

AT THE HEART
OF THE MATTER,
NZ DRUG
FOUNDATION.

Te Tūāpapa Tarukino o Aotearoa

AT THE HEART
OF THE
MATTER

State of the Nation 2018

A stocktake of how New Zealand is dealing
with the issue of drugs

Published: January 2019



Tēnā koe

The New Zealand Drug Foundation's vision is for an
Aotearoa free from drug harm.

This State of the Nation is the first of what will be an annual report. It's intended to track how New Zealand is dealing with alcohol and other drugs, and show a starting point against which we can assess the impact of any policy changes.

While we are doing well in some areas, there is massive room for improvement. Top of the list is the horrifying number of deaths (as many as 50) linked to synthetic cannabinoids since mid-2017.

There is room for hope, though, with some welcome announcements from the government in December. They plan to ensure Police no longer prosecute people for possession and personal use of any drug "where a therapeutic approach would be more beneficial, or there is no public interest in a prosecution". This could be a game-changer for ensuring people can get the help they need.

Also in December, the government passed new medicinal cannabis legislation and declared the 2020 cannabis referendum will be binding. And already this year, the Police Minister acknowledged the importance of drug checking at festivals.

However there is no room for complacency. Illicit drug convictions are creeping up again after falling for many years, with 5,710 people convicted in 2017. It's concerning that 61% of those convictions were for low-level offences, such as possessing or using drugs. And Māori continue to suffer disproportionate harm both from drugs and our drug laws.

And a note on drug statistics: New Zealand does not have adequate ones. With all that is going on, it's essential we rectify this in a hurry. How else will we know what's working and what's not working?

Ngā mihi nui, and best wishes for 2019,

Kali Mercier

Policy & Advocacy Manager



The Drug Foundation is a charitable trust. We have been at the forefront of major alcohol and other drug debates for 30 years, promoting healthy approaches to alcohol and other drugs for all New Zealanders.

New Zealand has high rates of alcohol and other drug use.

THERE ARE SOME CONCERNING NEW TRENDS

Synthetics are becoming more toxic and harmful

Over ten dangerous synthetic cannabinoids have been detected in New Zealand since 2017.

The chemicals found here are often sold in much more potent doses than overseas. This is a factor in our high mortality rates.



As many as 50 deaths have been connected with synthetic cannabinoids since mid-2017. Hundreds more people continue to be hospitalised with severe side effects such as seizures and overdose.

Most people in New Zealand drink alcohol, and cannabis use is slowly climbing

NEW ZEALAND ADULTS (2016/17)

79%

drank alcohol in the past year. Rates have remained the same over the past five years

↑12%

used cannabis in the past year, up from 8% five years ago

↓16%

were current smokers, down from 18% five years ago

0.8%

consumed methamphetamine in the past year. Rates have remained the same over the past five years

Source: New Zealand Health Survey 2016/17 and 2011/12

Harmful drinking is a major issue for New Zealand

Young people continue to have higher rates of harmful drinking than other age groups. While harmful drinking generally declines with age, one in three younger people who drink hazariously will continue to do so for most of their adult lives.

36%  **OF 18-24 YEAR-OLDS**

Binge drink (six or more drinks on one occasion) each month

Source: Ministry of Health (2016/17)

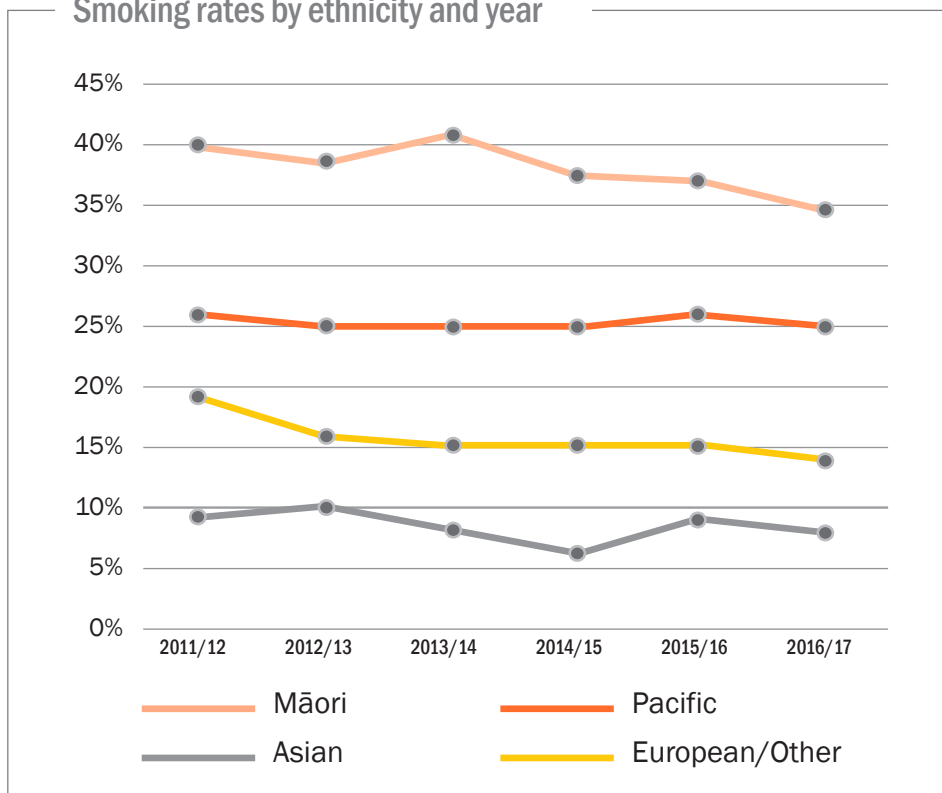
Smoking rates are falling

Smoking rates amongst Māori and European/Others (see graph) are slowly dropping. But Māori and Pacific rates are still much higher than other ethnic groups.

Generally, more men than women are smoking tobacco - except amongst Māori. In 2016/17, 6% more Māori women smoked than Māori men.



Smoking rates by ethnicity and year



Source: Ministry of Health (2018)

Methamphetamine use is still a great concern in many communities

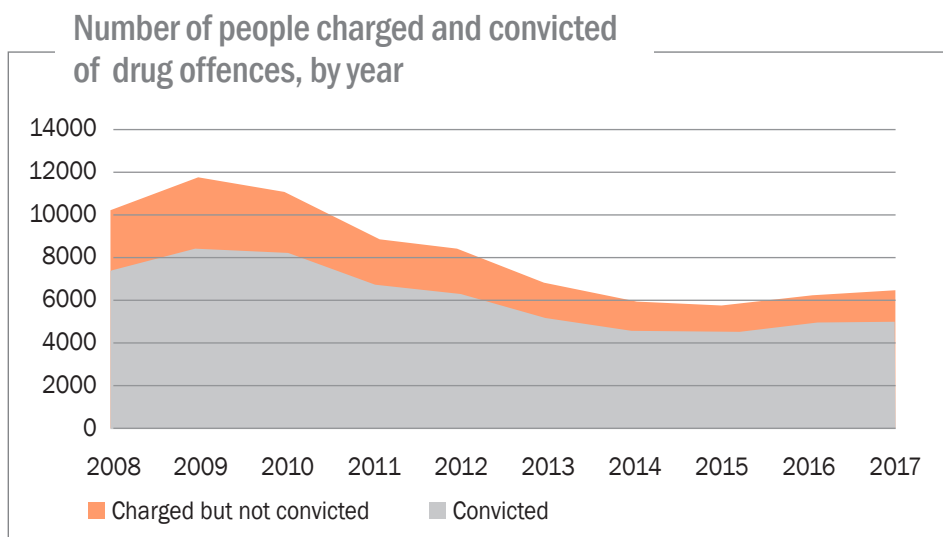
New Zealand doesn't keep good statistics on methamphetamine use, but it is clear that some locations are worse affected than others. For example, Police wastewater testing tells us the amount of methamphetamine consumed per population in Whangarei is two to three times higher than in Christchurch.

Drugs and the criminal justice system

ILLICIT DRUG CONVICTIONS ARE CREEPING UP AGAIN

Drug convictions in NZ almost halved between 2009 and 2015. But since then, that rate has begun creeping back up, with a 14% increase over the past two years.

Around 5,000 people are convicted every year.



Source: Ministry of Justice (2018)

LOW LEVEL DRUG CONVICTIONS ARE CLOGGING UP THE CRIMINAL JUSTICE SYSTEM

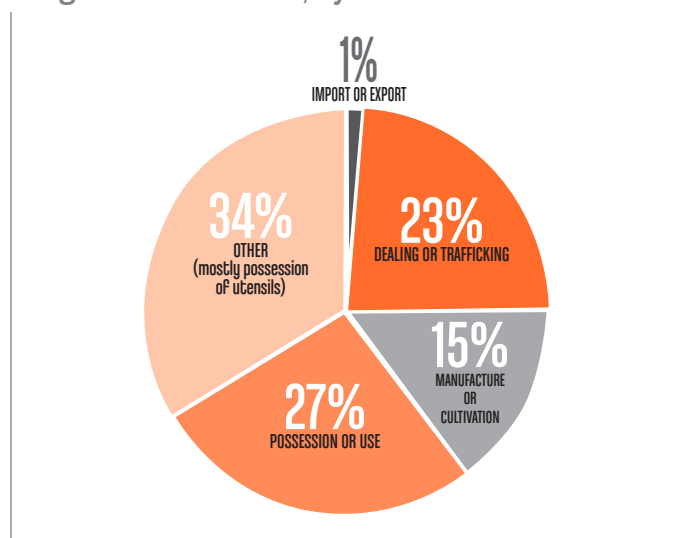
In the past 10 years, 62,173 people have been convicted of drug offences.

The majority (61%) of convictions are what we would define as low-level drug convictions. This includes charges for personal use, possession, and use or possession of a drug utensil.

In 2017, 3,833 people were convicted of low-level drug offences:

- People under 30 years made up nearly half of those convicted (46%).
- 80% of those convicted were men.
- Māori made up 41%.

Drug offences in 2017, by most serious offence



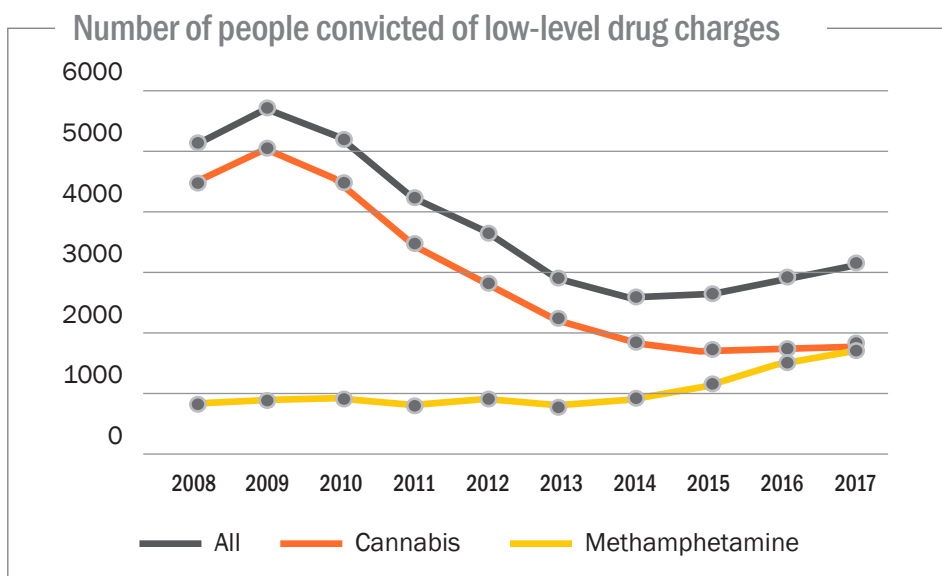
Source: Ministry of Justice (2018)

Low-level methamphetamine convictions have increased as cannabis convictions have fallen

Low-level cannabis convictions fell dramatically between 2009 and 2015.

However, about 1,800 people are still convicted for low-level cannabis offences each year.

Unfortunately, since 2014 a rise in methamphetamine convictions has helped to push up the overall number of low-level convictions by 19%.



Source: Ministry of Justice (2018)

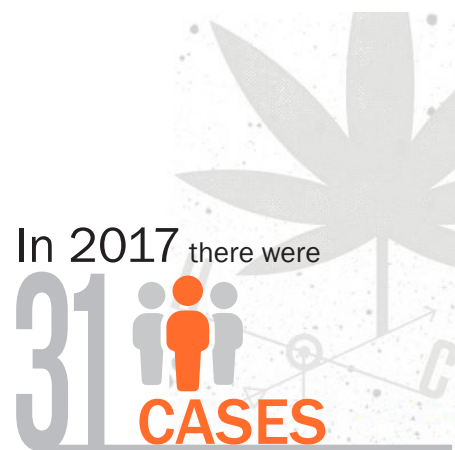
More people are being imprisoned for low-level drug convictions – more than 50% of them are Māori

The number of people being imprisoned for low-level offences is increasing, from 510 in 2013 to 870 in 2017 (a 71% rise). It's particularly worrying that Māori are bearing the brunt of the increase, making up 51% of this group in 2017.

It's worth noting that very few people are sentenced to prison for low-level drug offences alone – most of those imprisoned also have other drug or non-drug related charges. However, low-level drug convictions increase the total time spent in prison.

People still go to prison for cannabis

In 2017, in 31 cases, people were sent to prison for cannabis-related charges alone (that is, they had no other drug or non-drug related convictions). The average length of sentence for those 31 cases was 628 days, with the longest being 1,730 days.



of people sent to prison for cannabis alone

Source: Ministry of Justice (2018)

→ IT'S TIME FOR DRUG LAW REFORM

- We recommend removing criminal penalties for drug possession, use and social supply. Anyone found with a small amount of drugs would instead receive a health referral. This approach would make sure those people who need help get support instead of a conviction.

There are better ways ... but are we using them?

FEWER PEOPLE ARE BEING DIVERTED FROM COURT EACH YEAR

Non-court action covers a range of responses to offending, including therapy, warnings, iwi-community panels and youth aid referrals. It helps people avoid a conviction and is more likely to address the root cause of offending. In the past year (November 2017-October 2018), 2,735 people with drug charges were diverted into non-court action.

Between 2014/15 and 2017/18, there was a 13% drop in the number of people with illicit drug charges being diverted away from court.

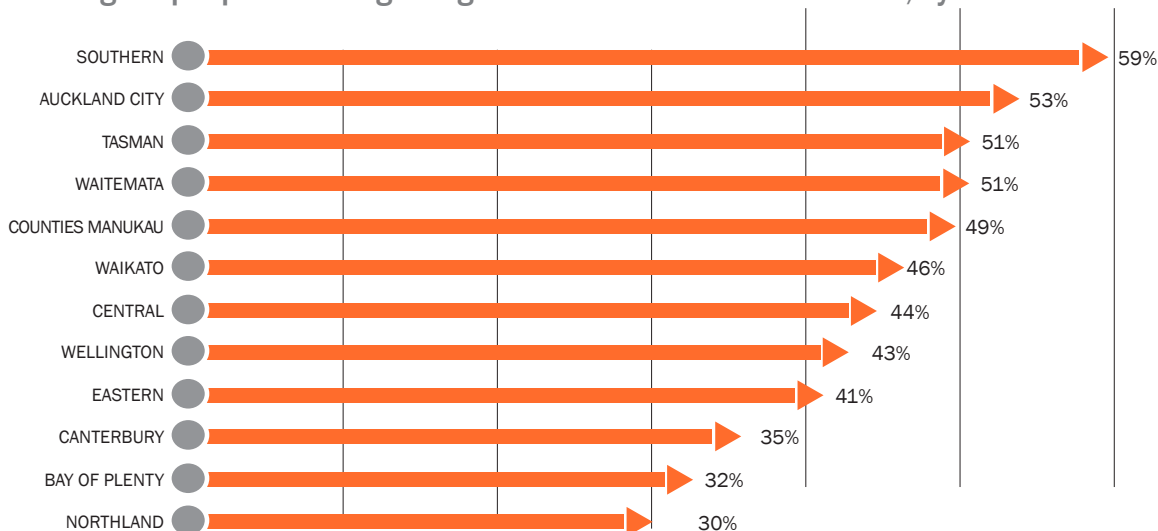


Source: NZ Police (2018)

SOME POLICE DISTRICTS ARE DOING BETTER THAN OTHERS

There is a significant difference in how often different Police districts divert people into non-court action for illicit drug crimes. Southern Police district is doing well, diverting well over half. Northland, by comparison, diverts less than one-third of people with illicit drug charges.

Percentage of people with drug charges diverted into non-court action, by district



Source: NZ Police (Nov 2017 - Oct 2018)

Alternative action that **works**

NEW ZEALAND HAS SOME GREAT EXAMPLES OF THERAPEUTIC AND ALTERNATIVE RESPONSES TO DRUG USE

Te Ara Oranga Methamphetamine Demand Reduction Strategy Pilot

Te Ara Oranga is an interagency pilot initiative between the Police, health organisations and the community that started in 2017. People struggling with their methamphetamine use receive health screenings and treatment instead of a conviction.

In the pilot's first year, 308 people were referred for treatment, many by the Police.

In only a year,

308  **PEOPLE**

have been referred for treatment - many of those by the Police

Community Iwi Panels

Eight Te Pae Oranga iwi community panels operate across New Zealand, from Auckland to Invercargill. They work to find solutions to people's offending and are particularly well-suited to helping those with alcohol and other drug-related charges.

In 2017/18, these panels processed 90 alcohol and other drug-related referrals.

Alcohol and Other Drug Treatment Courts

These two Auckland pilot courts take 'high-risk' cases where addiction is the root cause of repeated offending. Sentencing is deferred while those facing charges are supported to undertake addiction treatment.

As of early 2018, more than 150 people had completed the programme. This programme is estimated to reduce reoffending by 15%.

As of 2018, more than

150  **PEOPLE**

had completed the treatment court programme

→ MORE PEOPLE NEED ACCESS TO ALTERNATIVE RESOLUTIONS

- Ultimately New Zealand should stop charging people with low-level drug convictions altogether.
- In the meantime, we'd like to see more people being referred for non-court action, and more therapeutic or alternative actions available.

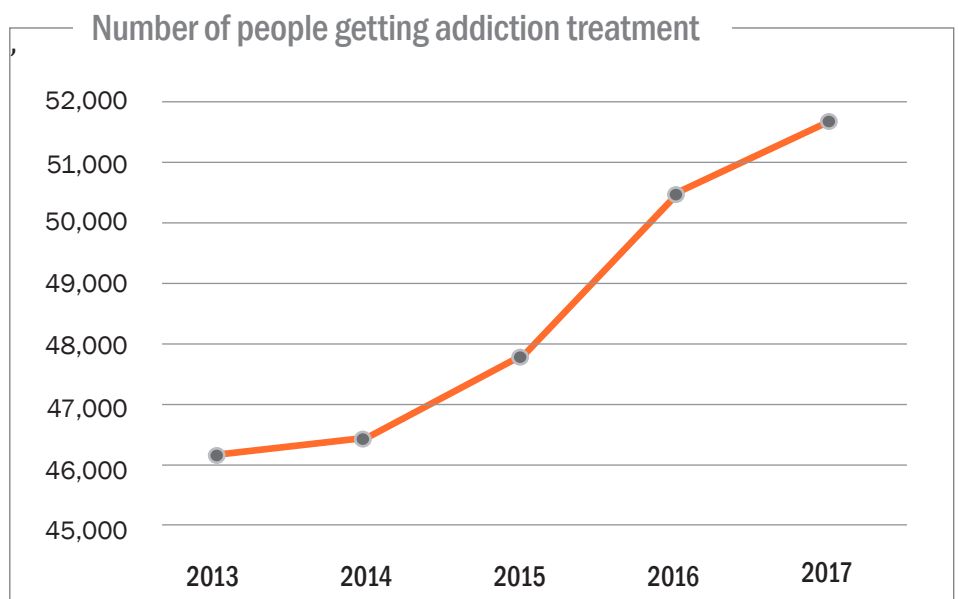
More people are **getting treatment**, but the sector is under pressure

73% **MORE PEOPLE**
accessed treatment for mental health and addiction in the past decade
BUT FUNDING INCREASED BY ONLY 40%

Source: Health & Disability Commissioner (2018)

The number of people receiving addiction treatment is slowly climbing, with 51,612 people receiving support in 2017.

Despite steady increase in demand, only eight extra full-time addiction treatment positions were funded between 2013 and 2017.



Source: Ministry of Health (2018)

→ WE NEED TO FILL THE GAPS IN TREATMENT AND HARM REDUCTION SERVICES

- We'd like to see the treatment budget doubled to eliminate waitlists. We'd also like to see a full range of treatment options funded, including community- and whānau-based services.
- New Zealand needs to fund harm reduction initiatives, including drug checking and drug consumption rooms.



Current harm reduction services get **great results**. But there are still big gaps

Harm reduction means meeting people where they are at, and acknowledging that abstinence (no drug use) is not a realistic goal for everyone. Harm reduction services work with people to avoid preventable drug-related harms, such as infection and death.

The only nationally funded harm reduction programmes are needle exchange and opioid substitution therapy.

Critical harm reduction services, such as drug consumption rooms, don't exist in New Zealand. Other services, such as drug checking at festivals, are run by volunteers. We need real investment over a full range of services if we are serious about reducing harm.

Needle Exchange

New Zealand now has 22 needle exchanges and also distributes through 190 pharmacies. In the past year, Needle Exchange distributed 3.75 million packs of sterile injecting equipment. And in NZ, only one case of HIV was contracted from injecting drugs in 2017.

Opioid substitution therapy

More than 5,500 people received opioid substitution therapy in 2017, with over 500 new clients assessed each year. Waiting times have dropped over the past five years, and most people start treatment within four weeks of presenting.

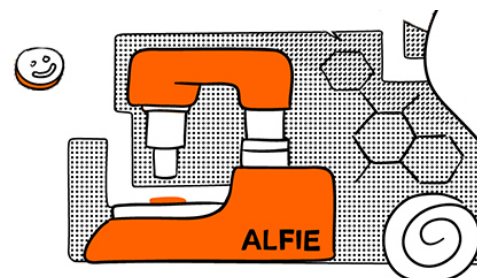
Drug checking at festivals

Drug safety checking is offered as a harm reduction service at some festivals. Forty four different psychoactive substances were identified by drug-checking services at festivals in 2017/18. Twenty of these were identified for the first time in 2017/18.

Drug checking changes behaviour. Fifty-eight percent of those checking their dugs at festivals said they wouldn't take a drug when it was not what they thought it was.

Needle exchange distributed
3.75 MILLION
Packs of sterile injecting equipment

5,500 PEOPLE
Received opioid substitution therapy

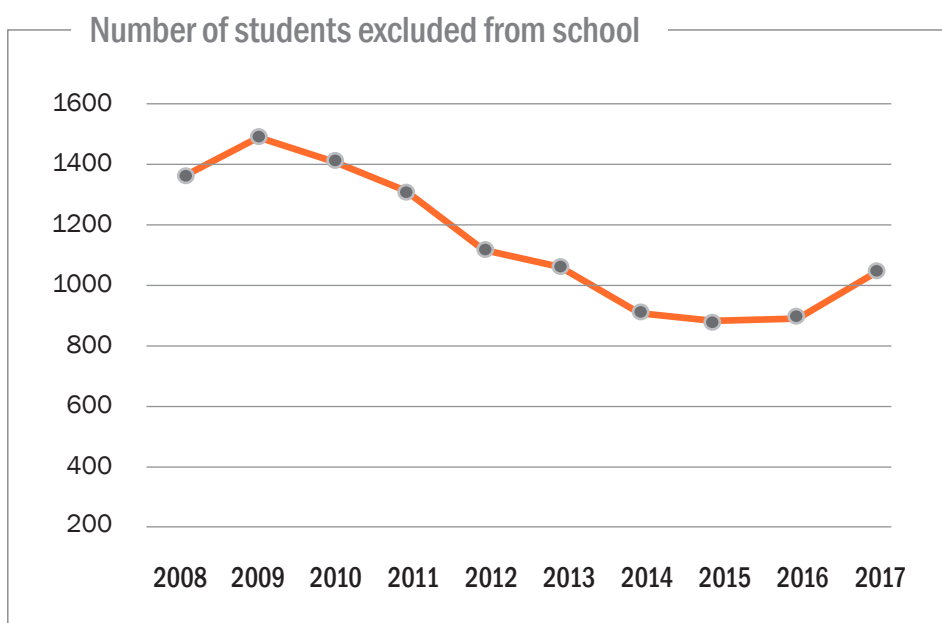
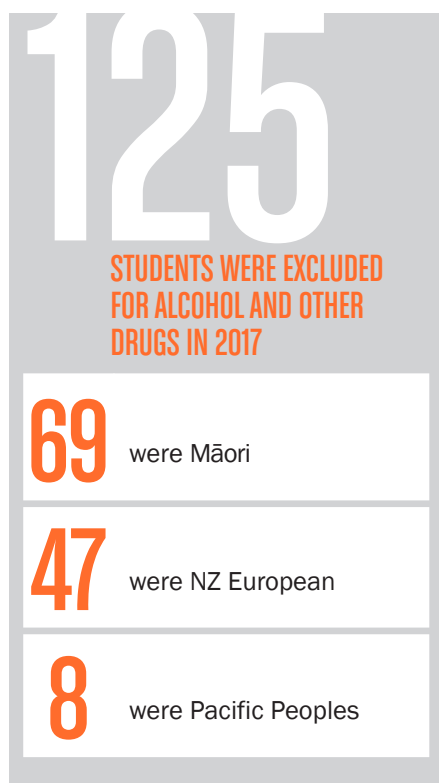


Vulnerable young people are falling through the cracks in our education system

Too many young people are excluded from school

For many years, school exclusion rates (those removed from school under 16 years) had been dropping. But in 2016 those rates began to climb back up.

School is a key protective factor for reducing alcohol and drug harm and improving overall life outcomes. Being excluded can cause much more harm than drug and alcohol use itself.



Source: Ministry of Education (2018)

→ SOME SCHOOLS NEED TO CHANGE THEIR RESPONSE TO SUBSTANCE USE

- Schools need the resources to be able to support students to stay in education as long as possible – particularly those struggling with alcohol or other drug use.

→ SOURCES USED FOR THIS REPORT ARE AVAILABLE BY REQUEST.

We all want a happier, **healthier**, more equal New Zealand.

For us that means treating drug use as a health issue rather than a criminal issue.

WE PROPOSE:

- **Removing criminal penalties for the possession, use and social supply of all drugs**
 - **Developing a strictly regulated cannabis market**
 - **Putting more resources into prevention, education and treatment**
-

Find out more in our model drug law,
[Whakawātea te Huarahi](#).

