

# Pill Testing

The Australian Way

# Report on the ACT GTM Pill Testing Pilot: a Harm Reduction Service

June 2018

The STA-SAFE consortium consists of:

Harm Reduction Australia

Australian Drug Observatory, Australian National University

Noffs Foundation

DanceWize, Harm Reduction Victoria

Students for Sensible Drug Policy Australia

Full report available at: <https://www.harmreductionaustralia.org.au/wp-content/uploads/2018/06/Pill-Testing-Pilot-ACT-June-2018-Final-Report.pdf> (Makkai, T., Macleod, M., Vumbaca, G., Hill, P., Caldicott, D., Noffs, M., Tzanetis, S., Hansen, F., 2018, Report on Canberra GTM Harm Reduction Service, Harm Reduction Australia)

# Introduction

- Punitive law enforcement doesn't work
  - Despite repeated drug related incidents occurring for many years at music festivals across the country, some of them fatal, governments of all persuasions have continued to prioritise a punitive supply reduction strategy for festivals. More often than not, governments have increased the number of sniffer dogs and police presence, despite the lack of evidence for, anecdotal or otherwise, to support the effectiveness of this approach in reducing the prevalence of drug use or drug related harms occurring, and some evidence that an increased police presence including sniffer dog operations could increase harms (NSW Ombudsman, 2006).
- Drug related deaths are still occurring
  - Even as families, festival goers, promoters, as well as public health and law enforcement officials, were becoming more concerned with the continuing drug-related incidents occurring at festivals, governments have continued to resist calls for pill testing as a harm reduction intervention.
- Calls for change are growing in the wider community
  - Agitation for change has been emerging across the wider community reflected by significant discussion of the issues by the media and in particular social media.
- An alliance of politicians, political organisations and family groups is emerging
  - Some political organisations such as the Greens Party and the Reason Party, and some individual members of parliaments from all parties, including the Liberal and Labor parties, have called for change that prioritises health outcomes over a law and order approach. The impact of strong vocal support from family groups such as Family Drug Support and people attending festivals also cannot be underestimated.
- First trial held in Canberra on the 29 April 2018
  - After a number of delayed starts at festivals in Canberra, the STA-SAFE consortium was able to secure the strong and publicly announced support of the ACT government, including ACT health and police, the University of Canberra (the venue where the GTM festival was being held), and the GTM promoters (Cattleyard), for a pilot of pill testing at the 29 April 2018 GTM festival in Canberra.

## Vision

To obtain government, landowner and festival promoter support for a sanctioned 'front-of-house' pill testing program at one of the larger upcoming festivals in the ACT.

### ***Why front of house?***

- Operates for the benefit of patrons at festivals
- Involves peers as equal partners
- Works co-operatively with all engaged emergency management team stakeholders, including police and health services
- Proactive approach

### ***Why not Back of House testing?***

- Information restricted to law enforcement/emergency management and other selected people
- Does not provide for immediate results to individual patrons
- Does not enable one on one counselling and health messages
- Does not commit to open science
- Reactive approach

## Key considerations

- Utilised best overseas and local evidence and experience
  - Within this growing push for change, the STA-SAFE consortium was conceived and began its efforts to introduce pill testing, as a harm reduction intervention, in Australia – an intervention based on the best evidence and experience available internationally, as well as local insight.
- Medical, health and peer model for both strategy and delivery
  - The model developed by the consortium was a front-of-house service with a strong level of medical, health and peer representation in both direction and delivery.
- Long term commitment by key players
  - The introduction of an officially sanctioned pill testing harm reduction service in Australia has taken over a decade of commitment (Camilleri and Caldicott, 2005).
- Independent of government funding
  - In conducting the pilot no funds were requested or provided by the ACT government, or any other government, for the development or delivery of the service. The pilot was completely self-funded by members of the consortium and their supporters along with significant pro-bono assistance provided by legal and other professionals.

# Global growth in New Psychoactive Substances

## Stepping up

New psychoactive substances reported to the UNODC each year, worldwide

**2009**

Drug overdoses surpass car accidents as the leading cause of accidental death in America

**2010**

British government makes mephedrone illegal

**2013**

In Europe, almost 1.6 tonnes of synthetic cannabinoids are seized (from 21,495 individual seizures)

**2012**

America outlaws several synthetic cannabinoids

**2015**

Drug overdoses in America overtake gun deaths

**April 2016** ▶

Prince, a musician, dies of an accidental fentanyl overdose

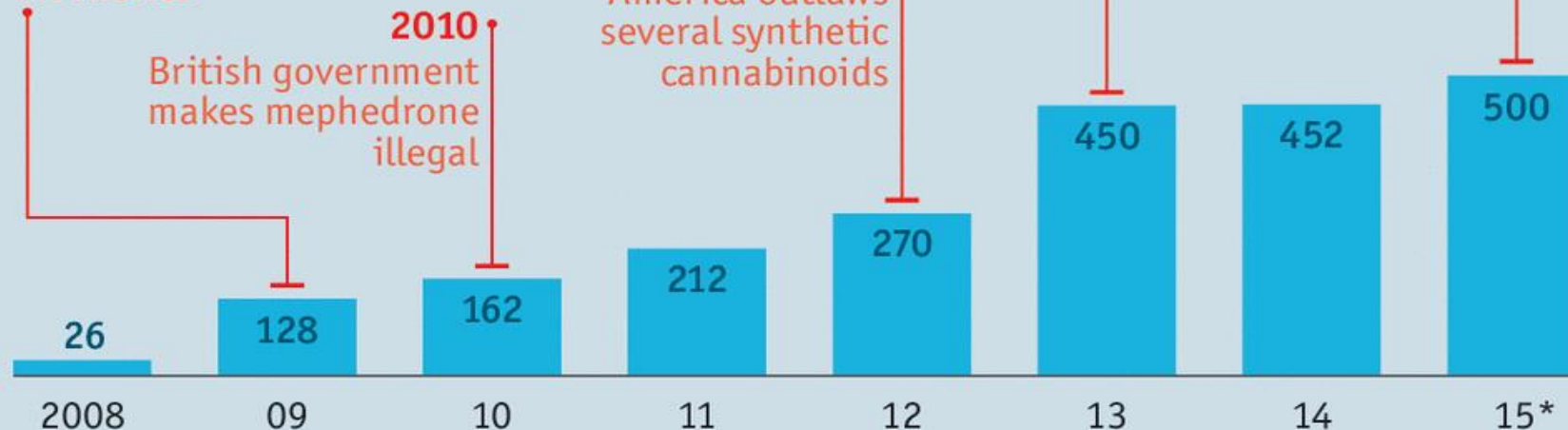
**May 2016**

British government passes the Psychoactive Substances Act

**March 2017** ▶

China adds four fentanyl analogues to its banned list

Donald Trump appoints New Jersey governor Chris Christie to run an opioid task force

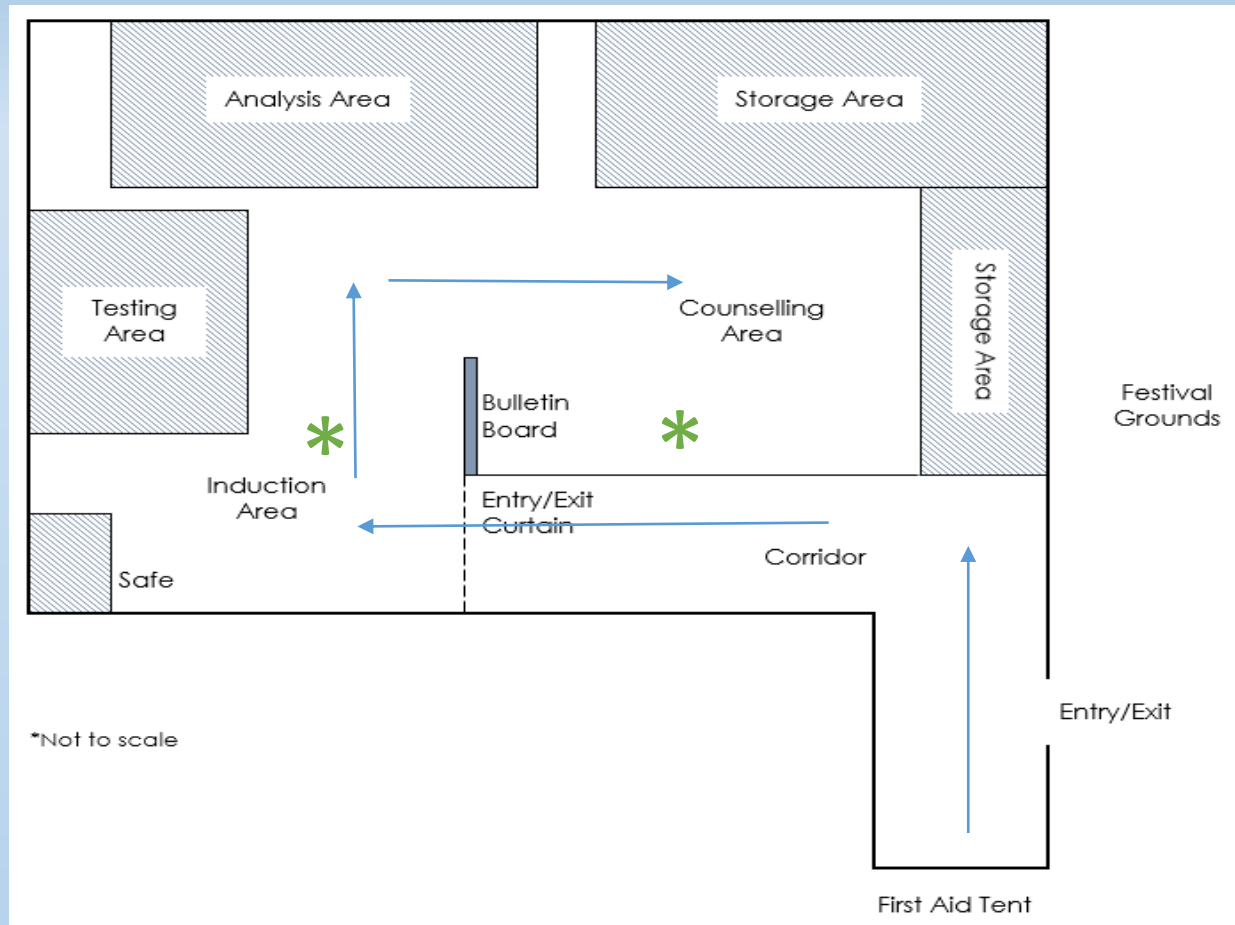


Sources: UNODC; European Monitoring Centre for Drugs and Drug Addiction; Centres for Disease and Prevention; *The Economist*

\* Estimate



# PILL TESTING AREA

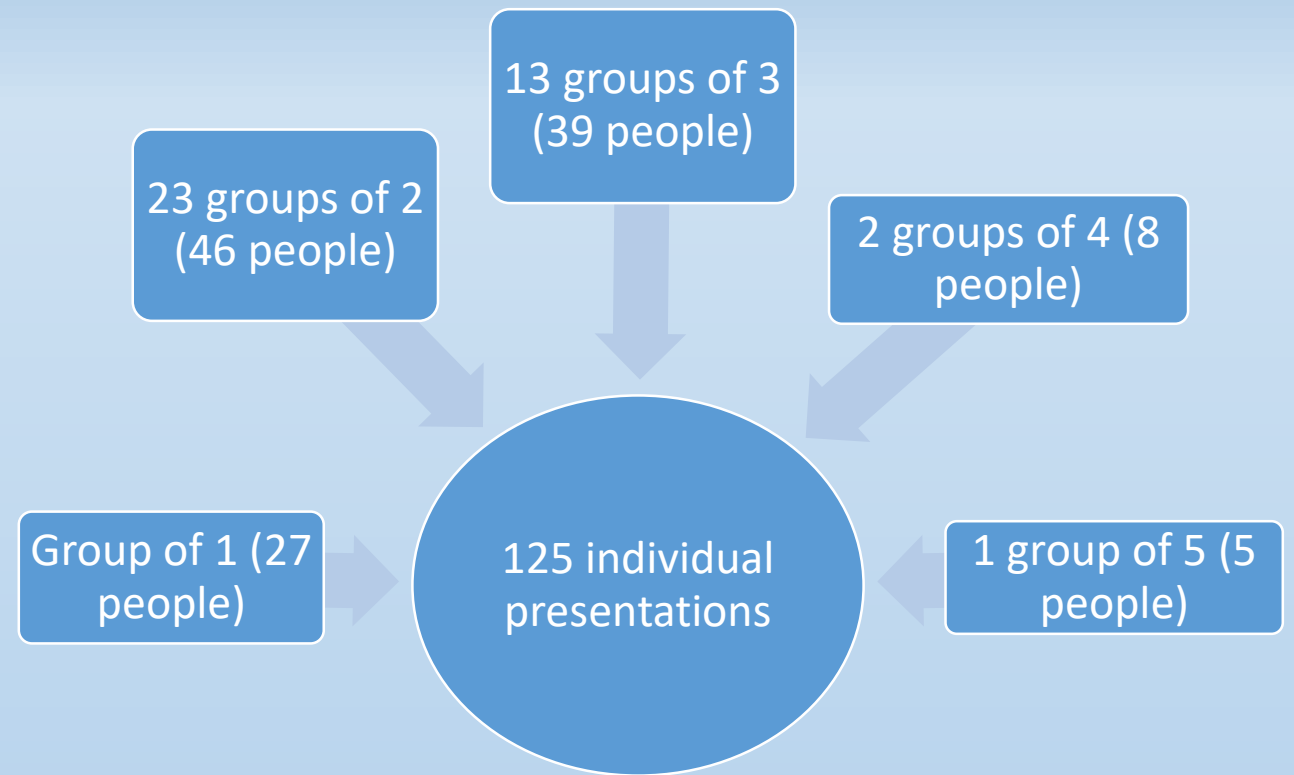


3x6m  
marquee –  
down  
corridor,  
behind  
medical tent



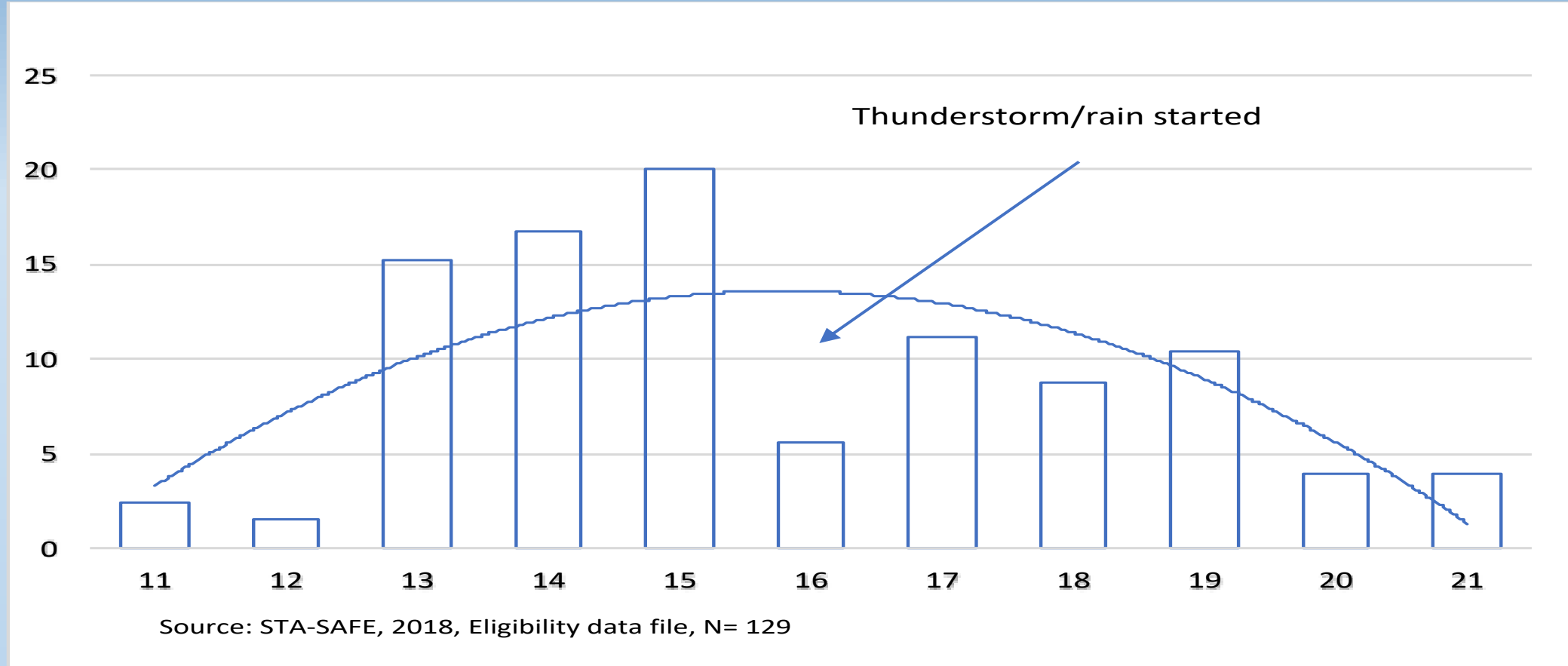
# Patron General Profile

- 125 patrons, 85 samples
- 2/3 male (67%)
- Age range 15-47
- Mean age = 23
- 45% of patrons <21 years
- 93% not the first time they had used illegal drugs
- majority got drugs from friends (55%), followed by their dealer (28%)





## Percent of people accessing the facility by hour of day



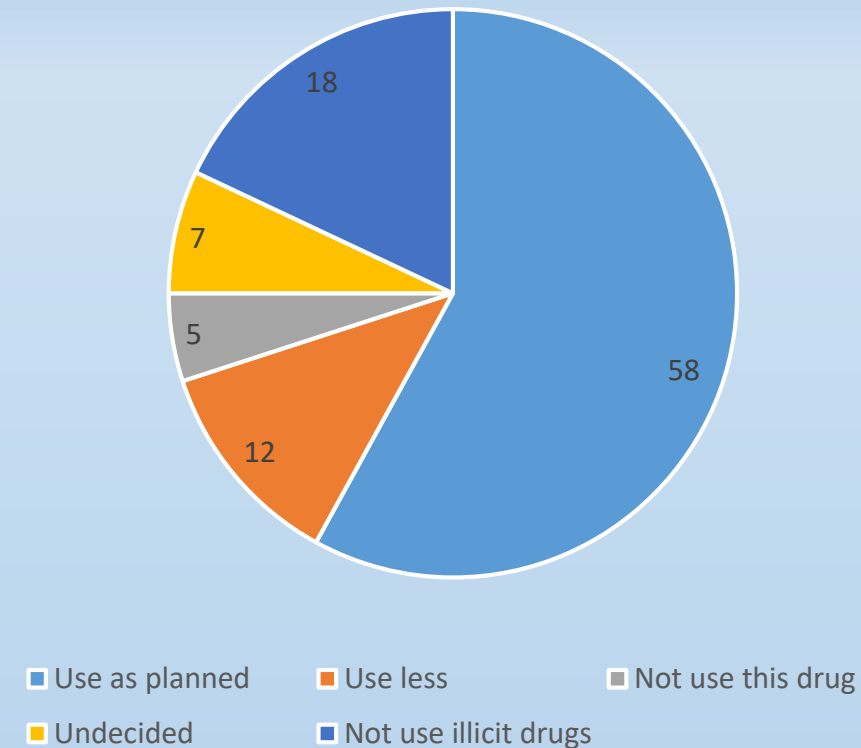
Source: Makkai, T., Macleod, M., Vumbaca, G., Hill, P., Caldicott, D., Noffs, M., Tzanetis, S., Hansen, F., 2018, Report on Canberra GTM Harm Reduction Service, Harm Reduction Australia.  
<https://www.harmreductionaustralia.org.au/wp-content/uploads/2018/06/Pill-Testing-Pilot-ACT-June-2018-Final-Report.pdf>

## SAFETY GUIDELINES

- Sign a waiver before testing is possible (must have capacity to sign waiver)
- Photography strictly prohibited
- Phones held by staff prior to entering the tent
- Anonymous service – collected de-identified information for evaluation purposes only
- Patrons with large amount of a substance (deemed a commercial quantity), refused service
- Patrons with signs of illness or intoxication referred to on-site health or welfare services
- Any anti-social behaviour reported to on-site security and/or police

# Concordance and Intended Behaviour

- Analysis of concordance found 43% agreement between patron's expectation and what was found; much lower than other findings internationally (80%, The Loop, UK)\*
- 41% reported they were very surprised at the result of the test; 19% reported they were somewhat surprised
- 35% reported they would change their use patterns; 7% undecided
- 8% (n=6) reported they would discard the drugs, while 11% were still unsure what to do; consistent with other findings internationally (The Loop, UK)\*



\*<https://www.abc.net.au/triplej/programs/hack/how-pill-testing-works-in-the-united-kingdom/9146380>

# PATRON EXPECTATIONS & SUPPLY SOURCES

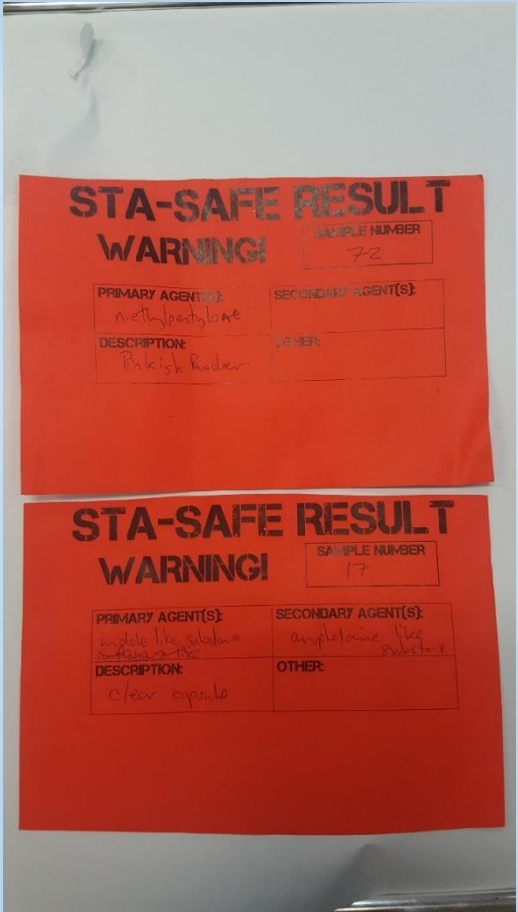
	Number	Percent
Expectation of drug type (n=83)		
MDMA	70	84
Cocaine	3	4
Ketamine	2	2
Endone	1	1
Meth	1	1
PMA	1	1
Unknown	5	6
Where they got drugs (n=82)		
Dealer	23	28
Friends/acquaintance	47	57
Found it	6	7
Online	4	5
Other (a)	2	2
Their source of information (n=82)		
Already tried	6	7
Dealer said	51	61
Friends said	13	16
Online	6	7
Found it	6	7

(a) Other includes prescribed and rather not say

Source: Makkai, T., Macleod, M., Vumbaca, G., Hill, P., Caldicott, D., Noffs, M., Tzanetis, S., Hansen, F., 2018, Report on Canberra GTM Harm Reduction Service, Harm Reduction Australia.  
<https://www.harmreductionaustralia.org.au/wp-content/uploads/2018/06/Pill-Testing-Pilot-ACT-June-2018-Final-Report.pdf>

# Classification and reporting of detected substances

WHITE	Where a substance was analysed, and was the same as what the patron anticipated that it might be
YELLOW	Where a substance was analysed, and there was a significant disparity between the result and what the patron anticipated that it was
RED	<p>Where a substance was analysed, and revealed the presence of a substance known to be associated with increased harm / multiple overdoses/ death</p> <p>Where a substance was analysed and returned an ambivalent result, or functional groups known to be associated with significant harm</p>



# OFFICIAL RESPONSES

## **ACT Health Minister Meegan Fitzharris**

*The trial was a success and had shown there was a demand for the service. This will assist to better understand how pill testing may help reduce the harms of illicit drug use at festivals and will inform next steps and future drug policy. As the first trial to be conducted in Australia, I know that other jurisdictions will be looking on with interest to see the results of the evaluation. We look forward to releasing the evaluation once complete*

## **ACT Chief Police Officer Justine Saunders**

*Our intention was to focus our efforts on those who were trafficking and selling drugs, focusing on the criminality of drugs but allowing the pill testing to occur in a safe way. The day overall was a great success. We are not in the business of targeting people who abuse drugs. We're very focused on criminality, focused on the selling and trafficking of drugs at these events.*

## **ACT Chief Health Officer Dr Paul Kelly**

*If we continue to do what we have been doing for the past 20 or 30 years in relation to drug policy, we will continue to get the issues that we face at festivals and other places every weekend and day in day out in Australia of kids putting themselves in harm. At least with pill testing, they have some information to guide their behaviour and we did see yesterday people changing their behavioural choices on the basis of the information they were given. The trial was a success and the lessons learned would be really valuable for the ACT and other jurisdictions around Australia.*

## **ACT Ambulance Commander Toby Keen**

*We didn't see anyone who'd been to pill-testing. It's worthwhile noting the people we transported for acute intoxication hadn't been to pill-testing which I think is actually a good success marker for the pill-testing.*



## RECOMMENDATIONS & FUTURE DIRECTIONS

1. That further front-of-house pill testing, as part of a commitment to harm reduction services, be supported in the ACT.
2. That appropriately sized and signed facilities for front-of-house pill testing be negotiated with all relevant stakeholders in a timely manner prior to events.
3. That Australian state and territory governments engage in discussions with their relevant ACT counterparts on the introduction of medical and peer based front of house pill testing services.
4. That Australian state and territory governments utilise the significant practical and strategic knowledge of the STA-SAFE consortium in their deliberations on the introduction of pill testing.
5. That the federal government take a national leadership role in advancing a mixed-model approach to pill testing as a harm reduction service across Australia, where front-of-house testing services are delivered on site at music events and festivals, as well as at fixed locations, such as participating public health, drug and alcohol and needle and syringe programs.
6. That all levels of government work together with the STA-SAFE consortium to establish a national pill testing evaluation framework, as well as an ongoing public early warning system (EWS) of all drug test results.

# MYTHBUSTING

## **“It will send a message to young people that using drugs is acceptable”**

This is an oft used argument against many harm reduction programs. It ignores the evidence that health professionals engaging with people using drugs often results in lower levels of drug use, lower levels of harms and increased access to treatment and other services for people in need of such help.

The alternative is to send a message of don't use drugs and if you do we will punish you. A message that lacks compassion, honesty and an understanding of human nature and behaviour.

## **“Young people will be told that it's safe to use drugs after testing and be at greater risk of harm”**

This is just not true. At no time are patrons attending pill testing programs advised that it's safe to use drugs. The evidence is clear that people are more likely to discard their drugs after testing than consume at harmful levels.

## **“Pill testing cannot take into account individual physiological conditions making any advice inaccurate”**

This is true but it is hardly reasonable to withhold information on the contents of a product that is about to be consumed by a member of the public on the basis that a full medical check must also be provided to individualise every piece of advice. It is unclear why such concerns are not raised about the information provided when alcohol, tobacco, over the counter pharmaceuticals, junk food etc. are sold to members of the general public.

## MYTHBUSTING

### **“The pill testing equipment used is not the same as that used in forensic laboratories”**

Again, this is true but the equipment used and operated by qualified technicians is of a far higher standard and quality than the reagent testing kits legally available and used by members of the community. Any field testing equipment will be of a lesser standard than that available in multi-million dollar laboratories but again it could be raised why such concerns are not raised with the technology of hand-held random breath and drug test equipment operated by police when compared to the laboratory equipment available.

### **“There is a liability on governments if someone uses the pill testing service and comes to any harm”**

One can only assume that the most harmful drugs in our society, alcohol and tobacco, are somehow exempt from such liability for the manufacturers and retailers of these drugs and the governments that earn significant revenue from their sales. The protocols in place around pill testing can never claim to prevent all harms despite our best efforts, such is human behaviour. However, it certainly reduces the likelihood of harm.

# Letter to All Governments & Oppositions

I am writing to you on behalf of the Safety Testing Advisory Service At Festivals and Events (STA-SAFE) Consortium to bring to your attention the report we recently released on the first sanctioned pilot pill testing program in Australia.

The full report can be accessed at: [Pill-Testing-Pilot-ACT-June-2018-Final-Report.pdf](#)

As you may be aware, with the support of the ACT Government, including ACT Health and ACT Police, as well as the University of Canberra (the site where the festival was held), and the *Groovin the Moo* (GTM) festival promoters (Cattleyard), the STA-SAFE Consortium was able to deliver a pill testing pilot at the GTM Festival on 29<sup>th</sup> April 2018.

The pilot was acknowledged as overwhelmingly successful by key stakeholders and the service was very well received by festival patrons. In addition, the pilot provided an important range of data and other information for our key stakeholders in the ACT.

The recommendations and future directions from the pill testing pilot were as follows:

- That further front-of-house pill testing, as part of a commitment to harm reduction services, be supported in the ACT.
- That appropriately sized and signed facilities for front-of-house pill testing be negotiated with all relevant stakeholders in a timely manner prior to events.
- That Australian state and territory governments engage in discussions with their relevant ACT counterparts on the introduction of public health and peer based front-of-house pill testing services.
- That Australian state and territory governments utilise the significant practical and strategic knowledge of the STA-SAFE consortium in their deliberations on the introduction of pill testing.
- That the federal government take a national leadership role in advancing a mixed-model approach to pill testing as a harm reduction service across Australia, where front-of-house testing services are delivered on site at music events and festivals, as well as at fixed site locations, such as participating relevant health organisations, alcohol and other drug services and needle and syringe programs.
- That all levels of government work together with the STA-SAFE consortium to establish a national pill testing evaluation framework, as well as an ongoing public early warning system (EWS) of all drug test results.

Accordingly, representatives of the STA-SAFE Consortium, which is comprised of Harm Reduction Australia, the Australian Drug Observatory (based at the Australian National University) the Noffs Foundation, DanceWize (Harm Reduction Victoria), and Students for Sensible Drug Policy Australia, would like to meet with you and relevant Ministerial and Departmental officials to discuss these recommendations with a view to conducting a pilot pill testing program in your jurisdiction.

# TRANS-TASMAN PILL TESTING CHARTER

## Shared Understanding

The signatories to this document have a united view on the key principles that should underpin the delivery of any pill testing services, they are as follows:

### Front of House Testing

‘Front of House’ is an adopted term from Europe, which refers to ensuring an interaction in real-time, and face-to-face between those testing pills and those presenting their pills for testing. It involves a direct exchange of information and delivery of services within a harm reduction framework. In contrast, ‘Back of House’ testing refers to the testing of pills that have been just seized, discarded or placed within an amnesty bin, and is delivered in partnership with law enforcement agencies as an intelligence gathering exercise and minimal, if any, direct interaction with people using pills.

### No fee for service

Pill testing services should be delivered as a universal public health and harm reduction measure. This means not constructing any barrier to participation by requiring any financial contribution from the people presenting their pills for testing, either by requiring payment from the consumer or from festival and event promoters.

# TRANS-TASMAN PILL TESTING CHARTER

## Shared Understanding

### Peer Driven

Pill testing services should involve peers and young people in all stages of its design, development and delivery. This is to ensure these programs are relevant, appropriate and able to attract and engage with people that should be utilising these services.

### Information Sharing

As part of any proper approach to expand evidence informed public health and harm reduction policies and programs, it is vital that experiences, expertise and data be shared and wherever possible, be made publicly available.

### Open Science

As an emerging intervention contributing to wider public health, it is appropriate for supporters of pill testing to embrace the concepts of 'open science'. 'Open Science' represents a commitment to making scientific research, data and dissemination accessible to all levels of an inquiring society, amateur or professional. It includes, but is not limited to, publishing [open research](#), advocating for the scientific process, and the communication of scientific knowledge independent of political imperative



# FUNDRAISING

Dear Colleagues & Friends

As you would be aware, in order to continue our work to introduce front of house pill testing more widely in the ACT and nationally, HRA has committed to raising funds for all future front of house pill testing pilot programs.

In order to raise the minimum \$100,000 required to fund further trials, including the lease and purchase of equipment needed, HRA is offering individuals and organisations the opportunity to donate funds and be publicly listed as 'honorary shareholders' for all future pill testing pilot programs.

All donations (honorary share purchases) can be made to Family Drug Support (see details below) and are tax deductible.

Shareholder Listings Available:

- Platinum Listing      4 shares      \$ 2,000
- Gold Listing          3 shares      \$ 1,500
- Silver Listing        2 shares      \$ 1,000
- Bronze Listing       1 share       \$ 500

'Honorary shareholders' will also have the choice of being listed as individuals, organisations, and corporations or as anonymous.

Given that some organisations and individuals may not have the capacity to purchase these honorary shares, HRA will also accept donations of any amount under \$500 in a separate category as 'supporters'.

HRA will also list organisations and individuals unable to make any financial contribution but who wish to have their support for pill testing publicly acknowledged on our website.

**THANK YOU**

Please Join HRA

[www.harmreductionaustralia.org.au](http://www.harmreductionaustralia.org.au)