

Reducing alcohol, tobacco and other drug harms



2024 ACT Election Platform

Harms from alcohol, tobacco and other drugs (ATOD) are most effectively reduced through a public health-based approach. Additional investment in a health-based approach is required to minimise harm from ATOD in the ACT over the next term of government.

To reduce alcohol, tobacco and other drug harms, ACTCOSS calls on the next ACT Government to:

- prioritise harm reduction and increase investment in harm reduction measures
- reduce alcohol-related harms through evidence-based policy and regulations
- reduce the harms from e-cigarettes and tobacco
- ensure sustainable funding to the ATOD sector that meets community need.

The need for a health-based approach to reduce harms

People who use drugs are among the most stigmatised people in the community, experiencing discrimination in many facets of their lives, including employment and healthcare. This contributes to poor health and social outcomes among people who use drugs in the ACT.

New synthetic drugs threaten to substantially increase mortality from overdose deaths. The ACT lacks a supervised consumption facility, despite the demonstrated health benefits of such facilities operating over many years in New South Wales and Victoria.

Alcohol consumption is the fifth most significant contributor to Australia's burden of preventable disease, accounting for 4.5% of the total burden.¹ Risks are wide-ranging and include alcohol use disorders, suicide and self-harm, and liver and breast cancer. Effective regulation of the alcohol industry can substantially reduce these harms, however industry influence reduces the likelihood of evidence-based policy and regulation being implemented.

Tobacco use is Australia's leading cause of preventable morbidity and mortality, accounting for 8.6% of the burden of disease.² E-cigarettes are a relatively recent phenomena that pose a new set of health challenges. While they may provide a means for some current smokers to reduce tobacco-related harm, they are also increasing nicotine dependence, particularly among young people.

The ACT Government has taken nation-leading steps toward responding to drug use as a health issue rather than a justice issue. This includes passing the *Drugs of Dependence (Personal Use) Amendment Act 2022*, and establishing the drug testing service CanTEST.

But more needs to be done to build on these measures. This includes a continuation and expansion of therapeutic approaches to drug possession; health-focused policies and programs grounded in evidence and prioritising harm minimisation; and sustainably funding the specialist treatment and harm reduction services to meet community need.³

Policy priorities

Increase investment in harm reduction measures

Of the total amount spent on responding to illicit drugs by Australian governments, only 1.6 percent is devoted to harm reduction measures, despite evidence that these measures reduce the rate of health harms and death from ATOD.⁴ Person-centred and health-based approaches to drug use have been shown to result in effective harm reduction and better health outcomes.⁵

The current model of drug decriminalisation in the ACT allows for people who use drugs to be referred into therapeutic health settings, thus reducing ATOD-related harms.^{5,6,7} It is less than 12 months since this reform took effect and it is essential a robust impact evaluation is undertaken to assess its impact. Notwithstanding this – there is no evidence base to suggest that repealing the law at this stage will improve health outcomes for the ACT community.

The CanTEST service reported that 70 percent of clients accessing the service had never engaged with a health care worker for information about drug use before, and 10 percent of people utilising the service discarded their drugs following the test.⁸

Supervised consumption rooms play an important role in a comprehensive harm reduction framework, reducing drug-related harms to the individual and the broader community.

- Continue drug decriminalisation into the future as a key harm reduction measure in the ACT.
- Make permanent the CanTEST drug testing site to continue to reduce harms and increase access to drug-related information, education and support for people who use drugs.
- Resource at least one supervised consumption room in the next term of government. This should be designed to be responsive to the specific context of the ACT, meet consumer needs and be informed by best practice models.

Reduce alcohol-related harms

National alcohol-related deaths reached a peak in 10 years in 2022. Approximately 46 percent of clients accessing ATOD services in the ACT in 2023 reported alcohol as a drug of concern, and 43 percent of ATOD clients nationally reported it as their primary drug of concern.^{9,10,11}

Independent regulation of the alcohol industry is vital to ensure objective, evidence-based decision-making that prioritises the health of the community over vested commercial interests. Despite this, five of the eight appointed members of the current ACT Liquor Advisory Board have a vested commercial interest in the sale of alcohol. The current composition of the Liquor Advisory Board means it cannot effectively fulfill its remit to reduce the harms associated with alcohol consumption via regulation of its sale, supply, and promotion.

Laws and regulations have not kept pace with the changing ways alcohol companies do business. The rapid expansion of online alcohol sales and rapid delivery services has made alcohol more accessible at home, creating added risks to community health and safety. Amending online sales and delivery licensing regulation is important to reduce alcohol-related harms, including the role of alcohol in the incidence of domestic and family violence in the ACT.

Alcohol marketing is linked to higher levels of drinking and increased levels of risky drinking, particularly among young people.¹² Seventy-three percent of ACT residents support limiting alcohol advertising online and on social media.¹³

- Amend online sales and delivery licensing regulations in the ACT to restrict delivery to the hours 10am-10pm, and to mandate a two-hour safety pause between purchase and delivery.
- Review and amend the membership of the ACT Liquor Advisory Board.
- Review and, where needed, amend alcohol industry marketing of alcohol products in the ACT.

Reduce the harms from e-cigarettes and tobacco

Tobacco remains the leading cause of preventable death and disease in Australia.¹⁴ In the ACT, there has been significant uptake in the use of e-cigarettes, with approximately one in five (18 percent) of the population reporting in 2022-23 that they have ever used e-cigarettes (an increase from 11.3 percent in 2019).¹⁵

- Ensure tobacco and e-cigarette use in diverse and marginalised populations is prioritised in public health policies.
- Increase the accessibility and affordability of best-practice combination Nicotine Replacement Therapy (NRT) and support in order to meet community demand, and to meet the goals of the *National Tobacco Strategy*.
- Expand the therapeutic model of access to e-cigarettes to include pharmacies where e-cigarettes can be utilised for tobacco cessation or the management of nicotine dependence.
- Undertake ongoing evaluation of e-cigarette uptake, access and health harms as we move to the next phase of regulatory reform in Australia and the evidence base continues to evolve.

Ensure sustainable funding to the ATOD sector that meets community need

ACTCOSS supports ATODA's call for sustainable funding for the ATOD sector, so that the sector can continue to provide efficient and effective specialist treatment and harm reduction services to our community.¹⁶ As part of the [ACT for Community campaign](#), ACTCOSS has joined organisations from across the community sector to call for sustainable funding for community services in the ACT. This includes the ATOD sector, where funding has failed to keep up with population growth, the true cost of delivering ATOD services, and the level and complexity of community need.

- Provide sustainable funding to the ATOD sector that reflects the true cost of delivering services and the level and complexity of community need.

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End Notes

This election brief is based on the [election platform](#) of the [Alcohol, Tobacco and Other Drug Association ACT \(ATODA\)](#), which is the peak body for the alcohol, tobacco and other drug treatment and harm reduction sector in the ACT.

¹ Australian Institute of Health & Welfare (AIHW), *Australian Burden of Disease Study 2018: Interactive data on risk factor burden. Alcohol use*, 2021.

² Australian Institute of Health & Welfare (AIHW), *Australian Burden of Disease Study 2018: Interactive data on risk factor burden. Tobacco use*, 2021.

³ Alcohol, Tobacco and Other Drug Association ACT (ATODA), [2024 ACT Election Priorities Statement](#), 2024.

⁴ A Ritter, M Grealy, P Kelaita, M Kowalski, *The Australian 'drug budget': Government drug policy expenditure 2021/22*, Social Policy Research Centre, UNSW, 2024.

⁵ A Unlu, T Tammi, P Hakkarainen, *Drug Decriminalisation Policy: Literature Review: Models, Implementation and Outcomes*, 2020.

⁶ H Ashton, Drug Decriminalisation in Portugal: A Public Health Response, a Humanistic Approach. *Health for the Millions* 2019; 45: 41-43.

⁷ I Benfer, R Zahnow, MJ Barratt, L Maier, A Winstock, J Ferris, The impact of drug policy liberalisation on willingness to seek help for problem drug use: A comparison of 20 countries, *The International Journal on Drug Policy* 2018; 56:162-175. DOI: 10.1016/j.drugpo.2018.03.032.

⁸ ACT Government, [CanTEST final report finds strong community support](#) (media release), 17 July 2023, (accessed 18 September 2024).

⁹ Australian Institute of Health & Welfare (AIHW). *Alcohol, Tobacco & Other Drugs in Australia: Health impacts*. 13 December 2023 ed. Online: Australian Institute of Health & Welfare, 2023.

¹⁰ Alcohol, Tobacco and Other Drug Association ACT (ATODA), *Service Users' Satisfaction and Outcomes Satisfaction and Experience (SUSOSE) 2023: a survey of people accessing alcohol, tobacco and other drug services in the ACT*, In Press.

¹¹ Australian Institute of Health & Welfare (AIHW). *Alcohol and Other Drug Treatment Services in Australia: early insights*. 16 April 2024.

¹² J Stafford, T Chikritzhs, H Pierce, S Pettigrew, An evaluation of the evidence submitted to Australian alcohol advertising policy consultations, *Plos one*, 2021, Dec 10;16(12):e0261280.

¹³ Australian Institute of Health & Welfare (AIHW), *National Drug Strategy Household Survey 2022-23*, 2024.

¹⁴ Department of Health and Aged Care, *National Tobacco Strategy 2023-2030*, Australian Government, 2023.

¹⁵ Australian Institute of Health & Welfare (AIHW), [National Drug Strategy Household Survey 2019—Australian Capital Territory](#), 2020.

¹⁶ Alcohol, Tobacco and Other Drug Association ACT (ATODA), [2024 ACT Election Priorities Statement](#), 2024.