TRANSCRIPT

LAW REFORM, ROAD AND COMMUNITY SAFETY COMMITTEE

Inquiry into drug law reform

Melbourne — 5 June 2017

Members

Mr Geoff Howard — Chair Mr Bill Tilley — Deputy Chair Mr Martin Dixon Mr Khalil Eideh Ms Fiona Patten

Ms Natalie Suleyman

Mr Murray Thompson

Witnesses

Ms Judy Ryan and

Ms Kylie Troy-West, Residents for Victoria Street Drug Solutions.

Necessary corrections to be notified to executive officer of committee

The CHAIR — During this part of the hearing we are hearing from Judy Ryan and Kylie Troy-West, both residents of Abbotsford. We are pleased to hear from you. We have had a submission from Judy, which is good.

Ms TROY-WEST — You did have a submission from me as well, but I did not disclose my name.

The CHAIR — That is fine. You would be aware that what is being said this afternoon will be recorded and become part of a transcript that will come to you in a couple of weeks so you can check that it is factually correct in terms of what you share with us, and then it will go on the public record. So if there is anything you want to say that you do not want to be on the public record — —

Ms RYAN — There is one little bit that I would like to — —

The CHAIR — So let me know before you get to that bit, and we can see that that part of the meeting is held in camera and then continue on afterwards. If you would like to share with us a bit of an overview of key issues you want us to be aware of, we can then ask you some questions and follow up with the some discussion from there.

Visual presentation.

Ms RYAN — I will start and then Kylie is going to follow. I am Judy Ryan from Residents for Victoria Street Drug Solutions. I actually live on Nicholson Street, Abbotsford, which is a fairly major part of the hotspot area. I would like to thank you for inviting our group to provide evidence to this inquiry into drug law reform. I must say that we are really pleased to have this opportunity to contribute to the Parliament's discussion on a trial of a life-saving supervised injecting centre in North Richmond.

As you know, in February Coroner Jacqui Hawkins reported on the tragic fatal overdose of a young female in North Richmond, and she recommended that the Honourable Martin Foley, MP, as Minister for Mental Health, take the necessary steps to establish a safe injecting facility trial in North Richmond. Three months later, in May, Coroner Audrey Jamieson supported Coroner Hawkins's recommendations, and she added:

If a safe injecting facility can shift drug injecting from public locations to a clinically supervised environment, this would be hoped to lessen the traumatic impact of injecting drug use, overdose and death on local residents who are exposed to these activities in their everyday life.

Along with this acknowledgement from the State Coroner's Office, the Residents for Victoria Street Drug Solutions have been overwhelmed with broad support from many groups, and I am going to name them for the record: paramedics from Ambulance Victoria, the local police from the Collingwood and Richmond police stations, the Melbourne Fire Brigade, emergency nurses and doctors from the North Richmond Community Health Centre and also St Vincent's Hospital, local pharmacists, three magistrates and other members of the legal profession. We have also been supported by the Salvation Army, the Country Women's Association and congregations of Catholic nuns and priests. We have also been supported by some local traders and various branches of the ALP, including Brighton, which was — —

The CHAIR — How many people is that? Three people?

Ms RYAN — No. It was carried unanimously. We were a bit surprised too, but anyway, that was good.

The CHAIR — That is good.

Ms RYAN — And Mitcham, Upwey, Richmond and Fitzroy-Collingwood. The significance of Brighton and Mitcham is that obviously they are not close to our patch, but when I spoke to those members about it, they said, 'Kids from our area die in North Richmond'. I really want to say that this is not a North Richmond issue; this is a Victorian issue, because Victorians are dying in North Richmond and Abbotsford.

I have to mention the media. The media interest prior to the last 12 months when it came to drug use in this area was always focused on the traders. Now it is focused on the residents, and we are very pleased about that. Channel 7 has been out to film our area. Channel 9's *A Current Affair* — there is an episode coming up in the next week or so that will be very interesting viewing. The ABC, the *Herald Sun* and the *Age* are all very positive in supporting our request for a trial of a supervised injecting facility.

Just to reinforce the fact that this is a Victorian issue, I have received advice from the federal member for Indi, Cathy McGowan, that she has received correspondence from her constituents in north-east Victoria who have young adult children living in Melbourne who frequent the North Richmond area for cheap eats. These parents are very concerned about reports of fatal overdoses in that area and support a supervised injecting centre in the event that their kids or their friends ever need such a facility. That is a really significant contribution.

Personally, last Wednesday afternoon, 31 May, I was walking along Victoria Street and I was near what we call the Abbotsford unsupervised injecting centre, which is a toilet block on the corner of Lithgow and Victoria streets, which Virginia mentioned before. While I was walking past, a woman came out of those toilets, overdosed and collapsed on the footpath in front of me, with her partner beside her — he had also injected. She collapsed and died. I just want to tell you from here that we are really exposed to these overdoses, but I am still shocked by them.

I think I have still got a bit of post-traumatic stress here. That another human being could take their last breath in such an undignified space, next to me, who is a stranger, is overwhelming. It took about an hour and a quarter. You are trying to hang on to this guy and ring 000 and explain where to go. It was about 3.30 p.m., and there were kids coming out of the school. You know, it is shocking. It was just terrible. The thing is that the trauma of witnessing this sort of stuff is taking a heavy toll on residents, as Coroner Audrey Jamieson suggested.

Residents are constantly on full alert as other people's kids and grandkids head into our laneways to inject. We know they are visitors to our area, and recent data provided in Coroner Jamieson's report advises that 68.8 per cent of people who fatally overdose in North Richmond come from other parts of Melbourne and regional Victoria.

As metropolitan and regional Victorian parliamentarians, could you just imagine for a moment if a drug injecting epicentre was in your community of Ballarat, McCrae, Cairnlea, Brunswick, Keilor Downs, Sandringham or Wodonga? I just want to ask you: how would you cope with people injecting and fatally overdosing in your area when you walk out of your office? How would you feel about your kids and friends confronting those shocking scenes on a daily basis? How would you manage the responsibility of keeping alive other people's kids and friends in a stressful situation? I have just been talking to Emma Greeney from Mr Foley's office, and there is the suggestion of us injecting naloxone. That is part of the suite of management tools. I tell you, on Wednesday I was not in a state to inject anything into anybody.

Ms PATTEN — What? You would have been carrying around naloxone — —

Ms RYAN — I have never injected myself. I have never injected anybody else. I think it is absolutely fanciful, and I really want to put that on the record. I think that seriously needs to be workshopped. I just want you to think about how you would react, given all those scenarios, if your Parliament actually threw a compassionate and evidence-based lifeline through a safe injecting facility to save lives in your community. I know what the response would be.

This is the Parliament of Victoria's Law Reform, Road and Community Safety Committee, and you know that for more than four decades Victoria has been a world leader in implementing effective harm-reduction measures that have saved thousands of Victorians from death and injury through campaigning, government policies and confronting advertisements like 'If you drink, then drive, you're a bloody idiot'. Most of those measures were controversial at the time of introduction, but the resulting decrease in road deaths and injuries — and there is a greater number of vehicles on the road now than there was four decades ago — has ensured that Victoria continues its leadership position in this key area of public health policy.

The overwhelming evidence from Sydney and international cities is that the key harm-reduction measure for injecting drug users is a supervised injecting facility. Not one life has been lost in any of these centres across the world, and thousands have been rehabilitated and communities have been renewed. Supervised injecting centres have significant benefits in economic terms alone. The reduction in ambulance service call-outs, as per the Sydney experience, would result in massive savings for the health budget as well as increasing availability to those residents fearful of not getting an ambulance unit because those units are occupied managing overdoses. This is a major concern for elderly residents in our community.

Residents believe that the funding of the Sydney MSIC through the confiscated proceeds of crime, which Virginia has mentioned, is a key selling point for those who otherwise would not support a trial supervised injecting centre.

I have three adult children, and we always say it takes a village to raise a child. I think it takes a village to save them as well, and that has been borne out by the response to the shocking road toll of four decades ago. Victoria has an impressive track record in creative and bold solutions to saving its people's lives. We know the Parliament — and it must be bipartisan — can stop our kids from dying preventable deaths by legislating for the establishment of a supervised injecting facility in North Richmond.

The CHAIR — Thank you, Judy.

Ms TROY-WEST — I am Kylie Troy-West. I am another member of Residents for Victoria Street Drug Solutions. I live in William Street, Abbotsford. I am a part-time working mother of one, and I am 13 weeks pregnant, so for me this is actually a very important issue. The trial of an MSIC is something that is of utmost importance to me and my family.

I would like to echo Judy's thanks for extending the invitation to us to participate in this inquiry. As you know, we are a residents group, and we are here today to advocate for our community and our neighbours — primarily those that live in Victoria Street and the surrounding streets — who, like us, are directly and personally affected by the high levels of public drug taking and dealing within the precinct. Many members of our community support the trial of an MSIC, as it is a proven solution to the issues that are destroying our community and traumatising our residents. These issues include high levels of public drug taking and unacceptable rates of public overdoses and fatalities. Then of course there is the associated crime in dealing and the risk to public health and safety and mental wellbeing that all of the residents face.

Just a bit of background on how the group started: in September last year in the lead-up to the council elections my neighbour and I were having dinner, and we were pretty much at the point of despair when we decided we would band together and start a campaign to see if we could encourage the local community to vote for candidates to support an MSIC. Twenty years earlier my neighbour's son had a needlestick injury, and I was looking at the fact that nothing had moved along in that time — that nothing meaningful had happened and that my child was at exactly the same risk as her child. That was the motivation for us to get going.

We headed up to the councillor Q and A, where we met Judy. We questioned all the candidates. We printed flyers, started a Facebook page, launched a website, and off we went. A few weeks after the election we banded together with Judy. The working group has grown to about 15 people.

Ms RYAN — Yes, and now the broader group is bigger.

Ms TROY-WEST — The broader group as well the Facebook community is almost at 500. It is baby steps, but everyone that we talk to locally is really supportive of what we are doing, and that is really what is motivating us to keep going. I am really proud to be representing my neighbours and our community today, so thank you so much for having us here.

Primarily my reflections will focus on my experiences as a mother, because living in the Victoria Street precinct as a parent is confronting and traumatising, and it bears down on my conscience daily. I am constantly questioning everything: why do I live here? Can I afford to move? I cannot really afford to move. What am I going to do? What if my son picks up a syringe? When will he start to notice the drug dealers? When will he notice the people injecting on my street? When will he notice the drug affected wandering around? What do I do if I get home and someone is injecting in my front yard? What do I do if he answers the door and it is someone asking for water so that they can inject? Is he safe at day care? Is he safe at the playground? Can we play on the street today? Am I a bad mother? It is really, really challenging.

On my street I have multiple neighbours that have performed CPR on people that have overdosed, some of whom have died, which is an awful fact. All of the houses on my street have removable tap heads, and that was a decision that was taken nine years ago as a preventative measure. So if you cannot access any water on the street, then your ability to inject on the street is reduced. Now they give out water when you pick up your syringes from the needle exchange, so it is not so effective anymore. But nine years ago that was one of the ways that neighbours all banded together to tackle that problem.

On my street I cannot pick up a piece of litter from the gutter in the autumn because I might get a needle stick injury. And every time my son wants to go and draw chalk animals on the footpath, I have to go out before him, check up and down. Is there anyone injecting? Are there any dealers? Are there any syringes?

I do not want to keep my child trapped inside our four walls. It is a right of a child to be able to interact in their community spaces, but for my child to be able to do that I need to take a series of steps to make sure that he is safe. We have found syringes in our front yard and in our back garden. We have asked users to get off our property on multiple occasions. I have witnessed far too many people injecting on my street between parked cars, in neighbours' yards, in our back laneway.

Chatting with the receptionist at my son's day care one morning in March, I learnt that the centre has trained its staff to collect syringes. They complete a sweep of the centre daily. They hire in security to drive around and check on the premises on the weekend. They have upgraded their fencing system. Coincidentally that same afternoon when I was collecting him, one of the parents came in and said, 'Everyone has to use the front door. There's an aggressive man shooting up in the back car park'. So this is the norm, and I do not think that is acceptable.

As Judy said, this is a Victorian issue, but it is a local problem and it really is focused around the streets that sprawl out around Victoria and Lennox streets. You know, I am actually really happy that it is so contained. I am really happy that there are mothers in my mothers group that do not understand what I deal with, and they might live 1 kilometre or 800 metres down the road. I am perfectly happy with that. But for those of us living here, making our lives here, growing our families here, we really need the government to say yes to the trial of a MSIC because the severity of the situation warrants it. For me I just think if it does not work, what have we lost? But if it does work, everything will be gained: lives will be saved and the neighbourhood will be returned to our community — and it is a beautiful community.

Mr DIXON — Why is it happening in this spot? Why did it not happen somewhere else? What is the history that it is so concentrated in this spot?

Ms TROY-WEST — I have been in the area for three years. Talking to neighbours on the street that have been there for 25, 30 years, it has always been a problem here. There are a number of factors. There is the high-density housing estate. There is the public transport mecca with the trams and the trains and the buses — it is an interchange. And for a very, very long time it has been known as the place to go and buy heroin. That primarily happens at the corner of Victoria and Lennox streets, unfortunately where PTV set up their step-free train platform. So if you have a child in a pram or you are in a wheelchair, you have to get onto the tram at ground zero. Sorry, I digress.

Heroin has been available readily in that part of Melbourne for a very, very long time, and that is where people come to take it. They buy it. They are not going very far to use it, so it is this little epicentre. There are probably 10 or 20 streets that are severely affected. Beyond that, I have got mothers from mothers group who say, 'Ooh Kylie, I saw a syringe; I know what you mean'. If I just saw a syringe once every six months, that would be wonderful. It does spill out from that. But primarily the activity happens: they buy, they use, they go or they go home, because people that are living within the area that use, they use within their homes, so they are not injecting on the street.

Ms RYAN — Can I also add to that? I asked a senior police officer this question about four or five years ago, and he said to me that if you asked an urban designer to design an area that was just a superb distribution centre for something like heroin, you would design North Richmond because of, as Kylie said, all the public transport but also our little laneways — there are a lot of them, there is a myriad — and also the foot traffic up and down with the restaurants and that sort of stuff. So there are places where people can move in and out. It is an action place, and so you can try and get in and around without being observed. That was his answer.

Mr EIDEH — As you said, the Residents for Victoria Street Drug Solutions overwhelmingly support a trial of that medically supervised injecting centre. Is there any objection and, if so, what is the opposition to that?

Ms RYAN — It is a very interesting question because I stood for council last year in October as an Independent. I was just on my own. I got some little brochures made up and I walked around and doorknocked, and I really prepared myself for opposition. I did not get any.

On the day of the election I only handed out at one spot, which was the Abbotsford Primary School because it was in the drug epicentre. I had two people say, 'Who's Judy Ryan? I'm not voting for you'. So I took them aside. One woman said, 'I'm not voting for you because my father had a heart attack the other day and he couldn't get an ambulance'. So I said, 'Well, that's exactly why you should be voting for me'. I did explain it and the penny dropped, and she came out about 20 minutes later and said, 'I voted for you'.

It is really interesting, though. You tell people, explain the story and then they say, 'Right, that makes sense'. The other guy — I did not care why; I mean, you win some, you lose some. But honestly, I have never had opposition. This might be the in camera bit.

The CHAIR — Clear the gallery.

Proceedings in camera follow.

Open hearing resumed.

The CHAIR — We have now moved back to less controversial or confidential territory. Generally with businesses in your area, you are saying there is a mixed view?

Ms RYAN — Absolutely.

Mr THOMPSON — I have got some general questions. How often does your association meet?

Ms RYAN — The core group of about 10 or 12 meets once a month, and we meet at my place. Then a week later we have a broader community gathering at another member's place who has got a warehouse.

Mr THOMPSON — And about how many members would you have signed up as an incorporated association?

Ms RYAN — Probably about 50 have signed up as a group, but we have got people who bring friends. They get to know their neighbours, know what we are doing and, as Kylie said, we have a lot of Facebook friends too. Every month when we have the broader community group meeting we try to have something educative in that process, so we always show the film from the injecting centre in Sydney, which is excellent. Has the group been to Sydney?

The CHAIR — Yes. Late last month we went to the supervised injecting facility.

Ms RYAN — We see that and then hopefully we will get a guest speaker or something to get going.

Mr THOMPSON — Do you have funding from any sources, the council or Victoria Police or — —

Ms RYAN — Nothing.

Ms TROY-WEST — Informally we started in September/October last year, so we are under 12 months old.

Ms RYAN — We incorporated in early March.

Ms TROY-WEST — So it is very, very early days for us, and we are starting to explore some funding options now.

Ms RYAN — We have got a Bunnings sausage sizzle in Collingwood, if you are interested, on Saturday.

Ms TROY-WEST — Buy one, buy 10.

Ms RYAN — So, no. We are totally unaligned. We have no funding. We have got a bank account but that has zip in it. But a few people need reimbursement, like Kylie and me.

Ms TROY-WEST — Just us.

Ms RYAN — It is pretty basic.

Ms PATTEN — You have really articulated the hyper-vigilance that you as a mother of a young family has to face each day. I am just so sorry to hear what happened last Wednesday, Judy. That is just absolutely tragic. I do not have much to ask because I have spoken to some of you at length, but we have asked other people who have come today where they think the facility should be established. I know you and I have had some conversations about this. Other people have said the North Richmond health centre. I was not here when Demos from North Richmond gave evidence, so I do not know whether he suggested it at his place.

The CHAIR — As I remember he felt that a facility that had other support agencies around it was a key thing.

Ms PATTEN — But I think you are less enthusiastic about that location.

Ms RYAN — I have been up to the Sydney injecting centre; I have been through that place, as an observer, not a user. I think I should clarify that.

Ms PATTEN — You probably did not have to.

Ms RYAN — No, but I will put it on the record. In talking to them we talked about, 'Based on evidence, where do you locate an injecting centre?', and they had a book which showed the ambulance call-outs. So where the majority of call-outs are is approximately where you should put it. I remember Marianne Jauncey said at the coroner's hearings in December that if it was located 300 metres further up the road at St Vincent's, it would not have worked. If you have got your drugs, you want to inject. You do not want to be wandering around looking for a place that suits everybody else but not the user. I know Demos's centre very, very well. It is a great place. My concerns would be that there is a maternal and child health centre there, there is the school next door. But once again I am really happy for it to be based on the evidence of the ambulance service in terms of where the majority of their call-outs are. I think that is where we should focus.

Ms TROY-WEST — I guess, similar to Judy, I think that North Richmond health would be a really easy place to put it, but I do not think that the easy solution is necessarily the best solution, because we want something that will be effective. I hate to say 'as a mother', but as a mother — especially in this setting — I cannot just think about the needs of my child. To be honest, having it at North Richmond health — I am in Abbotsford — is a fantastic solution for me and my family and for my neighbours, but there are hundreds of families that live on the North Richmond estate there. They already bear the brunt of the crisis, and I think we need to follow the evidence as to where a centre should be located instead of opting for the easy choice.

Ms RYAN — Because if you have a trial, you want it set up so it works. That is my view.

Ms PATTEN — Yes. If it is going to work, you want to give it every opportunity to work.

Ms TROY-WEST — That is right, so on Victoria Street somewhere, because Victoria Street is a mix of shops and industrial. It is surrounded by residential streets; I do not think it should be in a residential street.

The CHAIR — Although the key focus of your group is trying to get a supervised injecting facility going, are there are other things that you would — as you have the opportunity now — suggest the government do to address the drug problem as you see it?

Ms RYAN — It is an interesting question. It is all enmeshed really, isn't it? I look at these people that we see injecting, and I have got a very lovely laneway next to my front garden that if I was injecting I would probably inject in there too. We also do speak to the people who use drugs. That is the other thing I would like to say. We talk to them. You know, 'I'm Judy from the residents group. We're trying to get an injecting centre. Would you use it?'. They say, 'Of course we'd use it'. Then you say, 'Would you like to tell me why you're here today?'.

I suppose the fact is it is definitely a health issue, whether it has come from people's experience of abuse or trauma. Or the other one I had was a man about three weeks ago who was probably about late 30s, early 40s, and I saw him inject. I walked past to give him the privacy to inject in, and I came back when he was sort of mopping up. I said, 'I'm Judy, dah-dah-dah'. And he told me that about five years ago he had a workplace accident where he broke a bone in his neck. He was a forklift driver and he was paid out by WorkCover, and he has not been able to work. He said, 'I've been to so many doctors and specialists to get medication, and nothing has worked — nothing'. He said, 'I'm in total agony, so I've started using heroin just to get relief'. He said, 'I

use it here every morning. Then I go and walk down near the river, and I can do that for about 2 hours pain free', and he said it is worth it.

Then that takes you into other views about medicinal cannabis and all those other things. You know, why do people take it? Some people take it because they have got chronic illnesses and they cannot get relief in any other way. There are so many things. We are probably out of time, but I think we have got to be very open-minded about how we view certain drugs of addiction and why people use them. That is what I would suggest.

The CHAIR — Any other suggestions?

Ms TROY-WEST — Primarily the aim of our group is to have a safe injecting centre trialled locally. To be honest, at a government level I do not know if we have been doing much else. We have all been very actively participating in the council. They had a consultation program called Reimagining Victoria Street. So we have all been very, very active in trying to put forward some positive solutions for that. I work in local government and within that community space. I have tried to keep this to one side, and when I deal with the council I do not just shout at them for it being a problem. It is a problem, but we all need to muck in together and get it done.

So my focus with my background is trying to build some community pride, because there is a real disengagement at the moment which is affecting us all. As I mentioned — and it might sound really silly — if you cannot pick up rubbish out the front of your house and it just accumulates, and you are relying on the council to come out and pick up syringes and pick up litter, you really quickly lose pride in your home. That has created an atmosphere in Abbotsford, and I am sure in North Richmond, where people do not care; they are disengaged, and that is really negative.

I have lived in quite a few places. I was out of Australia for seven years. In moving to Abbotsford I can honestly say it is the most beautiful community that I have ever lived in, but even over the three years that I have been here I have watched neighbours, especially people that have been in the area for a long time, just retreat because they have reached breaking point.

This is slightly disconnected, but I think it is also very important. The community is under a lot of strain, and I think sometimes it comes out in different ways. I know, for me, my first thought is, 'What can I do to help?'. But I know for lots of people who are parents, and my husband — he has reached the point now where he is angry and he is aggressive. He is not concerned about people's wellbeing. He wants them to eff off and get out of the front of our house, because our son is in there playing. People's goodwill and people's concern for the wider community's wellbeing is wearing really thin now. It is something that we need to be aware of, because after 25 years of pretty consistent drug use in the area it really does wear you down.

Not only that, and this is totally disconnected but I am just going to keep on talking anyway, property prices in Abbotsford and North Richmond are through the roof. A two-bedroom house in my street will cost you \$1.3 million, and it needs a renovation on the inside. They are primarily being purchased by families who are looking to live close to where they work so they can maximise their family time. Now, when you are spending \$1.3 million on a two-bedroom house in a street where you cannot take your child out to play in front of your home, that is a real problem.

We constantly question what we should do — two bedrooms and we are having another baby. Can we renovate? How on earth can we spend any money on a renovation? Can we afford to move? Not really. What do you do? We have been in that place for three years. There is a tax if I sell my house. There is a 5 per cent tax that I am paying because the government will not get its bum into gear and get a safe injecting room set up. That is a lot of money for residents to bear when they have reached that breaking point and they cannot live there anymore.

Ms RYAN — Can I make one more comment just in terms of the ripple effects and impacts. This came out very much in the report that Coroner Hawkins did about the death of Ms A in the Hungry Jack's toilet. I feel for the kids that work in those sorts of places. All our kids have done part-time work after school in Hungry Jack's and Macca's and all those, and I just think to be a parent picking your kid up after their shift and taking them home and they have seen someone overdose — I know how I feel after last week, and I am an adult woman. A 15-year-old seeing that is just something that is beyond imagining. I just want to throw that into the mix — that there are many stakeholders in this discussion.

The CHAIR — Absolutely, yes. Judy, Kylie, thank you very much for sharing your personal experiences again.

Ms TROY-WEST — Oversharing.

Ms PATTEN — No. You guys are doing a great job.

Ms RYAN — We feel like we are taking one for Victoria at the moment, so it is lovely to be heard. We really do appreciate the opportunity.

The CHAIR — Your message is loud and clear.

Ms RYAN — Thank you so much, and all the best in the discussion.

Committee adjourned.