



Minor drug offences, major missed opportunities: The experiences of Victorians detected for minor drug offences

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I acknowledge I am a visitor on the lands of the Gadigal people. I extend my acknowledgement to pay respect to the Traditional Custodians, the Wurundjeri Woi Wurrung people of the Kulin Nation, where this work took place.

I pay my respect to their Elders, past and present and extend that respect to any First Nations peoples here today.



Project history: Parliamentary Inquiry into drug law reform (2017)

- Inquiry examining effectiveness of drug laws in reducing harm, looking at reform efforts in Australia and internationally
- Conclusion: **better balance needed** between law enforcement and health-based responses to improve community health and safety
- **Recommendation 13:** Victorian Government treat personal use and possession of all illicit substances as a **health issue**.

Better Responses to Drug Offences

- Aim of this project: to **understand the experiences** of Victorians detected for minor drug offences, and **identify their health and social support needs**.
- Funded by the **Victorian Government Department of Health**
- Disclosure of interest: None
- Content warning

Recruitment of 100 people about a stigmatising issue



BEEN PICKED UP FOR MINOR DRUG USE OR POSSESSION?

HOW DID IT IMPACT YOU?

Tell us about your experience, and receive a gift card

Turning Point Eastern Health MONASH University



Data collection and analysis: semi-structured interviews

- Details of the offence, focusing on the most significant event
- Life circumstances and service engagement at the time
- Impacts on health and wellbeing
- Experiences with police and the court
- Service use after the event: what helped, what didn't, what was missing
- Suggestions for improving the current system

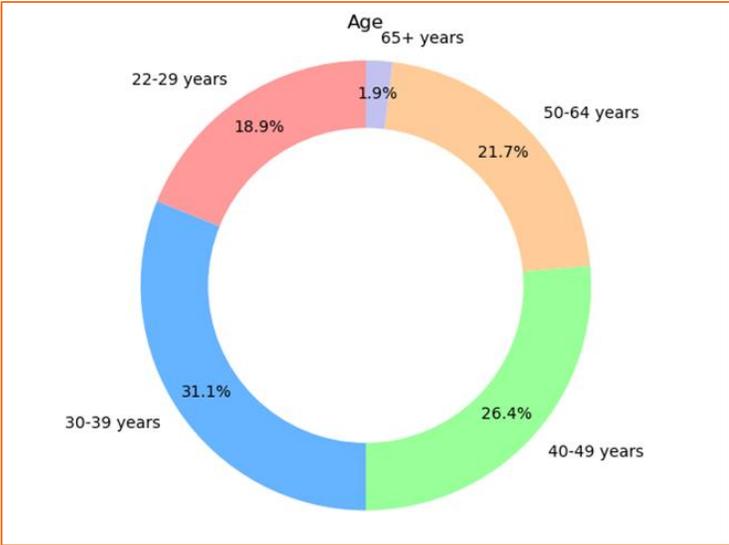
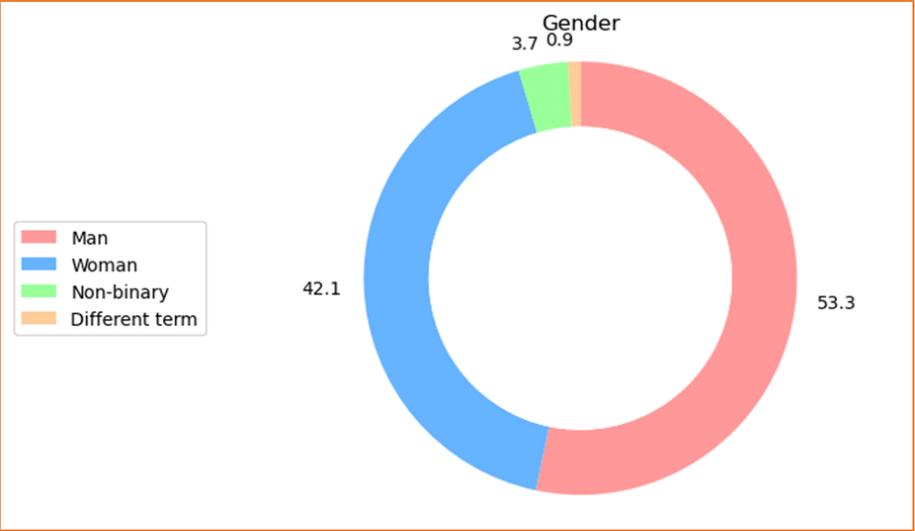
Interviews lasted on average 30 mins (range 7-70 minutes)

Online survey option

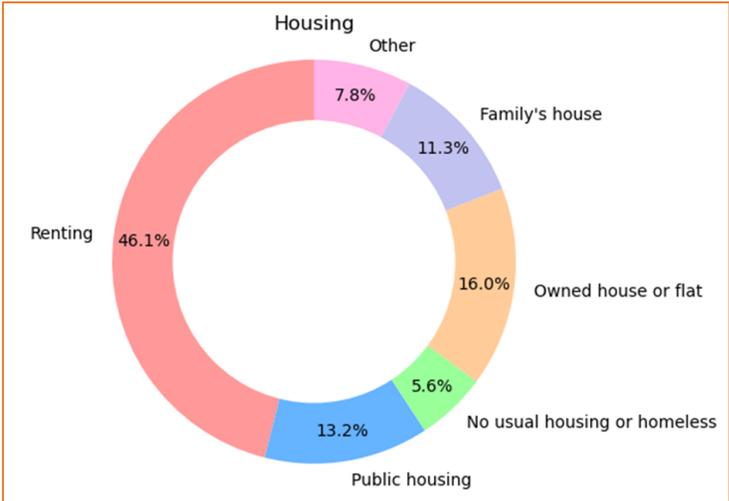
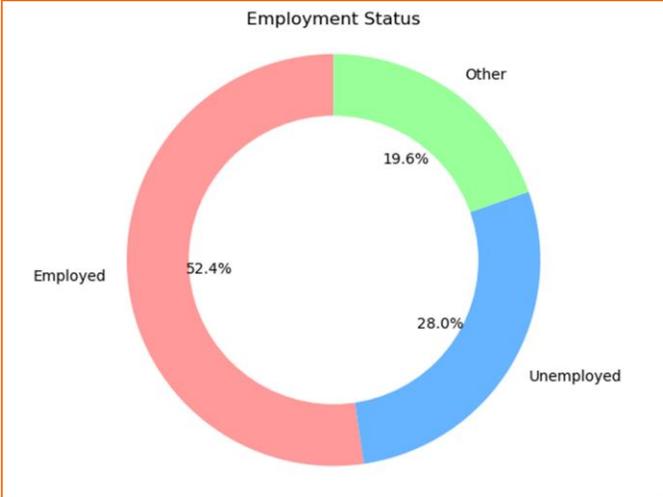
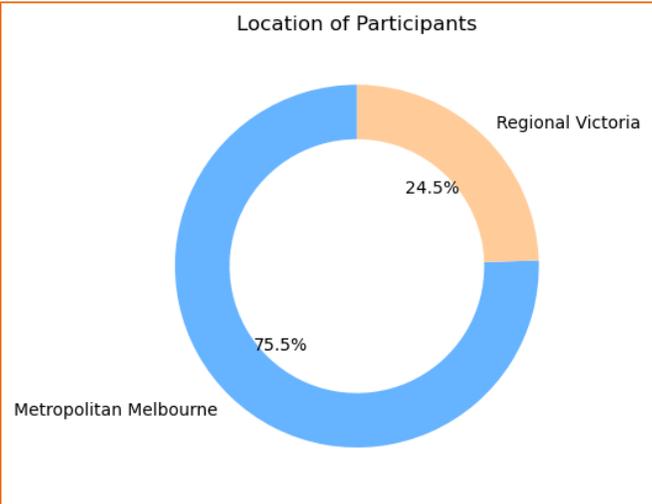
Template analysis – flexible for our team-based, inductive approach

Participants (n=107)

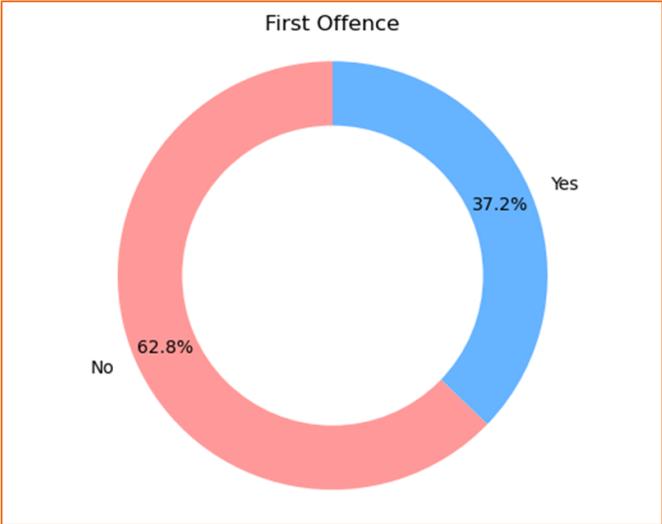
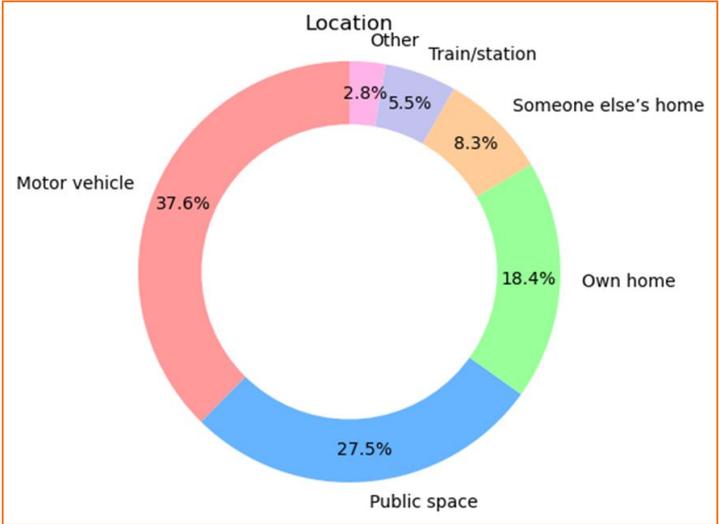
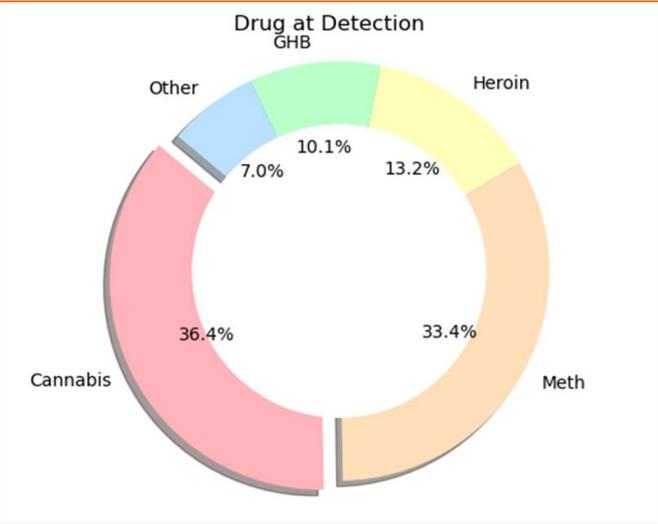
- 95 people interviewed; 12 completed online surveys



Participants



Offences



Participants experiencing multiple stressors at the time of detection

I was homeless after the first time in years. My parents had my kids. I had a massive relationship breakdown. I was making a lot of bad choices and not surrounded by the best people ... went from smoking to intravenous use ... not a good place mentally. I also suffered from a series of sexual assaults and stuff. (Georgia)



Interactions with police: stigma and discrimination

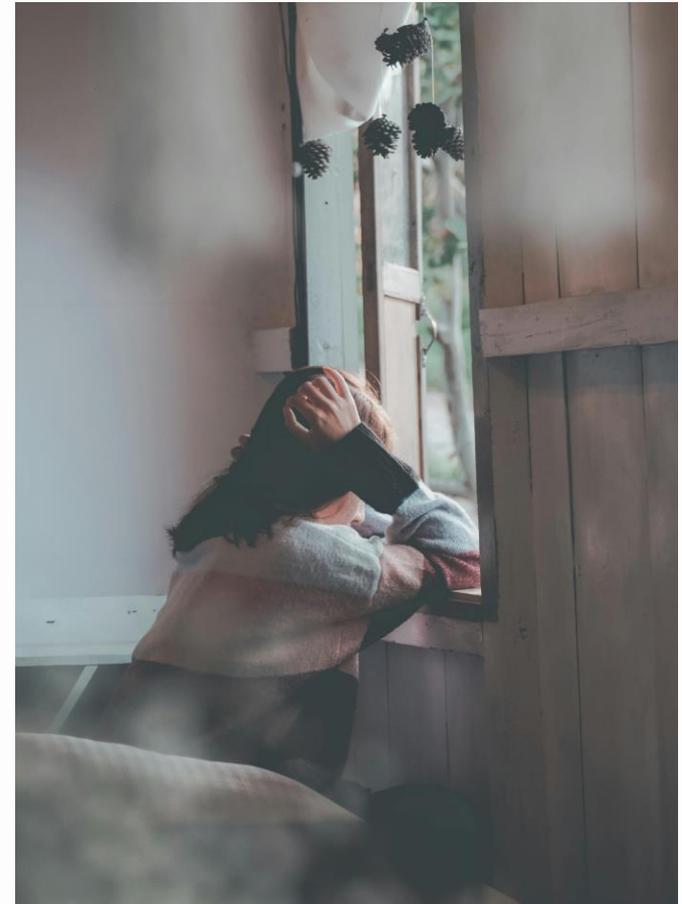
Drugs involved vs no drugs

They treat you like you're nothing and other times, before they looked at my file and before they see the drugs part, they're very nice and they're very accommodating. They're not so much when they realise drugs are involved. (Jennifer)

Prioritising punishment over care: Michelle

- Called police to assist with family violence
- Police spotted two cannabis plants

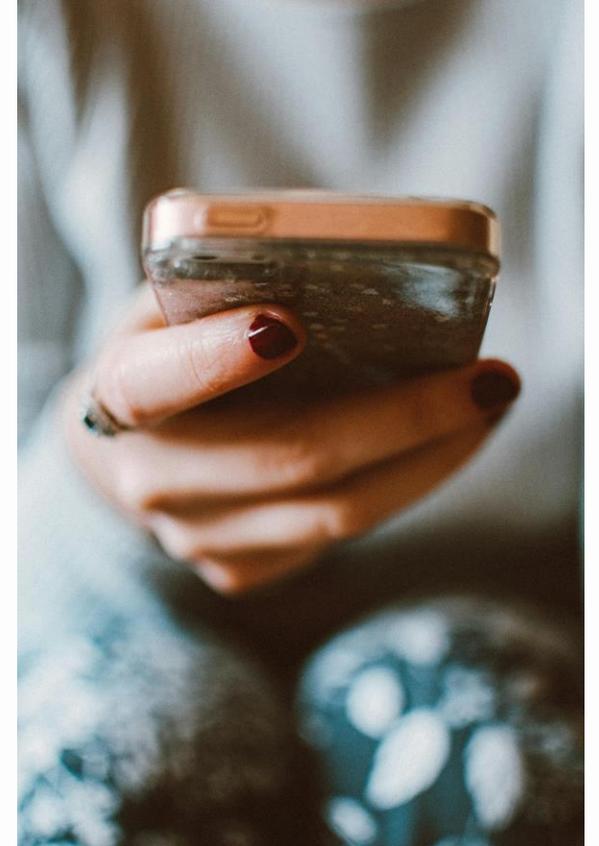
I invited them in and then, bang, they ended up getting me ... they said, “Oh, how silly of you to invite us in...” I was so embarrassed. I feel like such an idiot ... I've never invited police into my house again, put it that way.



Health impacts – Linda's detection

- Mid-50s, living with breast cancer, complex PTSD, and anxiety
- Police raided Linda's house following a tip-off
- Seizure of mobile phone for five weeks

I couldn't get any of the calls ... I was really, really mostly stressed out about that because I couldn't verify that I was attending appointments ... my breast care nurses' numbers were all in there, so I was just very isolated ... Everything was on the phone that I had to keep on top of to do with this cancer treatment.



Mental health support needed the most at the time of detection

I did have a lot going on in terms of my personal life struggling with mental health, undiagnosed ADHD ... a lot of mental health issues and was using [cannabis] to cope ... with the ADHD, it can be a bit hard to arrange the necessary support or even be aware of the support that I require. (Dom)



Summary of recommended better approaches from participants

- **Not everyone wants a referral to a drug service:** detection is an opportunity to intervene, particularly for mental health support
- **A range of personalised options is needed:** including a harm reduction approach and a key worker for immediate support
- **Addressing stigma:** community and police education, aiming to foster greater awareness, open dialogue, and understanding around drug use
- **Policy change:** a health-based response

Opportunity to intervene, not just for drug use

There's usually an underlying greater issue that's impacting on the person ... if that can be acknowledged and addressed, then usually that will help resolve some of the other issues like drug use ... coming into play.
(Kristen)



... instead of report to a police station every day, I have to go and report to a crisis accommodation place until I've got a place to stay ... see an alcohol counsellor, a drug counsellor once a week ... There's so many services that are available that they just don't use.
(Nathan)

Missed opportunities

- **Services exist**, including diversion, but weren't identified or routinely offered
- The **binary** between criminal justice and health responses remains
- The detection **increased the risk of psychological harm** for people already experiencing mental health challenges and life stressors, with **little or no support provided** to engage with any health or community service

Next steps

- Partnered with Victorian Aboriginal Community Controlled Health Organisation, the Balit Durn Durn Centre, and Dardi Munwurro
- Yarning circle heard stories of impacts on First Nations People, their Families, and Community
- Report to Department of Health demonstrating evidence of the need for a health-based response
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