

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

Dr Virginia Dods and

Mr Oscar Lang, Collingwood and Abbotsford Residents Association; and

Ms Emma Wise.

**Necessary corrections to be notified to
executive officer of committee**

The CHAIR — We are about to hear from Virginia Dods, Oscar Lang and Emma Wise from Collingwood and Abbotsford Residents Association. Welcome to the hearing this afternoon. You would be aware that Hansard is recording the discussion that we have this afternoon, and a transcript will come to you to check that it is technically correct. After that it is all part of the public material that is available on our website. If there is anything that you want to share with us that you do not want to be in the public domain, you will need to let us know, but otherwise everything is in the public domain.

Ms WISE — Thank you. I am not actually a member of this association. I am on the school council for Abbotsford Primary School. I am sure it does not matter, but just in case.

The CHAIR — Just to clarify; that is good.

Ms WISE — I moved here from overseas in April, so I would like to think I looked at the suburb, if you would, with fresh eyes. I had been living in America for eight of the last 10 years, but I was born in Melbourne and am Australian, as you can hear. My children do not sound like me, though; they sound American. We lived in a bit of a grainy suburb in DC. I will describe it. It was in the north-east area — so a similar socio-economic area. They had to have a gate-locked school policy. Because it was DC they also had practice drills with shootouts and things like that, which of course blissfully do not happen here in Melbourne.

So I thought I was bringing two streetwise Americanish-style students into Abbotsford Primary School. The school's grounds, unusually, have a gate, and it was not until we had been here a few months that I started to understand why, as we would step over our first hypodermic syringe in the gutter on the way to school. I am not particularly anti-drugs. I have a cousin who is a heroin addict. I understand that it is an addiction, but it seems that there are two sorts of users. There are users who are very diligent. They are like diabetics: they realise they have a problem, and they take care of their syringes; they put them in the little needle container.

Then there are users who are not really thinking much other than of what they are doing at the time. They are the ones, I think, that tend to discard, regardless of where they are — whether they are near a school, whether they are near a shopping centre or whether they are near a residential area. In fact on the day of the meeting I went to with Dr Dods at the Richmond council I took my children to the public toilet just behind the council chambers, and there was a beautiful spray of blood on the wall. There was a little package with a syringe on the floor, and I had to explain to my nine-year-old and 10-year-old why these are things you cannot touch — not just the hypodermic syringe but also the blood on the wall.

I have had conversations with my children I did not expect to have at this age. Even despite all of the things we had to confront, I suppose, living in DC in a very mixed neighbourhood, I did not expect to have this level of drug education with them at this stage. Certainly the giraffe life education van that pulled up into their school last week could not, I do not think, adequately prepare them for what they are seeing on a regular and daily basis. On a daily basis there are syringes. Like other parents, when I see them I will kick them out of the way so they cannot harm the children. But we do not see them all. It is disturbing, the frequency of overdoses. We have the toilet at the end of the street, and it is a private place where someone in a hurry will go and get a hit.

I suppose, given that I do not want to change my children's schooling again — they have just had a dramatic move from America to here — everything about Abbotsford is exceptional, it is a lovely community and I want them to stay there. But I seriously reconsider those options every time there is another ambulance and every time there is another person who is dead through lack of education and through the uncertainty of the 'medication' they are taking. I am not suggesting this is the time or place that we talk about legalising heroin, but if it were able to be open to you to look at Canada, Switzerland and, I think, Norway, the countries that have legalised it, you would see that the crime rates have gone down and that the overdoses have ceased altogether. These people have returned to the community.

We could stop treating them like criminals and more as normal people. I am not sure if it is appropriate, but the ABC iView program on ice addicts is quite informative because you would not be able to pick them from all the people sitting at this table today. They are very normal, everyday users, as are the heroin users. What we are looking at are the ones who are not responsible, who are just flicking the hypodermics out, leaving blood samples out and putting at risk members of the population who are just too young to understand it is a risk.

I think there is always a nimby — not in my backyard — problem with locating something like a safe injecting facility, and to that I say, 'Are you really happy with people in your back garden who have overdosed? Are you

really happy with blood products in your garden which may or may not carry diseases, let alone the syringe that you accidentally pick up with your finger while doing your gardening?'. For me personally, I am in Richmond, and I would be fine with having the safe injecting facility in my street next door to me, because it is treating these people as humans, which they are. Having an addiction does not mean that you are an evil member of society. I think if we as a community took a step closer towards normalising what they are doing — the fact is that it is okay to go into a bar and drink yourself senseless, but it is not okay for them to take a drug of their choice, albeit not an entirely legal one. I think we need to take a step towards it, and I think this takes a step towards it.

Certainly for me as a parent and community member, I am happy to have it in my backyard. I am happy to have that as an alternative to an outrageous situation. We are not fixing the drug problem by sticking our heads in the sand, saying, 'La, la, la. It's not happening'. It is happening. This is the absolute heartbeat of Melbourne's drug problem, and this is me coming in 13 months ago from America and really seeing it as an outsider. I am agog that we are behind Sydney. Please, let us address this.

The CHAIR — We will move to Virginia. If you want to make your comments. I notice you have written to the Premier on this issue.

Dr DODS — Yes, I have. That was on behalf of the Abbotsford Primary School council. I also represent the local residents association, the Collingwood and Abbotsford Residents Association. I would like to start out by acknowledging that we are meeting on the traditional lands of the Wurundjeri people of the Kulin nation and paying my respects to their elders, both past and present. I would like to tell you a bit about who I am. I grew up in Balwyn within a police family. I later worked at the AFP, the Australian Federal Police, and trained as a police officer. Then I worked for a decade as a frontline child protection worker in the western suburbs of Melbourne. I increased my understanding of the drug trade, from importation and propagation to parents so addicted to drugs that they would lose the care of their children, and traumatised young people were dying because they were self-medicating.

Where I live: yesterday was the 25th anniversary of my moving to Abbotsford, just one block away from Victoria Street. I knew about substance abuse from my work, and seeing discarded needles in gutters was a regular occurrence. I experienced burglaries and thefts from my car on more than 13 occasions. Then I stopped counting. I know people were stealing to get cash to buy drugs locally. I find it interesting that my house has not been burgled since the Neighbourhood Justice Centre was established in 2007.

In the early years I used to shop at the big Safeway supermarket in Smith Street, Fitzroy, and on many occasions I was accosted by those seeking money to support their habits. I watched and supported the candlelight vigil that was held in memory of those who died from heroin overdoses and wondered why the government would not support those grieving parents to establish a supervised injecting centre that might have saved their children from a squalid death.

Life lessons: when my eldest son was a toddler I was taking him to Victoria Street, and we saw a young man with peroxide-blonde hair and pink jeans lying on the footpath on the opposite side of Nicholson Street. The ambulance arrived, and the officers carefully put on gloves before treating him with Narcan in full view of the public. He was revived and left sitting there dazed on the footpath whilst they packed up and went away. I made a promise to my son that a civilised society does not treat its most traumatised members in such an impersonal way, with no privacy and no dignity, and I would do whatever I could to make that happen.

Over the years, as school council president at Abbotsford primary, and as a parent, I have dealt with the issues related to drug use on Victoria Street in a myriad of ways — from having to agree to installation at the school of high fences and gates that are locked outside school hours, preventing local community members from being able to access the community barbecue that was installed by the local Rotary Club and those who want to practice basketball and other sports in an area that is crying out for access to public open space. Prior to this, the school principal had to do daily sweeps to ensure there were not discarded syringes along the fence line.

Children must be taught that discarded syringes are not toys and told to have one child guard the spot where one has been located to prevent younger children accessing it whilst an adult is alerted to come and remove it safely. The outside drinking taps had to be disconnected for the same reason that local residents have often decommissioned the taps in their front gardens — to prevent usage by those seeking the water for their drug usage. On one occasion I spoke with a homeless man in the school grounds and explained that he would have to

leave as I was locking the gates and he could have become trapped inside. He complained that there were no taps accessible locally as residents had removed them. Directly outside the gate he crouched between two parked cars, injected himself and then walked off. Then we have the regular cases of people using in their cars and then driving into the school fence, with the potential for further harm as they drive away being truly frightening.

The number of people openly using and dealing along Victoria Street has just grown exponentially over the past few years. In the last six months especially all the children walking along the street to school need to be accompanied by an adult to keep them safe as they run the gauntlet of people who are congregating to deal and use. The children see sights that most adults would find confronting. A recent school excursion went past an unconscious man on a bench who had vomited on himself. My colleague, who has worked in child protection for decades, recently declined to come to dinner on Victoria Street citing concerns for the safety of her 10-year-old son and what he might witness.

The negative impact and the visible drug trade and usage on Victoria Street are showing with less foot traffic and businesses closing each week. As traders find it harder to make ends meet, the attraction of diversifying their business becomes more compelling and we witness the downward spiral. I have taught my children to be aware of the rowdies, those who are hanging out for a fix and becoming agitated. On one occasion recently my youngest daughter ducked beneath the hands of two guys who were doing a deal to put something in the rubbish bin. Recently we walked around a middle-aged man who had simply stopped, as though frozen, on a corner of our street.

What my children experience is nothing compared to their peers on the North Richmond housing estate who have told me stories of the woman shooting up in the car park with blood everywhere who threatened them with a needle not to tell anyone, or my attempts to ensure trauma counselling for a child who happened to see on the CCTV monitor in the security office a man in the lift slit the throat of a security officer whom he apparently believed was investigating him. Because the families must continue to live in this environment, and many are from non-English-speaking backgrounds, the parents tell their children not to tell anyone about what they have seen and make trouble for them.

I would like to tell you a couple of personal stories to give you an understanding of what this means locally for us each day.

Proceedings in camera follow.

Open hearing resumed.

Mr LANG — I will talk a bit about my friend's brother — also my friend — from primary school.

The CHAIR — He is about the same age as you, then?

Mr LANG — He is two or three years older.

The CHAIR — Putting him at around what?

Mr LANG — I think he would be 19 now.

Mr THOMPSON — Is this off the record or on the record?

The CHAIR — We are still in camera.

Mr THOMPSON — We have got witnesses in the back of the room.

Ms PATTEN — Oscar is not going to use his name.

Mr LANG — This is on the record, then.

The CHAIR — All right. Just so we understand.

Mr LANG — I think everybody has the choice to use drugs. It can be a fun thing to do when you go out with friends. You want to feel good. You drink, and it is normal. But when I was coming home late on a Friday night from work with a co-worker, sitting in his car, I stopped at the turn to Victoria Street. I had not seen my friend's brother — I will call him my friend. I had not seen my friend in I think six years since primary school, and that was the first time I had seen him since primary school, sitting at a tram stop pretty out of it.

He was alone. He was vulnerable, and he still looked like a kid. He still looked like he had just finished grade 6, and he was alone. I kept seeing that until I got home, and I told Mum about it. She was as shocked as I was, and it just kept playing over and over in my head, just seeing him sitting at the tram stop. I guess, yes, it is better if he is with other users, who can watch over them, but the best thing would be proper supervision. Seeing him alone like that was the worst thing, and I will not forget that. All I would hope for is supervision and a comfortable environment. Anyone else who drinks normally or uses any other drug, that is what they are doing. They are doing it in a safe and comfortable environment.

But he was not celebrating anything. He was not partying. He was not enjoying himself, and I think all I would want for him is a safe and comfortable place to continue on with his choice. It was his choice to use heroin, and that is all I would hope for — just a comfortable and safe place that is supervised.

Ms PATTEN — We have obviously received a lot of submissions about this issue, and I think the story of having to educate the children in such an explicit manner really hit home. We are yet to hear the opposition in North Richmond. We are yet to hear the nimbies. Are you aware — are there many residents who would be in complete opposition to this?

Dr DODS — I would have to say that I have known some people in the past over the years who were anti the idea, and I have run into a few of them recently and talked about this campaign. I have not had one yet say, 'We don't want that in our backyard' — the honey pot effect. What they are all saying now is it really cannot get any worse than this. Everyone knows where you come and get your heroin, and we are tired of seeing this in front of our kids and feeling unsafe ourselves.

Ms PATTEN — Are you hearing the same, Emma?

Ms WISE — There was one school council meeting where we had a member from the local business community — I cannot remember her name — and she spoke to the fact that essentially all of the retailers along Victoria Street had voted against. We had quite an open discussion with her about that. I think we may have given her a different perspective, without any touching or violence. Their view seemed to be that it would affect business, but it is already being affected. That is the thing, and what is proposed is not going to be in one of these shops on the street.

I will say that it seems in the last few weeks there has been more of a police presence along Victoria Street. The school is on Lithgow Street. On the street that is parallel to Lithgow, the street just before it, you can see them walking up there and shooting up, and there are more needles than ever. And the children — I just would not use that street anymore. In the year I have been here things are worsening, and it is dramatic.

So having that conversation at the back of Richmond town hall with my children, we have gone there — they are 10 and nine — to use the toilet, and literally there is this spray of blood up on the wall. My cousin was a trooper in the army. He was not a bad person, and I suppose that helped me personalise that these are not 'them'. These are just members of the community who have an addiction problem. Other countries look at them as no different to diabetics. In Canada now three times a day you can go to a prescribed place, be given a prescribed dose and go back to work, and it is working. We are not there yet, but if we could just get these needles and these poor overdosing people — they do not know what they are buying and they still will not know what they are buying, but the grades vary so dramatically that even a really skilled user of several decades can overdose, and in a supervised clinic they will be resuscitated safely.

Mr EIDEH — I want to ask you about the residents who have lived in this area for a long time. Would you say their views have changed to the establishment of a medically supervised injection centre?

Dr DODS — I think they are much more welcoming of it now. When I said that I was coming here today I got an email last night from one of the residents, who said, 'Thank God you're doing that, because it's been really full on tonight'. She thinks in the street opposite her they are dealing. They had police there last night, and

she felt very unsafe from some of the people that were very close to her house, because she lives on Nicholson Street.

Mr EIDEH — Do you think they have changed their view now?

Dr DODS — Yes. I think in the past some might have been more concerned that having an injecting centre would have encouraged the drug usage. I think now there is a general acceptance that it is rampant and that an injecting centre could only improve things.

Mr DIXON — Has it changed — and relating to the opposition question — because it could not get any worse or because they understand a bit more about what a medically supervised injecting facility would actually do?

Dr DODS — I think it could not get any worse.

Mr DIXON — Okay. Whatever the motivation is, as long as it works I suppose.

Dr DODS — That has motivated them to think, ‘Well, actually maybe an injecting centre would be a good idea’. So I think there are two parts to that. I mean people are experiencing people overdosing at the back of their homes in lanes and on the street corners in front of them.

Mr EIDEH — Have you liaised with the Kings Cross, in Sydney, medically supervised injection centre? And what did they tell you?

Dr DODS — I have not been there personally; I have seen documentaries about it and I understand a fair bit about the centre. I am very impressed that it is funded through the proceeds of crime because I think whenever you have an initiative like this from the government, the services are concerned it will mean that their funding is diverted in order to pay for the centre. In the scenario that is used in Sydney that is not the case, and I think that goes a long way to addressing other services’ concerns.

Mr THOMPSON — Our Chair is a teacher, and on fulfilling that particular role one generic comment I would like to make is that the use of mind-altering substances — whether they be alcohol or artificial substances — is not a good idea and they are not pathways of choice for young people as a matter of a general life journey. One of the great sons of the City of Yarra had a very strong view that a cup of tea was all that one needed to make a great contribution to the world, and he coached Richmond to four AFL premierships, ran a milk bar in Richmond and gave a lot of advice, in the style of our Chair, to young people.

Dr DODS — I think the particular person you might be referring to was an alumni of our primary school, and we certainly take the approach around drug education of ensuring that children are informed about the dangers of it. I would add to that, though, that certainly my work in child protection and with vulnerable children for the last 25 years would suggest that those who are most likely to be involved with substance abuse do so as a result of disadvantage and extreme trauma through neglect and abuse. I attempted in my scenario to explain to you that the child I looked after for the day was a child who was being emotionally neglected by his family, and I think that can be traced back to where some of his issues lie.

Mr THOMPSON — That narrative is consistent with other evidence that we have received from the coroner’s office. I just make the comment for the record too: my wife went to Abbotsford Primary School.

Dr DODS — So did Mary Coustas; that is another of our alumni.

Ms PATTEN — Just one more. Where do you think the centre should be? We have spoken to a few people who have said that maybe the North Richmond health centre is an option, but maybe that is too far from where the epicentre of use is or it is incompatible with what is going on around there. For you guys, where would you like to see it?

Ms WISE — The toilet at the end of the school’s street is a natural place to go because the door shuts. In Canberra those toilets have blue lights so you cannot see your vein. Addicts do not need to see their vein; they can just jab. I am not saying to move the toilet, but even if you had it closer, I would feel safer. So for me personally I do not feel that the Richmond estate people deserve to have a worse life out of this; I just think they deserve to have a better life. If it were to put members of the community off, for example, using their health

centre, I think it would just be an education gap, not a needs gap. I suppose if I were given the job of: ‘Where shall we place it?’, I would do a needs analysis. The first needle exchanges were in a mobile van. You could start, literally, with one week here, one week here, to just get an idea, just as a needle exchange thing, to see where you get the highest percentage.

My neighbour who is 83 and has lived in Richmond for 50 years walks down Lennox Street and turns the corner. She has seen a change and she is in support, and I would not have seen her as a very open-minded person on this. She is an immigrant. She is wonderful, a very strong woman, but she is all about it. It does not mean she is condoning the recreational use of drugs; it means she is condoning the safe use of whatever someone is using. It is no different to: would we give someone a beer with a jagged glass? No, we would like them to have a nice, safe glass.

Dr DODS — I would say that ‘dealers’ corner’ on the corner of Victoria Street and Lennox Street is there for a reason. It operates the same way that Squizzy Taylor’s domain did. It has got access to lanes, the area is full of lanes, and it has got good visibility along Nicholson Street, Victoria Street and Lennox Street. That is always going to be the place that people do the most dealing. It has got a tram stop beside it. But I think having an injecting centre at the community health centre that is less than half a block away would very useful, because people will always buy on that corner.

The CHAIR — Thank you very much for sharing those personal stories and your real-life experiences in the Richmond and Abbotsford areas.

Ms PATTEN — Thank you, Oscar.

Witnesses withdrew.