




Speech By  
**Hon. Yvette D'Ath**

**MEMBER FOR REDCLIFFE**

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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**

 **Hon. YM D'ATH** (Redcliffe—ALP) (Minister for Health and Ambulance Services) (11.33 am): I rise to speak in support of the Police Powers and Responsibilities and Other Legislation Amendment Bill 2022 and the Police Powers and Responsibilities and Other Legislation Amendment Bill 2023—in particular, the amendments to expand the police drug diversion program in the 2023 bill. The Palaszczuk government is committed to reducing problematic alcohol and other drug use and harms that affect individuals, families and the broader community. The reform to the police drug diversion program delivers on recommendation 13 of the Mental Health Select Committee report which called for the strengthening of illicit drug diversion initiatives to improve the mental health outcomes of Queenslanders.

Expanding diversion options is also a key priority under *Achieving balance: the Queensland alcohol and other drugs plan 2022-2027* which was released last year. An expanded police drug diversion program will divert people away from the criminal justice system for low-level personal drug use to a proportionate health response delivered by specialist alcohol and other drug services. This reform does not mean that the Palaszczuk government is soft on drug related crime—far from it. The expanded program is for people whose only offence is personal possession of minor illicit substances. It does not apply to people who have committed other offences.

The bill also amends the Drugs Misuse Act 1986 to increase the maximum penalty for the offence of trafficking dangerous drugs from 25 years to life imprisonment. Expanding the police drug diversion program means police can focus their efforts on serious offending, and those who profit from these activities will receive harsher penalties. The expansion of the police drug diversion program is a measured response based on national and international evidence which recognises that programs which divert people engaged in personal drug use away from the criminal justice system and into health and social responses work. That is why health experts and community stakeholders have backed this evidenced-based approach.

I did hear one of the speeches from a member of the opposition yesterday who said that they understand the AMAQ were supportive but they wanted to hear if from Queensland Health. Can I make it clear: Queensland Health and the Queensland Mental Health Commission back this in. They know the evidence is clear. They absolutely support drug diversion initiatives.

Drug diversion is not new to Queensland. During public hearings, the Queensland Police Service stated that they have been diverting people in possession of small amounts of cannabis to health responses for 20 years. Under the current police drug diversion program, Queensland Health delivers health responses through hospital and health services, funded non-government organisations and telephone service Tele-D. A drug diversion health response involves an assessment with an individual and, depending on their needs, may include a brief intervention, information and education, counselling and/or referral to specialist mental health, alcohol and other drug treatment services.

In 2021-22, there were more than 4,500 referrals to Queensland Health funded service providers for the police drug diversion program, with 69 per cent of referrals being for men aged 24 or younger. These statistics align with national research about cannabis police diversion programs, which found most drug diversion clients were young with an average age of 20, were male and were employed or studying. A small proportion, about 10 per cent, were substance dependent.

Queensland Health advise that participants involved in current drug diversion programs have reported reduced use of illicit drugs, reduced psychological distress and improved mental health. Participants also report having less conflict with their partner or spouse and have said they were less likely to drive after smoking cannabis or drinking alcohol. Ultimately, the real success of the current police drug diversion program is that young people can address their drug use early, before incurring a criminal record which may impact their lives for years to come. As AMA Queensland stated in their submission—

People suffering from addiction and drug abuse need a health response to stop using illicit substances, not criminal prosecution. Those at risk of addiction also need prevention and early intervention measures such as mental health support and education about drug harm.

This is what the expanded police drug diversion program and our government's additional investment in alcohol and other drugs services delivers. Under the expanded police drug diversion program, a health response will be offered two times following a police warning for personal low-level illicit drug possession. The program will remain focused on connecting people with tailored care, delivered by specialist alcohol and other drug services and providers. It means people will have a safe place to talk about their drug use with a trained professional and receive early treatment and holistic care without fear of criminalisation or penalty. It means pathways to access a range of alcohol and other drug treatment where needed, such as counselling, residential and non-residential treatment, withdrawal management and opioid dependence treatment, will be available. It means pathways to more intensive treatment to help address the underlying causes of their substance use will be offered. Without these reforms, many people who come into contact with the criminal justice system for low-level drug offences may not receive the timely support they need.

Queensland Health will continue to work with police, other government agencies and stakeholders to support the effective introduction and evaluation of the expanded police drug diversion program.

These reforms are part of the Palaszczuk government's whole-of-government commitment to improving the lives of Queenslanders living with mental issues and substance use disorders. It is why at the 2020 election we committed to establishing new residential alcohol and drug rehabilitation units at Cairns, Bundaberg and Ipswich, and in 2021 we opened a new residential alcohol and drug rehabilitation unit in Rockhampton.

As part of the 2022-23 budget, we announced an additional \$1.64 billion over five years to improve and expand our mental health, alcohol and other drugs services across Queensland. We are investing \$220 million in a range of alcohol and other drug treatment and harm reduction measures. This includes boosting hospital and health service community-based alcohol and other services with a focus on opioid dependence treatment and other demand pressures. We are supporting new and enhanced youth alcohol and other treatment and harm reduction services and models to support access to treatment for women and parents. We are increasing alcohol and other drug responses in emergency departments and hospitals through intervention teams and boosting the capacity of our 24/7 drug and alcohol telephone and online service, ADIS. The additional investment along with our existing services will ensure that people who are diverted from the criminal justice system through the expanded police drug diversion program will receive the support they need.

In closing, I would like to commend the Minister for Police and Corrective Services and Minister for Fire and Emergency Services for progressing such worthy reform. To put it simply, expanding the police drug diversion program benefits the whole community.