

MINISTERIAL COMMITTEE ON DRUG POLICY MEETING

*Monday 28 July 2008, 4.00pm – 5:30pm
Government Caucus Room, Level 1, Parliament Buildings Wellington*

MINUTES

1. WELCOME AND APOLOGIES

Ministers Present:

Hon Jim Anderton (Chair) –
Associate Minister of Health
Hon Damien O'Connor –
Associate Minister of Health
Hon Annette King –
Minister of Police
Hon Parekura Horomia –
Minister of Maori Affairs

Hon Lianne Dalziel –
Associate Minister of Justice
Hon Mita Ririnui –
Associate Minister of Corrections
Hon Harry Duynhoven –
Minister for Transport Safety

Apologies:

Hon Chris Carter –
Minister of Education
Hon Nanaia Mahuta –
Minister of Customs
Minister of Youth Affairs
Hon Steve Chadwick –
Associate Minister of Health

Hon Phil Goff –
Minister of Corrections
Hon Ruth Dyson –
Minister for Social Development
and Employment

Officials Present:

Stephen McKernan – Director-General, Health
Jared Mullen – Deputy Secretary (Policy & Legal), Justice
Gerard Vaughan – Chief Executive Officer, Alcohol Advisory Council
Howard Broad – Commissioner of Police
Barry Matthews – Chief Executive Officer, Corrections
Peter Hughes – Chief Executive, Social Development
Martyn Dunne – Comptroller, NZ Customs
Leith Comer – Chief Executive Officer, Te Puni Kokiri
Karen Sewell – Secretary for Education
Wayne Donnelly – Chief Executive Officer, Transport

Chris Laurenson – Health
Bronwen Hicks – Health
Barbara Phillips - Health
Bruce Atmore – Health

David Cuthbert –
Office of Hon Jim Anderton
Jonathon Jones –
Office of Hon Jim Anderton

Stuart Jessamine – Medsafe
Megan Larkin – ALAC
David Negri – Customs
Frances Scott - Customs
Phil Lockwood – Customs
Michael Harrison – Customs
Sarah Lynn – Justice
Fiona Roberts - Justice
Stuart Mills - NDIB
Virginia Andersen – Police
Jon Lyall – Police
Helen Feilding –
Transport
Kirsty Ruddlesden - Corrections

Michael Harrison –
Office of the Minister of Customs
Michael Wilkinson –
Office of Hon Lianne Dalziel
Rhondda Knox
Office of the Hon Ruth Dyson
Courtenay Mackie
Office of Hon Damien O'Connor

2. INTER-AGENCY CO-ORDINATION ON DRUG POLICY – Hon Jim Anderton

Chief Executives from government agencies had been invited to attend the MCDP meeting to encourage conversations with officials concerning drug policy at a senior level. CEs were requested to summarise the core issues regarding drugs from the perspective of their organisation.

2.1 Health

Stephen McKernan, *Director-General, Health* spoke of the Ministry of Health's leadership role in relation to the National Drug Policy.

The Director General identified alcohol as a serious risk factor and mentioned that the World Health Organization, following a New Zealand led resolution, was developing a global strategy on alcohol. The Ministry of Health had been involved in legislative reviews including those relating to advertising and sale and supply to minors.

The Director General also informed the Committee that Health is leading the development of the Fetal Alcohol Spectrum Disorder Action Plan and the National Alcohol Action Plan.

The Ministry of Health was also concerned with illegal drugs and administered the Misuse of Drugs Act in relation to the classification of drugs. The Ministry was also contributing to the Law Commission on the Review of the Misuse of Drugs Act. The Director-General also pointed out that the treatment of alcohol and drug affected people was particularly challenging for the Health sector.

The Director General advised the Committee that tobacco was the single biggest cause of premature death killing more than ten times the number of people killed

in road crashes. He mentioned that if tobacco was a new drug coming on to the market it would not be allowed to be sold. Health had made great progress concerning tobacco interventions.

2.2 Corrections

Barry Matthews, *Chief Executive, Department of Corrections* advised the Committee that the Department of Corrections was fully engaged to reduce the supply of and demand for drugs within Corrections, and consequently the minimising of harm.

In order to address issues surrounding drugs, Corrections have increased drug dog teams, scanning, intelligence and single point of entry to prisons. Corrections have also been working with the Ministries of Health and Justice on Effective Intervention strategies to increase offenders' access to alcohol and drug treatment programmes. Corrections have implemented new Drug Treatment Units in prison and have reviewed the Identified Drug User Programme resulting in an increase in the randomness of the test. The policy on opiate substitution had been changed so that those on the methadone programme coming into prisons could continue to participate. Corrections were currently working on producing a Five Year Drug Strategy.

2.3 Police

Howard Broad, Commissioner for Police, advised the Committee that the three drugs of most concern to Police are alcohol, methamphetamine and cannabis.

Police were concerned about the level of alcohol related harm in New Zealand. A large number of people who are arrested by Police are consuming alcohol prior to their arrest, and there are strong links between alcohol and violent crime. Particular concern for Police is availability of alcohol: location, age and price. The Commissioner supported a full review of alcohol legislation.

The Commissioner said there was a strong correlation between the use of methamphetamine and property crime. The Commissioner also said that collaboration between agencies was important and that there was scope to re-look at the Methamphetamine Action Plan and address the issue of methamphetamine precursor supply from illicit sourcing through community pharmacies. The Commissioner said that cannabis was the most entrenched illegal drug in New Zealand. He was concerned about the high THC content currently found in Cannabis and New Zealand's high cannabis usage. The Commissioner advised the Committee on Police's implementation of a large cannabis recovery programme and a number of educational programmes to address cannabis issues. The Commissioner noted that more work needed to be done to reduce demand and to address local problems such as 'tinny houses'.

The Commissioner advised of a new development where mental health/alcohol and other drug nurses were being put into watchhouses, which would encourage detainees into appropriate treatment services.

Hon Anderton queried the Commissioner as to which drug caused the most problems for Police. The Commissioner confirmed that alcohol caused the most issues for Police by a considerable margin.

2.4 Justice

Jared Mullen, *Deputy Secretary (Policy and Legal), Ministry of Justice*, advised the Committee that Justice is collaborating with other enforcement agencies around organised crime. The Serious Fraud Office has been disestablished, criminal proceeds legislation was expected to assist with removing the profit motive in dealing with drugs, and new penalties and sentencing procedures had been introduced to deal with organised crime.

Processing of cases through the courts had been improved to enable drug cases to be processed more quickly.

Justice were working with Health on the Effective Interventions Project. This was expected to result in an expansion of alcohol and drug treatment programmes for offenders and to ultimately result in a lower cost system and a better use of public money.

The Sale and Supply of Liquor and Liquor Enforcement Bill was being considered by the Cabinet Policy Committee. The object of the amendment was to move the regulation of alcohol more closely in space and time to where the harm was occurring by addressing outlet density and the sale of liquor to young people. The Ministry was also in consultation with the Law Commission on a review of the regulation of the sale and supply of liquor and was participating in the Law Commission's review of the Misuse of Drugs Act.

2.5 Transport

Wayne Donnelly, *Chief Executive, Ministry of Transport*, advised the Committee that the Ministry of Transport was currently working on the Land Transport Amendment Bill which proposed to take provision for roadside testing for drugs as well as alcohol and random drug testing. The Ministry was also investigating alcohol interlocks and was working with the Department of Labour and Accident Compensation Corporation on drug impairment issues. The Chief Executive advised that alcohol is to blame for a significant percentage of all crashes and that the Ministry was always looking for ways to address this including implementing programmes on attitudinal changes.

The Chief Executive announced that Transport was keen to work with other agencies in dealing with drug issues.

Hon Duynhoven highlighted the importance of roadside testing and raised the issue of party pills and alcohol being taken together, leading to reduced inhibitions and increased problems.

2.6 Te Puni Kokiri

Leith Comer, *Chief Executive of Te Puni Kokiri*, advised the Committee that the 17 – 20 year old age group were currently the most inclined to experiment with drugs. The Chief Executive advised the Committee that action to address issues emerging from drug use should be community based and sustainably resourced. The most effective ways to address drug issues were by rehabilitation and intervention as well as introducing youth to inspirational ideas to keep them away from drugs. Te Puni Kokiri placed a great deal of importance on culturally based initiatives such as kapa haka, waka teams etc. When youth became involved in these activities they were less likely to participate in taking drugs.

Te Puni Kokiri was working alongside Police and Maori Wardens on a number of interventions for young people.

2.7 Education

Karen Sewell, *Secretary for Education*, agreed with the other agencies regarding prevalent issues surrounding drugs, particularly alcohol and cannabis and that this impacted on schools.

The Secretary informed the Committee that the Ministry of Education promoted awareness of drug issues along side of other initiatives. Education had also placed a large emphasis on educating individual students. Awareness of drug issues had been incorporated into the health and physical education curriculum which dealt with the issues in a cumulative way.

The Ministry had prepared guidelines on the role of schools in drug education, and had created a website 'Team Up' which contained a link to helpful advice for parents and whanau in the areas of drugs, alcohol and smoking.

2.8 Ministry of Social Development

Peter Hughes, *Chief Executive, Ministry of Social Development* advised the Committee that the Ministry was in favour of taking a whole of government approach towards drug issues and that it was necessary to work together with other agencies and Non Governmental Organisations.

The Chief Executive advised the Committee that it was necessary to target families as a whole considering there are a large number of 'at-risk' families. Social Development was currently working with around five hundred families on

issues such as: adult citizens returning to work, early child care education, drug and alcohol addiction issues etc. Social Development has established a Community Link Centre in Christchurch which worked alongside families. Through the above initiatives the Ministry had identified a need for more drug and alcohol addiction services.

Hon Anderton queried the Ministry on which services require more resources. The Chief Executive identified income, housing and employment as three key areas needing attention before addressing drug issues.

2.9 Customs

Martyn Dunne, *Comptroller, NZ Customs* advised the Committee that while there was not a great deal of smuggling regarding alcohol, managing the excise tax on ready-to-drink beverages was an area Customs intended to focus on.

Smuggling of tobacco had not obviously increased in New Zealand but it was a huge issue in Europe and Asia and vigilance was needed in New Zealand.

A large amount of Custom's workload focused on off-shore pre-emptive work. However there were also border and on-shore issues to be addressed. Customs would welcome investigation into synthetic drugs as part of the Methamphetamine Action Plan and that the future work programme would analyse emerging trends concerning drugs in New Zealand. Customs have observed a reduction in heroin and cocaine importations but an increase in crystal methamphetamine. Customs would in future be focusing on emerging trends in new drugs.

Customs participated with Police and Health in the National Drug Intelligence Bureau and supported the Law Commission Review of the Misuse of Drugs Act.

2.10 Alcohol Advisory Council

Gerard Vaughan, *Chief Executive Officer, Alcohol Advisory Council (ALAC)*, informed the Committee that the biggest challenge ALAC currently faced was the culture of 'drinking to get drunk'. The Council was actively involved in partnerships and ALAC had co-funded the Alcohol and Drug Helpline with the Ministry of Health. ALAC hosted a number of conferences and forums and funded research and evaluations of programmes.

The Chief Executive informed the Committee that high priority issues for ALAC were Sale of Liquor Act proposals, lower maximum blood alcohol concentrations for drinking drivers, access to early help for people with problem drinking; and the discounting and cheap availability of alcohol.

3. PROJECT STOP

Project STOP is a broadband-based electronic, recording and reporting initiative developed in Queensland, Australia. Project STOP is intended to prevent products containing ephedrine and pseudoephedrine (PSE) from being diverted as precursors from pharmacies for the manufacture of methamphetamine.

The IACD had not finalised its recommendations concerning the implementation of such a project in New Zealand pharmacies. Hon Anderton advised the Committee that agreement on this issue was necessary as a matter of urgency.

Hon King advised the Committee that Police were in favour of implementing Project STOP in New Zealand and Police believed overcoming the legal issues was not insurmountable. Police officials advised they were keen to work with the Ministry of Health on this matter. Health officials advised that they did not hold a counter view and that the privacy issues are surmountable. However, Health was in favour of investigating all options to gain a reduction in PSE such as making products containing PSE prescription only. Health officials advised that if implemented now, Project STOP could breach parts of the Health Information Privacy Code (HIPC). Hon King advised that the HIPC will need to be amended for Project STOP to be implemented.

The Committee discussed the issues surrounding Project STOP. Hon Anderton advised that there are problems surrounding the costs involved with the implementation of Project STOP and that Project STOP has been an ongoing issue. There was discussion around the role of pharmacists and how they could potentially be affected if Project STOP was implemented, also the imminent problem of a consumer using the same ID but purchasing products containing PSE from different pharmacies over the country.

Action: The IACD working group (comprising Health, Police and Justice) are to assess whether an approach similar to Project STOP could be implemented in New Zealand. The working group are to produce a report on the issues surrounding methamphetamine precursors including Project STOP to be available in the next three weeks.

4. ALCOHOL & ILLEGAL DRUG MONITORING REPORT

The Committee reviewed the Alcohol & Illegal Drug Monitoring Report to ensure progress on drug related initiatives was being maintained. Hon Anderton requested Committee members forward any necessary amendments to his office.

5. READY TO DRINK BEVERAGES (RTDs); AVAILABILITY AND PRICE OF ALCOHOL IN SUPERMARKETS; AND EXCISE TAX

Hon Anderton noted that five options had been identified by officials for addressing Ready-To-Drink Beverages (RTDs). The Committee discussed increasing excise tax on RTDs. Hon O'Connor queried the Customs Service on their experiences with excise tax. Customs replied that increasing the excise tax on the product would have an influence, but will not put an end to the problem.

Hon Anderton advised taking into account the consequential damage likely to go with the implementing any of these options.

Hon O'Connor advised the Committee that the RTD industry had proposed a voluntary restriction of no more than two standard drinks per RTD. However, Hon O'Connor recommended that a minimum amount of 1.5 standard drinks per RTD would be preferable. Further discussion on this item was deferred until the next meeting.

6. NDP DISCRETIONARY GRANT FUND PROCESS

This item was deferred until the next MCDP meeting.

7. OTHER BUSINESS

A special meeting was to be held within the next few weeks to give further consideration to the two items that had been deferred.