



Surry Hills  
**CDAT**  
We're stronger together

Professor Dan Howard SC  
Commissioner  
Special Commission of Inquiry into the Drug 'Ice' (Crystal Methamphetamine)  
c/- GPO Box 5341  
SYDNEY NSW 2001

Dear Professor Howard,

**Re: Special Commission of Inquiry into the Drug 'Ice'**

Thank you for providing the Surry Hills Community Drug Action Team (SHCDAT) the opportunity to comment on the terms of reference, Draft Proposals for the Conduct of the Inquiry, and the media release titled 'Special Commission of Inquiry into Ice' (11/2018).

Since 1999, CDATs have led an extensive number of activities to engage at-risk groups, and educate the wider community through community activities and campaigns to reduce harmful use of alcohol and drugs. The Australian Drug Foundation (ADF) supports the CDATs through the Community Engagement and Action Program (CEAP) funded by NSW Health.

The SHCDAT shares knowledge from a range of stakeholder volunteers from state departments, organisations and service providers including: Surry Hills Local Area Command, Surry Hills Neighborhood Centre, The City of Sydney, The Office of Jenny Leong (NSW Greens), Family and Community Services, The Salvation Army, Wesley Mission, NSW Health (KRC, The Langton

Centre, SESLHD), St Vincent's Hospital (Stimulant Treatment Program, Rankin Court), ACON, Sex Workers Outreach Project (SWOP), Positive Life NSW and NSW Users and AIDS Association (NUAA). We are an expert, diverse team who has been successful in ranging the Surry Hills community with appropriate, non-biased and open, frank harm reduction messages regarding the use and management of drugs.

This submission respectfully provides commentary regarding the Draft Proposals, and additional discussion regarding the aim and focus of the inquiry.

#### Regarding the Draft Proposal

1. We welcome the inclusion of experienced health, drug addiction treatment and rehabilitation members to the expert advisory panel, and a member with expertise in drug education and harm minimisation. We ask that the expert panel also include stakeholders who have a lived experience of crystal methamphetamine use, and to regard their inclusion as both vital and critical to the success of the inquiry.
2. Stakeholder consultation should include and welcome contribution from the community of people who use drugs (PWUD) especially those who use methamphetamine. Such consultation should explore options for treatment, but most importantly gather important data related to the stigma and discrimination that methamphetamine users suffer as a result being a PWUD.

We need to find new and innovative ways in which to reduce the harms that are associated with drug use. Harm reduction through the national and state harm minimisation paradigm is underfunded and devalued when compared with demand and supply reduction. PWUD deserve better.

We would recommend that the inquiry take a strong focus on the healthcare field of methamphetamine and addiction, reviewing the extensive research and data available on the positive outcomes from harm reduction policies such as the needle exchange program, the medically supervised injection centre, and pill testing. Countries such as Portugal that have taken a humanitarian approach to addiction and substance misuse rather than a criminal, and have reported huge success with reducing harm to individuals and families, which has flow on effects to reducing the impact to healthcare, the justice system, and many other social communities.

Greater access to paraphernalia relating to smoking methamphetamine is urgently required to prevent additional harm to PWUD who have no other option but to inject methamphetamine because access to methamphetamine glass pipes is illegal. This is adding unnecessarily to the burden of disease amongst the community and also possibly contributing to the increase in treatment episodes, hospital admission and death of PWUD due to higher purity being broadly recorded and accessed by PWUD<sup>1</sup>.

Members of the SHCDAT interact with people who use methamphetamine every day, through treatment centres, homeless shelters, NSPs, and through other community engagements located across the inner Sydney suburbs. Where the Government sees a “scourge” we see a vibrant and marginalised community who has been shackled by drug use and who deserve better than scare-mongering, public humiliation and poor treatment that they often receive.

The SHCDAT sees firsthand the problems that arise from those most affected by drug use, particularly methamphetamine use and recognise that it is our most vulnerable members of society who are marginalised further by drug use. Stigma, discrimination, poor health outcomes, family separation, gambling, interrupted school and employment and diminished opportunities often

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<sup>1</sup> Degenhardt et al (2017). Crystalline Methamphetamine use and methamphetamine related harms in Australia: Methamphetamine use and harms in Australia. Drug and Alcohol Review, 36, 160-170

contribute to drug use in NSW. It is time that compassion, charity and grace were afforded PWUD so that they are able to live their best lives free of the stigma associated with drug use. We encourage and support the government in efforts to address the structural competencies of our most marginalised communities. Through addressing the social determinants of drug use we will encourage the best possible health and social response for PWUD.

Please feel free to contact me if you have any further questions regarding this submission.

Yours faithfully,

*Stephen Lunny*  
Surry Hills Community Drug Action Team Chairperson  
On behalf of SHCDAT Members  
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