

TACKLING ICE IN THE NORTHERN TERRITORY



breaktheice.nt.gov.au



MESSAGE FROM THE CHIEF MINISTER

There is genuine concern across the Northern Territory and throughout Australia about the impact that ice is having on individuals, families and the community.

In smaller communities, the impact of ice and other forms of methamphetamine can be devastating.

The Northern Territory has historically high rates of overall illicit drug use among its youth and adult population. In addition to this complex social issue, we are also facing an alarming increase in ice use, drug-related offending and resultant harm across the community that needs immediate and decisive action.

Ice use does not discriminate, and it is not confined to particular groups. That is why any actions need to be informed by evidence, and effectively coordinated across government agencies, the non-government sector and communities.

Regular use increases dependence, with friends and families often bearing the brunt of the physical, mental, financial and legal consequences. The earlier a person starts using drugs, the greater their risk of harm, including mental and physical health problems, and the greater their risk of continued drug use. This is where supportive friends, family and schools play an important part.

Effective policing and a robust criminal justice system are critical to reducing the supply and availability of ice - however, it is acknowledged illicit drugs will never disappear completely. Effective drug management involves law enforcement activities working hand in hand with evidence-based education, prevention and treatment responses.

We need to make sure we are educating and ultimately stopping Territorians from using ice or other drugs. Parents and schools must work together so our children can learn to make the right decisions about personal health and safety and to positively influence their decisions around drug use.

For whatever reason, there will always be people in society who use drugs, including ice.

Many of those will never seek treatment. They feel that their drug taking is 'under control' and will continue to use. We need to support these people to manage or stop their drug use if and when they ask for help.

Recognising that it is a very complex problem, *Tackling Ice in the Northern Territory* sets out what we're already doing and what we will do to address the health, social and legal problems that ice use is causing to individuals, families and the community.



The Hon Adam Giles



In developing *Tackling Ice in the Northern Territory*, the Northern Territory Government recognises the importance of a coordinated and balanced approach to addressing drug problems.

All government agencies, non-government services and the community have a part to play in reducing the harms associated with ice, but some agencies take a lead role.

The departments of Education, Health, Children and Families and the Northern Territory Police Force all have a critical role to play. Other agencies also contribute to developing effective responses.

These agencies must share information and work together to develop, implement and evaluate strategies to address ice use and supply across the Northern Territory. Reporting against achievements will show where progress has been made and also identify where more attention is needed.

The immediate priorities are developing and overseeing implementation of the Ice Action Plan and responding to the recommendations of the NT Committee Inquiry on Ice and the National Ice Taskforce Final Report.

Government alone cannot solve drug problems. We need effective partnerships with non-government organisations and Aboriginal Medical Services that provide education, treatment and aftercare services, particularly in remote and regional areas. These services are supported by both Northern Territory Government and Commonwealth Government funding.

It will be updated in early 2016 to respond to any additional recommendations from the NT Committee Inquiry on Ice and the National Ice Taskforce Final Report.

BACKGROUND

Tackling Ice in the Northern Territory sets out what the Northern Territory Government will do now as a priority to tackle ice and what it plans to do.

WHAT IS ICE AND HOW IS IT AFFECTING TERRITORIANS?

Methamphetamine is a stimulant that comes in a range of forms, including powder (speed), paste, liquid, tablets and crystalline (ice). Ice is the purest and most potent form.

Ice is not a new drug issue but all available evidence shows a rise in the number of Australians using ice and a significant increase in the severity of harm caused by taking ice.

Not only are there more people using methamphetamine, more people have changed from using powder (speed) to ice. There are also more injecting drug users who now use ice.

More people are seeking treatment, more people are self-reporting ice use through surveys and research and there has been a steady upward trend of amphetamine type substances (ATS) seizures in the Northern Territory for the past four years.

The purity of ice is increasing, but can fluctuate significantly from purchase to purchase. A person using ice will not know how strong it is until they use it -the effect, and their reaction, can vary significantly.

Families often bear the brunt of an individual's ice use through increased aggression and violence, relationship breakdown or through financial problems. Families are also likely to be the main support network and play a vital part for people wanting to cease or manage their ice use. Ensuring families and community groups have access to credible information, effective treatment services and supportive networks is a priority.

As well as having negative health and social impacts, the use of ice is illegal. People who use ice are more likely to come into contact with the criminal justice system whether from purchasing the drug, supplying it to others or engaging in criminal behaviour, such as property crime, to maintain their drug use.

Northern Territory Police have reported an increase in seizures and weights over the past financial year. The profit margins for ice are significant in the Northern Territory, making it an attractive drug market to organised crime groups. Members of the community can assist by providing police with information about drug activity – especially where it is believed it is being supplied or produced.



Research shows that drug related crime has changed and there is increased prevalence of firearms, weapons and violence associated with drug trafficking. This impacts significantly on community safety and requires considerable policing resources.

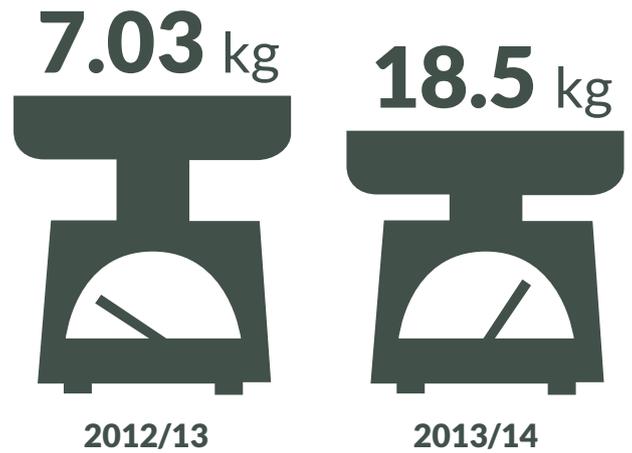
Direct drug defined offences, such as the possession, manufacture or distribution, of illicit drugs is increasing, with dependent users being repeat offenders. Dependent users often supply other users to help support their own habit; which can lead to them owing drug debts.

Repaying these debts often involves other drug related offending, including property crime, acts of violence (such as reinforcing other debts or reinforcing 'turf'). Other issues include the increasing feelings of vulnerability, psychosis and paranoia. Dependent users of the drug are often involved in weapon and firearm incidents - with theft of drugs and firearms a source of financing future drug deals and owning certain areas for drug distribution.

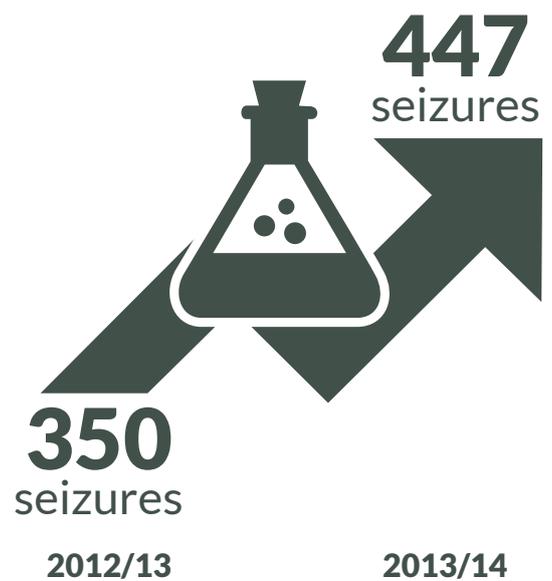
NT Police undertake considerable work to disrupt drug trafficking. As methamphetamine is a synthetic substance, targeting the sale and supply of precursors, other 'ingredients' and equipment is a key priority in reducing the local manufacture of ice. Intercepting drug traffickers and mules who are regularly used to transport the drug between jurisdictions (often as a result of their own drug debts) also helps to reduce supply.

Ice is not a common substance seized on its way to Indigenous communities, but there is concern that increased awareness about the drug may lead to more people wanting to try it.

This reinforces the need for a combined approach of law enforcement activities to reduce supply, effective and credible messages around prevention and education, including recognising signs of use, and appropriate training for health centre and frontline staff.



The total weight of amphetamine type substances (ATS) seized in the NT rose from 7.03kg in 2012-13 to 18.5kg in 2013-14



The number of amphetamine type substances (ATS) seizures in the NT increased from 350 in 2012-13 to 447 in 2013-14

WHAT ARE THE EFFECTS ON SOMEONE WHO USES ICE?

The effects of using ice vary depending on how much is used, how it is used, purity of the drug, frequency of use and the situation it is used in. It can be swallowed, smoked, snorted or injected – however, smoking is the main method of using ice.

When someone uses ice, they may experience:

- Feelings of pleasure and confidence
- Increased alertness and energy, talkative
- Repeating simple actions like itching and scratching
- Dilated and enlarged pupils and dry mouth
- Teeth grinding, jaw clenching and excessive sweating
- Fast heart rate and breathing
- Reduced appetite
- Increased sex drive, reduced inhibitions and unsafe sexual behaviour
- Restlessness and agitation
- Aggressiveness, paranoia and psychosis.

Long term, heavy or dependent users may experience psychosis, paranoia, hallucinations and mood swings. Problems may be compounded by existing mental health, physical, psychological and social issues.

People who inject methamphetamine may experience problems related to injection such as collapsed veins, abscesses and the spread of blood-borne viruses like Hepatitis B and C or HIV.

Taking ice with other drugs can be unpredictable and even more dangerous. Combining ice with other stimulants such as ecstasy can place enormous strain on the heart and other organs, leading to a stroke. Using ice with depressants such as alcohol, cannabis or benzodiazepines can mask their effects and in the case of benzodiazepines, increase risk of overdose.

A criminal conviction arising from drug use, supply or trafficking has major long term consequences on family relationships, employment opportunities and will also mean the person cannot travel to some overseas countries.

Using ice can lead to serious health, legal, social and financial consequences.

No matter which way you look at it, using ice is just not worth the risk.



WHAT HELP IS AVAILABLE FOR PEOPLE WHO USE ICE?

People using ice, or their family members, can get support from a range of Government and non-Government services across Darwin, Alice Springs, Tennant Creek, Nhulunbuy and Katherine.

Alcohol and other drug workers in remote communities can also help.

General practitioners can help users and their families by providing referrals to a treatment service.

Services operate through a combination of Northern Territory Government and Commonwealth Government funding.

Treatment includes assessment, information, counselling, withdrawal, residential rehabilitation, outreach and telephone support services.

The Alcohol and Drug Information Service is a good starting point for users or their family members. It is a confidential hotline and trained counsellors can offer advice, information and referrals to local treatment services. It is accessible 24 hours a day, seven days a week on 1800 131 350.

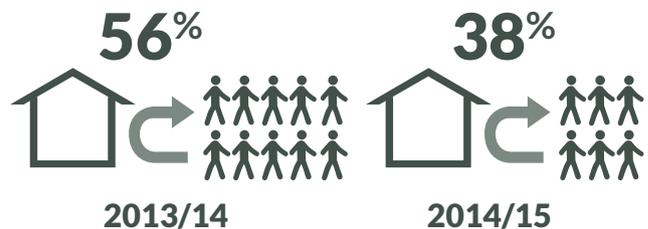
Anyone experiencing a mental health crisis or concerned about someone's wellbeing can call 1800 682 288 (for a free and confidential 24 hours a day service).

Where possible, treatment involves family members. This provides a supportive environment and helps everyone involved understand the problem, accept it and work together to make changes.

Harm from ice use is increasing and this is reflected in data collected from government and non-government treatment services, hospitals and health centres.



In 2013/14 there were 90 treatment episodes, climbing sharply to 245 in 2014/15.



Treatment episodes include those who attend a service for an assessment and discussion of their drug use but choose not to proceed with any follow up treatment. This accounted for 56% of all treatment provided in 2013/14 and 38% in 2014/15.



Counselling remains the most commonly accessed treatment type, accounting for 15% of all visits in 2013/14 and 33% in 2014/15.



Residential rehabilitation accounted for 17% of treatment provided in 2013/14, dropping slightly to 15% in 2014/15.

1800 131 350
 in confidence

TALK

OUR APPROACH

Harm minimisation



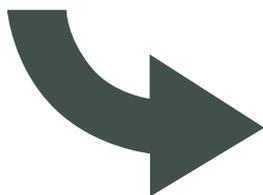
Reduce the demand for ice through education and prevention



Reduce the availability of ice through effective policing



Reduce harms caused to individuals, families and communities by providing counselling, treatment and support services.



This will be supported by:



Ensuring actions across government, non-government services and the community are coordinated, informed by evidence and reflect the diverse needs of different population groups



Developing a local workforce with the skills, knowledge and experience to provide appropriate support and advice for people wanting to stop using ice or to use it in ways that reduces potential for harm



Commitment to collecting, analysing and sharing research and data to improve policy, practice and treatment approaches.





Focus on education and prevention

What we're doing now

- Finalising locally produced evidence-based resources to support teachers and parents to better educate young people about ice. These will be completed by April 2016
- Funding grants to communities and organisations to promote local drug awareness, education and prevention programs
- Providing counselling services to Northern Territory Government school students, including responding to critical incidents which may relate to the abuse of ice by a student or parent
- Facilitating access to school-based drug education programs run by external providers
- Referral of youth offenders to drug education programs.

ACTION PLAN

- 1 Schools and parents help build resilience in young people by talking openly about the harms of drug use and making informed choices
- 2 Provide accessible and evidence-based information to increase community understanding about the effects of drugs use
- 3 Educate people by delivering peer to peer support and community-based programs designed to help people talk honestly about their drug use and how it affects them.

What we will be doing in the future

- Implementation of the positive behaviour and wellbeing program in NT government schools
- By April 2016, produce resources for young people, including posters in local Indigenous languages that are evidence based and target those areas most at risk.
- Produce communication strategies that are evidence based and target those most at risk
- Improve access to telephone information, counselling and follow-up services, and ensure hotlines incorporate methamphetamine expertise
- Review youth diversionary programs to identify how they can be more effective.



Reduce the supply, manufacture and distribution of ice

What we're doing now

- Taskforce NEMESIS – screening of major passenger flights and all drug routes into the NT – targeting of known drug suppliers/importers into the NT
- Strengthening the *Misuse of Drugs Act* to enhance search and seizure powers on drug trafficking routes
- Participation and engagement at the state and national level to improve regulation and controls on precursor chemicals and equipment used to manufacture ice.

ACTION PLAN

- 1 Strengthen legislation where possible to make it easier to identify and prosecute suppliers
- 2 Share intelligence with interstate and overseas to learn what policing methods work best
- 3 Improve identification of drug dealers and clandestine laboratories through strong community partnerships to reduce the amount of ice on the streets
- 4 Monitor sales of chemicals and equipment to make it harder for people to manufacture ice.

What we will be doing in the future

- Amendments to the *Misuse of Drugs Act* and *Sentencing Act* to create new offences, increase police powers and create higher maximum penalties for serious drug offences
- Identify further legislative measures relating to criminal property forfeiture
- Work closely with local councils to develop specific supply reduction initiatives.



Reduce harms caused to individuals, families and communities

What we're doing now

- Providing alcohol and other drug treatment resources and services to the areas of highest need
- Reviewing grant management practices to ensure that services are cost effective and meet the needs of local communities
- Funding needle and syringe programs to minimise the spread of blood-borne viruses such as human immunodeficiency virus (HIV) and hepatitis B and C
- Programs for youth and adult detainees to address drug use and post-release support.

ACTION PLAN

- 1 Encourage safer practices for people who use drugs
- 2 Provide easily accessible information on websites and through telephone hotlines so individuals and families can seek confidential advice, support and treatment
- 3 Reduce the stigma and marginalisation associated with ice use so individuals and their families don't feel ashamed to ask for help
- 4 Fund and support community-led approaches to identify and help solve local issues.

What we will be doing in the future

- Trial the HOPE (Hawaii's Opportunity Probation with Enforcement) strategy, which applies swift sanctions for unlawful drug use, to increase offenders' ability and motivation to participate in behavioural change processes
- Investigate a trial of needle and syringe vending machines
- Work with high-risk industries where current use is understood to be relatively high to improve workplace responses to ice use
- By February 2016, distribute resources to assist individuals, families, carers and communities to identify the signs of ice use and how to seek help from local support services
- Develop an online toolkit to support families and communities to better understand and address the problems caused by ice
- Reduce road trauma harms by amendments to the Traffic Act to enable drug driver testing in more circumstances.



Encourage people to work together and share ideas

What we're doing now

- Attendance at local, and national forums and conferences to exchange information
- Participation in national committees to develop drugs policy, treatment approaches and law enforcement responses
- Regular meetings with community groups to identify local issues and help them to put solutions in place.

ACTION PLAN

- 1 Respect all services, support groups, agencies and clients to reduce the stigma of drug use
- 2 Hold community forums to share and exchange information and ideas on what can be done
- 3 Encourage new ideas to reduce demand, supply and harm.

What we will be doing in the future

- Hold community forums in Darwin and Alice Springs in early 2016 to share information and exchange ideas
- Fund community level activities to address risk factors that lead to drug use
- Strengthen collaboration between the mental health and alcohol and other drug sectors.



Build a responsive workforce

What we're doing now

- Increasing local Indigenous employment in the Alcohol and Other Drugs sector
- 'Yarning about Ice' tool and presentation for government and non-government Primary Health Care Centres
- Providing National Accredited Training to staff in non-government and government services
- Improving training and protective equipment for frontline police respondents engaging with persons affected by illicit drugs.

ACTION PLAN

- 1 Attract and retain suitably qualified people so that people seeking help get the best advice
- 2 Enhance career opportunities for remote and regional Indigenous people to ensure culturally appropriate support
- 3 Develop workplace policies, procedures and training for those who come into contact with ice users and/or their families to enable them to help them and stay safe
- 4 Encourage professional development to ensure counselling and clinical skills are up to date.

What we will be doing in the future

- Implement evidence-based national treatment guidelines
- Increase opportunities for regional and remote people to gain Certificate IV level qualifications in Alcohol and Other Drugs
- Placement of after-hours Alcohol and Other Drugs liaison worker in Emergency Departments to assist with prompt specialist management and the commencement of withdrawal.



Improve the evidence base

What we're doing now

- Conducting local and national research to determine the use and impact of drug use
- Analysing treatment data to determine trends and areas of high demand
- Reviewing data collections to ensure they are as informative as possible
- Collecting data on critical incidents, suspensions and counselling in schools.

ACTION PLAN

- 1 Increase investment in local research projects to identify what is happening
- 2 Collect, analyse and share data to better understand the problem
- 3 Use evidence to develop better policy, strategy and treatment services
- 4 Work with other states and territories to learn from each other about what is working.

What we will be doing in the future

- Review local and National surveys to enhance data collection, analysis and reporting
- By June 2016, implement an NT Alcohol and Other Drug research and evaluation strategy
- Invest in local research and evaluation projects to inform policy and practice.



TALK **1800 131 350**
in confidence

breaktheice.nt.gov.au

