

Dr David Worth
Principal Research Officer
Education and Health Standing Committee
Legislative Assembly Committee Office
Level 1
11 Harvest Terrace
West Perth
WA 6005

Dear Dr Worth

Thank you for the opportunity to tender a submission to the Education and Health Standing Committee with reference to the *Inquiry into the Adequacy and Appropriateness of Prevention and Treatment Services for Alcohol and Illicit Drug Problems in Western Australia*.

This submission particularly relates to the following term of reference:

- 1) To inquire into the adequacy and appropriateness of prevention and treatment services for alcohol and illicit drug problems in Western Australia, with particular reference to:
 - (b) the evidence base, adequacy, accessibility and appropriateness of the broad range of services for treatment and support of people with alcohol and drug problems and their families, and the most appropriate ways to ensure integrated care;

The WA Viral Hepatitis Committee (WAVHC) was formed in December 2002 and has broad inter-sectoral representation including specialists and GPs, non-government organisations as well as members from relevant government departments.

The Committee's role is to provide advice and leadership across the spectrum of issues relating to hepatitis C and other blood-borne hepatitis, to maintain partnerships and to support an integrated approach to all matters relating to blood borne hepatitis. It also has an advisory role to key leaders in the Department of Health.

As injecting drug use is the primary risk factor for hepatitis C transmission in Australia, maintaining and enhancing access to sterile injecting equipment for people who inject drugs is a priority for WAVHC.

Needle and Syringe Programs (NSP) were introduced as a HIV/AIDS prevention strategy in Australia in the late 1980's. In Western Australia, the *Poisons Act 1964* and the *Poisons Regulations 1965* were amended in 1994 to provide a legislative framework for needle and syringe provision to take place through NSPs approved by the Chief Executive Officer of the Department of Health.

NSPs have been a public health success story in preventing an epidemic of HIV/AIDS amongst people who inject drugs in Australia. Countries which were slow to introduce NSPs register a much higher rate of HIV infection amongst people who inject drugs than countries which acted promptly at the start of the HIV epidemic.

The rate of HIV infection amongst people who inject drugs has remained low in Australia. From 2003-2007, only 2% of newly acquired HIV cases in Australia were attributed to injecting drug use alone (NCHECR, 2008).

However, hepatitis C rates remain high amongst people who inject drugs, principally as at the time when NSP were introduced, there was already an existing large pool of hepatitis C infection amongst people who inject drugs. Approximately 80 per cent of current infections and 90 per cent of new hepatitis C infections are estimated to be due to unsafe injecting drug use practices (DOHA, 2005). Around 1,100 cases of hepatitis C are notified to the Department of Health in WA per year. Long-term sequelae of hepatitis C include liver damage, cirrhosis, liver failure and liver cancer.

A report on the 'Return on Investment in Needle and Syringe Programs in Australia' commissioned by the Commonwealth Department of Health and Ageing indicated that during the period 1991 to 2000, \$141m was expended on needle and syringe programs across Australia saving between \$2.4b and \$7.9b in treatment costs for HIV and hepatitis C (DOHA, 2002).

In Western Australia, there are four main mechanisms of distribution: needle and syringe exchange programs, pharmacies, health services and vending machines.

The Department of Health funds the WA Substance Users' Association (WASUA) and the WA AIDS Council (WAAC) to operate Needle and Syringe Exchange Programs. Clients accessing an exchange program are provided with information and education and are not charged for sterile needles and syringes when they return used items, if no return a 'cost recovery' charge applies. The exchange system also provides another means of disposing of used needles and syringes appropriately.

Just over 4 million needles and syringes were distributed in Western Australia in 2008. Exchange services distributed over half of the total sterile needles and syringes distributed, and pharmacies retailed approximately one-third on a commercial basis.

In 2002, WA Government Health Services were instructed via an operational circular to provide an after-hour service adjunct to pharmacy provision in regional and remote areas. Approximately 10 per cent of the total number of needles and syringes distributed in WA were provided in 2008 by rural hospitals and other health services at no cost to clients. Needle and Syringe Vending Machines in Kalgoorlie, Esperance, Busselton, Geraldton and Nickol Bay provide after-hours access to sterile needles and syringes at a cost recovery price.

In addition to the provision of sterile injecting equipment, NSPs can provide health promotion information, and referral to drug treatment and other health services.

In 2007, a review was undertaken of the WA NSP (DHWA, 2008). In all, 89 service providers, 112 consumers and eight other stakeholders had input into the review. There was a high degree of convergence in service providers and consumers views about those factors that act as either enablers or barriers to NSP services. Generally, services were found to be meeting consumers' needs. Recommendations made in regard to the future direction of NSP in WA relate to:

- Promotion of NSP as core business for health services that provide secondary NSP.

- Expansion of the existing training and education programs for staff at secondary sites.
- Expansion of the existing *Guidelines for the Establishment and Operation of a Needle and Syringe Program* to reflect more of a state-wide policy position on NSP.
- Development of an additional fixed site NSEP.
- Roll-out of Needle and Syringe Vending Machines.
- Further development of secondary sites as 'enhanced' secondary sites.
- Development of strategies to increase the range of injecting equipment available.

WAVHC understands that progress is being made by the Department of Health and other stakeholders in implementing these recommendations. It is vital that access to sterile injecting equipment is increased for people who inject drugs if any impact is to be made on rates of hepatitis C transmission, and for low rates of HIV transmission to be maintained in this population. The 2007 National Drug Household Survey found that 67% of those surveyed supported needle and syringe programs (AIHW, 2008).

Once again, thank you for opportunity to provide a submission to the Education and Health Standing Committee. If you require any further information please do not hesitate to contact me by telephone on 9266-1604 or email S.Carruthers@exchange.curtin.edu.au

Yours sincerely

Dr Susan Carruthers
Chair of WAVHC

30 July 2009

References

Department of Health, Western Australia (2008). Needle and syringe program review 2007. Available at: <http://www.public.health.wa.gov.au/cproot/1787/2/10747%20NSP%20REVIEW%20FINAL.pdf> (accessed 24/07/09)

Australian Institute of Health and Welfare (2008). 2007 National Drug Strategy Household Survey: first results. Drug Statistics Series number 20. Cat. no. PHE 98. Available at: <http://www.aihw.gov.au/publications/phe/ndshs07-fr/ndshs07-fr-no-questionnaire.pdf> (accessed 24/07/09)

National Centre in HIV Epidemiology and Clinical Research (2008). HIV/AIDS, viral hepatitis and sexually transmissible infections in Australia Annual Surveillance Report 2008. The University of New South Wales, Sydney, NSW
Available at: [http://www.nchechr.unsw.edu.au/NCHECRweb.nsf/resources/SurvReports_3/\\$file/ASR2008-revision.pdf](http://www.nchechr.unsw.edu.au/NCHECRweb.nsf/resources/SurvReports_3/$file/ASR2008-revision.pdf) (accessed 24/07/09)

Department of Health and Ageing (2005) National Hepatitis C Strategy 2005-2008
Available at: <http://www.health.gov.au/internet/main/publishing.nsf/Content/phd-hepc-strategy-0508-cnt.htm> (accessed 24/07/09)

Department of Health and Ageing (2002). Return on investment in needle and syringe programs in Australia.
Available at: <http://www.health.gov.au/internet/main/publishing.nsf/Content/health-publth-publicat-document-roisummary-cnt.htm> (accessed 24/07/09)