THE LEGISLATIVE ASSEMBLY FOR THE AUSTRALIAN CAPITAL TERRITORY

DRUGS OF DEPENDENCE (PERSONAL USE) AMENDMENT BILL 2021

# SUPPLEMENTARY EXPLANATORY STATEMENT

Presented by Rachel Stephen-Smith MLA Minister for Health

## DRUGS OF DEPENDENCE (PERSONAL USE) AMENDMENT BILL 2021

## INTRODUCTION

This explanatory statement relates to Government amendments to the Drugs of Dependence (Personal Use) Amendment Bill 2021 as presented to the Legislative Assembly. It has been prepared in order to assist the reader of the Bill and to help inform debate on it. It does not form part of the amendments and has not been endorsed by the Assembly. This Supplementary Explanatory Statement outlines the Government amendments to be made to the Private Member's Bill (PMB).

The statement must be read in conjunction with the amendments. It is not, and is not meant to be, a comprehensive description of the amendments. What is said about a provision is not to be taken as an authoritative guide to the meaning of a provision, this being a task for the courts.

## BACKGROUND

On 11 February 2021, Michael Petterson MLA introduced the Drugs of Dependence (Personal Use) Amendment Bill 2021 (Private Member's Bill) into the Legislative Assembly. The Private Member's Bill proposes to reform the *Drugs of Dependence Act 1989* (DoD Act) in relation to personal possession of certain illicit drugs, by renaming and expanding the Simple Cannabis Offence Notice (SCON) Scheme to become a Simple Drug Offence Notice (SDON) Scheme by adding other common illicit drugs to this diversionary pathway. The Bill also proposes reducing the maximum penalties, and removing the possibility of imprisonment, for possession of small amounts of certain illicit drugs.

The Legislative Assembly referred the Private Member's Bill to the Select Committee into the Drugs of Dependence (Personal Use) Amendment Bill 2021.

On 30 March 2021, a separate Inquiry into alcohol, tobacco and other drug policy and programs was combined with the Select Committee's Inquiry into the Bill.

The Select Committee received 59 written submissions, heard evidence over five public hearings and conducted an online public survey. It tabled a final report on 30 November 2021. The Committee Chair also tabled a dissenting report. The Select Committee's Report made 17 recommendations. Recommendations in relation to the Bill supported the intent of the Bill, while also seeking to provide direction on potential improvements.

On 9 June 2022, the Government responded to the Committee report and agreed in full or in principle to the majority of the recommendations.

The purpose of the Government amendments is to enable the Private Member's Bill better meet its aims of prioritising a health-focused response to illicit drug personal possession and increase diversion away from the criminal justice system.

The ACT Government does not condone or encourage the recreational use of illicit drugs. This is a message the Government will continue to share with the Canberra community both in the context of this legislation, and more broadly.

However, we must also acknowledge that the outright prohibition model of drug policy is not working, as drug use is prevalent across Australia and within the ACT. There is good evidence from drug law reform around the world that a harm minimisation approach delivers better outcomes both for individuals and communities.

This is why the ACT Government is taking a harm minimisation approach by supporting the Private Member's Bill and introducing a range of amendments to further support the health of the ACT community.

## **OVERVIEW OF AMENDMENTS**

The Government amendments will ensure the Private Member's Bill best meets its stated objectives, and that possible unintended consequences are minimised. These amendments include:

- Changes to place the existing (unlegislated) Illicit Drug Diversion Program on an equal legislative footing to the proposed Simple Drug Offence Notice (SDON);
- Changing the name of the 'Personal Possession Limit' proposed in the Private Member's Bill to 'small quantity' to better describe its purpose;
- Making the 'small quantity' amounts more consistent across different drugs and more reflective of evidence of consumption patterns;
- Adjusting the list of drugs eligible for reduced penalties, to allow for a staged approach to these significant reforms;
- Ensuring that the list of drugs eligible for reduced penalties is in regulation, rather than in legislation, so that it can be more easily amended to take account of changing trends in future; and
- Reducing the maximum prison sentence for personal possession offences for all illicit drugs, in line with the harm minimisation principles of the Private Member's Bill and the Government's overarching approach to alcohol and other drug policy.

The Government amendments also delay the commencement of the legislation for 12 months after its passage to allow for appropriate police training and review of supporting administrative arrangements.

### **HUMAN RIGHTS**

The Private Member's Bill and amendments may have potential human rights implications. Where an individual's human rights are affected in any capacity, the limitations are reasonable with further justification provided below.

A broad summary of the human rights engaged by the Private Member's Bill can be found in the explanatory statement for that Bill. Therefore, this commentary is focused on a comparison of any potential limitations and impact of the Government amendments only. The Private Member's Bill and amendments may engage the following rights under the *Human Rights Act 2004* (HR Act):

- Section 8 Recognition and equality before the law;
- Section 9 Right to life;
- Section 18 Right to liberty and security of person; and
- Section 22 Rights in criminal proceedings

Legislating the illicit drug diversion program, which is intended to increase access to this health-focused program (by prompting a review of eligibility criteria), supports the right to life (HR Act section 9) because it relates to the delivery of, and may increase access to, medical treatment. Treatment options and support services have been shown to be highly effective in helping reduce risky alcohol, tobacco and other drug use as well as related problems for individuals and the broader community.<sup>1</sup> The Private Member's Bill and Government amendments as a whole further support this right: in reducing penalties for drug possession, they aim to reduce stigmatisation of people who use drugs, and thereby encourage them to seek treatment.

The introduction of the SDON fine (expanding the Simple Cannabis Offence Notice (SCON) scheme), as well as providing for the illicit drug diversion program in legislation, promotes recognition and equality before the law by expanding access to diversion for a range of the most commonly used drugs (HR Act section 8).

This is because socioeconomic status (property) is a protected attribute in relation to the right to equality before the law. For example, while employed people are substantially more likely to use cocaine, unemployed people are substantially more likely to use methamphetamine.<sup>2</sup> People who inject drugs tend to be highly marginalised and disadvantaged<sup>3</sup> and the main drugs that people report injecting in Australia are heroin and methamphetamine.<sup>4</sup> Broadening the range of diversion options across different drug types to include heroin and methamphetamine increases equal access to diversion options under the law for some highly disadvantaged drug users.

The provision that the SDON may be discharged by attending the illicit drug diversion program also promotes the right to recognition and equality before the law. These measures also promote the right to life (HR Act section 9).

<sup>&</sup>lt;sup>1</sup> Commonwealth of Australia, Department of Health (2017). National Drug Strategy 2017-2026.

 $<sup>^{2}</sup>$  Australian Institute of Health and Welfare (2020). Data Tables National Drug Strategy Household Survey 2019 – 8 Priority Population Groups Supplementary Tables. Table 8.13 - Use of drugs by employment status, people aged 14 and over, 2010-2019.

<sup>&</sup>lt;sup>3</sup> Australian Institute of Health and Welfare. See Alcohol, tobacco & other drugs in Australia, People who inject drugs - Australian Institute of Health and Welfare (aihw.gov.au).

<sup>&</sup>lt;sup>4</sup> Sutherland R, Uporova, J, Chandrasena U, et al. (2021). Australian Drug Trends 2021: Key findings from the national Illicit Drugs Reporting System (IDRS) interviews. Sydney: National Drug and Alcohol Research Centre, UNSW Sydney.

Harm minimisation is Australia's accepted overarching policy approach to drug use, and this includes recognition of the social harms associated with interaction with the criminal justice system.<sup>5</sup>

In setting penalties, it is important to take into account the relative harm to society contrasted with harms associated with interaction with the criminal justice system. Offence provisions relating to simple drug possession or use, without any other related crime, can be considered mostly aimed at protecting a person from their own behaviour, rather than the broader society.

Community attitudes, which are changing in relation to drug offences, are also relevant in this regard. A March 2021 survey conducted by the ACT Government found that compared with national data, Canberrans appear to lean more strongly towards remediation and rehabilitation for drug use as opposed to more punitive measures. Moreover, for drug related offences, there is ever-increasing acceptance that a justice centric focus can perpetuate a cycle of offending, which only exacerbates the negative impacts on society. In this specific context, the reductions to penalties, including the removal of the possibility of a prison sentence in some cases, proposed by the Private Member's Bill and Government amendments, can be considered to engage and promote the right to liberty and security of person (HR Act section 18) and rights in criminal proceedings (HR Act section 22).

These measures support human rights by offering a way for individuals who possess drugs to be diverted away from the criminal justice system, and to be put on a path to seeking treatment and information about the harms of drug use, instead of on a path to receiving a criminal conviction. This is particularly supportive of human rights given its potential impact on disadvantaged groups.

A key priority under the National Drug Strategy 2017-26, and the ACT Government's overarching approach to drug policy, is enhancing systems to facilitate greater diversion into health interventions from the criminal justice system, particularly for Aboriginal and Torres Strait Islander people, young people and other at-risk populations who may be experiencing disproportionate harm.

The opportunity to avoid the possibility of a criminal conviction for a minor drug offence may also indirectly promote the rights in section 17 and 27B of the HR Act because a criminal conviction can jeopardise the possibility of a person gaining appointment to the public service, obtaining public office, and some forms of employment.

Reducing penalties for possession, including above the 'small quantity' limit, while potentially promoting rights of accused persons, may also be seen to limit the right to security and the right to life for the broader community. This is because it is recognised that drug use can be associated with social harms including violence and other crime and occupational violence for frontline workers, and these rights include a positive obligation on government to take reasonable actions to safeguard life and protect individuals from foreseeable threats, such as through providing adequate sanctions to prevent social harm of drugs and deter drug use.

<sup>&</sup>lt;sup>5</sup> Commonwealth of Australia, Department of Health (2017). National Drug Strategy 2017-2026.

However, any potential limitations on the right to security and the right to life as a result of the Bill are considered justifiable, because of their aim to provide support to drug users and reduce engagement with the criminal justice system. There is no less restrictive means to achieve this purpose. The United Nations and World Health Organization issued a joint statement in 2017<sup>6</sup> on discrimination in health care which called on supporting states to reviewing and repeal "punitive laws that have been proven to have negative health outcomes and that counter established public health evidence", including laws that criminalise personal drug possession or use.

The reforms may reduce stigma in relation to drug use and fear of prosecution, meaning people may be more likely to attend treatment and contact emergency services and lives may be saved. Australian research has indicated that people who are diverted from the criminal justice system are significantly less likely to experience difficulties in employment, relationships, or accommodation and have reduced future contact with the criminal justice system.<sup>7</sup> Research in the United States has also identified cost savings from diversion programs.<sup>8</sup> Also in response to these potential limitations, it is important to note that the Bill and Government amendments do not reduce the penalties for supplying illicit drugs. Under the Private Member's Bill with Government amendments, police will retain the ability to charge individuals with concurrent offences to drug possession that may pose a threat to others, such as theft or assault. In addition, the proposed changes are not expected to reduce deterrence for drug possession, as deterrence is more strongly related to the certainty of a penalty than to the severity of a penalty.

Including only a select list of drugs as eligible for the SDON and reduced maximum penalties for possession of a small quantity could engage and limit the right to equality before the law, insofar as the list does not include all the drugs that people might use. However, it should be noted that the list of drugs captures the drugs which account for the large majority of possession apprehensions and/or diversions in the ACT. The three drugs most frequently seized by police in the ACT, in order, are cannabis, methylamphetamine and cocaine, accounting for half of all drug seizures. The list of drugs has also been moved from the Private Member's Bill to the *Drugs of Dependence Regulation 2009*, as this is more straightforward to amend in response to future drugs and changes to drug usage patterns. The ACT Government has taken a staged approach to these significant reforms and will consider the addition of further drugs over time.

In addition, the fact that the Illicit Drug Diversion program is intended to remain available for possession of all drugs acts as a safeguard for this right. People in possession of drugs not on the list would also still have access to other diversionary options, such as the Court Alcohol and Drug Assessment Service and the Drug and Alcohol Court (where other eligibility criteria are met).

<sup>&</sup>lt;sup>6</sup> World Health Organization (2017). <u>Joint United Nations statement on ending discrimination in health care</u> <u>settings (who.int)</u>

<sup>&</sup>lt;sup>7</sup> Lenton, S and Humeniuk, R and Heale, P & Christie, P. (2000). Infringement versus conviction: the social impact of a minor cannabis offence in South Australia and Western Australia. Drug and Alcohol Review 19 (3): 257-264.

<sup>&</sup>lt;sup>8</sup> Babor et al. (2018) Drug Policy and the Public Good (2<sup>nd</sup> edition). Chapter 11, Criminalization and Decriminalization of Drug Possession. Oxford, Oxford University Press, 2018.

## **CLAUSE NOTES**

### Amendment 1

This amendment is to the long title of the Bill, to reflect that it amends the *Drugs of Dependence Regulation 2009* (DoD Regulation) in addition to the DoD Act.

### Amendment 2

This amendment creates a new Part 1 for the Bill, dealing with preliminary matters.

### Amendment 3

This amendment provides that the enacted Bill commences 12 months after its notification day. This change will support implementation of these significant reforms, including allowing time for police training and review of administrative processes.

#### Amendment 4

This amendment reflects that the Bill amends the DoD Regulation in addition to the DoD Act.

### Amendment 5

This amendment creates a new Part 2 for the Bill, which sets out amendments to the DoD Act.

#### Amendment 6

This amendment inserts a new Clause 3A, which provides that Chapter 2 of the *Criminal Code 2002* applies to sections 169 and 171AAD of the DoD Act.

That chapter sets out the general principles of criminal responsibility (including burdens of proof and general defences), and defines terms used for offences to which the Code applies (eg conduct, intention, recklessness and strict liability).

This change aligns sections 169 and 171AAD with other offences in the DoD Act.

#### Amendment 7 – Clause 4

This amendment omits Clause 4 and substitutes a new Clause 4.

New subsection 169(1) establishes an offence where a person possesses not more than a small quantity of a drug of dependence.

The maximum penalty for the offence under s 169(1) is 1 penalty unit (reduced from 50 penalty units, 2 years imprisonment or both).

This amendment changes the term 'personal possession limit' used in the Private Member's Bill to 'small quantity', for consistency with terminology elsewhere in the DoD Act.

It also provides that the offence applies for possession of amounts not more than the small quantity limit, rather than only for possession of amounts below that limit, for consistency with limits in other areas of legislation, for example traffic speed limits.

New subsection 169(2) establishes an offence where a person possesses a drug of dependence and there is no small quantity prescribed for the drug, or if there is a small quantity prescribed, the person possesses more than a small quantity.

The maximum penalty for the offence under s169(2) is 50 penalty units, imprisonment for 6 months or both (reduced from 50 penalty units, 2 years imprisonment or both).

This amendment changes the term 'personal possession limit' used in the Private Member's Bill to 'small quantity', for consistency with terminology elsewhere in the Act. It also provides that the offence applies for possession of amounts above the small quantity limit of a drug, rather than at the small quantity limit or above (as proposed by the Private Member's Bill), for consistency with other areas of legislation.

This amendment also reduces the maximum imprisonment term for the offence under s 169(2) to six months. This more closely aligns the penalties with the Government's harm minimisation approach to drug use and to general penalties principles as set out in the Justice and Community Safety Directorate's Guide to Framing Offences (2010).

Section 169 does not apply if the person is authorised under the *Medicines, Poisons and Therapeutic Goods Act 2008*, or another territory law, to possess the drug of dependence.

The amendments to clause 4 also omit the new section 170 proposed by the Private Member's Bill, which set out personal possession limits for a select list of drugs. The list of drugs with prescribed small quantities has been moved to the DoD Regulation, for consistency with other areas of legislation. This will also facilitate any future changes to the list as required.

The new subsection 171(1) establishes an offence if a person possesses not more than a small quantity of a prohibited substance. The maximum penalty for the offence under s171(1) is 1 penalty unit (reduced from 50 penalty units, 2 years imprisonment, or both).

The new subsection 171(2) establishes an offence where a person possesses a prohibited substance and there is no small quantity prescribed for the substance, or if there is a small quantity prescribed, the person possesses more than a small quantity. The maximum penalty for the offence under s171(2) is 50 penalty units, imprisonment for 6 months or both.

These amendments align with the changes for the offences in ss169(1) and 169(2) above in relation to the term 'small quantity', the possession amounts for these offences, and the maximum penalties for possession of amounts above the small quantity threshold or for where no small quantity is prescribed.

Section 171 does not apply if the person is authorised under the *Medicines, Poisons and Therapeutic Goods Act 2008*, or another territory law, to possess the drug of dependence.

### Amendment 8 – Clause 5

This amendment omits Clause 5 and substitutes a new Clause 5.

The new s171AA(1) establishes an offence where a person possesses not more than a small quantity of cannabis.

The maximum penalty for the offence under s 171AA(1) is 1 penalty unit (reduced from 50 penalty units, 2 years imprisonment or both). This subsection does not apply where the person in possession of the small quantity of cannabis is aged 18 or over and possesses the cannabis in the ACT. This retains the changes made by the *Drugs of Dependence (Personal Cannabis Use) Amendment Act 2019* to decriminalise adult possession of small amounts of cannabis.

The new s171AA(2) establishes an offence where a person possesses more than a small quantity of cannabis. The maximum penalty for the offence under s171AA(2) is 50 penalty units, 6 months imprisonment or both.

These amendments align with the changes for the offences in ss169(1), 169(2), 171(1) and 171(2) above, in relation to the term 'small quantity', the possession amounts for these offences, and the maximum penalties for possession of amounts above the small quantity threshold.

### Amendment 9 – Clauses 7-12

These amendments omit clauses 7 to 12 and substitute new clauses 7 and 8.

New clause 7 inserts a new s171AAD. This establishes a new offence where a person possesses multiple small quantities of different kinds of relevant substances.

It provides that where a person possesses 3 or more different kinds of relevant substance, the quantity of each substance possessed is not more than the small quantity for the substance, and the total of the small quantity fractions for each substance is more than 2, they would be eligible for a maximum penalty of 50 penalty units and/or 6 months' imprisonment, rather than for multiple SDONs.

The small quantity fraction is equal to the actual quantity of the relevant substance the person possesses at the time of police apprehension, divided by the small quantity amount for that substance.

For example, this provision would apply where a person was carrying an amount equal to 80 per cent of the small quantity threshold for drug A, an amount equal to 70 per cent of the small quantity threshold for drug B, and an amount equal to 60 per cent of the small quantity threshold for drug C. This is because those 3 percentages add up to more than 2.

That is: 70/100 + 80/100 + 60/100 = 210/100 = 210% = 2.1.

This amendment reflects that where a person is carrying small quantities of more than two drugs, a SDON is a less appropriate response than routine possession penalties. It also increases consistency with the *Criminal Code 2002*, chapter 6 (serious drug offences), particularly section 631.

It is noted that other offences under the *Criminal Code 2002*, chapter 6 (Serious drug offences) may apply in relation to a person in possession of 2 or more kinds of controlled drugs, controlled precursors and controlled plants.

For persons aged under 18, this provision applies to small quantities of cannabis, as well as drugs of dependence and prohibited substances for which a small quantity is prescribed in the DoD Regulation. For those aged 18 and over, this provision applies only to drugs of dependence and prohibited substances for which a small quantity is prescribed in the DoD Regulation. Small quantities of cannabis are not included in the total of the small quantity fractions for persons aged 18 and over, given criminal penalties do not apply to persons aged 18 and over for possession in the ACT of small quantities of cannabis (per s171AA(3) of the DoD Act).

In new clause 8, the existing s171A is substituted with a new s171A. The Private Member's Bill changed the existing simple cannabis offence notice to a new simple drug offence notice, to apply to a broader range of drugs. The amendments preserve this change and update terminology in relation to parental responsibility in s171A(2) in line with other legislation, including the *Children and Young People Act 2008*.

The new s171A provides that a police officer may serve an offence notice on a person where they believe on reasonable grounds that a person has committed a simple drug offence. Police will retain the ability to divert directly to the illicit drug diversion program or to prosecute for the alleged simple drug offence instead of issuing an offence notice.

The new s171A also sets out the information that an offence notice must include, including the nature of the alleged simple drug offence, the date, time and place of the alleged offence, details for payment of the prescribed penalty and attendance at a drug diversion program. It stipulates that completion of the requirements of the drug diversion program or payment of the prescribed penalty within 60 days after the date of service of the offence notice means the liability of the person for the alleged simple drug offence is discharged, no further proceedings may be brought, and the person is not taken to have been convicted for the offence.

These changes bring the existing illicit diversion program into legislation to provide an additional option for people who receive an offence notice to discharge any liability in relation to the alleged simple drug offence. They will be able to choose whether to pay the fine or attend a drug diversion program that is approved under new s171BB.

This change will ensure that those who are unable or unwilling to pay the fine have an alternative option and thereby minimise the risk that those in lower socioeconomic groups are prosecuted for simple drug offences after failing to pay the fine.

The amendments also set out the attendance requirements for the drug diversion program. The existing illicit drug diversion program is health-focused. Providing

these options for diversion away from the criminal justice system for simple drug offences aligns with the intent of the PMB and the Government's overall harm minimisation approach to alcohol and other drug policy.

The new s171A(7) sets out the offence provisions for which an offence notice is available, that is, possession of not more than a small quantity of certain drugs of dependence (s169(1)), prohibited substances (s171(1)) or cannabis (s171AA(1)), or cultivation of one or two cannabis plants by a person aged under 18 years (s162).

The new s171A does not include the prescribed penalty for a simple drug offence. This has been moved to the DoD Regulation to align with other legislation and to facilitate adjustments in the future if necessary.

## Amendment 10 – new Clause 12A

This amendment inserts a new section 171BB into Part 10 of the DoD Act. It provides that the Minister may approve, by notifiable instrument, a drug diversion program for the assessment and treatment of people found in possession of drugs of dependence or prohibited substances. This change supports new s171A in relation to providing the option of discharging liability for an alleged simple drug offence through attendance at an approved drug diversion program. It raises the profile of the existing illicit drug diversion program as an alternative option to the payment of a fine.

## Amendment 11 – new Clause 12B

This amendment inserts a new section 205B into the DoD Act. It provides that the Minister must review the operation of the amendments made by the enacted Drugs of Dependence (Personal Use) Amendment Bill 2021 as soon as practicable after the end of their second year of operation, and table a report of the review in the Legislative Assembly within six months after the commencement of the review. This new provision broadly mirrors the existing section 205A of the DoD Act, which provides for review of the amendments made by the *Drugs of Dependence (Personal Cannabis Use) Amendment Act 2019*, except that the proposed review period is shorter. It will ensure that the legislation is fit for purpose and has not had unintended consequences.

## Amendment 12 – Clause 13

This amendment inserts a new definition of 'small quantity' of a drug of dependence or prohibited substance into the Dictionary of the DoD Act. It provides that a small quantity is a quantity that is not more than the quantity prescribed by regulation.

The term 'small quantity' has been chosen instead of 'personal possession limit' to reflect the purpose of the Private Member's Bill more closely, align with terminology used elsewhere in the DoD Act, and prevent confusion. Under ACT law, personal possession penalties apply up to the trafficable quantity for the individual drug as indicated in the *Criminal Code Regulation 2005*, not only for possession of the newly defined 'small quantities' of specific drugs.

A small quantity has been defined as an amount not more than the prescribed small quantity limit, rather than only for possession of amounts below that limit (as set out in the Private Member's Bill), for consistency with limits in other areas of legislation.

### Amendment 13 – Clauses 14-15

This amendment inserts a new part 3 into the Private Member's Bill. This part sets out amendments to the DoD Regulation.

New section 3A of the DoD Regulation provides that the prescribed penalty for an offence notice issued for a simple drug offence is \$100.

The penalty is unchanged from the existing penalty associated with a simple cannabis offence notice, but it has been moved from the DoD Act to the DoD Regulation for consistency with other areas of legislation and to facilitate any changes to the penalty in future in response to changing circumstances.

New section 6(1) of the DoD Regulation provides that for the purposes of the DoD Act, a small quantity of a particular drug of dependence or prohibited substance is as set out in column 3 of table 6.1 (drug of dependence) or column 3 of table 6.2 (prohibited substance).

The small quantities for these drugs (except for lysergide and lysergic acid) are intended to refer to a mixture, reflecting that these drugs are usually mixed with other substances and sold in fairly standard amounts. However, the small quantities for lysergide and lysergic acid refer to a pure weight of the drug. This is because the mixed weights for these drugs can vary widely depending on the carrier that is used.

New section 6(2) establishes a definition for a discrete dose unit (DDU). The amendments propose introduction of a DDU for some drugs which are often packaged as a single dose, for example, capsules or tablets. This will facilitate measurement of those drugs.

The proposed list of drugs eligible for the simple drug offence notice and maximum penalty of one penalty unit includes those most commonly used and for which people are most commonly diverted from the criminal justice system. Methadone has been removed from the list proposed by the Private Member's Bill, as it is regulated as a pharmaceutical drug, unlike the others on the list.

The amendments propose changes to the small quantity amounts for most drugs listed in the Private Member's Bill. This is intended to increase consistency across the small quantity amounts for the different drugs, to facilitate implementation of the reforms, and to better reflect evidence on consumption patterns and drug dose amounts. These changes have been informed by drug user self-reported consumption patterns recorded in the ACT and national Illicit Drug Reporting System (IDRS) annual reports, and the corresponding Ecstasy and Related Drugs Reporting System (EDRS) reports and evidence provided to the Select Committee Inquiry. The amounts proposed are intended to cover most people who use these drugs for 1-2 sessions or 1-2 days of use in most cases, allowing for varying use patterns. This means that all small quantity limits have been reduced from the personal possession

limits proposed in the Private Member's Bill, except MDMA ('ecstasy') which has been increased.

For drugs where it is appropriate to specify a DDU (i.e. MDMA, lysergide and lysergic acid), five DDU has been chosen as this will capture the majority of individual drug over 2 days, or longer for use at lower levels according to usage patterns described in both IDRS and EDRS reports, and other research conducted directly with current users. Five DDU is intended to equate to the weight specified in grams in column 3 of each of tables 6.1 and 6.2. For MDMA both DDU and mixed quantities are proposed as the drug is commonly used in formats that include capsules, tablets, powder and crystals.