

ALCOHOL AND DRUG USE IN AUSTRALIA: A COMPREHENSIVE POLICY APPROACH INFORMED BY EVIDENCE AND EXPERTS TO REDUCE HARMS

JACQUELINE BOWDEN^{1,2}, SHONA CRABB¹, SCOTT WILSON³, NATHAN J. HARRISON², ASHLEA BARTRAM², IAN OLVER⁴, CAITLIN HUGHES⁵, CAROLINE MILLER^{1,2}, ROBIN ROOM⁶

¹*School of Public Health, The University of Adelaide, Adelaide, South Australia, Australia,* ²*Health Policy Centre, South Australian Health and Medical Research Institute, Adelaide, South Australia, Australia,* ³*Aboriginal Drug and Alcohol Council SA, Adelaide, South Australia, Australia,* ⁴*School of Psychology, The University of Adelaide, Adelaide, South Australia, Australia,* ⁵*Centre for Crime Policy and Research, Flinders University, Adelaide, South Australia, Australia,* ⁶*Centre for Alcohol Policy Research, School of Psychology & Public Health, La Trobe University, Bundoora, Victoria, Australia*

Presenter's emails: jacqueline.bowden@sahmri.com; shona.crabb@adelaide.edu.au; scott@adac.org.au

Chair: Professor Robin Room, Centre for Alcohol Policy Research, La Trobe University

Chair's email: R.Room@latrobe.edu.au

Aim: The overall aim of the symposium is to present the findings from a recent study which provided a critical analysis of alcohol and drug use in SA based on available data and input from 24 key informants. Key informants worked across the AOD sector, or in AOD research in SA and across Australia. The symposium will gather feedback from the audience on ways to use this research to inform policy in SA and across Australia to reduce harms from AOD use in the general community, and among Aboriginal and Torres Strait Islander communities.

PRESENTATION 1: POLICY RECOMMENDATIONS TO REDUCE HARMS FROM ALCOHOL

Presenting Author:
JACQUELINE BOWDEN

Introduction / Issues: Alcohol use and misuse places a significant burden on public health and the health system. Alcohol is associated with over 5,750 deaths per year in Australia and it is responsible for 4.5% of Australia's total disease burden. Alcohol harms both the individual and others and therefore, it has been identified as Australia's primary drug of concern.

Method / Approach: This research comprised: critical analysis of current AOD data and literature in Australia, South Australia (SA), and; interviews with 24 key informants working across the AOD sector or in AOD research in SA and across Australia. Alcohol use trends, harms, drivers and policy responses were investigated.

Key Findings: There has been a steady decline in Alcohol consumption over time in Australia, and SA. The decline is likely due to lower drinking rates in young people, a global trend possibly due to reduced parental supply and the fact that social media is acting as surveillance. Key drivers affecting continued population consumption are: supply (alcohol is currently more widely available and less expensive, relative to previous years), industry promotion of products, limited community awareness of the harms of drinking, social norms,

limited brief intervention when people are developing problem drinking and the social determinants of health. A range of key evidence-based policy recommendations were outlined.

Discussions and Conclusions: Key evidence-based policy recommendations supported by key informants were: establishing minimum unit pricing, supporting a national volumetric tax, restricting alcohol advertising, reducing accessibility of alcohol, funding education campaigns, improving availability of early and brief interventions, ensuring responsible service of alcohol, increasing access to treatment services, reinstating wholesale data and addressing data quality.

Implications for Practice or Policy: The above policy recommendations should be considered by state governments across Australia, as part of a comprehensive approach to reduce the harms from alcohol.

PRESENTATION 2: POLICY RECOMMENDATIONS TO REDUCE HARMS FROM OTHER DRUGS

Presenting Author:
SHONA CRABB

Introduction / Issues: Nearly half of Australians aged 14+ are reported to have used an illicit or other drug at some point in their lives, and 16% have used one recently (in the 12 months prior to being surveyed). Illicit drug use is associated with multiple short and long-term health and social consequences.

Method / Approach: This research comprised: critical analysis of current AOD data and literature in Australia, South Australia (SA), and; interviews with 24 key informants working across the AOD sector or in AOD research in SA and across Australia. Drug use trends, harms, drivers and policy responses were investigated, with consideration given to methamphetamine, pharmaceutical drugs, cannabis, fantasy/GHB, heroin, ecstasy/MDMA, and cocaine.

Key Findings: Use of other drugs has fluctuated over time. In SA, use of methamphetamine, ecstasy and pharmaceuticals (e.g. pain-killers and opioids) dropped between 2016-2019, while cocaine use increased. Cannabis use remained stable. Fantasy/GHB was identified by key informants as an emerging drug of concern. Multiple key drivers affect use, including: social determinants; availability of substances; self-medicating for trauma and pain; inadequate support for rehabilitation. The current framing of illicit drug use as a largely criminal issue is problematic, creating stigma around use and barriers to help-seeking for users.

Discussion and Conclusions: Key evidence-based policy recommendations include: health professional and community education campaigns; 'upstream' programs to address social determinants; providing affordable access to pain and AOD treatment/rehabilitation; peer education; support for families of users; real time prescription monitoring; pill testing; partial decriminalisation; reviewing youth treatment models; needle and syringe programs; strengthening multi-sectoral collaborations; and investment in SA Police (to disrupt supply) and existing monitoring services.

Implications for Practice or Policy: The above policy recommendations should be considered by state governments across Australia, as part of a comprehensive approach to reduce the harms from drug use.

PRESENTATION 3: ALCOHOL AND OTHER DRUG USE AMONG ABORIGINAL AND TORRES STRAIT ISLANDER COMMUNITIES: POLICY RESPONSES TO REDUCE HARMS

Presenting Author:
SCOTT WILSON

Introduction / Issues: Aboriginal or Torres Strait Islander people experience a burden of disease that is 2.3 times that of non-Indigenous Australians. Rates of cannabis use are high and increasing, with 24.1% reporting recent cannabis use in Australia. Further, Aboriginal people have higher rates of methamphetamine and pharmaceutical misuse than non-Indigenous Australians, and are more likely to seek heroin-related treatment.

Method / Approach: This research comprised: critical analysis of current AOD data and literature in Australia, South Australia (SA), and; interviews with 5 key informants working with Aboriginal and Torres Strait Islander Communities across the AOD sector or in AOD research in SA and Australia.

Key Findings: Aboriginal or Torres Strait Islander Australians, compared to non-Indigenous Australians, are more likely to abstain from alcohol. However, those that do consume alcohol are more likely to drink at risky levels and rates of alcohol-related death are five times higher. Cannabis is the most commonly used illicit drug, reported by (24.1%) of adults nationally, and use of pharmaceutical drugs (at 3.8%), meth/amphetamines (3.4%), or ecstasy/designer drugs (3.3%) is more common than non-Indigenous Australians. The social determinants of health, including racism, are key drivers that require response. AOD-specific evidence-based policy recommendations were outlined.

Discussion and Conclusions: Many policy options recommended for the general population (e.g. minimum unit pricing, reducing promotion, and availability) were recommended by experts to reduce AOD harms. Data collection systems in Australia have been particularly problematic, and alternatives such as the Grog App (to be extended into other drug use collection) were recommended, as were programs to reduce boredom in communities, including role models and support of ACCHOs.

Implications for Practice or Policy: The above policy recommendations should be considered by state governments across Australia, as part of a comprehensive approach to reduce the harms from AOD in Aboriginal communities.

Discussion Section: The discussion will bring together threads from the presentations and facilitate dialogue with the audience around the strategies and policy responses mentioned, as well as ways to mobilise the community and build momentum for policy change in SA and across Australia, including for Aboriginal and Torres Strait Islander people.

Discussant: (Chair, as above) Professor Robin Room, Centre for Alcohol Policy Research, La Trobe University

Chair's email: R.Room@latrobe.edu.au

Disclosure of Interest Statement: *This work was supported by a grant from the Ian Wilson Liberal Foundation. JB was supported by an NHMRC Early Career Fellowship, grant number 1157069. The authors declare no conflict of interest.*