The National Methamphetamine Symposium

Making Research Work in Practice

12 May 2015 | Arts Centre, Melbourne

National Ice Action Strategy

Richard Murray
Crystalline methamphetamine hydrochloride (ice) is a growing problem

Of detected illicit drug imports to Australia, ice has grown from 5% in ... 2011 to 59% in ... 2014.

More than 60% of Australia’s most significant organised criminal groups are involved in the methamphetamine market.

More than 1 in 14 Australians have tried meth/amphetamine.

About 200,000 Australians used ice in the last 12 months.

Since 2010, the number of people receiving treatment for meth/amphetamine issues has MORE THAN DOUBLED.

Compared to 2010 more than TWICE THE NUMBER of meth/amphetamine users reported using ice in 2013.

Long-term use of ice can cause mental health problems including psychotic episodes.
The Australian Government has established a National Ice Taskforce

The Prime Minister announced the Taskforce on 8 April 2015.

There are three members on the Taskforce:

- Chaired by Ken Lay APM
- Dr Sally McCarthy
- Professor Richard Murray

The Strategy is being developed with the State and Territory governments in a two-pass process:

1. Interim Report in July
2. Final Strategy by the end of the year.

The Strategy will be agreed to by the Council of Australian Governments

The Taskforce is reporting to two federal ministers:

- Senator the Hon Fiona Nash, Assistant Minister for Health
- the Hon Michael Keenan MP, Minister for Justice

The Taskforce is being assisted by a multi-agency secretariat that is working closely with State and Territory public services.
The National Ice Taskforce will be engaging in targeted and community consultations

The Taskforce will be visiting communities in every state and territory to hear from local leaders and experts:

- Mount Gambier, SA
- Newcastle, NSW
- Darwin, NT
- Mildura, Vic
- more locations being settled

Targeted consultations and roundtables with expert groups are also being held:

- Peak bodies representing alcohol and other drug services
- Peak bodies responsible for training, educating and/or representing health professionals
- more consultations being settled

The Taskforce is also seeking views from the public via its website
### BOX 5.1 SUMMARY OF THE TEN STEPS TO SYSTEMS THINKING FOR HEALTH SYSTEMS STRENGTHENING

#### I. Intervention Design
1. Convene stakeholders
2. Collectively brainstorm
3. Conceptualize effects
4. Adapt and redesign

#### II. Evaluation Design
5. Determine indicators
6. Choose methods
7. Select design
8. Develop plan
9. Set budget
10. Source funding.
• Building confidence & skills vs mobilising support vs privileging one substance
• Services coordination vs sectoral & professional identity vs funding streams
• Resource contestability vs collaboration
• Law enforcement vs help-seeking behaviours
How can national whole-of-government approach add value?

- How to best **support the local** – mobilising health & social services, law enforcement, community leaders, users, ex-users, families *in the local context*
- **Information** – applying and making evidence available, priority research gaps
- **Technologies** – telehealth, surveillance, targetting
- **Coordination** – governments, health and helping agencies, law enforcement, employers, grass-roots activities, peer educators
- **Service design** – ‘systems of care’
- **Other?**
You are welcome to contribute: