

National Amphetamine Type Stimulant Strategy 2008-2011

In May 2006 the Ministerial Council on Drug Strategy (MCDS) agreed to develop a National Amphetamine-Type Stimulant Strategy.

The National Amphetamine-Type Stimulant (ATS) Strategy 2008-2011 is informed by the research literature, scientific evidence, a nationwide consultation process and written submissions from key stakeholders around Australia. It has been developed on behalf of MCDS under the direction of a Project Management Group chaired by Ms Virginia Hart (Assistant Secretary, Drug Strategy Branch, Australian Government Department of Health and Ageing) with input from three supporting reference groups in *Law Enforcement, Public Health and Treatment and Research*. Project development and research was provided by the National Drug Research Institute (NDRI) (Curtin University of Technology) and the Australian Institute of Criminology (AIC). The Project Team consisted of Professor Steve Allsop, Ms Jessica George and Associate Professor Simon Lenton (NDRI), and Dr Toni Makkai and Dr Jan Baker (AIC). The advice and support of Mr Peter Rogers and Mr Jeremy Williams from the Australian Government Department of Health and Ageing is acknowledged. In particular, the Project Team is indebted to Ms Jenny McLaren from the National Drug and Alcohol Research Centre (NDARC; University of New South Wales) who provided advice on the process used to develop the National Cannabis Strategy 2006-2009.

Abbreviations

ACC	Australian Crime Commission
ACoG	Asian Collaborative Group on Local Precursor Control
ACON	AIDS Council of New South Wales
ADCA	Alcohol and other Drugs Council of Australia
ADHD	Attention Deficit Hyperactivity Disorder
ADIN	Alcohol and Drug Information Network
ADIS	Alcohol and Drug Information Services
AFP	Australian Federal Police
AIC	Australian Institute of Criminology
AIHW	Australian Institute of Health and Welfare
ANCD	Australian National Council on Drugs
ASSAD	Australian School Survey on Alcohol and Drugs
ATS	Amphetamine type stimulants
COAG	Council of Australian Governments
DUMA	Drug Use Monitoring in Australia
EDRS	Ecstasy and Related Drugs Reporting System
IDDI	Illicit Drug Diversion Initiative
IDRS	Illicit Drug Reporting System
IGCD	Intergovernmental Committee on Drugs
MCDS	Ministerial Council on Drug Strategy
MDMA	3,4-methylenedioxymethylamphetamine
NDARC	National Drug and Alcohol Research Centre
NDLERF	National Drug Law Enforcement Research Fund
NDRI	National Drug Research Institute
NDSHS	National Drug Strategy Household Survey
NIDIP	National Illicit Drug Indicators Project
NMDS	National Minimum Data Set
NSP	Needle and syringe program
SPPCF	South Pacific Precursor Control Forum

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Executive summary

The aim of the ATS Strategy is to:

Reduce the availability and demand for illicit amphetamine-type stimulants and prevent use and harms across the Australian community.

The objectives are to:

- Increase the Australian community's knowledge about amphetamine-type stimulants and raise awareness of the problems associated with their production and use;
- Prevent the use and supply of illicit amphetamine-type stimulants;
- Prevent and respond to amphetamine-type stimulant-related physical and mental health problems as well as social, familial and financial problems for individuals and the community; and
- Enhance the capacity of organisations and the broad system to respond effectively to people affected by amphetamine-type stimulants.

The ATS Strategy consists of five Priority Areas, with a range of activities under each Area. These are:

Priority Area 1: Community awareness and understanding of amphetamine-type stimulant use and related problems

- i) Consolidate the current knowledge of patterns of ATS use and identify awareness of the risks of ATS use among the broad community and high-risk groups
- ii) Use social marketing programs and targeted strategies to raise awareness of the risks associated with ATS use

Priority Area 2: The supply of amphetamine-type stimulants

- i) Disrupt and dismantle criminal groups involved in the production, trafficking and supply of ATS into and within Australia, including preventing the illicit supply of precursor chemicals and equipment
- ii) Improve intelligence and information-sharing capabilities of Australian law enforcement agencies and related sectors
- iii) Ensure adequate laws are in place to respond to ATS related activities

Priority Area 3: The use of amphetamine-type stimulants

- i) Develop an evidence base regarding specific strategies to prevent ATS use
- ii) Address broad determinants of poor health and social outcomes and illicit drug use
- iii) Enhance the capacity of the education sector to implement prevention responses to illicit drug problems in general and ATS problems in particular

Priority Area 4: Problems associated with amphetamine-type stimulant use

- i) Ensure that quality information is available about the context of ATS use and related adverse consequences
- ii) Ensure that ATS users, and others affected by ATS use, are aware of the problems associated with ATS use and know how to prevent and reduce such problems
- iii) Implement effective brief and opportunistic interventions for ATS related problems for the large proportion of ATS users with lower levels of use and related problems
- iv) Implement effective ATS screening, assessment, management and referral protocols
- v) Establish an adequate, effective and accessible range of ATS treatment options
- vi) Build on the impact of the Illicit Drug Diversion Initiative (IDDI) to link suitable offenders to health services, to provide early intervention and avoid the risks of having a criminal record for minor ATS related offences
- vii) Enhance court responses to ATS problems
- viii) Develop and trial strategies to prevent and reduce concurrent ATS intoxication and driving
- ix) Develop and trial strategies to prevent and reduce ATS use in the workplace

Priority Area 5: Organisational and system capacity to prevent and respond to amphetamine-type stimulant problems

- i) Develop the capacity of the workforce to respond to alcohol and drug problems in general and ATS related problems in particular
- ii) Build capacity to prevent supply and use of ATS
- iii) Develop the capacity of the workforce to address ATS problems
- iv) Build clinical research capacity to respond to ATS related problems
- v) Build capacity to respond to the needs of families and children affected by ATS problems
- vi) Improve partnerships between drug and alcohol and mental health sectors
- vii) Improve understanding among law enforcement and court personnel about ATS use and problems and related interventions, treatments and other supports for ATS users
- viii) Improve the national response to seized clandestine laboratories and handling precursor chemicals to prevent harms
- ix) Ensure capacity building involves key stakeholders