue to use methamphetamine are more likely to be more severely dependent, higher-level users experiencing significant problems than previously.
- While there was considerable concern in the past about New Psychoactive Substance use in the ACT, use of drugs such as synthetic cannabis appears to be at relatively low population levels, although such drugs can have a significant and negative health impacts. New substances emerge unpredictably, meaning that monitoring and vigilance is required concerning emerging trends.

Our achievements: illicit and illicitly used drugs

Drug treatment services

✓ *Opioid treatment – new clinic in north Canberra*

Opioid pharmacotherapy treatment⁴ is associated with reduced overdoses, positive health and social outcomes for patients, and reduced rates of crime.

Canberra Health Services opened its new Northside Opioid Treatment Service (NOTS) in December 2020. The service provides clients on Opioid Maintenance Therapy (OMT) the convenience of dosing in Belconnen if they live on the northside of Canberra. The facility is close to transport links and provides access to other specialised health services at the same site. Addiction Medicine Specialists provide a weekly clinic in Belconnen Health Centre for OMT client assessments and reviews. The service also offers access to doctors who can prescribe opioid treatment medications that can be dispensed at community pharmacies.

The ACT Government allocated \$3.014 million in new funding over four years to establish and operate the service. It was designed in close collaboration with Canberra Alliance for Harm Minimisation and Advocacy, the ACT's consumer organisation for people who use drugs. As of 28 June 2021, 55 people were attending the clinic for dosing on the site. This represents 31 per cent of clients receiving opioid pharmacotherapies from Canberra Health Services, Alcohol and Drug Service.

Unfortunately, as a result of the Delta strain COVID-19 outbreak, services had to be suspended temporarily as experienced Drug and Alcohol Nurses were required to support the COVID Community Initiative. Regular clients of NOTS received their opioid maintenance therapy dose from The Canberra Hospital service in Phillip, or community pharmacies in their local area. However, northside clients have continued to receive clinical management and support from the opioid treatment service team (Medical Officers, Registered Nurses, Key Workers). The northside service will reopen in 2022.

✓ *Uptake of long-acting buprenorphine*

Long acting-acting buprenorphine is a new opioid maintenance treatment formulation that can be administered weekly or monthly, rather than every 1-2 days. For patients who choose to use the medication, it offers an option which is much more convenient than attending a clinic or pharmacy several times a week.

Since September 2019, there has been a steady uptake of long-acting injectable buprenorphine by Opioid Treatment Service clients across Canberra Health Services' Alcohol and Drug Services. Canberra Health Services is also working with Capital Health Network to increase access through GPs. This medication is also now the preferred option in correctional settings in the ACT. As of July 2021, two-thirds of prisoners in the Alexander Maconochie Centre who were receiving opioid maintenance treatment were receiving long-acting buprenorphine through depot injections.

⁴ Also sometimes referred to as opioid maintenance treatment, or simply opioid treatment.

✓ *Mobile Primary Care Outreach Clinic*

The Mobile Primary Care Outreach Clinic is a service established with joint funding between ACT Health Directorate, Capital Health Network and John James Foundation. The Mobile Primary Care Outreach Clinic, also known as “Pat” (Pathways to Assistance) or Pat the Van, is operated by Directions Health Services. This mobile outreach service provides weekly integrated primary care, appropriate acute care services (health, mental health and AOD), and access to a range of supports to highly vulnerable people with complex service needs at five locations across the ACT for free and without an appointment.

The “Pat” van has two fully fitted consultation rooms where people can see GPs or other health workers. Initial service commenced mid-November 2020, and the van was fully operational in 2021.

Target groups include: people at risk of or experiencing homelessness; people with, or recovering from, AOD dependencies; people with complex needs and chronic conditions, including mental health conditions; and people with very low incomes.

Harm reduction and prevention approaches

✓ *Injecting Drugs – additional investment in providing sterile equipment*

People who inject drugs are most at risk of contracting the potentially fatal liver infection, Hepatitis C, as well as risking other types of viral and bacterial infections. Ready access to sterile injecting equipment helps prevent the spread of such infections.

In October 2021 the Government announced additional ongoing funding of \$140,000 per year, to support the increased demand for needle and syringe services in the ACT. The additional funding will maintain current and future services across the Needle and Syringe Program, including expanded access to a successful pilot outreach service run by Directions Health Services to ensure sterile injecting equipment is available to those who need it most but can least afford it.

✓ *National real-time prescription monitoring – Canberra Script*

Real-Time Prescription Monitoring systems help prevent harms and preventable deaths associated with the use of high-risk medicines. The initial commitment in the Plan was to introduce an ACT prescription drug monitoring portal. This was completed in March 2019. However, in May 2019, the ACT also went further in becoming the first jurisdiction to commit to implementing the national Real-Time Prescription Monitoring system. In June 2019, the ACT Government allocated \$2.114 million to adopt this new national platform.

Work on the national monitoring platform has progressed during 2020 and 2021 and the new “Canberra Script” Management portal software was rolled out internally within the ACT Health Directorate in 2021. The Canberra Script Health Practitioner Portal was launched in February 2022 and will provide information about Schedule 8

(controlled) medicines and also some Schedule 4 prescription only medicines. Schedule 8 medicines include drugs such as opioid painkillers like oxycodone, and sedative benzodiazepine drugs like alprazolam (Xanax). The purpose of Canberra Script is to reduce harm and preventable deaths in the ACT community by supporting the safe and effective use of monitored medicines. It has the advantage over previous systems of providing information about prescribing by medical practices as well as dispensing by pharmacies and providing real-time alerts when a patient's treatment signals a risk of harm to them, or the prescription is not authorised. ACT Health Directorate's vision for Canberra Script is that prescribers and pharmacists use this system to provide more safe and effective care for ACT consumers.

Information displayed will be sourced from the National Data Exchange, which includes dispensing data sourced from other jurisdictions for ACT residents as well as ACT pharmacy dispensing data. ACT Health is working in collaboration with Pain Australia and its Consumer Advisory Group to facilitate the development of consumer and health professional messages, materials, and workshops that will support implementation of Canberra Script. Key messages will include the need to reduce opioid harm in the community through the safe use of opioids and other medications, and the need for the community/users and prescribers to focus on more effective ways of managing chronic pain.

✓ *Medically Supervised Injecting Facility*

The Action Plan committed to investigating the feasibility, need, effectiveness and appropriateness of establishing a medically supervised drug consumption facility (or supervised injecting facility) for the ACT. ACT Health Directorate engaged the Burnet Institute, in partnership with the Canberra Alliance for Harm Minimisation and Advocacy (CAHMA), to determine the need for, and feasibility of, a Drug Consumption Room in the ACT and investigate potential models for such a service.

The needs analysis report was published in early 2021. It showed that stakeholders and consumers consulted by the Burnet Institute support the establishment of a drug consumption room in Canberra. Surveys of potential consumers indicated a strong intention to use the service if one was established.

In the ACT 2021-22 Budget funding was announced of \$400,000 over two years to explore further options for such a facility in the ACT, including a suitable service model and potential location. A medically supervised injecting facility would contribute to preventing harms from overdoses, increase accessibility of sterile injecting equipment, and provide a gateway for people who are often experiencing significant disadvantage to access primary care and drug treatment services.

✓ *Overdose Response Training and Naloxone*

Naloxone is a drug that reverses overdose due to opioid drugs including illicit opioids such as heroin, and pharmaceutical opioid drugs such as oxycodone or fentanyl. In the 2019-20 ACT Budget, the ACT Government provided additional ongoing funding of \$300,000 annually to expand the reach of Canberra's naloxone program, which makes naloxone available to community members for immediate use in an emergency. Training in responding to emergencies is also provided alongside the medication.

The number and types of venues where naloxone and overdose response training can be provided has been increased significantly under the Action Plan, particularly in key high-risk settings, facilitated by a new nasal form of naloxone becoming available, in addition to the injectable form. Naloxone is now provided directly on discharge from prison to appropriate individuals. Needle and Syringe program staff also now provide overdose response training to clients and facilitate access to naloxone, and drug treatment service staff have received training in responding to overdoses using naloxone.

✓ *Fixed-site pill testing pilot in Canberra city centre and ACT Festivals Pill Testing Policy*

Pill testing is a harm reduction service that analyses the contents of drugs and provides targeted, evidence-based drug information to assist people to avoid potential harms associated with drug use. In October 2021 the ACT 2021-22 Budget announced \$260,000 to support a six-month, fixed-site, pill testing pilot.

Following the release of the independent evaluation of the second ACT pill testing trial, the ACT Government developed and published a Festivals Pill Testing Policy in 2020, which is available on the [ACT Health website](#).

✓ *Alcohol and other drug sector response during 2021 COVID-19 lockdown*

ACT Health Directorate has worked closely with drug treatment services providers, Canberra Health Services, Capital Health Network, the Pharmacy Guild ACT, community pharmacies and primary care practitioners including GPs, throughout the COVID-19 pandemic to ensure continuity of services. In particular, the Government allocated additional funding of up to \$250,000 to ensure safe continuity of opioid maintenance treatment services. In September 2021 the Government also announced \$300,000 in additional funding for CAHMA for additional Peer Treatment Support Workers to maintain their valuable work to support people with complex needs affected by the ACT Public Health Directions, and an additional \$160,000 in flexible funding to alcohol and other drug services to provide additional treatment and counselling support to those with substance use problems.

In response to the outbreak of COVID-19 in higher density housing in August 2021, the Mental Health, Justice Health and Alcohol & Drug Service set up a COVID-19 Community Response Team. This comprised experienced Mental Health and Drug and Alcohol Nurses who provided clinical support to people in quarantine and isolation. The nurses conducted assessments, provided support and managed withdrawal symptoms of people affected by substance use and dependence. The original commitment was for two weeks, but based on the success of this initiative, the Mental Health and Drug and Alcohol Nurses joined the Rapid Evaluation and Care in the Home (REaCH) Team. This tri-service approach supports the Primary Health, Mental Health and Drug and Alcohol needs of people in quarantine and isolation across the ACT and surrounding areas. The REaCH team received referrals directly from quarantine accommodation centres (Ragusa and Australian National University) and the COVID-Care-in-the-Home Service. The REaCH team supports clients in the community that may otherwise be without appropriate services and may require admission to hospital.

The response was significantly strengthened by the work of the ACT peer-based drug user organisation CAHMA. CAHMA played a unique role in supporting the ACT Government response through their peer workers, and strong relationships with people living in public housing. This, coupled with Directions primary health outreach and vaccination program, likely substantially reduced COVID-19 transmission among this priority population group and in the wider community.

Alcohol, Tobacco and Other Drug Association ACT (ATODA), the treatment sector and consumers advocated for new, more flexible, opioid treatment guidelines to provide more flexibility in opioid maintenance treatment during the pandemic period. New guidelines were produced in 2020 lockdown which allowed for the necessary flexibility to provide pathways for people to access opioid maintenance treatment while in isolation.² Directions Health Services were funded to help people access opioid maintenance when they were unable to attend their usual dosing service. Directions and CAHMA staff also provided naloxone, food, and other essential supplies, as well as access to telephone and data for clients to communicate with healthcare providers. Directions' Needle Syringe Program (NSP) further expanded outreach services to facilitate safer access to equipment for people vulnerable to COVID-19, as well as provide access to sterile equipment for people in isolation and quarantine.

Meeting the needs of clients required a collaborative effort between Directions, ADS, pharmacies and CAHMA, the latter advocating on behalf of clients and forming critical communication pathways for clients to access treatment. CAHMA also played a crucial role in ensuring that alcohol and nicotine withdrawal was not an additional issue for isolating or quarantining individuals. Hepatitis ACT also provided support, delivering care packages to people isolating or quarantining at home.

Directions Health Services also began vaccinating vulnerable people against COVID-19 through their regular primary health outreach services at housing estates and other sites in June 2021. Additional funding and advocacy from the Capital Health Network and the ACT Government for increased supply of vaccinations enabled Directions to speed up its campaign to ensure vulnerable populations, including people experiencing drug and alcohol issues, mental illness, socio-economic disadvantage and other complex issues in the ACT, could achieve the highest possible vaccination rate.

To address barriers faced by this population group, dedicated vaccination clinics were also established in Directions' Woden clinic. In addition, Directions' nursing staff and doctors took vaccinations to the doors of residents in over 35 public and community housing complexes, all quarantine facilities and numerous individual homes across Canberra. Vaccines were also offered to people who were homeless at various sites around the ACT. Ted Noffs Foundation also facilitated access to vaccinations for young people via its Street University Program. Directions' vaccination program was supported by ACT Housing staff and CAHMA peer workers, who informed and encouraged residents to take advantage of this opportunity. Directions actively followed up every individual to ensure they would be fully vaccinated, providing their second dose at their home or another location convenient to them. The ACT Health Testing Team also partnered with Directions, CAHMA and housing providers to offer more accessible PCR COVID-19 tests for residents at a number of public and social housing complexes and at other sites.

The Directions' vaccination program was an outstanding success, substantially contributing to the ACT's world-leading vaccination rate by achieving high rates of double vaccination in vulnerable populations across the ACT. Interchange Health Co-Operative also contributed to the high vaccination rate in this population group by providing vaccinations at the Early Morning Centre.

Therapeutic justice responses and diversion

✓ *Continuation of the ACT Drug and Alcohol Court*

The ACT's Drug and Alcohol Court completed two years of operations in December 2021. The court was a commitment made in the 2016 Parliamentary Agreement, and since its inception in December 2019, has offered an alternative to custodial sentencing with a therapeutic jurisprudence approach and holistic sentencing case management.

To December 2021, 46 Drug and Alcohol Treatment Orders have been imposed, with participants being a mix of genders and from diverse economic, cultural and ethnic backgrounds. Depending on the circumstances, orders can require participants to engage in a range of different activities including personal therapeutic counselling, treatment and intervention programs, relationship and family counselling as well as employment training. The scheme has so far produced five successful graduates with many more having progressed to the final phase of their order.

The purpose of the Drug and Alcohol Court is to achieve long-term behavioural change and divert people from the criminal justice system and jail. It takes a problem-solving approach to dealing with a participant's behaviour, providing targeted and structured health and justice interventions while holding people to account for their behaviour. The measure of success is not only the completion of the program by individuals but the flow-on effects for those people, their families and for the broader community in terms of reduced recidivism.

In the 2021-22 Budget, the ACT Government committed \$17.8 million to continue the Drug and Alcohol Court.

An evaluation of the implementation has been conducted by the Australian National University. The recommendations are being considered by representatives from the Justice and Community Services, ACT Supreme Court & ACT Court of Appeal, ACT Corrective Services, Public Prosecutions, ACT Health and Canberra Health Services.

✓ *Safer Families*

In 2021 ACT Health provided \$250,000 to Alcohol, Tobacco and Other Drug Association ACT to carry out additional work to improve the capacity of the alcohol and other drug sector to identify and respond effectively to domestic and family violence (DFV) (the Safer Families Project).

ATODA has been working in collaboration with the Office of the Coordinator-General for Family Safety and the ACT Health Directorate to embed the ACT Government domestic and family violence capacity-building approach within the Alcohol Tobacco and Other Drug sector. ATODA engaged consultants 360Edge to provide seven workshops

to workers in specialist alcohol and other drug services in the ACT, and for the ACT Domestic Violence Crisis Service to present at each workshop.

At the end of 2021, ninety-one alcohol and other drug workers had successfully completed this training. Before-and-after surveys of training participants found that knowledge, skills and confidence levels rose by 47 to 49 per cent and familiarity with DFV services increased 25 per cent. ACT Health approved the provision of one further training session for clinical workers in February-March 2022.

In June 2021, ACT Health Directorate provided a grant of \$366,300 (GST inclusive) to Winnunga Nimmityjah Aboriginal Health and Community Services for work to 30 June 2023 to build the capacity of the ACT and surrounding region's Aboriginal and Torres Strait Islander communities to address domestic and family violence within the community, particularly in the context of alcohol and other drug use.

Looking forward: 2022 actions on illicit and illicitly used drugs

While there have been a number of significant achievements and new investments under the Plan, the Government also acknowledges feedback from the sector that the alcohol and other drug treatment system is under stress, and that there is a need to further increase effective and affordable treatment and support services, for people who use drugs, their families and carers, as well as a need to reduce waiting times for treatment.

The Select Committee into the *Drugs of Dependence (Personal Use) Amendment Bill 2021*, which held hearings in July 2021, also took evidence on the alcohol and other drug sector's strengths and weaknesses, current and future demand, and appropriate service and funding models. The select committee heard evidence that decriminalisation would lower the barriers that have often deterred drug dependent users from reaching out for healthcare and psychosocial support. The committee tabled its report in the ACT Legislative Assembly on 30 November 2021, supporting the passage of the Bill, and making several recommendations to improve ACT alcohol and other drug treatment system. The Government is considering the committee's recommendations and will provide an official response to the Assembly in 2022. Both the committee's recommendations and the contents of the 59 submissions to the inquiry will be carefully considered in developing the next ACT Drug Strategy Action Plan.

The Government is making significant investments in the infrastructure of the alcohol and other drug treatment system and a process of planning and collaborate service commissioning is under way to ensure the ACT has the best possible treatment and harm reduction systems. It should be noted that while treatment services are included in the current section on illicit drugs so that a broad range of treatment and harm reduction initiatives can be discussed in one place the progress report, the individual drug that most people seek treatment for in the ACT remains alcohol.

New Aboriginal and Torres Strait Islander and youth residential rehabilitation facilities

The Government committed to a range of initiatives to improve health services in the ACT Health system through the 2021-22 Budget. These include investments in minimising harms from alcohol and other drugs, as well as a key focus on meeting the health needs of Aboriginal and Torres Strait Islander peoples.

A key initiative will be redevelopment of the Watson Health Precinct to deliver a world-class, community-led alcohol and other drug and mental health treatment precinct for those most in need. The Government has committed \$803,000 in the 2021-22 Budget to this work, including \$550,000 in funding for initial design work for rebuilding facilities for Ted Noffs (youth alcohol and other drug residential rehabilitation) and CatholicCare (youth mental health facility), and for an Aboriginal and Torres Strait Islander alcohol and other drug residential rehabilitation facility. The total funding also includes \$253,000 in funding for staff for Winnunga Nimmityjah Aboriginal Health and Community Services for planning it plan for the new facility. The Government will also partner with Winnunga Nimmityjah on the early planning and design. The facility is intended to complement existing services, including the Ngunnawal Bush Healing Farm.

The Government has also announced that a new facility will be built for Gugan Gulwan Aboriginal Youth Service. This will provide new facilities for Gugan Gulwan's youth alcohol and other drug services among other services it provides.

Renovation of existing alcohol and other drug service buildings

In June 2020, the ACT Government signed an agreement with the Australian Government for additional funding under the Community Health and Hospitals Program, including \$4.3 million to expand the capacity of residential alcohol and other drug rehabilitation services in the ACT. Agreement to the funding included consulting with the ACT alcohol, tobacco and other drug sector to identify critical points of need, including ageing infrastructure.

As a result, repairs worth \$1.3 million are being undertaken at two residential alcohol and other drug treatment facilities run by Karralika Programs at Isabella Plains and Fadden. This includes Make Safe and Refurbishment projects, including improvements to heating, ventilation and air condition, improved disability access, and an outdoor Make Safe and Healing Garden project.

Stakeholder consultation is being undertaken to identify the best allocation of the remaining funding. Additional renovations and improvements to buildings completed during the lifetime of the ACT Drug Strategy Action Plan include:

- Opening of the opioid maintenance treatment clinic through refurbishment of rooms in Belconnen community health centre;
- Opening of new walk-in centres providing affordable access to healthcare, including access to sterile injecting equipment;
- New facilities for diversion services housed within the new court building to provide more immediate access for clients.

Service planning and commissioning

The ACT Health Directorate funds about 70 non-government providers for the delivery of more than 100 health and mental health services, including nine alcohol and other drug service providers. The contracts for these services are due to expire in June 2022.

Until now, ACT Health has used traditional procurement processes to select and fund health services in the community. Feedback to ACT Health has highlighted the need for a more inclusive approach to determining the services Canberrans need and value, and the way they are delivered. In response, ACT Health is moving towards a collaborative commissioning approach for the future provision of health services delivered by non-government organisations in the community. This aligns with the position increasingly adopted across Australian jurisdictions and internationally, where commissioning is informing investment in community-based health services and delivering improved client outcomes.

The move to commissioning will happen in stages, allowing the approach to be refined based on a shared experience of commissioning. The commissioning of alcohol and other drug services will be one of the first to occur. ACT Health will work with sector partners to carry out a system-wide needs assessment focusing first on types of services set out in the National Treatment Framework. Current services not included in the National Treatment Framework remain important and will continue to be included in the commissioning conversation.

ACT Health has already heard from initial consultations with the sector that there are a number of key needs that require addressing including:

- Increase access to evidence-informed, effective, and affordable treatment and support services, for people who use drugs, but also for their families and carers;
- Ensure that we have a highly qualified workforce, but also that staff are supported and sustained;
- Improve linkages between services, particularly alcohol and other drugs services and mental health services;
- Increase the proportion of diversions from criminal justice system, and provide appropriate resourcing;
- Reduce the harms from alcohol and tobacco, including targeted responses;
- Further prevent and reduce overdoses;
- Strengthen data collection and analysis;
- Improve infrastructure and consider future infrastructure needs to that service delivery is not just sustained, but grows;
- Streamline administration; and
- Ensure that services are sustainably funded.

The aim of the collaborative process will be to align multiple pieces of work from the beginning to set out a planned and mutually agreed process for meeting shared priorities and leveraging the entire knowledge base of the sector. The process will aim to embed policy processes into standard practice and will provide opportunity to input government process in a coordinated and timely fashion.

Blood Borne Viruses Prevention Grants

In November 2021, a new round of Healthy Canberra Grants was announced to support community-based activities which use a population health approach to reducing risky behaviours with a focus on preventing Blood Borne Viruses (BBVs) and Sexually Transmitted Infections (STIs). Up to \$1.3 million will be available to support multi-year programs delivered from May 2022 through to December 2024. Injecting drug use is a cause of transmission of blood-borne viruses, and blood-borne bacterial infections.

Next Drug Strategy Action Plan

While substantial achievements have been made under the current Plan, the ACT Government is committed to further minimising harm related to alcohol, tobacco and other drugs in our community. The ACT Government will develop a new plan in collaboration with community partners to renew and target the ATOD policy focus across the whole of government, given all that has been achieved and has changed over the last three years. The new plan is intended to set clear, ambitious but achievable goals that can shape our work not just for the length of the plan, but for the next 10-20 years of health outcomes.

Emerging issues, data and reporting

Our achievements: emerging issues, data and reporting

The Plan allows for responses to emerging priorities that could not be identified at the time the plan was developed. Important issues that have emerged during the lifetime of the Plan, which the Government has responded to, that were not initially anticipated were:

- The COVID-19 pandemic;
- *The Drugs of Dependence (Personal Cannabis Use) Amendment Bill 2019* to decriminalise possession and cultivation of small amounts of cannabis; and
- *The Drugs of Dependence (Personal Use) Amendment Bill 2021* to reduce penalties and further decriminalise possession offences for some more-commonly used illicit drugs.

The 2021 pandemic response has been described above, as have cannabis related data. The Government made a detailed submission to the ACT Legislative Assembly Select Committee Inquiry on the Drugs of Dependence (Personal Use) Amendment Bill 2021. Committee hearings were held in July 2021, and the Minister for Health provided evidence to the Inquiry. As indicated above the select committee tabled its report on 30 November 2021.

Looking forward: 2022 actions on emerging issues, data and reporting

Future drug trends

ACT drug consumption trends detected through wastewater testing showed that consumption of several illicit drugs fell in 2021, except cannabis. This pattern reflected national trends with cannabis at a record high nationwide in August and October 2021 but records lows for MDMA ('ecstasy'), and methamphetamine.

As Australia's borders, both internal and external, reopen following the pandemic it is likely that the supply of illicit drugs from overseas, particularly those smuggled by air, will increase. Demand for drugs that are consumed in and around nightlife venues is also likely to increase as bars and nightclubs operate with increased capacity limits. It is likely that consumers will switch between drug types as their preferred drugs become available in greater quantity again. Some drugs, such as MDMA or ecstasy, seem have a strong relationship to music festivals, and use of these drugs may increase accordingly at large events.

The Government and the ACT alcohol, tobacco and other drug service sector are therefore aware that increases in drug use and alcohol consumption may occur as Australia moves into a phase of fewer restrictions on movement. Additional investments, for example in a fixed site pill testing pilot, are therefore well timed.

Canberrans' views on drug policy

Canberrans have progressive views on drug policy, and the Government's approach reflects these views.

An ACT-Government-commissioned YourSay survey conducted in Canberra in March 2021 found that 68 to 75 per cent of people, depending on the specific drug, supported responses to small-quantity personal drug possession offences that stopped short of court proceedings. For example, Canberrans favoured a caution, small fine, or referral to drug education or treatment over a substantial fine, community service order, weekend detention, or prison. Only 4 per cent to 11 per cent of Canberrans support a prison sentence for drug possession for personal use, depending on the specific drug.

The Australian Institute of Health and Welfare National Drug Strategy Household Survey 2019 showed support for pill testing among Canberrans to be the highest in the country, at 70 per cent. The majority of Australians support pill testing (57 per cent). The 2019 household survey also showed that two-thirds of people surveyed in the ACT support harm reduction measures, such as needle and syringe programs (72 per cent), opioid maintenance treatment (68 per cent), access to take-home opioid overdose reversal drug naloxone (63 per cent) and regulated injecting rooms (65 per cent).

The new COVID-19 normal

While Canberra has one of the highest vaccination rates of any city in the world, the COVID-19 virus remains in the community and there continues to be a potential for break-through infections. Like other areas of health, alcohol and other drug services have been developing plans to deal with this new 'COVID-19 normal' and to ensure that staff and clients are kept as safe as possible with COVID endemic in the community. Considerable experience has been gained by the sector and the health system during 2020 and 2021, and contingency arrangements are in place for potential outbreaks.

Drugs of Dependence (Personal Use) Amendment Bill 2021

The Government will formally respond to the findings of the Select Committee Inquiry into the *Drugs of Dependence (Personal Use) Amendment Bill 2021* (the Private Member's Bill) in 2022. The Government is committed to enhancing health-based responses to illicit drug use.

Fixed Site Pill Testing

ACT Health is currently working closely with Pill Testing Australia to establish a fixed site pill testing pilot to take place in the city commencing in the first half of 2022. The pilot project will help establish the usefulness of a fixed-site service. The trial will also potentially provide additional data about the contents of drugs circulating in Canberra and provide warning of contaminants and toxic substances contained in those drugs.

Prompt Response Network

Prompt Response Networks, or Early Warning Systems, are programs that are designed to make rapid and coordinated use of new drug data, so that emerging trends and risks can be quickly identified and communicated to reduce drug-related harms.

As a smaller jurisdiction, the intention for the ACT was to move in line with national project to draw on the national work and make efficient use of resources. Work on the national project was delayed during the COVID-19 pandemic, but is now progressing again, with ACT Health Directorate participating in the national project group.

Further work will be carried out during the next alcohol and other drug plan to build a local Prompt Response Network to better collate information to provide timely warning of emerging illicit drug trends.

Australian Secondary Students' Alcohol and Drug Survey

The ACT Health Directorate was due to collect Canberra schools' data for the three-yearly Australian Secondary Students' Alcohol and Drug in 2020. However, this national survey has been postponed until 2022 due to the disruption of usual school activities during the COVID-19 pandemic.

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Appendix 1: Implementation of Drug Strategy Action Plan actions 2019 to December 2021

Note: The *Healthy Canberra: ACT Preventive Health Plan 2020–2025* was published in 2019 and spans action items 1 to 13 (alcohol and tobacco). The table below is not intended to capture the whole range of continuing and vital work carried out each year by alcohol and drug treatment and harm reduction services in the ACT. Rather, it deliberately describes progress against Government commitments made under the ACT Drug Strategy Action Plan for specific pieces of work to be advanced between 2018 and 2021 across a range of prevention, treatment and policy initiatives.

Drug Strategy Action Plan – Action/commitment	Progress in 2019–20	Progress in 2020–21	Status
<p>1. Conduct evidence-informed alcohol public education and social marketing campaigns, including those that aim to: increase public knowledge of links between alcohol use and chronic disease, including cancer and cardiovascular disease; increase public knowledge of safe drinking guidelines; increase the knowledge of young people, including school students, of the short and long-term harms of risky drinking, and also of issues relating to secondary supply of alcohol to peers.</p>	<p>More than \$2 million through Healthy Canberra Grants to alcohol public information and support initiatives. Grants funding relevant to Action 1 includes:</p> <ul style="list-style-type: none"> Provided \$762,940 to the Foundation for Alcohol Research and Education (FARE) for the <i>Preventing Alcohol Related Chronic Disease</i> campaign (later renamed as Reduce Your Risk). <ul style="list-style-type: none"> Provided funding of \$397,086 to FARE for the program Addressing the booming booze culture among ACT women: combining innovative technology with an awareness raising campaign (later RIPPLE campaign). Provided \$79,021 to FARE for the pilot program Reaching Men in the ACT (later renamed as Third of Men [TOM] campaign). 	<p>The Reduce Your Risk website was the first component of the campaign to go live on 25 May 2021 to support health professional engagement in the month leading up to the launch of the public campaign. www.reduceyourrisk.org.au</p> <p>A range of campaign resources have been distributed via media, including video, GP collateral (video, eDM, A3 posters, leaflet), out of home ads (Superlite bus stop signs); social tiles and banners, including a mnemonic device illustrating the alcohol guidelines.</p> <p>The FARE RIPPLE campaign, a project supporting women aged 40-65 in the ACT to reduce the amount of alcohol they drink, concluded in June 2021. FARE will also report on data obtained through the randomised control trial (RCT) that tested a web-based intervention to support women to reduce their alcohol use. The TOM (Third of Men) campaign was completed in January 2021. The evaluation found that the pilot project demonstrated that an online approach to engaging and supporting the target audience (ACT men aged 25 to 55 years) to reduce their alcohol consumption can be effective and is cost effective.</p>	<p>Completed</p> <p>The campaign on secondary supply of alcohol to peers was not able to proceed due to competing COVID-19-related priorities</p>

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<p>2. Implement initiatives to reduce alcohol promotion and use in ACT sports and other community settings.</p>	<p>\$184,468 to the AIDS Action Council of the ACT (now Meridian) for a program to reduce risky drinking in lesbian, gay, bisexual, transgender and/or queer communities (SoBar project). \$170,577 to the Australian Red Cross Society for the save-a-mate (SAM) program for young people to respond to alcohol and other drug related emergencies. \$476,200 grant over two years to Winnunga Nimmityjah Aboriginal Health and Community services to establish a program to prevent the uptake of excessive alcohol consumption, provide community-wide education about risky drinking, and reduce harm associated with such drinking. Provided training to junior sport clubs to develop sponsorship guidelines and engage healthier sponsorship.</p>	<p>The Not So Straight Up grant (SoBar) was completed on 30 June 2021 and the evaluation found that the campaign was highly effective at reaching LGBTIQ+ people with messaging that challenges social norms around alcohol within LGBTIQ+ communities, raises awareness of the health and wellbeing impacts of harmful drinking, and promotes strategies for addressing risky drinking behaviour. Despite being significantly impacted by COVID-19 restrictions within schools, the Australian Red Cross Society delivered 17 save-a-mate workshops (≤20 people per workshop) in an education/community setting. The Winnunga Nimmityjah Aboriginal Health and Community Services' grant project to scale up work to address alcohol issues among the Aboriginal and Torres Strait Islander Community has been implemented. Healthier Choices Canberra Junior Sport has continued to work with junior sport organisations to increase their capacity to engage sponsorship that does not promote unhealthy products. Gamechangers supports State Sporting Organisations and their clubs to commit to healthy sponsorship arrangements that create a healthier sporting environment for children and do not market unhealthy food and drink products or alcohol at junior sport. A review of the <i>Liquor (Responsible Promotion of Liquor) Guidelines 2012</i> is being led by Access Canberra. A discussion paper was released in August 2021 with submissions closing on 15 October 2021. Access Canberra is considering the range of views that it received and plans to have the revised guidelines published in early 2022.</p>	<p>Completed (and ongoing)</p>
<p>3. Investigate initiatives to reduce promotion of alcohol on government premises, consistent with preventive health commitments.</p>	<p>Published the <i>Healthy Canberra: ACT Preventive Health Plan 2020–2025</i>. Finalised agreement to avoid promotion of alcohol on light rail vehicles and the light rail corridor.</p>	<p>Additional action was not able to be taken due to the COVID-19 pandemic.</p>	<p>Partially completed</p>

<p>4. Develop policy options for the implementation of activities that address risky drinking and alcohol-related harms, with a focus on: links between alcohol use and domestic and family violence; the impact of enforcement measures on risky drinking.</p>	<p>Not progressed during 2019-20.</p>	<p>An ANU internship project at ACT Health Directorate on the impact of enforcement measures was completed in 2020. The development of policy options to respond to domestic and family violence linked to alcohol use has been delayed by the COVID-19 pandemic.</p>	<p>Delayed due to COVID-19</p>
<p>5. Once sufficient data is available, consider actions to address the findings of the Driving Change study into the impact of alcohol use on ACT Emergency Departments.</p>	<p>Published Driving Change reports for Canberra emergency departments in July 2019, December 2019, and April 2020. Key findings included:</p> <ul style="list-style-type: none"> • alcohol consumption was linked to a greater number of emergency department attendances than illicit drug use. • a greater proportion of ACT Emergency Department presentations were linked to packaged alcohol bought from offlicence premises such as supermarkets and bottle shops than onlicence premises such as pubs and clubs. <p>Driving Change researchers wrote to on-licence venues linked to alcohol-related emergency department presentations to draw their attention to this link as part of the intervention phase of the project.</p>	<p>The Driving Change Project was completed in mid-2021 following COVID related delays. ACT Health is undertaking geospatial mapping of data from the study to build a better picture of where alcohol-related harms occur in the ACT. The Canberra Health Services' Alcohol and Drug Service is exploring options to increase awareness and identification of alcohol and drug use in the Canberra Hospital Emergency Department.</p>	<p>Completed</p>
<p>6. Conduct educational activities for licensees regarding compliance with alcohol licensing legislation and regulations and use an appropriate escalated enforcement response on a case-by-case basis.</p>	<p>Conducted education sessions for liquor license holders including seminars, site visits and emails. Completed follow-up inspections.</p>	<p>Health Protection Service and Access Canberra to attend major events to regulate liquor licenses.</p>	<p>Partially completed Impacted by ongoing COVID-19 pandemic</p>

Drug Strategy Action Plan – Action/commitment	Progress in 2019–20	Progress in 2020–21	Status
<p>7. Implement appropriate actions at Territory level to support the national Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan.</p>	<p>The ACT Government provided Healthy Canberra Grant of \$181,801 to the Foundation for Alcohol Research and Education for the Pregnant Pause (Be a Hero Take Zero) project.</p> <p>The National FASD Action Plan is not supported by additional funding from the Australian Government to the ACT Government.</p>	<p>The Foundation for Alcohol Research and Education Pregnant Pause Project was completed in 2021.</p> <p>Ministers approved mandatory pregnancy warning labels on alcohol containers nationally in July 2020.</p> <p>The ACT website has been updated to include additional information on risky alcohol consumption, including information on alcohol use in pregnancy.</p>	<p>Completed</p>
<p>8. Identify and implement measures to reduce secondary supply of alcohol to minors, including by family members and over-age friends.</p>	<p>Ran the <i>Alcohol. Think Again 'I need you to say no'</i> campaign encouraging parents not to supply their under-age children with alcohol from December 2019 to February 2020.</p>	<p>The new ACT Health alcohol information webpage discourages parents from providing alcohol to their children in the belief that this will help them develop lower risk drinking habits. This is in line with current national guidelines.</p> <p>Work in relation to secondary supply of alcohol to minors by overage friends would require additional resourcing to further progress.</p>	<p>Partially completed</p>

<p>9. Further develop approaches to reduce smoking rates among highrisk population groups in the ACT.</p>	<p>Published the e-cigarettes factsheet. Published the <i>Healthy Canberra: ACT Preventive Health Plan 2020–2025</i>. Tabled the Healthy Prisons Review in the ACT Legislative Assembly. Successful applications for Healthy Canberra Grants: Focus on Reducing Smoking-Related Harm announced in May 2020:</p> <ul style="list-style-type: none"> • Provided funding of \$289,591 to Directions Health Services for the Butt it Out! Smoking Support Program to implement an evidenced-based program for addressing tobacco dependency in a busy Alcohol and Other Drug (AOD) treatment and primary care practice. • Provided funding of \$284,000 to Cancer Council ACT to implement the Tackling Tobacco Program in the ACT to work with not-for-profit community sector organisations to increase their capacity to address smoking and to provide their clients with support to stop smoking. • Provided funding of \$325,696 to the Worldview Foundation Limited for the Pre-Release Non-Indigenous Supplement along with Post Release Support Activity to address issues associated with alcohol, tobacco and other drugs to support a more successful reintegration of detainees into the community. 	<p>Work has commenced to identify potential regulatory options to further reduce smoking in the ACT. The Directions Health Services: Butt it Out! Smoking Support Program was launched in June 2021. COVID-19 has delayed the development and implementation of the program. While unable to engage actively with the ACT community, Directions has been coordinating training in tobacco cessation screening protocols, support practices, and program evaluation tools for all client-facing staff. COVID-19 delayed the implementation of the Cancer Council ACT Tackling Tobacco in the ACT grant program. While unable to engage actively with the community, Cancer Council ACT has been linking with Cancer Council NSW to undertake staff training and to develop program materials.</p>	<p>Completed and ongoing</p>
		<p>Launched in June 2021, COVID-19 halted implementation of the non-indigenous pre-release program (to supplement the existing Indigenous Program), due to the inability of Worldview staff to provide face to face training within the Alexander Maconochie Centre (AMC). The program has been modified and adapted to an online format, which will be delivered within the AMC on their computers. Development of the online modules has taken time, however, following user testing the modules should go live in the AMC 2022. A Tobacco & E-Cigarette Prevention Community of Practice of government and non-government stakeholders has been developed. Work on the Worldview Foundation pre-release project is likely to be included in the next Alcohol and Other Drug (AOD) Plan, with the ACT's approach to be informed by the National Tobacco Strategy, when it is finalised.</p>	

Drug Strategy Action Plan – Action/commitment	Progress in 2019–20	Progress in 2020–21	Status
10. Use learnings from evaluations of relevant existing and previous programs relating to smoking, including the Smoking in Pregnancy program, to inform future program planning and development.	Evaluated the Smoking in Pregnancy Program. Published the Healthy Canberra: ACT Preventive Health Plan 2020–2025.	Work has commenced to identify potential regulatory options to further reduce smoking in the ACT. Learnings informed selection of Healthy Canberra Grants: Focus on Reducing Smoking-Related Harm. The Safer Baby Bundle has a focus on smoking cessation during pregnancy. ACT health has provided eight carbon monoxide meters for use in maternity services at Calvary Hospital and Centenary Hospital for Women and Children to support quitting. Healthy Canberra Grants: Focus on Reducing Smoking-Related Harm: are being progressed during 2021 after some delays during the pandemic period. Information on progress has been provided in the first section of the report.	Completed
11. Consider the need for additional smoke-free areas.	Implemented smoke-free areas of light rail public corridor including legislation.	No clear need was identified for new smoke-free areas in 2020-21. No new smoke-free areas were introduced. ACT Health is exploring avenues to reduce smoking on government-owned sports grounds while junior sport is training or playing.	Completed
12. Continue to enforce tobacco and smoke-free legislation in the ACT by conducting compliance programs focusing on tobacco retailers and smoke-free public places and responding to complaints.	Continued to action community complaints regarding breaches of smoke-free legislation.	Routine tobacco and e-cigarette compliance and enforcement activities were reduced in 2020-2021 due to the diversion of officers to COVID-19 compliance duties, however compliance activities have been conducted in relation to complaints and concerns. The Guide to Sale of Smoking Products in the ACT was revised and the updated guide was published in 2020.	Completed

<p>13. Continue to monitor the emerging evidence regarding the health risks associated with the use of electronic cigarettes.</p>	<p>Provided submission to the review of Commonwealth Tobacco Legislation, focusing on e-cigarettes and vaporisers, particularly by children and young people. Published the e-cigarettes factsheet. Completed a submission to the Therapeutic Goods Administration regarding heated tobacco products in February 2020.</p>	<p>In November 2020 the ACT Government provided a submission to the Select Committee on Tobacco Harm Reduction noting the importance of protecting tobacco control achievements and prioritising protection of children and young people and also calling for regulation of non-nicotine e-cigarettes. In August 2021 a motion was passed in the ACT Legislative Assembly stating that the government would continue to develop programs that educate and inform Canberra about the risks of e-cigarettes and would review relevant legislation to ensure current arrangements are contributing to minimising harm being caused by e-cigarettes and vaping. ACT Health has worked with other states and territories and the TGA to plan and roll out the 1 October 2021 changes resulting from the TGA decision that consumers need a valid prescription to import nicotine vaping products. ACT Health is collaborating with ANU's National Centre for Epidemiology and Population Health on monitoring of e-cigarette harms to young people. ACT Health is developing co-design initiative to reduce uptake of e-cigarettes by young people.</p>	<p>Completed and exceeded</p>
	<p>The ACT Education Directorate distributed E-cigarette resources provided by ACT Health to schools. In October 2021 a joint operation by the Therapeutic Goods Administration and ACT Health seized large numbers of illegal nicotine vaping products from three Canberra businesses in response to community tip offs.</p>		

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<p>14. Review current information and identify gaps in order to improve access to sterile injecting equipment and sharps disposal in the ACT.</p>	<p>Reviewed the <i>Australian Needle and Syringe Program Survey: National Data Report 2014–2018</i>. Reviewed the <i>Needle Syringe Program National Minimum Data Collection Report 2019</i>. Replaced two of the four sterile equipment dispensing machines in the ACT with larger capacity machines. Provided larger equipment packs from Needle and Syringe Programs during the COVID-19 emergency response to reduce the number of trips required by clients to Needle and Syringe Programs.</p>	<p>The Government invested \$982,000 over four in the 2021–22 Budget for ongoing expansion of the existing Needle and Syringe Program and to explore options for a medically supervised injecting/drug consumption facility, including the development of a suitable service model and a potential location. This additional funding includes additional funding of \$140,000 per year, index linked, to expand the existing Needle and Syringe Program, including providing equipment through new nurse-led walk-in centres. Additional dispensing machines at the walk-in centres also provide for out-of-hours supply in more locations. The Directions Health Services mobile clinic outreach clinic is now able to provide additional sterile equipment via outreach.</p>	<p>Completed</p>
<p>15. Increase access to prevention, screening, testing and treatment for blood-borne viruses, particularly hepatitis C, and sexually transmitted infections among people who use drugs, including in treatment settings, and increase access to vaccinations for types of blood-borne viruses where vaccines are available.</p>	<p>In 2019, to ensure clients have streamlined access to the new Hepatitis C treatments, Canberra Health Services introduced direct access to screening, assessment and Hepatitis C treatment within the Alcohol and Drug Services. Patients can also be screened for other blood-borne viruses such as HIV and Hepatitis B. Consultation was conducted on the Strategy with service providers to the Alexander Maconochie Centre and the Alcohol Tobacco and Other Drug Association (ATODA) ACT.</p>	<p>The ACTCS Drug and Blood Borne Virus Strategy is near finalisation.</p>	<p>Completed</p>

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<p>16. Implement a real-time prescription monitoring remote access portal, DAPIS Online Remote Access (DORA), by March 2019.</p>	<p>Successfully implemented the ACT DORA portal in March 2019. The system included real-time prescription dispensing information for ACT patients including from interstate pharmacies.</p> <p>Invested \$2.114 million over two years to adopt the national Real-Time Prescription Monitoring system.</p>	<p>In 2020–21 the ACT Government prepared for the roll-out of the national Real-Time Prescription Monitoring system. On 24 February 2022, DORA was replaced by Canberra Script as the ACT's real time prescription monitoring system as part of the national effort to minimise harms associated with monitored medicines and shares core features and functionality with other Australian jurisdictions.</p>	<p>Completed and exceeded</p>
<p>17. Explore further opportunities to expand on pill testing at events in the ACT.</p>	<p>Completed second pill testing trial at the Groovin the Moo festival in April 2019.</p> <p>Published independent evaluation report by the Australian National University in December 2019.</p> <p>The evaluation found an overwhelmingly positive response to pill testing by festival patrons and concluded that pill testing is an effective health intervention that can have a significant impact reducing the potential harms associated with the use of illicit drugs.</p>	<p>ACT Health published The Festivals Pill Testing Policy in September 2020.</p> <p>In October 2021 the ACT Government announced \$260,000 in 2021-22 Budget to support a six-month pilot for a fixed-site pill testing service. This will be Australia's first pilot of this type.</p>	<p>Completed</p>
<p>18. Investigate the feasibility, need, effectiveness and appropriateness of establishing a medically supervised drug consumption facility (supervised injecting facility) in the ACT.</p>	<p>Invested \$200,000 for research to determine whether there is a need for a medically supervised injecting facility in the ACT.</p> <p>Commissioned the Burnet Institute to conduct a needs analysis.</p>	<p>The Burnet Institute needs analysis report was completed and published in early 2021.</p> <p>In September 2021 the Government announced investment of \$400,000 over two years to explore further options for such a facility in the ACT, including a suitable service model and potential location.</p>	<p>Completed</p>

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19. Develop and implement actions relating to opioids including those that address or expand overdose prevention and response; access to naloxone; access to opioid maintenance treatment.

Provided Budget funding of \$300,000 annually to increase the supply of naloxone and prevent overdoses in the ACT.

Provided Budget funding of \$3,014,000 over four years to increase the availability of opioid replacement treatment in Canberra's north by establishing a government-run opioid treatment service.

Provided grant funding of \$170,577 to the Australian Red Cross Society for the SAM program to respond to alcohol and other drug emergencies, targeting young people and parents.

Canberra Health Services began prescribing new opioid treatment, long-acting buprenorphine. The new medications have also been made available through three GP clinics in central and southern ACT.

Directions ACT began providing take home naloxone through needle and syringe programs, with funding from ACT Health Directorate.

Began providing take-home naloxone through Canberra Health Services Alcohol and Drug Services.

Introduced opioid maintenance treatment contingency guidelines during COVID-19 to maintain patient access to medications during the pandemic.

Increased annual funding to the Canberra Alliance for Harm Minimisation and Advocacy by \$159,590 to expand the take-home naloxone program.

Maintained continuity of access to take-home naloxone during the COVID-19 pandemic.

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Canberra Health Services opened its new Northside Opioid Treatment Service at Belconnen in December 2020.

Increased numbers of organisations have been trained to able provide overdose response training, including needle and syringe programs.

Access to naloxone to clients in high-risk settings has been increased, including on release from prison.

During lockdown in late 2021, specialist AOD services and the peer-based organisation CAHMA ensured naloxone was provided to people impacted by isolation and quarantine requirements.

Despite being significantly impacted by COVID-19 restrictions within schools, the Australian Red Cross Society delivered 17 save-a-mate overdose response workshops (≤20 people per workshop) for young people and parents.

Access to long-acting buprenorphine was expanded, including in community and correctional settings.

An additional \$300,000 was provided for the Canberra Alliance for Harm Minimisation and Advocacy to employ additional treatment support workers to help support people with complex needs who were affected by public health measures, including people who inject drugs, and people with opioid dependencies.

A Budget announcement was made on 21 September 2021 of \$524,000 for Directions Health Services to meet increased demand for primary care and opioid maintenance treatment for clients who are unable to access pharmacies due to the COVID-19 outbreak.

Completed

<p>20. Disrupt and dismantle the networks and facilities involved in the production, cultivation, trafficking and supply of illicit drugs and precursors—particularly targeting organised crime groups.</p>	<p>ACT Policing continued to target drug manufacturing and distribution networks through its works targeting serious and organised crime. In May 2019, ACT Policing seized 5 kilograms of cocaine, worth approximately \$1.5 million, the largest cocaine seizure in the ACT.</p>	<p>ACT Policing continued to prioritise dismantling organised crime groups and individuals involved in illicit drug trafficking and their related supply chains. In 2020, this saw a total of highly addictive substances seized within the ACT, including: 2,728 grams of methamphetamine; 293 grams of heroin; 2,251 grams of cocaine; and 176 grams of MDMA (Ecstasy). It is important to note that current statistics are live, and data is continually revised, therefore statistics may differ depending on the date of extraction. Drug seizure statistics are therefore subject to significant revisions each year.</p>	<p>Completed and ongoing</p>
<p>21. Target the financial proceeds and confiscation of assets from illicit supply activities.</p>	<p>ACT Policing continued to focus attention on confiscated assets deemed to be proceeds of crime. This was assisted by the ACT Government signing up to the Intergovernmental Agreement on Unexplained Wealth, and work progressed on developing an ACT specific unexplained wealth scheme.</p>	<p>ACT Policing continued to target the financial proceeds derived from criminal activity and confiscate those assets. This work involves a close working partnership between the ACT Criminal Investigations Financial Investigations Team and the ACT Office of the Director of Public Prosecutions.</p>	<p>Completed and ongoing</p>
<p>22. Develop a regulatory framework for pre-cursor drugs and equipment that mirrors the Australian Government framework to regulate the sale of substances and key equipment used in the preparation of illicit drugs. This will include, but will not be limited to, an end-user declaration framework for prescribed substances and key pieces of equipment.</p>	<p>ACT Policing continued to work with the Commonwealth on an Australia-wide regulatory framework.</p>	<p>ACT Policing continued to work with the Commonwealth on an Australia-wide regulatory framework. This includes additional considerations regarding specific controlled substances and drug paraphernalia; however this continues to be in-progress given time delays as a result of the COVID-19 pandemic.</p>	<p>Partially completed and ongoing</p>

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23. Maintain and enhance cooperation and collaboration between law enforcement and forensic agencies, across jurisdictions—particularly New South Wales and Victoria.

Work was ongoing.

ACT Policing continue to maintain and enhance cooperation between law enforcement agencies across Australia. This is notably seen across major cross-jurisdictional investigations and their corresponding efforts, such as Operation Ironside, which involved extensive collaboration not only with other states/territories within Australia, but international counterparts such as the Federal Bureau of Investigation (FBI) from the US, Europol, alongside a total of 18 other countries and global partners.

Completed and ongoing

Successful operations such as Operation Ironside saw seizures of illicit substances in tonnes, over 100 weapons seized, police disruptions involving 'threats to kill', over \$44 million in cash, in addition to assets expected to run into the millions of dollars.

24. Gather intelligence and monitor trends to identify new drugs or supply chains.

Work was ongoing.

As in previous years, ACT Policing continued to gather information and monitor trends in relation to new types of controlled substances, supply chains, and how this interrelated to harm, supply, and drug demand. Further to this, ACT Policing continues to work with numerous different government agencies to ensure effective information sharing and collate efforts to monitor and most updated trends in relation to drug control.

Completed and ongoing

<p>25. Drawing on specialist sector knowledge, identify options to expand alcohol and other drug services to meet the needs of a growing population, including outpatient withdrawal services, early interventions and responses to the needs of priority populations.</p>	<p>Invested Budget funding of \$300,00 for preliminary work to establish an Aboriginal and Torres Strait Islander residential rehabilitation facility.</p> <p>Invested \$300,000 annually to expand naloxone access in the ACT.</p> <p>Invested \$200,000 for research to determine whether there is a need for a medically supervised drug consumption service (supervised injecting facility) in the ACT.</p> <p>Invested \$1.075 million over four years (ongoing) to expand the opiate replacement treatment service and provide a range of additional drug and alcohol services at the Alexander Maconochie Centre.</p> <p>Invested \$2.930 million over four years (ongoing) to expand early intervention and diversion programs for people in contact, or at risk of contact, with the justice system. The funds will be allocated to Canberra Health Services Alcohol and Drug Services Police and Court Diversion Service to meeting increasing for early intervention and support services.</p> <p>Invested \$167,000 funding to support continuation of the Karralika outpatient withdrawal program beyond the pilot period funded by the Australian Government.</p> <p>Fully decriminalised adult personal cannabis use to encourage engagement with treatment system and minimise contact with the criminal justice system.</p> <p>Invested \$3.014 million over four years to establish ongoing opioid maintenance treatment clinic in Canberra's north.</p>	<p>Public consultation on the Draft Territory-wide Health Services Plan has been conducted. The Draft Territory-wide Health Services Plan commits to developing a framework for alcohol and drug services and a review of ACT alcohol and other drug services.</p> <p>ATODA has worked the Capital Health Network (CHN) on consultations related to the development of their AOD needs assessment, and ATODA has been contracted to provide an updated 2022-25 report as part of the overall assessment of health needs.</p> <p>ACT Health Directorate is moving towards collaborative commissioning for health services delivered by non-government service providers.</p> <p>The Select Committee Inquiry into the <i>Drugs of Dependence (Personal Use) Amendment Bill 2021</i> also inquired into alcohol and other drug treatment. 59 submissions were received. The Inquiry report to be tabled in the Legislative Assembly by 30 November 2021. The Government will formally respond in 2022.</p> <p>In September 2021 the Government provided \$803,000 to commence design work to deliver a new community-led alcohol and other drug and mental health treatment precinct in Watson. The includes design work for a new Aboriginal and Torres Strait Islander residential alcohol and other drug rehabilitation facility in partnership with Winnunga Nimmityjah and for the redevelopment of the Ted Noffs Foundation and CatholicCare facilities currently located on the Watson site.</p> <p>The needs analysis for a medically supervised injecting facility service completed in early 2021.</p> <p>The new northside opioid maintenance treatment clinic opened in December 2020.</p> <p>Access to long-acting buprenorphine has been expanded.</p> <p>Canberra Health Services has introduced an outpatient alcohol withdrawal program and collaborates closely Karralika on its non-residential withdrawal program, which is funded by the Commonwealth through Capital Health Network.</p>	<p>Completed</p>
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Status

26. Work with primary, secondary and tertiary AOD services, peak bodies, and the Capital Health Network, to improve two-way pathways between alcohol and other drug treatment and primary care.

Introduction of the Directions Health Services Mobile Outreach Clinic to improve primary care access for vulnerable individuals.

ACT Health joint funding with Capital Health Network and John James Foundation of the Mobile Primary Care Outreach Clinic ("Pat", or Pathways to Assistance and Treatment) delivered by Directions Health Services.

This mobile outreach service provides weekly integrated primary care, appropriate acute care services (health, mental health and AOD), and access to a range of supports to highly vulnerable people with complex service needs at five locations across the ACT, for free and without an appointment.

\$300,000 additional funding was provided in September 2021 for the Canberra Alliance for Harm Minimisation and Advocacy for additional Peer Treatment Support Workers, helping to support people with complex needs who are affected by public health measures.

Budget announcement on 21 September 2021 of \$524,000 for Directions Health Services to meet increased demand for primary care and opioid maintenance treatment for clients who are unable to access pharmacies due to the COVID-19 outbreak.

ATODA has continued to engage with the Capital Health Network (the ACT's Primary Health Network) on undertaking fit for purpose AOD specific planning, needs assessment and contracting activities. This has included discussions on improving AOD-related engagement processes through accurate presentation of ATOD data and collaboration opportunities related to AOD data enhancement.

ATODA commenced its next iteration of the Workforce Qualifications and Remuneration Profile, beginning data collection during the period.

Canberra Health Services' Mental Health Services offer physical health assessment, provided by medical and nursing to all consumers being cared for, both and ongoing as is clinically indicated.

Completed

<p>27. Collaborate with non-government organisations to implement the National Quality Framework for Drug and Alcohol Treatment Services and the National Drug and Alcohol Treatment Framework.</p>	<p>National Quality Framework for Drug and Alcohol Treatment Services released in December 2019. National Framework for Alcohol, Tobacco and Other Drug Treatment, 2019-2029 released in December 2019. Implementation work was initially delayed by COVID-19.</p>	<p>The Government is collaborating with non-government organisations to implement the National Framework for Alcohol, Tobacco and Other Drug Treatment 2019-29 and the National Quality Framework for Drug and Alcohol Treatment Services in the context of drug and alcohol service planning and commissioning processes currently being undertaken by ACT Health in collaboration with the AOD sector. The national quality framework and national treatment framework rollout timeframe will extend beyond the life of the current plan. ACT Health is working closely with Capital Health Network, the Australian Government, and ATODA to improve collaboration between funders and coordination of funding. Collaborative re-commissioning of services is also expected to improve funding coordination.</p>	<p>Partially completed and ongoing</p>
<p>28. Develop speciality service plans for ACT Health treatment services and review/develop appropriate models of care.</p>	<p>Work on this Action was initially delayed, and alternative planning processes have been put in place by ACT Health Directorate.</p>	<p>It is estimated that full implementation of the National Treatment Framework will take up to ten years. The National Quality Framework is due to be implemented by November 2022. ACT Health has provided additional funding in 2021 to CAHMA, a peer-led organisation, to achieve accreditation against an approved standard under National Quality Framework for Drug and Alcohol Treatment Services. Other clinical organisations in the ACT are already accredited against approved standards. Work to align online treatment directories to emerging national requirements has been delayed as a result of delays in the national project.</p>	<p>Completed</p>

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<p>29. Undertake co-design processes to: agree on principles for prevention and treatment of co-occurring alcohol and other drug and mental health conditions, including suicide prevention; and then develop an implementation plan for responding to co-occurring mental health and AOD conditions, which could include: development of guidelines; multi-agency responses; outcome reporting, and indicators of integrated service access; and consider the implications of the co-design process for other co-occurring conditions.</p>	<p>Considered the findings of the Productivity Commission Inquiry into Mental Health.</p> <p>Progressed service planning within the Government health services system that further considers the relationship between mental illness and alcohol and other drug use behaviours.</p>	<p>Canberra Health Services Alcohol and Drug Services provides holistic health care, screening, assessments, treatment planning, interventions and care coordination in line with the National Guidelines on the Management of Co-occurring Alcohol and other Drug and Mental Health Conditions in Alcohol and other Drug Treatment Settings (2016).</p> <p>Treatment of co-occurring conditions is priority for Mental Health, Justice Health, Alcohol and Drug Services, as reflected in the MHJHADS Business Plan (July 2021 – June 2022) with the inclusion of the development of a Responding to People with co-occurring Mental Health and Drug and Alcohol Conditions Plan by 30 June 2022. The Plan will focus on enhancing staff members responsiveness in identifying co-occurring conditions and taking a holistic approach to their clinical management</p> <p>Canberra Health Services employs two comorbidity clinicians who are developing further training and support for Mental Health, Alcohol and other Drug workforces.</p> <p>Funding for the redevelopment of the Watson site will help to deliver a world class, community-led alcohol and other drug and mental health treatment precinct for those most in need.</p> <p>ATODA continued to provide alcohol, tobacco and other drug information and harm reduction training for allied sectors over this period, reaching 142 individuals. Due to COVID-19 restrictions, training was primarily provided via 4-part online webinar series. Sectors that participated included youth, housing, multicultural, mental health and women's services. Participants' roles included support workers, managers/supervisors, case managers, youth and social workers, teachers, learning specialists and welfare workers.</p> <p>ACT Health Directorate has jointly funded with Capital Health Network and John James Foundation of the Mobile Primary Care Outreach Clinic ("Pat", or Pathways to Assistance and Treatment) delivered by Directions Health Services. This mobile outreach service provides mental health and alcohol and other drug treatment via outreach.</p>	<p>Partially completed</p>
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<p>30. Identify and implement initiatives to support the development of a skilled and diverse alcohol, tobacco and other drug workforce.</p>	<p>Conducted staff training for implementation of the ACT Drug and Alcohol Court.</p> <p>Expanded staff training for treatment and harm reduction services in providing naloxone to clients.</p> <p>Carried out product familiarisation at Canberra Health Services Alcohol and Drug Services and Alexander Maconochie Centre to support introduction of long-acting buprenorphine.</p> <p>Canberra Health Services and ACT Health Directorate provided staff training and upskilling to develop appropriate clinical skills to respond to the COVID-19 pandemic.</p> <p>Stimulus funding provided by ACT Health Directorate to ATODA funded development of a training program to respond to alcohol and drug uses issues in the context of the pandemic, for example preventing spread of the virus when people are using drugs.</p> <p>Continued expansion of training for staff of treatment and harm reduction services to respond to overdoses and to provide naloxone to clients.</p>	<p>Training has been conducted for alcohol and other drug for workers to respond to domestic and family violence issues. (See Action 35).</p> <p>The ACT AOD Qualification Strategy requires AOD service providers to ensure all their staff have the minimum level (Certificate IV) of expertise in specialist AOD assessment and service delivery. ATODA, delivered nationally recognised AOD Skills set training to 10 workers from four organisations in 2020, and a further 16 workers from seven organisations started their training in 2021, with high gender diversity and rates of Indigenous worker participation. There was more demand for training than capacity.</p> <p>Further work will be informed by the new national AOD Workforce Development Strategy, currently being developed through the national Project Advisory Group.</p> <p>Planning of workforce qualifications and skills are also addressed through the National Quality Framework for Drug and Alcohol Treatment Services and will be incorporated into ACT Health Directorate service commissioning processes.</p> <p>Canberra Health Services supports professional development and career development for all staff members. A range of external and flexible training options are currently being explored.</p> <p>SoBar – No So Straight Up lead by Meridian delivered LGBTQ+ alcohol and other drugs awareness training to 17 organisations from the AOD sector reaching 43 participants (equivalent to approximately one-quarter of the AOD workforce assuming 1 FTE for each participant).</p>	<p>Completed</p>
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<p>31. Collaborate with Aboriginal and Torres Islander services, mainstream specialist Alcohol and Other Drug services (AOD) and other stakeholders to determine specialist AOD implementation priorities, including residential rehabilitation for Aboriginal and Torres Strait Islander peoples.</p>	<p>Invested \$300,000 for co-design work for an Aboriginal and Torres Strait Islander alcohol and other drug rehabilitation program.</p> <p>Provided \$476,200 grant over two years to Winnunga Nimityjah Aboriginal Health and Community services to establish a program to prevent the uptake of excessive alcohol consumption, provide community-wide education about risky drinking, and reduce harm associated with such drinking.</p> <p>Provided grant funding of \$170,577 the Australian Red Cross save-a-mate (SAM) alcohol and other drug program, which will work in Collaboration with Canberra Institute of Technology's Aboriginal and Torres Straits Islander Unit to equip young people and persons at risk with the knowledge and skills to prevent, recognise and respond to alcohol and other drug related emergencies.</p> <p>Provided a Healthy Canberra Grant of \$233,787 to the Worldview Foundation for the program 'Smoke, Booze and Drug Free Prison Post-Release' to work with Aboriginal and Torres Strait Islander inmates.</p>	<p>The Model of Care for the Aboriginal and Torres Strait Islander residential rehabilitation facility was finalised in 2021.</p> <p>Funding of \$803,000 in 2021-22 will provide for preliminary design of a new Aboriginal and Torres Strait Islander residential alcohol and other drug rehabilitation facility in Watson. It will also support design work for the redevelopment of the Ted Noffs Foundation and CatholicCare facilities currently located on the site.</p> <p>The Winnunga Nimityjah grant project to scale up work to address alcohol issues among the Aboriginal and Torres Strait Islander Community has been implemented.</p> <p>The Government announced additional funding to support the continuation of Winnunga's holistic model of health service delivery to Aboriginal and Torres Strait Islander detainees at the Alexander Maconochie Centre (AMC). This work contains a significant alcohol and other drug element.</p> <p>COVID-19 halted implementation of the Smoke, Booze and Drug Free Prison Post Release program, due to the inability of Worldview staff to provide face to face training within the Alexander Maconochie Centre (AMC). The program has been modified and adapted to an online format, and following user testing later this year the modules will go live in 2022.</p>	<p>Completed</p>
<p>32. Deliver a comprehensive strategy that will describe actions to be undertaken to address alcohol, tobacco and drug and blood-borne viruses issues in ACT correctional centres until 2022.</p>	<p>Developed a draft, Alexander Maconochie Centre Drug and Blood-Borne Virus Strategy, and undertook two rounds of key stakeholder consultation on the draft.</p> <p>Completed the final round of key stakeholder consultation on the Alexander Maconochie Centre Drug and Blood-Borne Virus Strategy early in 2020.</p>	<p>The ACTCS Drug and Blood Borne Virus Strategy is near finalisation. The ACT Correctional Services' Drug and Blood Borne Virus Strategy has been drafted and is working through the government approval process for decision on the appropriate time and method for release. The work has been completed, but the release of the Strategy is being considered in the broader context around non-smoking at the AMC.</p>	<p>Partially completed</p>

<p>33. Design and deliver a range of interventions using a number of models to meet the diverse needs of people involved in, or at risk of being involved in, the criminal justice system. This includes exploring ways to increase diversion and treatment and support options available as part of an integrated system in the ACT, through either policy or legislative reform.</p>	<p>Provided Budget funding of \$1.075 million over four years to expand alcohol and other drug services in the Alexander Maconochie Centre.</p> <p>Provided a Healthy Canberra Grant of \$233,787 to the Worldview Foundation for the program 'Smoke, Booze and Drug Free Prison Post-Release' to work with Aboriginal and Torres Strait Islander inmates.</p> <p>Provided a grant of \$325,696 to the Worldview Foundation for pre and post release support for alcohol, tobacco and other drug issues for non-indigenous inmates (to supplement the Aboriginal and Torres Strait Islander Program).</p> <p>In January 2020 fully decriminalised minor personal cannabis use and possession offences for adults, to reduce potential contacts with the criminal justice system.</p> <p>A University of New South Wales report published in 2019 highlighted that the ACT had the second highest rate among Australian states and territories of diversion from the criminal justice system for minor drug offences.</p> <p>Recruited nursing staff to treatment positions at the Alexander Maconochie Centre to expand the range of services offered.</p> <p>Introduced providing naloxone to relevant detainees upon release from the Alexander Maconochie Centre.</p>	<p>Expansion of Canberra Health Services' Diversion Services throughout 2019/20 has improved response rates for assessment and treatment planning for individuals presenting with alcohol and other drug concerns who are in contact with the criminal justice system.</p> <p>The expansion of Diversion Services has increased capacity for ongoing case management with clients. This has also provided additional support to individuals at risk of contact with the criminal justice system, most notably, youth and family counselling.</p> <p>An external evaluation of the Police Illicit Drug Diversion Program was conducted in 2020. The recommendations are being considered. Findings were generally positive.</p> <p>On 11 February 2021, Mr Michael Pettersson MLA introduced a Private Member's Bill, the <i>Drugs of Dependence (Personal Use) Amendment Bill 2021</i> into the ACT Legislative Assembly. The Private Member' Bill seeking to reduce the penalties for drug possession offences and to introduce a Simple Drug Offence Notice (SDON).</p> <p>Select committee hearings on the Private Members' Bill were held in July 2021 and the committee report was tabled on 30 November 2021. The Government will carefully consider the committee's findings and recommendations once they have been made public.</p> <p>The Government allocated \$8.213 million over four years in the 2021-22 Budget ongoing to continue to support the Intensive Corrections Order (ICO) scheme, including funding for eight full-time equivalent positions as well as to cover the cost of weekly drug tests for offenders.</p> <p>Launched in June 2021, COVID-19 halted implementation of the Worldview Foundation Aboriginal and Torres Strait Islander and non-indigenous pre-release programs due to the inability of Worldview staff to provide face to face training within the Alexander Maconochie Centre (AMC). The programs have been modified and adapted to an online format, which will be delivered within the AMC on computers.</p> <p>Development of the online modules has taken time, however, following user testing later this year the modules should go live in the AMC 2022.</p> <p>Progress on the ACT Drug and Alcohol Court is covered under Action 34.</p>	<p>Completed</p>
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<p>34. Implement an ACT Drug and Alcohol Court within the term of the ninth Assembly.</p>	<p>The ACT Drug and Alcohol Court commenced operations in December 2019. Drug and Alcohol Treatment Orders commenced in early 2020.</p>	<p>In the 2021–22 Budget the Government announced an investment of \$17.8 million to continue the Drug and Alcohol Court, which aims to rehabilitate high risk and high need offenders, and protect the community, by providing health and justice interventions, while holding people to account for their behaviour.</p> <p>The Drug and Alcohol Sentencing List deals with offending related to serious drug and alcohol use. It aims to rehabilitate high-risk and high-need offenders, and protect the community, by providing health and justice interventions, while holding people to account for their behaviour.</p> <p>The funding for a further two years, includes funding staff in Justice and Community Services, ACT Health, ACT Policing, Legal Aid and the Community Services Directorate.</p>	<p>Completed</p>
<p>35. Integrate more effective responses within Alcohol and Drug Services for people who either experience domestic and family violence or are at risk of using it.</p>	<p>Consultants 360Edge completed a baseline assessment of ACT treatment services' capacity to respond to issues of domestic and family violence. Allocated Budget funding to continue work to integrate more effective responses to domestic violence in alcohol and other drug treatment services.</p>	<p>ACT Health provided \$250,000 to ATODA to undertake an additional portion of the Safer Families project to improve the capacity of the alcohol and other drug sector to identify and respond effectively to domestic and family violence.</p> <p>ATODA has been working in collaboration with the Office of the Coordinator-General for Family Safety and the ACT Health Directorate to embed the ACT Government domestic and family violence capacity-building approach within the Alcohol Tobacco and Other Drug sector. ATODA engaged consultants 360Edge to provide seven workshops to workers in specialist alcohol and other drug services in the ACT, and for the ACT Domestic Violence Crisis Service to present at each workshop. 91 AOD workers successfully completed the Safer Families training, representing approximately half of the ACT alcohol and drug workforce. Knowledge, skills and confidence levels rose by 47-49% and familiarity with DFV services increased 25%.</p> <p>In June 2021, ACT Health Directorate provided a grant of \$366,300 (GST inclusive) to Winnunga Nimmityjah Aboriginal Health and Community Services for work to 30 June 2023 to build the capacity of the ACT and surrounding region's Aboriginal and Torres Strait Islander communities to address domestic and family violence within the community, particularly in the context of alcohol and other drug use.</p>	<p>Completed</p>

<p>36. Implement actions to increase the safety of ACT road users including: Develop and implement an ACT Drug Driving Strategy; Continue existing road safety strategies that address impaired driving, e.g. roadside breath testing, roadside drug testing; Address the findings of the independent evaluation of the ACT alcohol interlock program; and Conduct activities to educate road users to be unimpaired and alert.</p>	<p>Ran the <i>Drug Driving: Don't Risk it</i> campaign over the summer season. Completed the summer holiday period drug driving road safety campaign <i>Drug Driving: Don't Risk It</i> in February 2020. Participated in the National Drug Driving Work Group. Progressed finalisation of the independent evaluation of the ACT alcohol interlock program</p>	<p>Launched the <i>ACT Road Safety Strategy 2020-2025</i> (the Strategy) and the <i>ACT Road Safety Action Plan 2020-2023</i> (Action Plan) in which the ACT Government committed to actions to address drink and drug driving as a key focus area.</p> <p>The Action Plan commits the ACT Government to reviewing and assessing the effectiveness of the Territory's drink and drug driving scheme against best practice models, including consulting with experts and the community on the effectiveness of scheme and potential reforms. The ACT Government also commits to exploring measures that are appropriate for the ACT, which will deter drink and drug driving. The ACT continued to participate in the National Drug Driving Working Group.</p> <p>Legislative reforms were progressed to address drink and drug behaviours on the entire road network. The Government also ran <i>The Drink or Drive - Choose one campaign</i> which highlighted that whilst it's fun to socialise with friends, if you're drinking the safest options are to catch public transport, get a lift with a sober friend, stay overnight or if you plan to drive, don't drink.</p>	<p>Partially completed</p>
<p>37. Implement evidence-informed programs in community settings such as sporting clubs and workplaces to prevent and reduce harms of alcohol, tobacco and other drugs.</p>	<p>Awarded more than \$2 million on behalf of the Healthy Canberra Grants. Renewed funding for the Canberra Night Crew to reduce alcohol and drug related harms in Canberra City at night. Established a new 'Cannabis and Your Health' webpage on 14 January 2020. Provided information to stakeholders, intermediaries, drug and alcohol services and public health staff. Ran social media advertisements on the health risks of cannabis from 31 January to 19 March 2020.</p>	<p>ACT Health continued to implement Healthy Canberra Grants projects focused on alcohol, tobacco and other drug use, taking into account the COVID-19 context.</p>	<p>Completed</p>

<p>38. Identify a range of evidence-based educational resources that can be used by ACT schools and ensure schools are informed about these resources and know how to access them.</p>	<p>Promoted the Student Well-being Hub. Provided \$154,400 to Canberra Health Services to expand the Prevent Alcohol and Risk Related Trauma in Youth program for students aged 15–16 years, through outreach to schools.</p>	<p>The Positive Choices website was publicised to teachers as a key resource for schools. Teachers can access a range of resources on alcohol and drug education to support the delivery of the Australian Curriculum in ACT schools. The decisions to adopt specific educational materials and resources are school-based decisions. The 'Alcohol and other drugs' focus area addresses a range of drugs, including prescription drugs, bush and alternative medicines, energy drinks, caffeine, tobacco, alcohol, illegal drugs and performance-enhancing drugs</p> <p>Although COVID-19 restrictions led to delays and some modifications to the Canberra Health Services' PARTY Outreach Program, more than 20 sessions were still able to be delivered to approximately 2,160 senior high school students.</p>	<p>Completed</p>
<p>39. Leverage opportunities to inform the public about the contents of illicit drugs and how they are manufactured, including findings from pill testing and drug seizures.</p>	<p>Published pill testing evaluation.</p>	<p>The ACT Education Directorate distributed e-cigarette (vaping) resources provided by ACT Health to schools.</p> <p>The Government continues to explore how to secure substances disposed of at festival-based pill testing services for later testing at government laboratories.</p> <p>Improved internal communications processes have been implemented within ACT Government on drug alerts and in coordination with NSW. Drug alerts in 2021 have included ecstasy potentially containing NBOME and 'cocaine' potentially containing opioids, both of which have been detected in NSW.</p>	<p>Completed</p>
<p>40. Monitor interventions in other jurisdictions and overseas in relation to the supply of alcohol, including the implementation of minimum unit pricing in the Northern Territory.</p>	<p>The National Alcohol Strategy 2019–2028 was released in November 2019. This strategy indicates the Australian Government does not intend to increase alcohol taxation.</p> <p>ACT Health Directorate carried out active monitoring of alcohol supply interventions, including minimum pricing.</p>	<p>To prevent unsafe episodes of alcohol withdrawal occurring the in community, alcohol retail outlets were regarded as essential suppliers during the COVID-19 pandemic lockdowns.</p> <p>The Government is monitoring potential issues arising from internet supply and home delivery of alcohol.</p>	<p>Completed</p>

<p>41. Consider emerging issues, and identified gaps, in alcohol, tobacco and other drug control and respond as required, including participation in national initiatives, during the lifetime of the <i>Drug Strategy Action Plan</i>.</p>	<p>The ACT Legislative Assembly passed amendments to the Drugs of Dependence Act to fully decriminalise adult use of cannabis at home, in September 2019.</p> <p>Invested more than \$518,000 in stimulus funding for non-government treatment services to respond to the COVID-19 pandemic.</p> <p>Maintained continuity of access to essential treatment and harm reduction services during the COVID-19 pandemic and lockdown period.</p> <p>Maintainance the safety of clients and staff during the COVID-19 pandemic.</p> <p>The Government developed amendments to the <i>Drugs of Dependence (Personal Cannabis Use Bill) 2018</i> which were incorporated into the <i>Drugs of Dependence (Personal Cannabis Use) Amendment Act 2019</i>.</p> <p>Amendments to the Drugs of Dependence Act on personal cannabis use to come into effect on 31 January 2020.</p>	<p>In September 2021 the Government also announced \$300,000 in additional funding for the CAHMA for additional Peer Treatment Support Workers to maintain their valuable work to support people with complex needs affected by the ACT Public Health Directions, and an additional \$160,000 in flexible funding to alcohol and other drug services to provide additional treatment and counselling support to those with substance use problems.</p> <p>The ACT Government provided a submission to the Select Committee Inquiry on the Drugs of Dependence (Personal Use) Amendment Bill 2021. The Private Members' Bill proposes reduced penalties for 10 commonly used illicit drugs and introduction of a Simple Drugs Offence Notice.</p> <p>The Government will respond to the Select Committee's report in 2022.</p> <p>The Government, ATODA, CAHMA, CHN Directions and other providers collaborated to maintain access to essential services during the COVID-19 outbreak and lockdown period in 2021.</p> <p>Canberra Health Services supports The Royal Australian and New Zealand College of Psychiatrists (PANZCP) position on the potential utility of psychedelic therapies for the treatment of certain mental illnesses: Further research is required to assess the efficacy, safety and effectiveness of psychedelic therapies to inform future potential use in psychiatry.</p>	<p>Completed</p>
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42. Implement initiatives to improve data collection, management, reporting and analysis.

Requested additional ACT analyses for ACT National Drug Strategy Household Survey 2019 from Australian Institute of Health and Welfare.

The 2019 National Drug Household Survey was released in July 2020. Additional analyses and factsheets for states were included in Strategy materials.

Additional surveys and analyses of survey data regarding cannabis use and policy support.

ATODA worked with the Drug Policy Modelling Program team at the University of New South Wales to develop a Drug and Alcohol Services Planning methodology specific to the needs of the ACT and to provide improved data to inform strategic planning and future funding of alcohol and other drug services in the ACT.

The Australian Secondary Schools' Alcohol and Drug Survey was postponed to 2022 due to COVID-19.

The Government conducted a YourSay survey to assess views of the ACT community on drug decriminalisation and diversion.

ACT Health Directorate has funded ATODA to undertake a co-design process with service users, service providers and policy makers to improve the content and design of the (alcohol and drug) Service Users' Satisfaction and Outcomes Survey. The aim is to better capture the areas of service experience that are of interest and importance to people accessing alcohol and other drug treatment and harm reduction services. This process will be undertaken during the first half of 2022 to inform the next iteration of the Service Users' Satisfaction and Outcomes Survey.

The government supported additional analysis of Illicit Drug Reporting System data by University of NSW regarding naloxone uptake.

43. Refer to learnings from national pilots and explore the implementation of a local early warning system to ensure timely use of data to monitor and respond to emerging drug trends and harms.

Findings from national projects early warning pilots were not released in 2019.

ACT Health is participating in the National Centre for Clinical Research in Emerging Drugs Prompt Response Network (PRN) project. Work to establish the National Prompt Response Network platform will take place in 2022. The national project has been impacted by COVID-19.

Completed

Completed

