




Speech By
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**POLICE POWERS AND RESPONSIBILITIES AND OTHER LEGISLATION
AMENDMENT BILL 2022 AND THE POLICE POWERS AND RESPONSIBILITIES
AND OTHER LEGISLATION AMENDMENT BILL 2023**

 **Ms BUSH** (Cooper—ALP) (12.42 pm): I rise to make a contribution in the cognate debate of the Police Powers and Responsibilities and Other Legislation Bill 2022 and the Police Powers and Responsibilities and Other Legislation Bill 2023. In my contribution I will be focusing, as some others have today, on the drug diversion reform which this year came before the Legal Affairs and Safety Committee, of which I am a member.

I want to make a comment after the previous contribution. Nobody is saying that these are minor drugs; it is a minor drug offence. There is a distinction there.

I am excited to see legislation like this and I think many in my electorate and those who have been working in the social services sector will also be excited by this legislation. I start by thanking the minister for doing the work and for bringing this bill before the House and for having the courage to make progress in relation to drug reform. It is not an easy issue to take on. It is an area where the evidence does not always align with populist views. It is certainly an area that is liable to getting politicised, as we have seen. It is a shame because it is legislation and policy like this that is literally lifesaving—I will get to that. I thank the minister, the submitters who helped us understand the potential impacts arising from the bill, my parliamentary colleagues and, finally, the secretariat and Hansard staff involved in this.

The bill changes police drug diversion in a couple of ways. It expands the availability of diversion to drugs beyond cannabis. It removes barriers for eligibility such as the requirement that a person must make an admission of guilt to the offence before being diverted and the exclusion of people who have unspent convictions for violence. The bill also introduces three tiers of diversion—building on the current model where the person can only be offered one diversion.

There are a few points I would like to make in my contribution. The first is that drug diversion works and it works in a couple of ways. It has a proven and positive social impact in connecting people who are using drugs and who, as a result, may have a drug problem to timely and relevant information, support, counselling and rehabilitation.

We heard in the public hearing from submitters on these benefits. People are able to talk about their lives with authorities in a way that does not lead to criminalisation, that they can get help for any underlying issues and that ultimately people who may have problematic drug use can stop that behaviour and reconnect with family, start or resume positive relationships and regain or improve their employment outcomes.

One of the greatest benefits from my perspective as a criminologist is that it keeps people who are not dangerous, who are not a threat to society out of prison. We heard from Rebecca Lang, the Chief Executive Officer of the Queensland Network of Alcohol and Other Drug Agencies, on this issue in our public hearing. She said—

The benefit is that around 12,000 people a year do not collect a conviction ... it is about not letting people get into the justice system ... the reality is that most people who are detected by police for drugs possession are not problematic users. They are just people who are in public spaces and came to the attention of police.

This is consistent with the Queensland Productivity Commission's 2019 inquiry into imprisonment and recidivism which found that 62 per cent of offenders sentenced to a custodial sentence were for nonviolent crimes and that the median prison term was really short—less than four months. Often the whole sentence, or most of it, is served on remand where opportunities for rehabilitation are limited. I think if people knew that the majority of people in prison are there for a few months and for nonviolent offences like drug possession they would be quite shocked.

Prisons are in themselves criminogenic. The direct costs of incarceration are significant. It is estimated at \$500 million per year, with \$222 million of this spent on enforcement of drug possession offences alone. To let that sink in: \$222 million a year is spent on arresting and imprisoning people whose principal offence was to have a small quantity of drugs on them for personal use.

The indirect costs are so much greater—forgone employment, higher rates of unemployment, social exclusion, homelessness and poor mental health following release. Prison disrupts the parent-child relationship, alters the networks of support and places new burdens on government services such as schools and family support services. Studies suggest that the indirect costs of imprisonment may be around \$48,000 per year for each prisoner. We have to do better for our people and for Queensland, and this bill is another step in that direction.

My second point to make is this: despite statements from some that this bill has been rushed or that it is confused and has been developed in a silo, drug diversion programs have been operating in Queensland for over 20 years. Since 2001, over 158,000 people have been diverted from the criminal justice system to a health intervention through the current police drug diversion program. We know that this model works.

This bill sits against a backdrop of multiple and independent reports that demonstrate the benefits of drug diversion for Queensland, including: *Achieving balance: the Queensland Alcohol and Other Drugs Plan 2022-2027*; *Better care together: a plan for Queensland's state-funded mental health, alcohol and other drug services to 2027*; the Queensland Productivity Commission's recidivism and sentencing report; the Queensland Sentencing Advisory Council report titled *Sentencing spotlight on possession of dangerous drugs*; the Australian Institute of Health and Welfare's 2020 National Drug Strategy Household Survey; the Queensland parliament's Mental Health Select Committee report titled *Inquiry into the opportunities to improve mental health outcomes for Queenslanders*; and the Queensland Women's Safety and Justice Taskforce report No. 2, *Hear her voice*. To suggest that this has been developed without support and research is simply untrue.

There are also a few misunderstandings about the bill that I would like to address. The first is that diversion is not decriminalisation. Diversion is not legalisation of illicit substances. Diversion is about shifting the government response away from a criminal justice response and towards a health response. This is the challenging but important work towards justice reinvestment—investing in programs and services to keep people out of the justice system rather than continuing to grow our prison population.

The second myth is something that does come up occasionally during this debate. That is that drug diversion programs lead to increased crime. That is simply untrue. This myth is embedded in the idea that those who use drugs are awful people, perpetrating a range of offences, probably dangerous, certainly antisocial and that they should be locked up.

My view may not be a popular view, but the reality is that a lot of people have used or are using drugs. They are mostly being used in small quantities and they are being used sporadically and recreationally and without incident. Robert Taylor from the Alcohol and Drug Foundation told the committee that close to 50 per cent of Australians have used an illicit drug in their lifetime—12 per cent within the last 12 months. The majority of people arrested for drugs are charged with a principal offence of drug possession. That means that most people detected with drugs by police are not committing any other crime: the drugs found in their possession are for personal use only, not for supply.

The eligibility requirements of this particular bill will preclude people being referred for drug diversion if they are committing more serious offences. If someone has been apprehended, for example, on a break and enter and they also have a quantity of drugs on their person, they are not going to be eligible for this diversion program. We are really only looking at those offenders in this expansion who have a principal offence of drug possession.

We heard from Brett Dale, Chief Executive Officer of the AMAQ, who said in the public hearing—

We do know that the current approach is likely to turn social drug users into criminals if there is not health intervention or diversion programs available to them.

...

The studies that were done in Portugal showed that the diversion programs reduced incarceration rates and repeat offences in the areas of criminal activity by something like 40 to 50 per cent ... That was because education about the consequences of using drugs, both criminally and in health, was part of the diversion program. The success has been incredibly good.

I am going to give the final words to Dr Will Tregoning, who is the Chief Executive Officer of Unharm, who spoke to the issue of stigma and its impact on those who are using drugs and particularly those who are drug users who may ordinarily want to get help. He said—

We often work in alliance with drug treatment organisations. Repeatedly people who work in those contexts talk about how they often have clients who delayed seeking help because of a fear of the legal implications of admitting to an illegal behaviour, in this case drug use. The fact that that fear of punishment prevents people from seeking treatment is abundantly not in the public interest and not in the interests of the individual themselves.

This is a really good bill. It has been a shame really to hear some of the comments that have been made in this House about the bill—complete misrepresentations about what the bill is going to achieve. That says to me that either they have not really sought to understand the bill or they are intentionally politicising the issue.

It is a good progressive Labor policy. The reform will help support those with drug problems. In some cases it will go so far as to save lives. It will reduce our prison population and stop the criminalisation of people who are carrying small quantities for personal use. I commend the bill to the House.