State and Territory Alcohol and Other Drug Peaks Network (the Network)

Submission to the Public Inquiry into public communication campaigns targeting drug and substance abuse

January 2020

It is the position of the State and Territory Alcohol and Other Drug Peaks Network (the Network) that national mass media campaigns targeting alcohol and other drug demand have historically been unsuccessful, and in some cases even detrimental:

- Based on the best available evidence they have had rare and very limited success;
- in the worst cases they have contributed to increased use of the target substance, or at least increased the likelihood of uptake;
- they have further stigmatised drug users (negatively impacting community connectedness, treatment and support seeking**);**
- they are expensive, and should not be considered a viable alternative to place-based demand reduction (treatment and prevention).

The Network position is that the limited national funds available should be invested in evidence-based approaches that have been shown to reduce demand.

Ineffective and detrimental:

Are mass-media campaigns effective in preventing drug use? A Cochrane systematic review and meta-analysis,[1] a review of 19 mass media campaigns carried out in the USA, Australia, and Canada, concluded that mass media campaigns targeting drug and substance use were overwhelmingly unsuccessful and some actually created a 'boomerang effect' whereby they either increased use of the target substance or increased the positive view of using the target substance - making it more likely for those that had been exposed to the campaign to begin using the target substance.

The Cochrane review found anti-drug use campaigns can increase drug use by normalising drug use, i.e., giving the impression that drug and substance use is more commonplace than it really is and therefore more acceptable[2].

The Cochrane review concluded that the implementation of any mass media campaign targeting drug use was unethical if not preceded by appropriate research and carried out with a well-designed evaluation framework. Without these steps, the review concluded that a campaign risked being both ineffective and harmful.

Stigma:

According to a 2017 report on the experiences of stigma and discrimination for problematic alcohol and other drug users in Queensland[3], mass media that sought to apply fear as a deterrent to drug use further stigmatised drug users. In turn this negatively impacted people, reducing the likelihood they would seek assistance when needed.

The Queensland report recommended exercising "extreme caution in mass media campaigns for drug use prevention" and further recommended exploring "a mass media campaign to reduce stigma".

According to the report, people experiencing problems associated with alcohol and other drug use were profoundly affected by stigma and discrimination: preventing them from pursuing treatment when they felt they needed it; negatively affecting their personal relationships, employment opportunities, access to health care, and treatment within the justice system. Stigma was found to elicit feelings of degradation, shame and anger; and ultimately result in poorer substance use and wellbeing outcomes.

[1] Allara E, Ferri M, Bo A, et al (2015) *Are mass-media campaigns effective in preventing drug use*? A Cochrane systematic review and meta-analysis.
Available at: https://bmjopen.bmj.com/content/bmjopen/5/9/e007449.full.pdf
[2] Ibid
[3] Ritter A, Lancaster K, Seear, K. (April 2007) *Reducing stigma and discrimination for people experiencing problematic alcohol and other drug use .* A report for the Queensland Mental Health Commission
Available at:
https://ndarc.med.unsw.edu.au/sites/default/files/ndarc/resources/Reducing%20stigma%20and%20discrimination%20for%20people%20experiencing%20problematic%20alcohol%20and%20other%20drug%20use.pdf

Better uses for additional AOD funds:

Any effective mass media campaign that seeks to influence drug use needs also to consider providing additional funding to cater to any increase in the number of people seeking assistance from alcohol and other drug treatment services. The latest review of alcohol and drug treatment services in Australia, by the Drug Policy Modelling Program, National Drug and Alcohol Research Centre, has found there are at least 200,000 to 500,000 people nationally who need, want, and cannot gain access to alcohol and other drug treatment each year.[4] Significant funding and system development is needed to address this unmet need.

The Network supports investment in:

- stigma reduction, including raising community and workplace awareness
- cross-sector capacity building in health and other human services;
- an holistic approach to drug use prevention, particularly for youth and marginalised groups, by addressing protective factors, and the socio-economic determinants to health and wellbeing; and
- place-based approaches to community development that best meets the needs of specific population groups.

[4] Ritter, A & Berends, L et al, July 2014, New Horizons: The review of alcohol and other drug treatment services in Australia, Drug Policy Modelling Program National Drug and Alcohol Research Centre, UNSW.
Available at:
https://ndarc.med.unsw.edu.au/sites/default/files/ndarc/resources/New%20Horizons%20Final%20Report%20July%202014.pdf

State and Territory Alcohol and Other Drug Peaks Network:

WHO WE ARE:

The State and Territory Alcohol and Other Drug Peaks Network comprises of all Australian state and territory peak Alcohol and other Drug bodies:

- Alcohol Tobacco and Other Drug Association ACT (ATODA)
- Alcohol, Tobacco and other Drugs Council Tasmania (ATDC)
- Association of Alcohol and other Drug Agencies Northern Territory (AADANT)
- Network of Alcohol and other Drug Agencies (NADA)
- Queensland Network of Alcohol and other Drug Agencies (QNADA)
- South Australian Network of Alcohol and Drug Services (SANDAS)
- Victorian Alcohol and Drug Association (VAADA)
- Western Australian Network of Alcohol and other Drug Agencies (WANADA)

OUR VISION:

An Australian community with the lowest possible levels of alcohol, tobacco and other drug-related harm, as a result of the alcohol, tobacco and other drug sector's evidence-informed prevention, treatment and harm reduction policies and services.

WHAT WE DO:

The Network advances and supports alcohol and other drug services in all Australian jurisdictions to prevent, treat and reduce alcohol, tobacco and other drug-related harms to individuals, families and communities. We provide expert services in:

- Sector and workforce development
- Capacity building
- Quality improvement
- Education and research
- Information and communication
- Coordination and partnerships
- Information management and data collection
- Representation and consultation
- Program development for State, Territory and Commonwealth governments, including policy and advice.

OUR REACH AND WHO WE REPRESENT:

We provide a conduit for immediate access to alcohol and other drug services in all Australian jurisdictions. We represent:

- 435 organisations (primarily non-government), which includes 80% of organisations funded to provide AOD services by the Commonwealth;
- All specialist treatment types (counselling, detoxification, residential and non-residential rehabilitation, opiate replacement therapy) and harm reduction services;
- $377,905,578 of State, Territory and Commonwealth AOD services funding investment; and
- 80,000 Australians who receive an episode of care annually.

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