

Hearing date: 14 February 2025

Question taken on notice

Directed to: Victorian Alcohol and Drug Association

Received date: 28 February 2025

1. Michael GALEA, p. 15

Question asked:

Dave TAYLOR: I am not, but I think I would probably put it to the committee that the daily waitlist data for alcohol and drug treatment has increased from around 2400 at the start of the pandemic to over 4600 last year. I can provide the exact figures and the times when those surveys were taken on notice if that is desired.

Response:

The Victorian Alcohol and Drug Association (VAADA) have undertaken <u>this</u> <u>survey</u> to the Victorian alcohol and other drug (AOD) sector seven times since September 2020. The most recent survey was administered in June 2024.

This survey seeks wait list data from funded AOD agencies on a selected day within a survey period. The data is then aggregated to provide a total estimate of people waiting for treatment.

In September 2020, there were 2385 Victorians waiting for funded AOD treatment services, including community based services (such as counselling, assessment and non-residential withdrawal), residential services (including residential rehabilitation and residential withdrawal) as well as youth based community and residential AOD services.

In June 2024, there were 4615 Victorians waiting for the same services.

2. Michael GALEA, p. 15

Question asked:

If I can quickly ask: in rough terms of a percentage increase of demand, what would you expect to see under this model? Can you perhaps take that on notice as well?

Response:

We noted when providing evidence that an estimate of this type is difficult to ascertain.

This Bill would result in the elimination of criminal penalties relating to cannabis in certain circumstances. The long-term impact of such reforms was noted in evidence with a reduction in stigma toward people who use cannabis.

Stigma is widely known impact help seeking behaviour and therefore can deter people from engaging with AOD support.

By addressing stigma related to the use of AOD in the community, it is anticipated that more people would feel comfortable seeking support for cannabis dependence, increasing demand for AOD treatment.

The impact of this reforms on stigma is anticipated to be a slow change in attitudes, making it difficult to provide an estimate of immediate or even mid to long term effects on treatment demand.

With AOD treatment wait lists increasing by 93% in Victoria between 2020 to 2024, the AOD treatment system is already under significant strain so any changes in demand would occur within an environment where treatment services are already overburdened.

It is likely that this Bill will reduce justice related AOD interventions. People who may have been apprehended for a cannabis possession or consumption related offence, irrespective of clinical need, could be currently corralled into a forensic treatment intervention. This Bill could reduce this type of demand due to a decrease in police interaction with people who use cannabis.

A systemic review of 114 articles that cannabis law reform was not associated with changes in consumption¹, concurs with the ACT experience.

We note that it would be equally difficult to ascertain the impact on AOD treatment demand if a different model was adopted, such as the pre 2020 ACT's *Simple Cannabis Offence Notice* (SCON) which see individuals issued with a \$100 infringement notice.

The SCON model runs the risk of drawing people with limited means into the justice system for failing to pay a fine while having similar limitations to the current model with regards to deterrence.

It would be a retrograde step to shift to a model recently abandoned in the ACT and assume that this model could reduce stigma or harm in Victoria. Equally, it would represent a missed opportunity to better direct police resources to criminal issues that enhance community safety.

¹ Scheim AI, Maghsoudi N, Marshall Z, et al. Impact evaluations of drug decriminalisation and legal regulation on drug use, health and social harms: a systematic review BMJ Open 2020;10:e035148. doi: 10.1136/bmjopen-2019-035148