

9 April 2019

Committee Secretariat  
Health Committee  
Parliament Buildings  
**WELLINGTON**

Tēnā koe

**Re: Misuse of Drugs Amendment Bill submission 2019**

Thank you for the opportunity to provide a written feedback on this submission process.

RPH delivers population and personal health services in the greater Wellington region. Our geographical area of service delivery spans Hutt Valley, Capital & Coast and Wairarapa DHBs. We deliver a range of population and personal health services, aiming to improve the health of communities throughout the greater Wellington region. In particular we focus on achieving equitable health outcomes for Māori, Pacific peoples, tamariki and young people, low income whānau and other people groups facing complex challenges.

We have a range of occupations working within Regional Public Health including: medical officers of health and public health physicians, public health advisors, public health analysts, health protection officers and public health nurses.

The following feedback to the Bill provides our public health perspective and experiences in the illicit drugs space in our region.

For additional advice or clarification on any of the points raised in our written feedback please contact us.

Nāku noa, nā

Dr Stephen Palmer  
Medical Officer of Health

Peter Gush  
Service Manager

## Misuse of Drugs Amendment Bill submission 2019

Regional Public Health (RPH) supports the *Misuse of Drugs Amendment Bill*, however we believe that some elements of the implementation of the amendment require consideration. The risk posed by synthetic drugs is unprecedented, as they become more toxic, unpredictable, and account for 50-55 deaths in New Zealand since June 2017.<sup>1</sup>

RPH employs one Psychoactive Substances Enforcement Officer and we work extensively with councils within the region to develop their Local Approved Products (Psychoactive Substances) Policies. As part of the transitional provisions of this *Act* restrictions were placed on who could sell and supply products and that only low risk products received interim approvals. With this we observed that the levels of harm from synthetic drugs dropped off. However, since the transitional provisions were repealed in May 2014 more powerful and toxic synthetic drugs are appearing on the black market.

Locally we were involved in the response to a rapid rise in harm from synthetic drug use in Porirua East in late 2016. We learned much from our involvement in that response.

RPH strongly supports the *Misuse of Drugs Amendment Bill* proposed reclassification of AMB-FUBINACA and 5F-ADB to Class A. This reclassification gives appropriate legal weight to these substances which are associated with significant harm and death.

It is our experience the new and more potent synthetics drugs are appearing constantly. RPH strongly supports the provision to enable temporary drug class orders to be issued for emerging and potentially harmful substances.

RPH strongly supports a health-centred approach to addressing the use and possession of all drugs where the Police will be able to divert those using or possessing illicit drugs towards a health centred therapeutic approach.

However, because of the risk of unconscious “bias” influencing decisions where there is discretion, Māori and Pacific Island people may disproportionately miss out on the opportunity of a health centred approach. We do not believe that the Whānau Ora based strategy “*Turning the Tide*”, which is aimed at the avoidance of unconscious bias, is sufficient to minimise the disproportionate number of Māori who are incarcerated.

We strongly recommend that easily understood criteria and transparent guidelines are developed for the Police so as to avoid the effect of unconscious bias on decisions relating to the use of discretion. A sub-clause (7) could be added to make this an explicit requirement such as:

*“Within 6 months of these amendments taking effect the Police, in consultation with the Director General of Health, develop guidelines including explicit criteria on how discretion is*

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<sup>1</sup> Office of the Chief Coroner, <https://coronialservices.justice.govt.nz/assets/Documents/Publications/Chief-Coroner-2017-18-Annual-Report.pdf>, viewed 26 March 2019.

*to be applied. Such guidelines should be reviewed and updated every five years, or sooner, if deemed appropriate.”*

When enacted these amendments will increase demand for health services that are currently stretched. Additional investment in staff training and the recruitment of more therapists will be needed. Also it will be important that the ongoing funding of the additional services is sustainable.