

Public Health Association of Australia: Policy-at-a-glance – Pill Testing Policy Position

- Key message: 1. Taking illicit drugs, especially ecstasy, is becoming more common among young people in Australia.
 - 2. 70% of pills taken by young people in a 12 month period were taken at clubs, festivals and dance parties.
 - 3. The growth in new psychoactive substances and evolving chemical composition of illicit drugs means users have no way of knowing what they are taking and the potential risks involved.
 - 4. Testing of pills by appropriately trained health professionals can inform users about the content and thereby minimise the risk of injury or death.
 - 5. Evidence from several European countries indicates pill testing may reduce use, and health-related harms including deaths.

Summary:

The Public Health Association of Australia (PHAA) supports medically supervised pill testing as an integral part of Australia's harm-minimisation approach to drug use.

Audience:

Federal, State and Territory Governments, health professionals, policy makers and program managers.

Drafted by:

PHAA's Alcohol, Tobacco and Other Drugs Special Interest

Group (SIG).

Policy Statement February 2017 approved in:

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Position Statement Policy Position

The Public Health Association of Australia notes that:

- 1. Taking illicit drugs, especially ecstasy, is becoming more common amongst young people in Australia. A 2013 survey found 8.6% of 20 to 29 year olds and 6.2% of 18 to 19 year olds had taken the drug in the previous 12 months.¹
- 2. According to annual research among 1000 ecstasy users, 70% of these pills are taken at clubs, festivals and dance parties.²
- 3. Ecstasy (also known as Methylenedioxymethamphetamine [MDMA]) generally causes little reported harm but may contain a range of substances of varying potency including highly toxic substances that are a by-product of MDMA production and additives.
- 4. The growth in new psychoactive substances and evolving chemical composition of illicit drugs means users have no way of knowing what they are taking and the potential risks involved.
- 5. Technology exists to test for potentially highly toxic substances. For people intending to take illicit drugs, testing before by appropriately trained health professionals can inform users about the content and thereby minimise the risk of injury or death.³
- 6. Accurate information about the content of pills and risks is currently lacking among users in Australia posing a serious health risk. The PHAA recognise that there is no data from Australia on the usefulness of ecstasy pill testing as a harm minimisation strategy. However, there is evidence from Europe that might reduce use, and health-related harms including deaths. Pill testing is available in several European countries including the Netherlands, Switzerland, Austria, Belgium, Germany, Spain and France. The legal status of the service is unclear in these countries and there is no formal government endorsement of the measure.
- 7. Research from Austria found that pill testing changes behaviour: 50% of those who had their drugs tested said the results affected their consumption choices. Two-thirds said they would not consume the drug and would warn friends in cases of negative results.⁵

The Public Health Association of Australia affirms the following principles:

8. Visits to pill testing sites create an important opportunity for providing support and information over and above the testing itself. This intervention with members of groups know to be at high-risk of use, can help to provide appropriate and timely support to reduce the risk of problematic drug use.

The Public Health Association of Australia believes that the following steps should be undertaken:

9. The PHAA supports medically supervised pill testing as an integral part of Australia's harm-minimisation approach to drug use and asks that Federal, State and Territory governments provide support to undertake this life saving initiative.

References

¹ Australian Institute of Health and Welfare 2014. National Drug Strategy Household Survey detailed report 2013. Drug statistics series no. 28. Cat. no. PHE 183. Canberra: AIHW.

² Ibid.

³ Key findings from the 2014 <u>Ecstasy and Related Drugs Reporting System</u> (EDRS) - Drug Trends Conference handout. Available at: https://ndarc.med.unsw.edu.au/resource/key-findings-2014-edrs-drug-trends-conference-handout

⁴ An inventory of on-site pill testing interventions in the EU. 2002, European Monitoring Centre for Drugs and Drug Addiction (NCDDA). Available at: http://www.emcdda.europa.eu/html.cfm/index1577EN.html

⁵ Key findings from the 2014 <u>Ecstasy and Related Drugs Reporting System</u> (EDRS) - Drug Trends Conference handout. Available at: https://ndarc.med.unsw.edu.au/resource/key-findings-2014-edrs-drug-trends-conference-handout