

LAW REFORM, DRUGS AND CRIME PREVENTION COMMITTEE

**Inquiry into the supply and use of methamphetamines, particularly ice,
in Victoria**

Mildura — 5 December 2013

Members

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Witnesses

Superintendent P. Naylor, Divisional Superintendent, Division 6, Western Region,
Victoria Police.

The CHAIR — Good morning, Superintendent Naylor. Thank you very much for making the time available this morning to address the committee.

Supt NAYLOR — Welcome to Mildura.

The CHAIR — Thank you. As you know, this is a joint parliamentary committee which is conducting an inquiry into the supply and use of methamphetamines, particularly ice, in Victoria. We invite a small contribution from you, and then we will allow committee members to ask questions. Before we start I need to read the conditions under which you are presenting to this committee this morning.

Welcome to the public hearing of the Law Reform, Drugs and Crime Prevention Committee. All evidence taken at this hearing is protected by parliamentary privilege as provided by the Constitution Act 1975 and is further subject to the provisions of the Parliamentary Committees Act 2003, the Defamation Act 2005 and, where applicable, the provisions of reciprocal legislation in other Australian states and territories. However, it is important that you note that any comments you make outside the hearing, including effective repetition of what you have said in evidence, may not be afforded such privilege. Have you received and read the guide for witnesses presenting evidence to parliamentary committees?

Supt NAYLOR — Yes, I have.

The CHAIR — Thank you. It is also important to note that any action which seeks to impede or hinder a witness or threaten a witness for the evidence they would give or have given may constitute and be punishable as contempt of Parliament. We are recording the evidence and will provide a proof version of the transcript at the earliest opportunity so you can correct it as appropriate. I now invite you to make a verbal submission, and obviously we will ask questions as appropriate afterwards.

Supt NAYLOR — Thank you, sir. Firstly, I have been the superintendent up here for around four years. My area of responsibility is from the South Australian border through Mildura to just short of Echuca. I have the area south from Mildura to just the other side of Charlton and then back across to the South Australian border. It is a very large and geographically diverse area, Mildura being quite different to the areas of Robinvale, Swan Hill and Kerang and obviously the broadacre farming areas of the Mallee track through Ouyen and Charlton. The population of the area is just over 90 000 sq kms. For the Mildura-specific area we are looking at a bit over 52 000 sq kms.

We also have cross-border relationships, particularly with New South Wales Police. There is large population growth across the border, and all the members who work in any of the police stations that touch on the Murray River are sworn constables in New South Wales. We have a number of police officers who are sworn constables in South Australia.

If I just touch on the cross-border issues, I would like to make a point that we have a very good working relationship with both police forces, and the intelligence we gather within Victoria is shared equally as required on specific events with both New South Wales and South Australia. The population in New South Wales being so close and dynamic to Mildura, we tend to work very closely with New South Wales.

The issue for which you are here in regard to ice is something that has concerned both us and the community, and you will hear that from other representatives; I see we have a great representation from a wide variety of community groups here. The number of users of ice is very difficult to capture specifically. Victoria Police does not hold specific data in regard to the exact nature of the drug that is taken. Unless there is a need for evidentiary purposes, we do not analyse drugs through our forensics science laboratories.

I am aware that Victoria Police has already provided a submission to your committee detailing more specifically the sort of data we collect. It is rather spasmodic that we can drill down specifically to ice. We often refer to the broader nature as being methamphetamine or amphetamine-type substances, which is a data reference we often make when we are not aware of

exactly the nature of the drug that has been presented either at trial court or in intelligence holdings. I hope that puts a bit of context around the data we are able to provide to you.

There is no doubt that the type of drug that we see being used in Mildura specifically now is very different to a few years ago. When you look at ice, as you would know, it is a very high concentrate and our purity levels are very high. Our purity levels are very high, and as most would know, one of those things that the user tends to go for is the much higher purity. In the past we have seen predominantly the use of cannabis, heroin and ecstasy tablets. Those sorts of users tend not to come to the awareness of the public as often as users of ice do. If I were to differentiate between the two, I would say that with heroin and cannabis it is more a solitary use. It is used in solitude, and people exhibit depression, as you would know. The user tends not to come to the face of the community. What we see with the use of ice is very much the opposite. We believe anecdotally that the majority of users smoke ice through smoke pipes, and we have seen that through the execution of search warrants, the searching of vehicles and the searching of bags for different reasons.

We see that smoking seems to be the predominant method of use in Mildura. The effects are more instantaneous, and no doubt you will get evidence from clinicians along these lines. In essence, the effect is instantaneous and it gives a much greater high. That high is quicker because of the inhalation, but the drop is much quicker as well, and so then we find there is a need to reuse very quickly. Those who are addicted seem to be addicted for a longer period. Sadly, one of the things that also comes with this drug are the greater signs of depression and anxiety. Aggression and paranoia come with it as well. That is where the community has it in their face, more so than they did when heroin was the predominantly used drug.

The number of users we have contact with through the policing processes at the moment does not vary dramatically. There seems to be a suggestion anecdotally that there has been a shift in what our users are using, and it seems to be a shift towards ice. The increase in information reports coming in from the community has staggered us. To put rough figures around it, you would say that there has been around a 400 per cent increase in information to the police in regard to the use of ice and in the dealing of ice in the community. We believe the reason for that is that it is in the community's face more. That is coupled with an extremely good umbrella of community support and education of our youth particularly. There is a huge risk with taking drugs such as this.

The area of Mildura was very lucky in 2006 — it had a social indicators report presented to Mildura Rural City Council. That report was put together by Professor Tony Vinson from the University of New South Wales, a social scientist. He found that he had the perfect opportunity to basically look at a large growth area that was almost an oasis in the middle of a desert. He broke the categories up very well. I do not want to take away from other people who will probably speak on this, no doubt, from the Mildura Rural City Council. He broke down all the social indicators that affect the community, and then he broke them down into postcodes. Coupled with that, Victoria Police then formed an alliance with council and a large number of major stakeholders to try to turn some of those social indicators to make the community a better place to live.

In forming that nucleus of community support, what we did by stealth, it turned out, was that we became better positioned to address a situation like ice without having to invent the process, if that makes sense. When we came to look at, for example, our perceptions of safety in the community, we could go to the group, which was called the Community Engagement Framework — and it has had a name change just recently — and talk about our wicked problems that were specific to the perceptions of safety in the community.

For example, in the CBD of Mildura there was a sense of being unsafe at night. Some of these wicked problems cannot be fixed with one silver bullet, and the police certainly could not change that perception on their own. In creating partnerships with the council, the federal government and the state government, Victoria Police and a few others that do not come to mind, we have had 20 CCTV cameras put into the area of the CBD. We were very fortunate through the allocation of 1700 extra police officers that the Mildura police service area was in the top 10 of the 52 police service areas to receive quite a substantial increase in its strength. We also had the taxi directorate formulate a plan with us for safe waiting zones after 11.00 p.m. at night. An organisation can come

to the table with a wicked problem, and through consultation and collaboration with those other major stakeholders it can actually make a difference to the community.

The Community Engagement Framework in Mildura is in three areas — the governance level, the operational groups and then the action teams that actually look at a particular problem in isolation and bring experts to the table.

This has been used over a number of examples throughout the years since 2006–07. Now in 2013, when we are seeing this growing issue with ice, we then have the opportunity to pull together, quite fluidly, a team to look at a specific issue, a wicked problem — something that cannot be fixed by the police on their own, one that cannot be fixed by health on its own et cetera. The team has been pulled together again, and it is called Project Ice. I know that other people here will talk on that more specifically later.

We have a joined-up approach. We have very good communication across agencies. We have great support, particularly for high-risk communities, such as the Aboriginal communities in Mildura, where there is a lot of data that is no doubt before you already that indicates that Aboriginal communities in the justice sector are overrepresented in nearly every part. The Aboriginal community here is around 3.6 per cent of the population, but far in excess of that are offenders and particularly, sadly, victims. There is a very good connection with Aboriginal communities through MDAS — the Mildura Aboriginal corporation — and that is going from strength to strength. We also have an Aboriginal community liaison officer, who is employed by Victoria Police as an unsworn person, by the name of Jemmes Handy. She was the first Aboriginal Community Liaison Officer to be appointed to Victoria Police as part of the ACLO project pilot. Her connections with the Aboriginal community have been exceptional. She has brought together specific issues that do raise the head, particularly through youth and also through a Koori youth cautionary and diversion program, which you may want to ask questions about later. It is certainly going from strength to strength. That was in consultation and collaboration with the Victorian Aboriginal Legal Service.

Getting back to ice, obviously the drug has been found in Mildura. I will leave it at that, unless there are questions.

The CHAIR — Thank you. Yes, I am sure there will be questions. If I could start the ball rolling I have a question about supply. From information we have been given, Mildura does have a small manufacturing base — you might well want to dispute this — and the outlaw bikie clubs have been quite active in that space. So I would like to get a response on that from you, in relation to the activity of organised crime syndicates or the outlaw bikie clubs in relation to distribution in this region.

Supt NAYLOR — Victoria Police certainly has the view that there are organised crime syndicates in relation to the distribution of amphetamine-type substances, which include ice. Our focus is not predominantly on one specific group type. Certainly bikie groups are included in that, but to say that it was ostensibly one group would be detrimental to investigations we conduct. We keep a broader focus as to the sorts of people who are likely to enter into the distribution. When you look at the extremely high profits that can be made out of this insidious drug, it would be wrong to think it was the domain of one particular group. There have certainly been very clear fights in the streets at times in regard to what we say may well be drug dealers arguing and trying to force their point. That sort of observation leads us to believe that we are right not to focus on one particular group type.

The CHAIR — Thank you.

Mr SCHEFFER — Thank you for your presentation, Superintendent. You mentioned that you did not really have access to the detailed data on the use of ice in this area, but you did say there was a 400 per cent increase in reporting and that you attributed that to the fact that the drug was more in the community's face — I think your words were — and that there was the education of youth and so forth. It is clear that the police have a media strategy. Can you talk to us about how

you link into the general Victoria Police media strategy and what its objectives are and whether it has been successful?

Supt NAYLOR — Just to clarify one point, I did not say I did not have access to the data.

Mr SCHEFFER — Sorry; yes.

Supt NAYLOR — What I said was we do not have the data. There is no data specific to ice that is available at all.

Mr SCHEFFER — My apologies.

Supt NAYLOR — The reference to information reports in the data system is that we can obviously search specific words — so words in information reports such as the word ‘ice’ and the word ‘methamphetamine’ — and the types of jargon that informers may use can be searched across the data, and where that search identifies a particular IR we have had those searches done, and that is where I have got that broad understanding of how many IRs relate to amphetamine-type substances. You have made reference to a media strategy. What you may mean — and I do not want to misinterpret what you are asking — —

Mr SCHEFFER — I am concluding that from news reports. The police are speaking to the media a lot, as is evidenced in the media, and so common sense would indicate there is a strategy, so I am just asking you to talk about that in relation to the increase in reporting, and we know that from other areas where the police are active they play a proactive and constructive role in that.

Supt NAYLOR — Yes. Firstly I have to say that we have an extremely supportive media — radio, print and television — in regard to this issue. They clearly have a great understanding of the impacts it is having on the community, as you would imagine. Certainly Victoria Police would be silly if we did not also act and give as much opportunity as possible for the media to give the full picture that we can provide. A great part of our role is about that disruption to the use and particularly the dealing in amphetamine-type substances and the manufacturing of it. Part of that disruption process is to have the media briefed as best we can, lawfully remembering the rules around sub judice et cetera, but we certainly, through that medium more than any other, attach it to the tactical response to a particular investigation.

So if we have had an operation in regard to amphetamine-type substances and there are arrests and people spoken to, then we would, on every occasion, provide a media story. It does not, interestingly, always get driven by us ringing up the media and saying ‘We’ve got a story for you’. Nine times out of ten it is rather that the media has been informed by somebody in the community who says, ‘There’s been a search warrant executed just down the street, and you might want to find out what’s going on’. So 9 times out of 10 we are beaten to the punch in actually getting that media connection out. I could go on for hours with regard to our connection with media, but certainly we are in line with what is pretty much going on across the rest of the state.

Mr SCHEFFER — Thank you.

Mr SOUTHWICK — Superintendent, what challenges do methamphetamines pose to law enforcement in Mildura? Perhaps you could talk a little about things like burglary and any issues with your officers being at risk. Is there any particular training that your officers require to deal with methamphetamine users?

Supt NAYLOR — If I may refer to notes just to make sure I do not miss any points in regard to that question, the most obvious, as I mentioned earlier, is the symptoms that come with the use of ice, particularly around aggression. It is a great concern for the community. There are many stories of tragedy within families in regard to the use of ice, and it is often left with police to clean up the mess pretty much. The sad stories around family violence, violence in the homes — as I said earlier, we have seen quite a large decrease in the number of assaults and those sorts of offences in the CBD but we have seen an increase away from the CBD and into the homes and the streets.

We have seen families torn apart, we have seen assaults within family groups where it is a child assaulting a parent, and by 'child' I say up to and including the age of 24. We see youth offences increasing in the home. We see an increase in the inability of our emergency services to do their job without being assaulted or the threat of assault and aggression. We are also seeing, to a lesser extent, we believe drug debts being recovered through violence. We are also seeing a large number of burglaries and aggravated burglaries, and the differentiation between burglary and aggravated burglary is the fact that with aggravated burglary you see that there is a level of violence or a level of potential for violence where people are at home when the burglary occurs. Many of these people that we are arresting for those offences are people who do have addictions to an amphetamine-type substance. I had one other point to make.

Mr SOUTHWICK — Your officers, Superintendent?

Supt NAYLOR — Yes, thank you. I was just going to mention the cells. We do have a 30-day gazetted jail here, which is the only one in the state. The rest are pretty much 14 days, and our police officers are also the jailers. We are seeing a high level of aggression towards our members, and we have had to change our jail routines and management to better keep down that aggressive behaviour. Certainly when our members are attending to these people who are showing high levels of paranoia and aggression, it puts our members in a much different position to responding to crime compared to how they used to respond two or three years ago.

As I mentioned earlier, our drug addicts were predominantly cannabis, heroin and ecstasy users, but now with this ice, we are seeing that these people are more overt in the way that they connect not just with police but with ambulance officers, with other social agencies that are there to support them. It is a very sad place to see when that occurs. The training that our officers get has changed. Our training through the police academy is dealing with this change in demographic of offender as we speak, particularly on ice. We are also now training our police officers in mental health training, which gives them a better understanding of the types of offender they are going to be confronting.

Anecdotally, in preparing for my presentation, myself and other managers spoke to a number of our front-line young people about their ability to identify the difference between the chronic alcoholic — that violent alcoholic that we have always traditionally seen — and the type of offender we are getting now. The police officer is much more informed to be able to identify the difference between those two characteristics of the classic violent drunk and that person suffering with some sort of psychosis.

Mr SOUTHWICK — Thank you.

Mr CARROLL — Thank you, Superintendent, for your presentation. I just wanted to take you back to what you said before about the 30-day jail routine, the holding cell. How does that work? If someone has been arrested for possession or taking illicit drugs, what is the process from there? If they are in one of the holding cells, do Mildura police work with the local health organisation to get that person seen? Are you able to comment on that?

Supt NAYLOR — Yes. The cells are, as I say, 30-day gazetted jails, and there is a maximum number that can be held. The jail itself is broken up into cell groups so you can, if you like, isolate groups one from another if there is a need, for security, to move them apart. There is also the ability to support those who have some sort of addiction. It is not just the ATS-type offenders that we see, we are also getting chronic alcoholics, for example, and a myriad of issues including, I might add, heavy smokers who all of a sudden cannot smoke in police cells because of the health regulations.

So certainly police need to be able to keep our prisoners safe but also medicated to try and assist them through coming down from whatever it is they are coming down from, and it can vary from the clinicians around a person with a heavy dependency on ice to the heavy smoker who needs to be supported with nicotine patches maybe and everything in between. We have custodial nurses employed who obviously do not work 24 hours a day but they are there to respond when there are specific issues around that sort of example that you brought up, Mr Carroll.

Mr CARROLL — Thank you.

Mr McCURDY — Are there specific partnerships that you have developed or need to develop with the onset of ice usage? You spoke about domestic violence, and I do not know whether you have a family violence unit here in Mildura or not, but are there any other partnerships that you have worked with closer or need to work in closer partnership with specifically because of ice?

Supt NAYLOR — Yes, there are. As I mentioned at the start, the community engagement framework that has been built up since it 2006–07 has had the dynamic nature that, depending on what the wicked problem is, we can bring that particular expert to the table to inform the group but also to try and formulate a plan, and I notice that will be spoken about later, but with this specific wicked problem we have — I just want to be careful how I have clarify the ‘we’. It is not just about Victoria Police trying to pull this together. It really is a joint community concern, and we hold ownership of it through the operational safety group part of that operational framework, but the wicked problem that we have pulled together we have named Project Ice, and the specific people we have pulled to the table have altered to create a safer environment in the CBD, for example.

It is more health practitioners, psych services, mental health support, primary care partnerships, the Sunraysia Community Health Services, the Mildura Aboriginal Corporation, the RAJAC and LAJAC, the Regional Aboriginal Justice Advisory Committee, the Local Aboriginal Justice Action Committee, the Department of Justice, SupportLink, which plays a particular role with us as well which we hold the support to, and the Mildura Base Hospital. I think that is pretty much it. If you get the sense that for this particular problem we believe we have pulled together the people who can actually have the knowledge. It is by enriching that knowledge that we get better collaboration and a greater understanding, which then goes on to actually having the people at the table who have not only the knowledge but also the ability to make decisions on behalf of their area. That is the other important part of it: that we have the right people at the table who can actually make decisions as a result. I know that you will hear more about Project Ice later in one of the other presentations.

The CHAIR — Thank you, Superintendent. I suppose I will just say in finishing that as part of the inquiry we are due to report and make recommendations next August. Mildura is a bit different to the other regional cities we have been to because there have been identified particular players in the market in relation to manufacture and distribution. We want to make a positive report to the Parliament that actually puts in place potential recommendations that the government can respond to in dealing with the supply and distribution and obviously early intervention issues.

If you think there is something you would like to contribute in relation to what this committee might well recommend in relation to dealing with issues peculiar to Mildura perhaps — —

Supt NAYLOR — I would go down on bended knee to be asked to do that. The questioning today has not quite gone the way I expected it to. There are other issues, particularly on that point, sir, that I would like to have the opportunity to put to you in regard to the way we might be able to change some things for the better in regard to how we do investigate. I have seen our organisation’s response to that question, but I believe specifically for Mildura there might be other things that may assist you.

The CHAIR — Perhaps, Sandy, we can invite the Superintendent to provide a witness submission. If the committee sees fit to follow up either we can ask you to come to Melbourne to make another verbal submission to the committee, or we can do it through phone hook-up — if you believe that we have not asked you about and not covered areas particular to this region anyway.

Supt NAYLOR — Thank you.

The CHAIR — Thanks very much, Superintendent.

Witness withdrew.