



Western Australian Meth Strategy



A message from the Premier

The emergence of meth in our community is putting enormous pressure on families, communities and our police and hospital emergency departments.

Unlike other hard drugs we've previously had to deal with, meth is truly alarming.

The physical effects this drug has on users includes psychosis and aggressive, violent behaviour.

I've heard stories of parents too scared to allow their sons or daughters into their homes for fear of their abusive behaviour while high on meth, mothers too frightened to let their children near their father and siblings too afraid to help their brother or sister for fear of being physically hurt.

Meth is debilitating and it is destroying lives and the fabric of many communities.

The community is crying out for more to be done to help get people off this drug and the Government has responded. We have funded more treatment and rehabilitation services, a 24-hour help line, training

for frontline workers, a specialist meth clinic, more drug support nurses in our emergency departments and Cabinet has approved the drafting of compulsory rehabilitation legislation

The fact that meth is easy and cheap to manufacture adds to the enormous challenge we, as a community, face in trying to disrupt its supply.

Yet the State Government is committed to doing just that, and more.

In addition to a significant law enforcement effort to interrupt the work of the organised crime syndicates feeding meth to our community, we also have a concerted campaign to prevent drug abuse and to educate and support meth users.

The WA Meth Strategy outlines the Liberal National Government's commitment to fighting the meth scourge.

A handwritten signature in black ink that reads "Col Barnett". The signature is written in a cursive, flowing style.

Colin Barnett
PREMIER

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WA Meth Strategy

The use of crystal methamphetamine (also known as meth and Ice) is a significant problem for WA law enforcement and health professionals as well as families and individuals trying to cope with the frightening impact of the drug.

The negative effects experienced by users, such as psychosis and violence, have a knock-on effect in the wider community where meth is increasingly being linked to domestic violence, sexual assaults and other crime.

The sharp shift in the proportion of meth users, the increased harm to individuals, the increasing cost to Government services and growing concern from the community has reinforced the need for the Government's strong and coordinated response to the scourge of meth.

The WA Meth Strategy outlines the State Government's two-pronged approach – targeting the supply chain by strengthening law enforcement measures to reduce production and distribution of meth, and reducing demand for the drug through targeted early intervention programs and individual and community support.

Disrupting Supply

WA Police have experienced a 40.8 per cent increase in amphetamine-type stimulant arrests between 2013–14 and 2014–15.

Research has indicated that meth users are 1.6 times more likely to commit robbery, 1.8 times more likely to commit burglary, 2.1 times more likely to arm themselves with weapons and 1.5 times more likely to commit property offences than non-users.

Drug Use Monitoring Australia (DUMA) statistics sourced in relation to the offenders lodged at the Perth Watch House also indicate that the percentage of offenders who had 'recently used meth', has tripled from 15 per cent in 2009, to 53 per cent in the third quarter of 2015. This is the highest percentage since the data was first collected in 1999.

The amount of meth seized in WA has also significantly increased from 122.7kg seized in the 2013–14 to 276.2kg seized in the 2014–15. From July 2015 to December 2015, WA Police seized approximately 418kg of meth. This figure includes a seizure of 321kg in September 2015.

In the 2014 calendar year, the Australian Federal Police (AFP) seized 193 kg of meth destined for the Western Australian market, with 45kg of these seizures coming from postal and parcel deliveries, 15.2kg from international air courier (e.g. cargo, baggage and internal-human), 16.5kg concealed in freight and 115.7kg seized in other searches.

The Australian Crime Commission (ACC) has determined that a high proportion of the meth seized in Australia originated from overseas. It has become much more profitable for illicit drug manufacturers to purchase meth from countries such as Taiwan and China, than to manufacture it in Australia.

In its 2013-14 Annual Report, the ACC established that one kilogram of meth can be purchased in China for \$6,522, and sold in Australia for \$590,000. This has resulted in a decrease in the number of clandestine drug laboratories producing meth in Western Australia.

WA Police - Meth Enforcement Action Plan

In July 2015 the Liberal National Government announced the Meth Enforcement Action Plan. The Plan has been developed by WA Police to enhance their activities to target supply of meth in the community. In November 2016, on the back of the success of the Meth Enforcement Action Plan, The Liberal National Government committed an additional \$3.1m to boost WA Police meth teams and ensure its continuation. The teams will be boosted by an additional 24 police officers, 10 specialist civilians roles and 8 vehicles.

The Meth Enforcement Action Plan includes the establishment of:

1. Meth Transport Teams

The meth transport teams deploy to key transport hubs, to conduct searches of vehicles, truck, trains and aircraft entering WA, seizing meth and arresting those responsible.

2. Agency cooperation and collaboration

Greater cooperation and collaboration between WA Police Organised Crime Division and federal law enforcement partners, operating as the Joint Organised Crime Task Force.

Partners include:

- Australian Federal Police;
- Australian Customs and Border Protection;
- Australian Crime Commission; and
- AUSTRAC.

Since April 2015, officers have been co-located at the AFP Aviation Operations Building at Perth Airport, are operating as the Joint Organised Crime Taskforce. The Taskforce allows key agencies to share intelligence on drug importations, combine specialist capabilities and detect and disrupt meth importation into WA and arrest those responsible.

3. Dedicated Meth Teams

Dedicated Meth Teams have been established within the Organised Crime Squad to target meth dealers in metropolitan and regional Western Australia.

4. Seize Cash Profits from Meth Sales

Dedicated teams involving collaboration with the Australian Crime Commission have been established. The teams investigate the transfer of money derived from meth, nationally and internationally, seizing funds and arresting those responsible.

The WA Police Proceeds of Crime Squad are also focused on seizing money derived from local meth based dealers.

5. Meth Desk

A Meth Desk has been established within WA Police which provides intelligence and investigative support to support Meth Teams.

6. Clan Labs

In 2011 when clan labs were an escalating problem, the Liberal National Government introduced new laws for adults who manufacture, cultivate or prepare illicit drugs that cause harm to a child which meant they face a mandatory minimum jail term of 12 months. In 2011, 177 clan labs were detected by WA Police, with 35 children present at some sites.

WA Police deconstructed 84 clandestine laboratories in 2014. During the financial year to date 35 clandestine labs have been deconstructed by WA Police, 27 of which were capable of producing meth.

WA Police intelligence indicates that clandestine laboratories in WA are not currently driving the meth trade and there is no evidence that they are capable of producing significant quantities.

However, the Organised Crime Squad (OCS) will maintain resources to locate and dismantle clandestine laboratories which also pose a broad risk to the community.

7. Road Side Drug Testing

Studies have shown that drugs that are capable of impairing driver skills have been found in significant numbers of drivers who have been injured or killed on our roads. Statistics indicate that meth and other drugs are a factor in up to 20 per cent of serious and fatal crashes.

WA Police have increased road side drug testing since 2012 from approximately 9,000 tests to almost 30,000 tests in the 2015-16 financial year.

In 2015-16 \$5.6 million was allocated to WA Police from the Road Trauma Trust Account for additional breath and drug testing and more than \$5 million will be allocated again in 2016-17.

This is a reflection of the commitment to catch meth users who are risking their lives and those of other road users by driving under the influence of illicit drugs.

8. Drug transit route legislation

The State Government has drafted legislation to target meth being transported along known drug routes as well as freight and courier distribution facilities.

Under the proposed laws, a road suspected of being a drug transit route could be declared a search area for a limited time by a senior police officer, allowing police to search any vehicle travelling through it.

The new laws mean police must have a reasonable suspicion the road network, such as interstate border crossings or roads into remote communities, were being used by drug traffickers.

The legislation also targets freight and courier distribution facilities. A senior officer would be able to authorise the search of a freight or courier distribution facility for a maximum period of 24 hours.

Officers could only open individual packages once they have a reasonable suspicion drugs have been detected in them. The State Government consulted with major freight and courier companies, who strongly supported the legislation.

Reducing Demand

Since 2010 there has been significant growth in the Australian meth market.

Meth use in Western Australia is higher than the national average with 3.8 per cent of the population over the age of 14 using the drug compared to 2.1 per cent nationally.

The higher representation of meth use in Western Australia is exacerbated by an increase in the potency of the drug, with 78 per cent of users reporting using the stronger crystal “ice” form in 2013 – compared to 44 per cent in 2010.

Users are most likely to be men between 20 and 29 years old and use amongst this cohort is higher in Western Australia than the rest of country (11.1 per cent compared to 6.7 per cent).

The use of the drug in WA is primarily in the metropolitan area, however anecdotal evidence suggests increasing use in regional areas, in particular remote communities.

The health impacts of meth can be devastating. They include psychosis, heart failure and stroke.

The Liberal National Government has a comprehensive cross-agency approach – led by the Mental Health Commission- to prevention, education and support for individuals and communities to reduce demand for meth.

Mental Health Commission

Specialist alcohol and other drug intervention services and appropriately skilled staff who operate within the community are essential components of responding to meth use early and effectively and will take pressure off the State hospital system.

Over the next two years the Commission will spend an additional \$15 million on prevention and support to individuals, families and communities affected by meth.

This will complement the Australian Government’s National Ice Action Strategy nation-wide investment of \$298 million over four years, which was announced in December 2015.

Treatment and Support

More than \$13 million will be invested over the next two years to expand withdrawal, residential rehabilitation, and community based treatment services in metropolitan and regional areas as well as deliver more drug support nurses in hospitals.

This funding will cover:

1. Dedicated rehabilitation and low-medical withdrawal beds and increased community treatment

An additional \$6.2 million has been invested for 60 beds at rehabilitation services – 52 residential rehabilitation beds and eight low-medical withdrawal beds – all of which will be operational by 1 January 2017.

Western Australia currently has just over 350 publicly-funded residential rehabilitation beds for people with alcohol and other drug issues and the new rehabilitation and low-medical withdrawal beds will be made available within the existing alcohol and other drug residential treatment facilities.

An additional \$3.7 million over two years has been provided to increase the existing State-wide network of Community Alcohol and Drug Services (CADS), through an additional 13 full time staff, which will enable more people to access prevention and treatment services. CADS are specialist community alcohol and drug services who provide prevention, treatment and support.

In addition to the current State Government funding of about \$66 million per year for State-wide treatment and support services, it is estimated the additional investment for rehabilitation and low-medical withdrawal beds and community treatment, once fully implemented, will provide approximately:

190 additional treatment episodes a year for low-medical withdrawal and residential rehabilitation. This represents an estimated nine per cent increase in residential rehabilitation and low-medical withdrawal service provision.

2. New pilot specialist meth clinic

Meth users in crisis need early access to effective interventions to minimise the risk of their use.

Funding of \$500,000 over two years will establish a pilot specialist meth clinic to provide rapid assessment, early intervention and treatment including outpatient withdrawal within the Next Step Drug and Alcohol Service in East Perth.

The clinic will be supported by a doctor and nurse and will link with and accept referrals from a variety of sources including the new Ice Helpline.

The clinic will also act as a centre of excellence for treatment centres and medical services around the State by providing information of the latest and most effective treatments available for people experiencing meth-related harms.

Frontline drug support nurses

Funding of \$2.26 million over two years will deliver more drug support nurses at hospital emergency departments. They will also aim to support meth users, and their families, to connect with treatment in the community after leaving hospital. This aims to ease the pressure on hospitals and reduce stress in emergency departments.

3. Dedicated State Ice Helpline

Meth users and their families often do not know where to go for advice and information about the effects of meth and services available for treating use.

While the Mental Health Commission provides an alcohol and other drug support line, the service has not previously targeted meth users and their families may not be familiar with it.

With funding of \$300,000 over two years, the Mental Health Commission will establish the State Ice Helpline linking directly to its existing alcohol and other drug support line, to provide specialist information, support and referral for individuals and families affected by meth.

In its first week of operation more than 160 callers sought assistance through the Meth Helpline.

4. Involuntary Treatment program

Currently, the Mental Health Act allows us to help someone experiencing a drug-induced psychosis. They can be involuntarily admitted while they are experiencing this psychosis.

However, once that episode has passed (usually after a few days), that person is able to withhold consent for any further treatment, they cannot be involuntarily detained and, most sadly, walk out the door and repeat the cycle.

The Mental Health Commission has already done considerable work in developing a proposal for an involuntary treatment centre and will now develop a model of service for the Government to consider.

The model will be a significant step toward establishing a trial involuntary treatment facility for drug and alcohol users in line with the Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015-2025: Better Choices.

To fast-track a trial of the service model, the Minister will draft new legislation rather than go through the lengthy process of amending multiple aspects of the Mental Health Act.

An additional 1,400 episodes of treatment through the network of Community Alcohol and Drug Services, specialist support in hospitals, the pilot meth clinic and the State Ice Helpline.

This represents an increase of approximately six per cent in community treatment service provision.

Prevention

An additional \$1.65 million will be invested over two years to increase initiatives to prevent, or at least delay, the onset of meth use, to reduce harms among those who are already using, and to encourage people to seek treatment.

The new funding commitments will complement extensive work already being undertaken by the Mental Health Commission as outlined below.

- In 2015–16 the Mental Health Commission committed \$1.1 million over three years for a new targeted meth education campaign. The campaign was developed in partnership with a not-for-profit organisation partner to target young people aged 15 – 29 who are currently, or may be at risk of methamphetamine use. This campaign was launched in late 2015.
- To complement its public meth campaign, the Mental Health Commission has redesigned its Drug Aware website to ensure the public has access to accurate, appropriate information about meth. The website provides factual information about meth use and where to get help, and is accessible from all devices (such as smartphones) and links directly with the Alcohol and Drug Support Line. The website will also link with the State Ice Helpline once developed.
- The Mental Health Commission will further expand the training currently provided to alcohol and other drug and frontline workers to build skill and confidence in working with meth users, including de-escalation conversation techniques.
- A further \$500,000 over two years will be made available to expand the School Drug Education and Road Aware program.

Department of Education

Most young people do not smoke, use cannabis or other illicit drugs.

Drug education is about giving children and young people accurate information and opportunities to practice skills such as decision-making so they can make informed decisions and stay safer.

Through the School Drug Education and Road Aware program a new meth-specific awareness pack has been added to the existing drug and alcohol prevention and education program.

1. School meth awareness pack

The Department of Education has reprioritised existing funding to provide \$250,000 to School Drug Education and Road Aware (SDERA) to develop meth-specific education resources and programs.

The project will deliver a range of resources for school staff and their communities, including:

- a dedicated online resource portal accessible to public and private schools
- an online professional development module for school staff to learn how to teach meth education
- State-wide professional development workshops conducted by SDERA consultants.

SDERA currently delivers 'Drug Aware' and 'Road Aware' education in public and private schools in Western Australia. In 2015–16, to support drug education, SDERA received \$1.534 million from the Mental Health Commission and \$725,471 from the Department of Education, which comprised ongoing annual funding of \$475,471 and the one-off \$250,000 grant to develop the meth awareness pack.

The resource pack is the latest addition to the comprehensive suite of SDERA materials already available to schools to support the delivery of quality drug education to their students and communities.

SDERA's supports and resources are based on national best practice principles and research on drug education.

SDERA works closely with Student Services teams, the School Psychologist Service, School Chaplains and Community Health Nurses to ensure all staff in schools have the necessary knowledge, skills and understandings to support students facing problems associated with drug use.

SDERA receives consistent feedback regarding the high quality of its programs and is recognised as a leader in drug, road safety and resilience education in Western Australia.

2. School curriculum

The Western Australian Curriculum includes the requirement for schools to provide drug awareness education from Year 6 through to Year 10.

Initial education focusses on developing strategies that promote a healthy lifestyle including refusing tobacco, alcohol or other drugs as well as those that promote physical and mental health, safety and wellbeing in various environments.

In Year 9 and 10, education is focussed on developing skills to deal with unsafe situations including strategies to manage situations where risk is encouraged by others, including alcohol and drug taking.

In providing this education, teachers may refer to specific drugs such as meth to develop students' understanding of the issues.

Department of Corrective Services

A large proportion of the WA prison population have substance abuse problems.

Of the prison population of 5751 on 28 May 2015, 2125 (37 per cent) prisoners had an 'Active Problem' listed on their Electronic Medical Record that related to drug use or dependency. This record is used for clinical management, however this is worth comparing with a self-identifying survey conducted in 2013.

The study, published in April 2015, surveyed 719 reception prisoners including 574 men and 145 women. It found:

- 74 per cent of women and 77 per cent of men reported a substance use disorder, with reference to drug use in the previous 4 weeks;
- 45 per cent of women and 42 per cent of men declared meth use;
- 44 per cent of women and 44 per cent of men declared cannabis use;
- 13 per cent of women and 14 per cent of men declared opiate use; and
- 26 per cent of women and 33 per cent of men declared alcohol dependence.

The Department of Corrective Services will spend more than \$5.7 million this financial year on drug and alcohol intervention and treatment services to combat these figures.

1. Court Assessment and Treatment Service (CATS)

Provides suitability assessment reports for offenders who have applied to participate in the Perth Drug Court and intensively case manages up to 90 offenders by facilitating either residential treatment or outpatient community counselling through government or non-government treatment facilities.

2. Breaking Out

A community-based program which targets the needs of offenders with a history of alcohol and drug use that is linked to their offending. The program aims to reduce alcohol and drug use and raise awareness of how emotions and thoughts underlie alcohol and drug use and offending behaviour.

3. The Pathways Program:

Targets adult men and women who have a history of offending behaviour and substance use problems, it uses Cognitive Behaviour Therapy (CBT), the program aims to change thinking and behaviour patterns to increase positive attitudes and beliefs.

4. The PAST Program:

Targets adult men and women who have a history of offending behaviour and substance use problems and assists offenders to develop a greater understanding of their substance use, and provides them with the skills and knowledge to assist in avoiding relapse, associated harms and reoffending upon release.

5. The Drug and Alcohol Through-care Service (DATS):

A re-entry type service with a focus on the initial assessment, through-care counselling including potential referral of clients who have volunteered for the service with an identified alcohol or other drug (AOD) issue.

6. Brief Intervention Service Program:

Targets adult men and women who have a history of offending behaviour and substance use problems and assists offenders to develop a greater understanding of their substance use, and provides them with the skills and knowledge to assist in avoiding relapse.

7. The Health in Prison, Health Outta Prison (HIPHOP) program:

Delivered by external community agencies, the program assists offenders to develop a greater understanding of their substance use, and provides them with the skills and knowledge to assist in avoiding relapse.

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To help disrupt supply

If you have information about drug dealing, drug dealers or a suspected drug house contact

Police

131 444

If you wish to remain anonymous contact Crime Stoppers

1800 333 000

As always, in an emergency

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24 Hour Support lines

Alcohol and Drug Support Line

9442 5000 or **1800 198 024** for country callers

Parent and Family Drug Support Line

9442 5050 or **1800 653 203** for country callers

Working Away Alcohol and Drug Support Line

1800 721 997