



Speech by

## Miss FIONA SIMPSON

MEMBER FOR MAROOCHYDORE

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Hansard 22 June 2000

### DRUG INJECTING ROOMS

**Miss SIMPSON** (Maroochydore—NPA) (6 p.m.): I move—

"That this House opposes the introduction of injecting rooms for administering illicit drugs in Queensland."

The scourge of drugs touches every sector of our community. Some people have experienced sons and daughters or friends wasting their lives on mind-altering drugs. Other people have experienced their homes being broken into by addicts looking for cash to feed their drug habit. There are parents who are watching their children's playgrounds being turned into a deadly places because of discarded needles from illicit drug use that potentially harbour HIV/AIDS and hepatitis C.

As leaders, we are motivated by the increasing anger and desperation of many people in our community—people who want answers and a better, safer future for their children. In answering their calls, we need to enunciate clearly where we stand. Are we going to tolerate drug abuse and simply apply the bandaid in the name of harm minimisation, or will we strive for a drug-free society and send a very clear anti-drug message as well as a compassionate message of rehabilitation for those who are already addicted to drugs?

The coalition believes that we must send a strong message of anti-drug abuse. However, that must be balanced with a compassion for helping people get off drugs and a recognition that drug addiction puts people in bondage. The only proven way to reduce the incidence of drug overdoses is to get addicts drug free.

Recently, there have been calls for Governments to introduce injecting rooms to supposedly prevent addicts from overdosing and to keep them alive. That has been allowed in New South Wales and will soon be allowed in Victoria. In Queensland, the Labor Lord Mayor, Jim Soorley, has been a passionate advocate of drug injecting rooms. At the Labor Party conference this year, Lord Mayor Jim moved a motion, seconded by David Hinchliffe, calling for the introduction of so-called safe injecting rooms. The matter was not resolved but referred to a committee, which is to report back to a future Labor Party conference.

Tonight, I urge Labor Party members to vote in favour of this motion, which would send a clear message that injecting rooms should not be sanctioned by the Government. The State National/Liberal coalition believes that there are other solutions to the incidence of drug deaths. We strongly reject the push for illicit drug injecting rooms.

Injecting rooms for administering illicit drugs is a bit like feeding a man on death row. The man's destiny has not been changed. Injecting rooms mean that the bondage remains for the addict. There are worse problems caused by allowing those who are already addicted to drugs to use these so-called safe injecting rooms. There is also the very real potential that these rooms will provide a safety net for those people who are not addicts but who may experiment with drugs and believe that they will be safe if they do that in a so-called safe injecting room. That is a major concern.

I am morally opposed to Governments sanctioning the taking of illicit mind-altering drugs. However, there are also some very practical reasons why I believe that so-called safe injecting rooms do not achieve their objective of keeping people alive, which I will outline. However, I also believe that in this debate I must mention some of the alternative ways forward.

While the abuse of drugs such as heroin or amphetamines is not as widespread as the abuse of substances such as alcohol and tobacco, their effect is deadly, particularly the effect of the highly addictive drug, heroin. The rate of infection from hepatitis C and HIV is also greater with injecting drug use and these diseases in their own right have the power to cause agonisingly painful and slow deaths.

However, there are many reasons to reject injecting rooms. As I have mentioned, injecting rooms provide a so-called safety net for non-addicts to experiment with drugs and to provide a lure for them to enter this dangerous lifestyle. Injecting rooms also depend on the availability of drugs. The supply has to be close to or actually inside the injecting room or else people will not use these rooms. Then there is the pressure on Governments to allow more and more of those rooms to be closer and closer to the people.

The myth is that drug addicts mainly overdose on the streets. Actually, the majority of them overdose in their own homes. The other problem with injecting rooms is that of law enforcement. Police are encouraged to turn a blind eye to dealers within the vicinity, or within the injecting room. After the pseudo acceptance of dealers, the next step is for Governments to become the dealer and provide the heroin in these so-called safe injecting rooms. That is often the progression of the argument. At first, people say, "Let us make sure that we keep people alive. We will have injecting rooms and make sure that we have quick backup for medical teams." Then they say, "We have to have a clean supply. We had better make sure that the Government supplies the drugs." One argument after another leads to the situation in which the Government is not only pseudo sanctioning drugs but also actually pushing drugs in the community.

Injecting illicit substances is never without risk. It is not a safe thing to do even in hygienic surroundings. Even with needle availability programs, people still share needles. Health Minister Wendy Edmond herself admitted that when she argued against the coalition's proposal to introduce non-reusable retractable needles into the needle availability program. I remind members that in a radio interview the Health Minister said that they could not introduce retractable needles because the number of needles required would soar as people would not be able to reuse their needles. I say to the Minister that, surprise, surprise, the whole reason for this program was to stop people sharing needles. Yet the needle availability program, on the Minister's own admission, is supplying needles that are reused by addicts and, therefore, are infecting people.

I reiterate the coalition's commitment to introducing retractable needles and say that it is time that the Government got on with it and not only introduced those needles into the needle availability program but also had some clear controls and aims at getting people off drugs. Those retractable needles should also be introduced into the mainstream health service, which is where the majority of needle pricks occur. The Government has to get its act together and move on this issue. There are a number of patents pending for those needles and there are also existing retractable needles on the market. Let us look after not only the drug users but also the health workers.

I referred to drug addicts needing to be close to their drug source. The reality is that most people overdose in their own homes. However, if people are going to use drug injecting rooms, there has to be some tolerance of dealers. The coalition simply will not tolerate that. These drug injecting facilities also fail in their role to educate people about the dangers of drug abuse, because they encourage addiction rather than rehabilitation. They send the wrong message of condoning drug use.

In light of my comments about Governments condoning drug use, I believe that if Governments fail to have proper rehabilitation and counselling services set up with the aim of getting people off drugs, then needle availability and methadone programs will also be severely flawed. The coalition believes that there needs to be more accountability in the way in which drug and alcohol rehabilitation and detoxification services are delivered. We believe that there needs to be a complete review of the existing services. It is essential that Governments set targets by which they can be judged. Those targets must also represent more meaningful outcomes than merely adding up the number of people who proceed through methadone clinics.

I suggest that members look at the Government's Budget papers that set out the performance indicators for drug and alcohol services. They are really pathetic. As I have outlined, when the coalition is returned to power, it will undertake a review of those services to make sure that there are clear targets and programs that are aimed at effectively getting people off drugs.

I believe that it is time that we had a report on the Naltrexone trials, which were first proposed by the coalition when it was in Government. In Western Australia, Naltrexone has been used in effective programs that have resulted in a marked downturn in the number of overdoses from heroin. Of course, Naltrexone must be taken with proper medical and social support. There are lessons to be learned about the Naltrexone treatment, but where it is used appropriately it is effective. This treatment gives people the hope that they can get off drugs, get on with their lives and make a difference. Ultimately, so-called safe injecting rooms do not provide the answer. People are still addicts. They can still go back to their homes and overdose on drugs.