



## Methamphetamines and Demand Reduction

### How can we change the market culture and demand for methamphetamines?

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This paper presents some initiatives to reduce demand for Methamphetamines and provides:

1. Information about methamphetamines and a contextual overview of use.
2. Why Australia? Some reasons why there is a lucrative market for methamphetamines in Australia
3. Why do we need to take preventative action?
4. What can be done ? Examples of successful models of demand reduction.

### 1. Methamphetamines in Australia – a contextual overview

According to the United Nations World Drug Report, 2013, Australia and New Zealand have the highest overall per capita rate of illicit drug use, when compared to other OECD nations, especially Sweden. This is mainly due to high levels of ATS and Ecstasy

It is important to compare Australia's policy approach to that of Sweden, given their much lower rate of per capita consumption.

Here are the latest statistics on the Annual Prevalence of Use – 15-64 year olds:

Substance	Australia	New Zealand	Sweden
Opiates	0.2	0.10	0.17
Cocaine	2.10	0.60	0.50
Cannabis	10.3	14.6	2.61
ATS	2.10	2.10	0.8
Ecstasy	3.0	2.60	0.10

Of note also is the fact that Sweden, whose population is 40% of that of Australia, has a total of 29,500 problematic drug users, according to the Swedish National Institute Of Public Health 2012.

Australia has approx 225,000 hep C sufferers and 220,000 dependent cannabis alone. The two national drug policies are poles apart, with Sweden implementing a restrictive policy, based on prevention and early intervention. Australia's Harm Minimisation focus, gives priority to treatment, with little attention and support for primary prevention.

Globally, in 2011, an estimated 0.7 per cent of the world population aged 15-64, or 33.8 million people, had used ATS in the preceding year.

- **Methamphetamine** continues to dominate the ATS business, accounting for 71 per cent of global ATS seizures in 2011. Methamphetamine pills remain the predominant ATS in East and South-East Asia: 122.8 million pills were seized in 2011.

### **Australian Crime Commission Report**

- In a report released on 29 April 2014 the Australian Crime Commission has warned the nation that the size of the ICE problem is reaching pandemic proportions.

According to the report West African and Chinese organised crime gangs are supplying significant amounts of ATS to South East Asia for domestic consumption, and Australia is a key market, with high demand. In the past decade increases in supply has reached 751%. Pricing is high in Australia and people are paying it.

#### Other facts revealed include:

- 20 tonnes of illegal drugs worth \$2.7 billion were seized in Australia during the past year.
- There were record numbers of seizures in Australia last year of cannabis, ecstasy, heroin, cocaine, amphetamine-type stimulants and steroids.
- **In Victoria 'ICE'** is easily the purest available in Australia, with the median purity level jumping from 20 per cent to 76.1 per cent in just the past two years.
- **Victoria** last year had the biggest percentage increase of any state in seizures of ice and other amphetamines, with more than 1.8 tonnes grabbed in what was a 35 per cent increase in the number of busts.
- **Victoria Police's Deputy Commissioner Ashton** has revealed that bikie gangs and overseas criminal syndicates were taking advantage of the highly addictive aspect of ice "to actively hook thousands of young Victorians".

### **Concerning new methamphetamine trend data**

Turning Point Alcohol and Drug Centre reports that:

- ICE-related call-outs in **regional Victoria** increased by nearly **200% in 2012-13** from 2011.
- In one year, ice-related ambulance calls **increased by 88 per cent in the city of Melbourne**, dealing with issues such as mental health symptoms, psychosis and anxiety, injuries as a result of accidents and violence.
- Children as young as 14 are becoming addicted to the drug, and the regional areas of Latrobe, Moorabool, and Horsham have recorded the highest rates per capita.

## **2. Why Australia? Reasons why there is a lucrative market for methamphetamine in Australia**

### **Price**

Organised crime gangs are flooding Australia with ice and other illegal drugs because Australians are prepared to pay world record prices for them. We are one of the world leaders in terms of price at up to \$320,000 a kilo of crystal meth (ice), compared to the United States where the average price is \$100,000 per kilo and china about \$7000 a kilo. Organised crime is aware Australians have a particularly high disposable income after decades of economic growth'. – source: the ACC's national manager of strategic intelligence, Hamish Hansford.

## **Soft or Token Penalties**

Penalties for drug trafficking and use are all too often a 'slap on the wrist'. Victoria has recently proposed tougher penalties for trafficking, but it is yet to be tested.

Availability, Accessibility and Acceptability, without Accountability lead to a permissive drug policy regime.

## **Lack of knowledge about methamphetamines**

- The most common forms of amphetamine are powder and tablets or capsules.
- Methylamphetamine has four common forms — tablet, crystal, base (also referred to as paste) and powder (also referred to as speed) — with powder the most common form used in Australia. Ice is generally heated and the vapours inhaled. It may also be injected after being dissolved in water.
- Crystal methylamphetamine, often referred to as 'ICE' or 'crystal meth', is a highly purified form that is crystalline in appearance. Intelligence obtained by the ACC reveals the median purity of ICE on sale in Victoria is the highest in Australia at 76.1 per cent pure, compared with between 50 and 68 per cent in other states.

## **Lack of awareness of the harms to mental and physical health**

- Due to slight structural differences, methylamphetamine produces a stronger nervous system response than amphetamine.
- Short-term effects of use may include sweating, headaches, insomnia, anxiety and paranoia. High doses can result in blurred vision, hallucinations, tremors and stroke.

Long-term use may result in severe dental problems, reduced immunity, high blood pressure, depression, impaired memory and concentration, deficits in motor skills, aggressive or violent behaviour, anxiety, cardiovascular problems and kidney failure

## **Lack of Political Will**

Low government priority to provide preventative initiatives such as effective, targeted and continuing community education campaigns.

In 2002-5 Australia had a well funded and resourced National School Drug Education Program. By 2007 it was effectively dismantled. Schools are now left to their own devices in dealing with drugs issues and rely on charities or NGO's to provide education programs. Two of these are the Dalgarno Institute and Life Education.

In 2006/7 the Federal Government's Department of Health and Ageing produced a confronting, but potentially effective media and community communication campaign designed for television. Every household received a booklet about the harms of illicit drugs. Interestingly the 2007 National Household Survey showed a decrease in illicit drug use. Unfortunately the media campaign was short-lived; had it been sustained, we may have seen even better results in the 2010 Household Survey.

More political emphasis and government resourcing has been allocated to treatment and harm reduction. These are necessary, but really represent the 'ambulance at the bottom of the cliff' scenario.

To quote Colliss Parrett, Fellow of Drug Free Australia and former Director, Drugs of Dependence, Commonwealth Dept of Health: 'Drug events are reported most days of the week in our national papers. In Sydney, methadone users who are selling their take-way doses are reportedly linked to a black market in the drug. In Australia there are 47,000 people registered for treatment with methadone, mainly for heroin use. Sweden has forty percent of Australia's population. A Swedish 2012 Institute of Health report reveals that country has only 1700 on methadone'.

### 3. Why do we need to take preventative action?

- Pandemic destroying our young, their brains and their future potential.
- High negative impact on safety and productivity in workplaces
- Increased risk and danger on our roads
- Increased violence in our communities, families and relationships

An example close to home - Methamphetamine has been blamed for the majority of violent and property crimes in Warrnambool. The head of a police unit set up to tackle the ice problem said many offences involving violence, burglary, theft and “home run-throughs” occurred last year because the perpetrators were involved in the ice trade.

#### **Increased incidences of child abuse and neglect – the Rights of the Child**

NIDA in the United States estimates that: 'Approximately 50% to 80% of all child abuse and neglect cases substantiated by child protective services involve some degree of substance abuse by the child's parents.'

And the results play out in trends like this one in Australia:

The 2011 Cummins Report into Victoria's vulnerable children shows an alarming trend – which could well be a reflection of other jurisdictions in Australia.

It found that over the past decade, the number of children and young people in out-of-home care increased by 44 per cent an annual growth of around 4 per cent a year bringing the total number of children and young people in care to 5700 at June 2011.

In 2010-11, there were 55,000 reports concerning child safety to the Victorian Department of Human Services with nearly 14,000 considered sufficiently serious that they were formally investigated. Those investigations found that for 7600 of these cases, the concerns about the safety or welfare of these children were well founded.

The report found that Aboriginal children and young people were significantly over-represented in Victoria's system for protecting children.

The following is a specific example:

*'Child protection workers (in Victoria) received a staggering 5828 complaints of neglect in 2010-11. In the worst substantiated cases, overworked investigators found children left in conditions so bad they had to remove their rotted teeth and teach them how to sit at a table. Shocking revelations of abuse included incidents of toddlers being left to starve among human waste, rat infestations and used syringes in their toy boxes.'*

Clearly, there is a significant need to re-visit and implement **proactive prevention and early intervention** strategies.

**Clearly there is an urgent obligation to re-visit our responsibilities related to the UN Convention on the Rights of the Child** – the most ratified Human Rights Convention in the world:

**Article 33 states that member states – that is Australia :** *“shall take all appropriate measures, including legislative, administrative, social and educational measures, to protect children from the illicit use of narcotic drugs and psychotropic substances as defined in the relevant international treaties, and to prevent the use of children in the illicit production and trafficking of such substances”.*

**Article 6 states that** *“every child has the inherent right to life and that Member States shall ensure to the maximum extent possible the survival and development of the child”*

**Article states that 27 states that Member States** *“recognize the right of every child to a standard of living adequate for the child's physical, mental, spiritual, moral and social development”.*

#### **4. What can be done? - Successful models of Demand Reduction**

A number of countries have demonstrated examples of demand reduction and early intervention to prevent harms caused by methamphetamines

**Sweden is one that has been exceptionally successful.**

In the 1970s Sweden had the highest levels of drug use in Europe, but had the lowest levels of drug use in the developed world by the new millennium.

How did Sweden achieve this?

- A restrictive drug policy
- Emphasis on rehabilitation of all problem drug users
- Court-enforced rehab as against court enforced prison
- Use is still criminalised to send a clear message about the harms of illicit drugs, especially methamphetamine

If Australia wants to follow best-practice, we could certainly learn from Sweden.

For example:

##### **Sweden's 'Compassionate policing'**

Stockholm County Police combine with Social Services in an early intervention approach when minors are found to be using drugs. They attend Raves and other venues where young people might be tempted to experiment and when they are alerted to an incident they speak to the young people and request them to attend a special centre (not a police station) for questioning and testing. At that point they are introduced to staff from Social Services and Health Care and offered treatment.

**Sweden's 'Top Down & Bottom Up Approach'** is the key to their successful drug strategy. This is a combination of **Political Will + Leadership** from the Swedish Government combined with the implementation of education and health programs to achieve the strategy. Education and public awareness campaigns are conducted with a synchronised message of prevention between school, health and law enforcement.

**Mentor International and Sweden's involvement** – with high profile leadership in Queen Sylvia of Sweden

Mentor Sweden is part of the Mentor Foundation, an international organization working with drug prevention around the world.

It was formed in Sweden in 1994 with a sole focus on health promotion and prevention of drug abuse among children and young people in Sweden.

The target groups are young people between the ages of 13-17, parents with children 6-18 years and schools.

In partnership with Swedish corporations and adult volunteers from the public, Mentor Sweden manages three key programs: Mentoring, Parenting and Inspiration activities that create study motivation, among others.

The activities aim to prevent abuse by building relationships and meaningful communication between young people and adults.

## United States

- **CADCA** - <http://www.cadca.org>

Community Anti-Drug Coalitions of America (CADCA), headquartered in the historic city of Alexandria, Virginia, about 5 kilometers from the nation's capital, has established itself as one of the leading substance abuse non-governmental organizations (NGOs) in the United States.

CADCA assists community coalitions by providing the support they need to become stronger, more effective and better able to sustain population-level reductions in substance abuse rates and related problems. CADCA currently represents over 5,000 community coalitions across the United States and over 100 coalitions in twenty countries on five continents.

- **Prevention Programs for Young Rural Teens**

Research supported in part by the National Institute on Drug Abuse (NIDA), National Institutes of Health, shows that prevention programs conducted in middle school can reduce methamphetamine abuse among rural adolescents years later.

It is the first study to examine the effects of a preventive intervention on methamphetamine abuse among youth, according to NIDA Director Dr. Nora D. Volkow. "The results of this research indicate the effectiveness of prevention programs on lifetime or annual methamphetamine abuse."

The research assessed the effects of two randomized, controlled, prevention trials on methamphetamine abuse among middle and high school students.

In the first study, 667 families of rural Iowa 6th-graders were randomly assigned to participate in one of two family-focused interventions, the *Iowa Strengthening Families Project* (ISFP) or the *Preparing for the Drug Free Years* (PDFY) program, or act as controls. A total of 457 families participated in the 12th-grade follow-up.

In the second study, 679 families of rural Iowa 7th-graders were randomly recruited for the *Life Skills Training* (LST) program (a school-based intervention) combined with the *Strengthening Family Program for Parents and Youth 10-14* (SFP10-14 — modified from the ISFP), the LST program only, or a minimal-contact control group. A total of 588 families participated in the 11th-grade follow-up and 597 families participated in the 12th-grade follow-up.

The *Iowa Strengthening Families Project* and *Strengthening Family Program for Parents and Youth* target the enhancement of family protective factors and the reduction of family risk processes. The *Preparing for the Drug Free Years*



program is designed to enhance parent-child interactions and to reduce children's risk for early substance abuse. The *Life Skills Training* program is a school-based intervention designed to foster general life skills as well as teach students tactics for resisting pressure to use drugs.

## Results

In the first study, none of the ISFP 12th-graders had abused methamphetamine in the past year compared to 3.6 percent of the PDFY 12th-graders and 3.2 percent of the controls.

In the second study, the combined SFP 10-14 + LST intervention showed significant effects on both lifetime and past year methamphetamine abuse.

Only 0.5 percent of this group had abused methamphetamine during the past year, compared with 2.5 percent for LST-alone and 4.2 percent of the controls. At the 12th-grade follow-up, lifetime abuse of the drug was significantly lower in both the SFP 10-14 + LST and the LST-alone groups (2.4-2.6 percent) versus the control group (7.6 percent).

"Adolescents who participated in both programs showed a relative reduction in lifetime methamphetamine abuse of 65 percent compared with the controls," says Dr. Richard Spoth, of Iowa State University and lead author of the study. "This means that for every 100 adolescents in the general population who reported methamphetamine abuse, there would be only 35 in the intervention population reporting abuse during the same period."

- **Media and public service campaigns**

*The Partnership for a Drug-Free America "Meth Stories: Affecting Your Community"* web site, have been developed for youths and parents that exclusively focus on preventing meth use and changing perceptions of the dangers associated with meth use.

[www.rehabs.com](http://www.rehabs.com) have released a new video that shows the tragic downfall of several healthy men and women after addiction to hardcore drugs.

*Learn the Link* - Demonstrates the importance in knowing that methamphetamine use is also linked to risky sexual behaviors, which increase the risk for transmission of infectious diseases, including HIV. It is increasingly important that young people "learn the link" between drug abuse and HIV/AIDS. *Learn the Link* is the focus of NIDA's current public service campaign, designed especially for young people. *Fact sheets on the health effects of drugs of abuse and information on NIDA research and other activities can be found on the NIDA home page at <http://www.drugabuse.gov>.*

## Iceland – Watch this Space ...

Substance use amongst Icelandic adolescents has become the lowest in Europe in 2013 from measuring very high only a few years ago. In 1998 42% of 15 to 16 year old Icelanders had become drunk during the past 30 days whereas now, in 2013, only 5% of students report the same. Daily smoking and the use of cannabis has also decreased dramatically (click here to see graph).

The Minister of Health of Iceland has approved an alcohol and drug prevention policy until 2020. A task force made up of representatives from several ministries will define quantifiable targets on the basis of this policy and develop a plan of action to work towards achieving them. The policy also covers the abuse of prescription drugs which can lead to addiction and dependency.

The main goals of the policy are to:

- prevent young people from starting to consume alcohol or other drugs
- restrict access to alcohol and other drugs
- protect groups at risk from the damaging effects of alcohol and other drugs
- ensure that those who have addiction problems have access to continuous and coordinated services
- reduce health damage and deaths related to consumption of alcohol, or other drugs, consumed by individuals.

This is definitely a demand reduction model to watch.