

Is there support for non-criminal responses to drug use and harm reduction measures in Greater Western Sydney?

Greater Western Sydney is a large and populous region in Greater Sydney. Greater Western Sydney is characterised by high population growth, diverse multicultural communities, and is often an area of social and political focus for governments.

Public and political attitudes toward evidence-based measures, such as non-criminal penalties for personal drug use and possession, drug checking, and supervised consumption facilities, may be seen as barriers to policy change. This research note summarises data from the National Drug Strategy Household Survey (2022-23) (NDSHS) about public support for non-criminal responses to drug use, drug checking and supervised consumption facilities in Greater Western Sydney (with comparison to Sydney, NSW, and Australia).

While public perceptions toward these drug policy responses are important to understand across the state (see on the evidence hub 'Public opinion on what action should be taken against people found in possession of illicit drugs?'), they may differ by area, and specific policy mechanisms may have particular relevance for different areas.

Drug checking: The Inquiry into the deaths of six patrons of NSW music festivals in 2019 by Deputy State Coroner Harriet Grahame responded to the deaths of six young adults at five music festivals. Four of these music festivals were held in Greater Western Sydney (Castlereagh; Parramatta; and two at Sydney Showgrounds). The Coroner recommended the establishment of drug checking at both fixed sites and music festivals (Recs A1,2).

Supervised consumption facilities: Analysis of National Coronial Information System data 2006-2015 identified that Western Sydney had the second highest rate of overdose deaths outside of inner Sydney (Dertadian & Tomsen, 2020). Efforts to establish a second consumption facility in Liverpool in 2015-2016 (Dertadian & Tomsen, 2020) were not supported by local and state government representatives. In regional NSW, there are identified barriers to accessing treatment and harm reduction services (such as consumption facilities) (Howard, 2020). The NSW Government has rejected recommendations to establish drug consumption services to address local need (NSW Government, 2022).

At a glance

- 70-89% of people in Greater Western Sydney support non-criminal responses to possession for personal use of heroin, methamphetamine, hallucinogens, ecstasy, and cannabis.
- 59% of people in Greater Western Sydney support drug checking.
- 52% of people in Greater Western Sydney support supervised consumption facilities.

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Greater Western Sydney

Greater Western Sydney in the below combines 'SA3s' (an ABS geographical classification) in and around the thirteen local government areas in Greater Western Sydney, and to the metro boundaries of the Greater Sydney region.

The SA3s combined are: Canterbury, Auburn, Merrylands – Guildford, Parramatta, Blacktown, Bankstown, Penrith, Mount Druitt, St Marys, Fairfield, Campbelltown, Liverpool, Camden, Wollondilly, Bringelly – Green Valley, Richmond – Windsor, Hawkesbury, Dural – Wisemans Ferry, Baulkham Hills, Blacktown – North, Carlingford, Rouse Hill – McGraths Hills, Blue Mountains – south, and Blue Mountains¹.

We provide data for Greater Western Sydney, and by way of comparison for Sydney², for the state of NSW, and for Australia as a whole.

Reduction or removal of criminal penalties for drug use

Evidence for the reduction or removal of criminal penalties for drug use is summarised in the evidence hub under 'Removing or reducing criminal penalties for drug use - what is the evidence?'

A clear majority of people in Greater Western Sydney support non-criminal responses to illicit drugs. The proportion of people who supported non-criminal responses (which include no action, a caution or warning, referral to treatment or education, or a fine) for cannabis, ecstasy, heroin, methamphetamine, and hallucinogens range from 70-93% of people (see Table 1).

Table 1: Support^a for non-criminal responses to possession of drugs for personal use

Region	Cannabis	Ecstasy	Heroin	Methamphetamine	Hallucinogens
Greater Western Sydney	89%	79%	70%	70%	76%
Sydney	92%	84%	74%	74%	80%
NSW	93%	83%	73%	72%	79%
Australia	93%	83%	74%	72%	80%

^a Support includes the responses: no action; caution/warning only; referral to drug education; referral to treatment; a small fine; a substantial fine.

Base excludes people that were unsure or did not know.³

Source: National figure: AIHW, NDSHS 2022-2023, general population survey, national data, Table 11.31. NSW, Sydney, GWS: unit records and geographic variable supplied by AIHW, Choice of action that should be taken against people found in possession of selected illicit drugs for personal use.

A fine can be considered either a civil/administrative sanction or a criminal sanction. For fines, respondents can select either 'Something similar to a parking fine, up to \$200' or 'A substantial fine, around \$1,000'. A more conservative analysis would remove the % choosing either of these options, or just the more substantial fine from the sub-total of non-criminal responses. The support for non-criminal options remains over 50% in all regions, for all drugs, even when including fines as a criminal penalty.

¹ Analysis of these SA3s was made possible by the provision of a geographic variable provided by AIHW. Our thanks to Parker Blakey at AIHW for his help and response to our requests.

² Sydney in the NDSHS data refers to Greater Sydney as defined by the ABS Greater Capital City Statistical Areas (a combination of SA4s).

³ The NDSHS public release data provides data that exclude people who did not know or did not answer. We also exclude people that did not answer or did not know for comparability.

Drug checking

Drug checking (sometimes called 'pill testing') services are fixed-site or mobile services that allow people to test drugs they may plan to consume (see on the evidence hub 'Drug checking services: an evidence brief'). Testing is conducted by trained professionals, and informs the person using the service of the purity and the substances the drug contains, including any substances which may not have been expected. Drug checking services have been shown to influence decisions to consume drugs that contain unexpected substances (Maghsoudi et al., 2022) or stronger than expected doses (see on the evidence hub 'Drug checking services: an evidence brief'). Unexpected substances may include adulterants/contaminants/other substances, for example, if MDMA or cocaine contain dangerous cutting agents, or other substances such as opioids; another highly relevant example is where an opioid (such as heroin) is found to contain a different, much more potent opioid such as fentanyl or nitazenes, which can substantially increase risk of overdose. Drug checking services do not encourage drug use (Barratt & Lee, 2023). A key benefit of drug checking services, in addition to providing accurate data about what is in the drug itself, is that they provide important health and harm reduction information to service users, including ways to reduce harms of drug use, and referrals to other health services as required (Barratt & Lee, 2023; Barratt et al., 2018).

59% of people in Greater Western Sydney support drug checking.

Table 2: Support^a for drug checking

Region	Support
Greater Western Sydney	59%
Sydney	65%
NSW	65%
Australia	64%

^a Support or strongly support

Base excludes people that were unsure or did not know

Source: National figure: AIHW, NDSHS 2022-2023, general population survey, national data, Table 11.13. NSW, Sydney, GWS: unit records and geographic variable supplied by AIHW, Thinking about the use of illicit drugs and harm minimisation, to what extent would you support or oppose measures such as...: 'Allowing people to test their pills/drugs at designated sites. The test will inform them of the purity and the substances the drug contains'.

Supervised consumption facilities

Supervised consumption facilities are sites where people can consume previously obtained substances under the supervision of trained health professionals. These facilities are called many different names, most often supervised injecting facilities, centres, or rooms; safe/supervised consumption sites. Supervised injecting facilities refer to spaces where people can inject drugs under supervision (and may exclude other forms of consumption, such as smoking). There is consistent, strong evidence that supervised consumption facilities are effective harm reduction measures that achieve public health outcomes (e.g. reduced health harms from drug use; connecting people who use drugs with treatment and other health and social services) and public order outcomes (e.g. reduced public drug use and publicly discarded syringes; no increases in drug-related crime), while also being cost-effective (Kennedy et al., 2017; Levenson et al., 2021; See also Day et al., 2022; Magwood et al., 2020; Stevens et al., 2024).

52% of people in Greater Western Sydney support supervised drug consumption facilities.

Table 3: Support^a for supervised consumption facilities

Region	Support
Greater Western Sydney	52%
Sydney	57%
NSW	55%
Australia	53%

^a Support or strongly support

Base excludes people that were unsure or did not know

Source: National figure: AIHW, NDSHS 2022-2023, general population survey, national data, Table 11.13. NSW, Sydney, GWS: unit records and geographic variable supplied by AIHW, Thinking about the use of illicit drugs and harm minimisation, to what extent would you support or oppose measures such as...: 'supervised drug consumption facilities/rooms'.

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