The effectiveness of the Illicit Drug Diversion Initiative in rural and remote Australia
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The effectiveness of the Illicit Drug Diversion Initiative in rural and remote Australia

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## Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>ADD</td>
<td>All Drug Diversion (WA)</td>
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<tr>
<td>AIHW</td>
<td>Australian Institute of Health and Welfare</td>
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<tr>
<td>ANCD</td>
<td>Australian National Council on Drugs</td>
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<tr>
<td>ASGC</td>
<td>Australian Standard Geographical Classification</td>
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<tr>
<td>CCS</td>
<td>Cannabis Cautioning Scheme (NSW)</td>
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<tr>
<td>CIN</td>
<td>Cannabis Infringement Notice (WA)</td>
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<tr>
<td>COAG</td>
<td>Council of Australian Governments</td>
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<td>CREDIT NT</td>
<td>Court Referral and Evaluation for Drug Intervention and Treatment (NT)</td>
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<tr>
<td>DoHA</td>
<td>Australian Government Department of Health and Ageing</td>
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<tr>
<td>IDCDP</td>
<td>Illicit Drugs Court Diversion Program (Qld)</td>
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<td>IDDI</td>
<td>Illicit Drug Diversion Initiative</td>
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<td>IDDI NMDS</td>
<td>Illicit Drug Diversion Initiative National Minimum Data Set</td>
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<td>IDP</td>
<td>Indigenous Diversion Program (WA)</td>
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<td>IGCD</td>
<td>Intergovernmental Council on Drugs</td>
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<td>KADW</td>
<td>Koori Alcohol and Drug Diversion Workers (Vic)</td>
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<td>MCDS</td>
<td>Ministerial Council on Drug Strategy</td>
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<td>MERIT</td>
<td>Magistrates Early Referral Into Treatment (NSW)</td>
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<td>PDDI</td>
<td>Police Drug Diversion Initiative (SA)</td>
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<tr>
<td>PDP</td>
<td>Police Diversion Program (Qld)</td>
</tr>
<tr>
<td>POP</td>
<td>Pre-sentence Opportunity Program (WA)</td>
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<tr>
<td>QIDDI</td>
<td>Queensland Illicit Drug Diversion Initiative</td>
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<tr>
<td>RODW</td>
<td>Rural Outreach Diversion Workers (Vic)</td>
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<tr>
<td>STIR</td>
<td>Supervised Treatment Intervention Program (WA)</td>
</tr>
<tr>
<td>YORR</td>
<td>Young Offenders’ Residential Rehabilitation (NSW)</td>
</tr>
<tr>
<td>YORRC</td>
<td>Young Offenders’ Rural and Regional Counselling (NSW)</td>
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<td>YPOP</td>
<td>Young Persons Opportunity Program (WA)</td>
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Executive summary

Project objectives

The Australian Institute of Health and Welfare (AIHW) was commissioned by the Australian Government Department of Health and Ageing (DoHA) to evaluate the effectiveness of the Council of Australian Governments’ (COAG) Illicit Drug Diversion Initiative (IDDI) in rural and remote areas of Australia. This report presents the project findings.

It was agreed at the outset of the project that effectiveness would be evaluated in relation to the following objectives, namely that drug diversion will result in:

1. people being given early incentives to address their drug use problem, in many cases before incurring a criminal record
2. an increase in the number of illicit drug users diverted into drug education, assessment and treatment
3. a reduction in the number of people being incarcerated for use or possession of small quantities of illicit drugs.

The first two objectives were the initial stated aims of the IDDI, while the third objective was modified by the Australian Government Department of Health and Ageing to reflect the emergence of court-based models of drug diversion under the IDDI.

Project method

The project method included quantitative and qualitative streams, conducted between September 2006 and June 2007. While the IDDI commenced in 1999–2000, this study focused on the period 2002–03 to 2005–06 as the implementation stages of the initiative had previously been evaluated (HOI et al. 2002).

Quantitative data were requested from 22 IDDI programs operating in rural and remote areas of Australia. Data managers were asked to supply aggregate information that is routinely provided under the IDDI performance reporting arrangements, broken down according to whether the offender lived in rural and remote or other areas of the jurisdiction.

Early tasks in the qualitative stream included a literature review, developing detailed descriptions of all IDDI programs operating in rural and remote Australia, and developing agreed definitions and indicators. The latter part of the project involved extensive field work, including interviews with IDDI State/Territory Reference Group members in capital cities (61 people from health, justice, police and non-government sectors) and with 150 people involved in delivering IDDI programs in 16 rural and remote locations across Australia (magistrates, police, and drug and alcohol service providers).

Due to the large number and diversity of IDDI programs operating in rural and remote Australia, cross-program and cross-jurisdiction comparisons are not a feature of this report. Individual IDDI-funded programs are not evaluated. The project takes a ‘strengths and weaknesses’ approach, exploring existing program models and identifying factors that appear to act as barriers or facilitators to their effectiveness in rural and remote areas. While
investigation focused on the factors that were likely to have a substantial influence on the effectiveness of IDDI programs in rural and remote settings, many of the findings may have relevance to the IDDI across Australia. The report highlights only those issues that were raised by several people and across locations, and which were considered by the study team to have national significance.

Study limitations include that:

- input was not sought directly from offenders
- input was not sought from stakeholders other than those directly involved in IDDI programs
- there are limitations on the data currently available under the IDDI National Minimum Data Set (NMDS).

**Key findings**

**IDDI programs in rural and remote Australia**

Since its announcement in 1999, the IDDI has contributed to the development or expansion of over 22 programs in rural and remote Australia. This relatively young initiative is a large and complex response to drug use—spanning the health, police and justice sectors, and involving state/territory and Australian governments and the government and non-government drug and alcohol service delivery networks. The initial IDDI framework focused on police diversion but was adapted early in the life of the Initiative to include court diversion. Police diversion generally involves issuing a caution in conjunction with referral (voluntary or compulsory) to an education session, assessment and/or a brief intervention or treatment. Court diversion generally involves a more intensive intervention, with a target group that has more complex drug and alcohol, criminal and other issues. Accounting for nearly one-quarter of all diversions in rural and remote Australia in 2005–06, court diversion has emerged as a major component of the IDDI in practice.

**Diversion numbers in rural and remote Australia**

**IDDI police diversion programs**

In 2005–06, there were 24,804 diversions under IDDI-funded police diversion programs, of which 6,041 (24%) were classified as occurring in rural and remote Australia. The proportion of all police diversion participants living in rural and remote locations (24%) is well above the proportion of people in the general population living in these locations (13%).

Overall numbers of people diverted under police diversion programs in rural and remote Australia generally increased between 2002–03 and 2005–06, consistent with an overall increase in police diversion numbers in Australia as a whole. However, there is wide variation across individual IDDI police diversion programs both in terms of the proportion of diversions conducted in rural and remote areas and changes over time in the numbers of diversions in rural and remote areas.
The proportion of offenders complying with their diversion requirements varied widely. For programs with available data, completion rates ranged from 56% to 95%. Completion rates were generally similar for rural and remote areas and the rest of the state/territory.

**IDDI court diversion programs**

In 2005–06, there were 7,872 diversions under IDDI court diversion programs, of which 2,001 (25%) were classified as being in rural and remote Australia.

Overall numbers of people diverted under court diversion programs in rural and remote Australia generally increased between 2002–03 and 2005–06, in line with an overall increase in court diversion numbers in Australia overall. This increase is also consistent with the deliberate staged rollout of court-based IDDI programs in most states and territories. This trend over time varied widely across individual IDDI court diversion programs.

In 2005–06, offenders referred to court diversion programs in rural and remote areas were equally or more likely to be accepted into the diversion program than those in other areas of the state/territory. In the majority of programs for which data are available, the completion rate for court diversion programs was higher in rural and remote areas than in other areas of the jurisdiction.

**The effectiveness of the IDDI in rural and remote Australia**

While some information is available about the inputs and outputs of the IDDI, there is limited information about the outcomes of the Initiative. However, through this study, considerable qualitative information was gathered about the effectiveness of the processes of various IDDI program models. Based on the assumption that good program processes are a firm foundation for good program outcomes, Box S1 summarises the program elements considered by the study team to be the most effective in rural and remote Australia.

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**Box S1: Which IDDI processes or characteristics are most effective in rural and remote Australia?**

*Based on the qualitative information gathered during the study, the most effective processes or characteristics in IDDI-funded programs in rural and remote Australia were observed in court diversion programs which:*

- targeted young people
- allowed drug diversion for alcohol as the primary drug of concern
- were supported philosophically and practically by magistrates and drug and alcohol service providers
- had well-established communication mechanisms between magistrates, drug and alcohol service providers and other relevant stakeholders at the local level
- involved a considerable period of treatment (for example, three months)
- included high-quality case management to assist in addressing clients’ broader social and health issues
- had access to an appropriate range of treatment options
- were able to support clients with barriers to treatment, most notably transport barriers
Consistent with previous Australian studies of drug diversion, the qualitative evidence gathered during this project suggests that Indigenous people are particularly disadvantaged in terms of accessing and completing diversion programs. The exclusion under the IDDI framework of offenders who have alcohol as a primary drug of concern or who have any history of violent offences is widely viewed as having a disproportionately negative impact on Indigenous communities. A number of recently-implemented Indigenous-specific court diversion programs have largely addressed these and a range of other identified barriers to Indigenous participation. However, the availability of suitable treatment options for Indigenous offenders, particularly in remote and very remote areas, remains a major obstacle.

In terms of the three overall objectives of the IDDI, it was only possible to evaluate the second objective—increased numbers of diversions over time—using the established reporting mechanisms for the Initiative. Throughout this study, quantitative and qualitative evidence was sought to inform the remaining two IDDI objectives. However, on the basis of this evidence, it is not clear whether these objectives are being achieved in rural and remote Australia.

Based on the evidence gathered throughout the project, it is considered that the effectiveness of the IDDI would be better understood through:

- the availability of improved national data about IDDI programs and alignment of this data with the overall objectives of the Initiative
- further targeted studies to investigate longer-term outcomes for people entering diversion programs.