



Submission to:

**The City of Sydney's draft Drug and Alcohol
Strategy *2007-2010***

April 2007

1. ACON (AIDS COUNCIL OF NSW INC)

ACON was formed in 1984 as part of the community response to the impact of the HIV/AIDS epidemic in Australia. Since 2000, ACON has been a community-based non-government organisation promoting the health and wellbeing of a diverse gay, lesbian, bisexual and transgender community, and a leading agency in HIV/AIDS policy development and program delivery.

ACON provides education, health promotion, care, support, and advocacy services for members of the GLBT community, including drug users and Aboriginal people, to sex workers and all people living with HIV/AIDS (PLWHA).

ACON has offices in Sydney, Illawarra, Northern Rivers, Hunter and Mid North Coast with an extensive range of outreach services. ACON is also home to the Community Support Network ([CSN](#)), the Positive Living Centre ([PLC](#)), the Lesbian and Gay Anti-Violence Project ([AVP](#)) and the Sex Workers Outreach Project ([SWOP](#)).

2. OVERVIEW

The City of Sydney is to be commended for the developed of the draft Strategy. The role of local government in addressing problems arising for drug and alcohol misuse is an important one. ACON has participated in a consultation process on the strategy and supports the aim, objectives, key principles and target groups identified in the draft.

ACON supports the identification of Gay, Lesbian, Bisexual and Transgender people as a special population in the strategy as this reflects not only the demographic composition of the city but also recognises that the City is host to many of our community events and celebrations.

It should be noted, however, that ACON does not view GLBT communities as “vulnerable” and perhaps consideration could be give to the title of this section on page 15 at 5.0. “Priority Populations” may be more appropriate.

3. ACON’s APPROACH TO DRUG AND ALCOHOL

As a provider of drug and alcohol service within the city of Sydney and as a community based organisation ACON has a significant investment in ensuring that drug and alcohol

issues are addressed in our communities. Addressing the harms associated with alcohol and other drug use is one of seven strategic goals outlined in the *ACON Strategic Plan 2006-2009*.

ACON has a long history of working to reduce the harms associated with alcohol and other drug use. Work in this field began in the late 1980s with a focus on preventing the transmission of HIV through injecting drug use and discussions of the possible impact of alcohol and drug use on sexual behaviour. Since that time we have further developed our services to include health promotion programs and education campaigns, needle and syringe programs, provided injecting equipment and undertaken community education and support at dance parties and provided limited counselling and referrals to drug and alcohol services.

ACON has had a dedicated Drug Strategy since 2002 and we have recently taken steps to build and strengthen our response to drug use through the development of a specialist Alcohol and Other Drugs Program and management structure. The program is supported by a board advisory group that provides expert strategic and programmatic advice. Membership of the group includes ACON board members, ACON management and staff, researchers, service providers and interested community members.

4. COMMENTS AND SUGGESTIONS FOR STRENGTHENING THE DRAFT

General comments

The current draft reads as two distinct documents and would benefit from integrating some of the issues and discussion in Sections 1 to 5 into the Strategy at Section 6. This would strengthen the relationship between the evidence presented in the early sections of the document with the strategic approaches that are proposed.

The relationship between the City and community based organisations and non-government organisations could also be enhanced by increasing the acknowledgement of and references to partnerships throughout the document.

Sections 1 & 2 Introduction and Background

ACON recognises the importance of describing the role of local government, as distinct from other agencies, and of situating the Strategy within National and State policy

contexts. Consideration should also be given to outlining the relationship between the city and the relevant Area Health Services (AHSs). Area Health Services have a role in policy development as well as service delivery and the draft should include acknowledgement of this as well as a description of the relationship between the City and its AHSs.

Statements such as those on the escalation of drug overdoses in the 1990s (p.5, paragraph 1) and that *councils are often the most directly impacted by drug and alcohol harms* (p. 5, paragraph 2) should be evidence based and appropriately referenced.

The recognition of the links between the draft strategy and other relevant city documents in this section is valuable. The draft could be strengthened by referring to relevant and complementary city strategies throughout the document.

Section 3: Alcohol in the City

The use of addiction to describe alcohol dependence is not supported. It is recommended that *addiction/addicted* should be replaced by *dependent* in this and other sections of the document. Similarly alcohol *misuse and abuse* should be used with caution and could be replaced with *the use of...*

Care should also be exercised in expressions used to describe people with drug and alcohol issues, as terms such as “these people” can be seen to be derogatory. It is recommended that the section on street drinkers is reviewed to ensure that it is consistent with the City’s street drinking and homelessness strategies. People who are alcohol dependent to this extent are often referred to as “chronic alcohol users” and perhaps this term is more appropriate.

Section 4: Drugs in the City

This section could be strengthened by reviewing the evidence base on public nuisance issues (such as disposal and other issues in the public domain) and the inclusion of references/citation for any research findings.

The trend towards poly drug use in Australia is well documented and should be explicitly addressed in this section.

It is recommended that there is consistency in defining methamphetamines. The use of terms such as ice, methamphetamines and amphetamines interchangeably in this section of the document is problematic.

Section 5: Drug and alcohol impacts in vulnerable populations

The inclusion of gay and lesbian communities as a priority population is supported. However, as previously stated the use of the word “vulnerable” to describe our communities is problematic.

Consideration should be given to referring the reader to the homelessness and street drinking strategies for information on initiatives targeting these populations (p.15, bullet point 1).

Section 6: Drug and Alcohol Strategy

The aims, objectives and key principles of the strategy, as outlined on page 16, are supported.

Objective 1: Reducing drug and alcohol related crime and anti social behaviour

This section could be strengthened by a more detailed description of the evidence for the relationship between the use of drug and alcohol and crime.

Commitments under this objective should include specific mention of relevant partners and clearly articulate the roles of police and the city in law enforcement initiatives as well as Area Health Services and relevant non-government organisations in the development of harm minimisation plans for licensed premises.

Objective 2: Minimising the negative impact of drug and alcohol use in the public domain

Activities under this objective should be linked to the *draft Safe City Strategy* and to other planned initiatives addressing street drinking and homelessness.

The section could be strengthened by increasing the focus on partnerships with service providers and drug user groups such as the NSW User and AIDS Association (NUAA).

In regards to public injecting and discarded injection equipment, strategies need to be put in place to work with the injecting drug users, including “occasional” users.

Outreach, NSP services and peer based programs are required to reach the people engaging in the behaviour. In addition, effective measures to reduce the impact such as appropriately placed bins, regular emptying of bins and alternative methods of disposal need to be explored.

Objective 3: Reducing impacts from licensed premises

It is recommended that the City work with NSW Police to explore and address the role of security staff in some of the issues identified for licensed premises.

Objective 4: Reducing drug and alcohol related harm among vulnerable Populations

The inclusion of GLBT people as a priority population is applauded and ACON looks forward to working with the City on the development and implementation on all initiatives targeting our communities. However, as previously stated the use of the word “vulnerable” to describe our communities is problematic.

Social inclusion is a key factor in address issues for these populations and approaches should include strategies to consult and develop mechanisms to increase social inclusion. Whilst there is reference made to community consultation mechanisms for the GLBT community, this is not the case for the other populations identified.

The involvement of Aboriginal and Torres Strait Islander people in the development and establishment of the proposed day centre needs to be highlighted in the document. Consideration should be given to related services that would complement such a day-centre, including a staged approach to problem drinking, including reduction, cessation and “dry-house” accommodation and rehabilitation programs.

Objective 5: Improving access of the City community to information on drug and alcohol related harms

ACON currently plays a lead role in developing resources for our communities and actively promotes these in a number of settings. For example, ACON’s Drug Rover

program provides a thorough and effective harm reduction strategy to major events that occur through the city.

Information on alcohol and drugs should not be limited to treatment options and should include strategies to reduce drug related harm.

Objective 6: Advocating to other levels of government

Consideration should be given to the City advocating for the implementation of the recommendations of the NSW Ombudsman's *Review of the Police Powers (Drug Detection Dogs) Act 2001*. Drug detection dogs continue to be used at many events in the City and the review found little or no evidence to support claims that drug detection dog operations deter drug use, reduce drug-related crime, or increase perceptions of public safety.

The city is commended on its continued support for the Medically Supervised Injecting Centre.

Objective 7: Reducing drug and alcohol related accidents and injuries

A statement of support for the MSIC could also be included under objective 7 as the related outcomes of the MSIC are to reduce overdose, reduce drug related accidents including needle stick injuries in public places, and to improve public amenity and safety.

Consideration should also be given to including links to relevant City strategies and initiatives that target alcohol related violence and community safety.

Section 7: Monitoring and evaluation

It is recommended that the proposed Drug and Alcohol Strategy review committee include representation of community based organisations such as ACON and other non-government service providers