

Looking beyond the headlines: ambulance trends after drug decriminalisation

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Introduction: In October 2023, the Australian Capital Territory (ACT) implemented a harm minimisation reform decriminalising personal possession of selected controlled substances, including amphetamines, cocaine, cannabis, ecstasy and heroin. This study presents preliminary evidence on whether the reform was associated with changes in acute substance-related harms assessed using ambulance data.

Method: National Ambulance Surveillance System data were used to examine ACT ambulance attendances from January 2021 to June 2024, with New South Wales (NSW) included as a control jurisdiction. Interrupted time series models assessed attendances involving (1) any illicit/decriminalised substance, (2) individual decriminalised substances, (3) overdose-related presentations, and (4) patients residing outside the ACT. Monthly rates per 10,000 population were estimated and models adjusted for seasonality.

Key Findings: Between January 2021 and June 2024, 3,571 substance-related attendances occurred in the ACT (mean monthly rate: 1.83 per 10,000). Post-October 2023, both ACT and NSW recorded step (immediate) increases in attendances involving any illicit/decriminalised substance, cocaine, cannabis, and amphetamines. NSW showed step increases for ecstasy and heroin, which were not observed in the ACT. No significant changes were detected in ACT for overdose-related attendances or in attendances involving interstate residents.

Discussions and Conclusions: Early evidence suggests ACT reforms were not associated with increased ambulance-attended overdoses or interstate presentations. Step increases in several substances were seen in both ACT and NSW (no reform), indicating broader drivers of substance-related attendances beyond the ACT policy. Taken together, the reforms in ACT appeared to have had minimal impact on emergency responses to substance-related harms.

Implications on communities, practice, policy and/or First Nations communities: The current findings suggest there is no clear evidence of increased substance-related harm following ACT's drug decriminalisation. However, continued surveillance of health outcomes is essential in understanding longer-term trends following the policy reform.

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