Penington Institute, a not-for-profit organisation, has grown out of the rich and vibrant work of one of its programs - Anex, and its close to 20 years experience working with people directly affected by problematic drug use.

The institute is inspired by and named in honour of Professor Emeritus David Penington AC, one of Australia’s leading public intellectuals and health experts, who has long been a courageous advocate for rational solutions to drug problems and the prevention of HIV/AIDS.

Our aim is to help communities have more effective, cost-efficient and compassionate ways to prevent and respond to drug use problems.

**HOW WILL WE DO THIS?**

Penington Institute will advance health and community safety by connecting substance use research to practical action.

We will achieve change through research analysis, policy formation, workforce development, networking and community education.

Importantly, our promotion of evidence-based approaches is grounded in the experiences of individuals, families and communities who are grappling with the challenges posed by drug use, as well as perspectives of the agencies and organisations providing services at the front line.

Australia does not lose the strength of Anex with the launch of Penington Institute. Anex stays a strong and trusted program of the Penington Institute, staying close to its roots in leadership of Australia’s needle and syringe programs. Anex staff will continue to deliver training and other workforce development to this vital public health program, acknowledged for having saved tens of thousands of lives by reducing blood-borne virus transmission.

In addition, Penington Institute continues to lead International Overdose Awareness Day, to coordinate the Community Overdose Prevention and Education program (COPE), and through its Lucid program, to offer employers much-needed consulting on the management of drug and alcohol issues in the workplace.

The institute will provide the framework and infrastructure to allow Anex, Lucid, International Overdose Awareness Day and COPE to concentrate on their core work and allow the organisation to grow and work in new areas of drugs policy.

**WHY A NEW ORGANISATION? WHAT IS THE NEED?**

**The problem**

Each year billions of dollars are spent on law enforcement, which will never entirely prevent the flow of drugs in the community; not while there is still a raging appetite for them.

The Australian Bureau of Statistics has calculated that in 2010, Australians spent an estimated $7.1 billion on cannabis, amphetamines, ecstasy, heroin and cocaine. This estimate does not include the illicit trade in pharmaceutical drugs, which is an enormous and growing issue in Australia. Neither does it include spending on non-prescribed steroids and peptides, which are also growing in popularity. It is therefore likely that Australians spend at least $8 billion a year on illicit drugs.

Long-standing and unresolved illicit drug issues are being compounded by the emergence of new drugs, such as synthetic cannabinoids, and rising purity of others. Current data suggest that overdose deaths related to opioid use are on the rise again, and we have increasing evidence that crystal methamphetamine use is having serious impacts on emergency and welfare services, not to mention the individuals and families directly involved.
Solutions to drug problems that rely on prohibition give rise to loss of workforce productivity through incarceration and lack of job prospects on release, unresolved drug and mental health problems, as well as disruptions to relationships with families and communities.

Our challenge is to find effective ways to promote health and wellbeing and reduce initiation of drug use. We also need to consider what it takes to keep people who use illicit drugs functioning as contributing members of our society, bridging the relationship between illicit drug use and labour market and economic participation – rather than just stigmatising them or locking them up in prisons.

The potential for new strategies

Penington Institute aims to offer fresh perspectives on what governments and civil society could do to improve the lives of all Australians.

We need to find more appropriate prevention paradigms to reduce the uptake of drugs and progression to problematic use.

Our hope is that the launch of Penington Institute will help re-invigorate policy debates about how best to tackle problematic drug use. It is essential there be more rational, evidence-based and efficient approaches to spending taxpayers’ money in relation to drugs.

WHAT ARE SOME OF THE POSITIONS PENINGTON INSTITUTE TAKES?

HIV and hepatitis C are communicable diseases that pose serious risks to the wider community, and preventing their transmission is a public health imperative. The evidence that needle and syringe programs (NSPs) and opioid substitution therapy (OST) are effective in averting HIV infections is compelling. They reduce HIV transmission, decrease mortality, reduce drug dependency, reduce crime and disorder, and improve quality of life.

The incarceration of people who use drugs, the criminalisation of drug use, and drug policies that restrict access to health programs such as the above increase vulnerability to HIV and hepatitis C.

Drug use amongst prison entrants is common, especially amongst those under 40 years of age. A 2012 study by the Australian Institute of Health and Welfare reported that 70% of prison entrants had used illicit drugs in the previous 12 months.

In addition, the AIHW 2011 study identified approximately 68 per cent of Indigenous prison entrants self accounted the use of illicit drugs during the previous 12 months. Of all Indigenous prisoners, those aged 18–24 years old were most likely to have used illicit drugs (76%).

The degree of illicit drug use amongst prison entrants, and the cycle of re-imprisonment for those incarcerated indicate more should be done to address illicit drug use amongst offenders. Treatment in prison and diversion into drug treatment for low-level offenders could potentially disrupt a criminal career trajectory. Intervention programs for juvenile offenders have shown diversion to be highly effective in reducing crime.

Penington Institute acknowledges the value of existing programs in the justice system to provide treatment in prison and diversion opportunities for low-level offenders, but believes more could be done to interrupt young people’s drug use even before they ever appear before a court. Partnerships with police and other justice officers could be strengthened to improve referral pathways into treatment for young, low-level offenders.

The knowledge base around effective alcohol and drug prevention education is increasingly sophisticated, and certainly some secondary school systems in Australia have developed and/or adopted high quality resources for use in school settings. Unfortunately, government policy is increasingly moving away from mandating and providing staff resources for widespread student welfare programs; alcohol and drug prevention education included.

Penington Institute believes a re-evaluation of this policy approach is warranted. Whether mandated or not, more secondary schools should be encouraged to introduce evidence-based student welfare programs and alcohol and drug prevention education included.

More than just the provision of information, school-based programs should also involve evidence-based policies and procedures for dealing with students who are already experimenting with illicit drugs. Punitive approaches such as suspension or expulsion from school are not beneficial. Connectedness to school is a key protective factor for current and future wellbeing. Effective referral into mental health, family therapy and drug treatment programs will have far greater positive outcomes. Ensuring referral pathways are functioning strongly is therefore vital.
Similar approaches should be supported for implementation through big employers in sectors with high rates of drug and alcohol use, such as hospitality, transport, construction. Supplying employers with evidence-based toolkits and training for promoting awareness of the risks of substance misuse, for identifying related behaviours and applying evidence-based policies to respond, including referral to treatment through Employee Assistance Programs is a worthwhile prevention strategy.

Peer based programs in workplace settings addressing substance abuse are also a promising approach. For instance, a U.S. workplace peer-focused substance abuse program in the transportation industry focused on changing workplace attitudes towards on-the-job substance use in addition to training workers to recognise and intervene with colleagues who have a problem. The program was associated with an approximate one-third reduction in injury rate, representing a benefit-cost ratio of 26:1.

**WHAT IS UNIQUE ABOUT PENINGTON INSTITUTE?**

Drug use trends, drug development and markets move faster than research and policy responses.

Penington Institute is flexible and responsive, strategically shaping agendas as trends emerge and knowledge gaps become apparent. This is because through our outreach to the front line we are well placed to know what is going on in the community – well before the published literature surfaces the issues.

We add our front-line knowledge and experience to our analysis of the evidence to help support more practical research and policy.

Our strong, diverse networks provide an excellent platform for building widespread support for initiatives. We have a track record in connecting major stakeholders to help generate more effective, cohesive responses.

We take on the hard issues that many others prefer to ignore.

We understand the inherent complexity in drug and alcohol problems and, taking a broad societal perspective on the issues, work across public health, the justice system, business and economics, communications, social welfare and public governance policies.

We seek to engage with the broader community to promote discussion and debate around substance use problems and their potential solutions.

**WHO FUNDS PENINGTON INSTITUTE?**

Penington Institute is funded through a mix of government and philanthropic grants, fee for-service training and facilitation activities, and private donations.

**WHAT ARE THE ORGANISATION’S KEY PAST ACHIEVEMENTS?**

Penington Institute will build on Anex’s 20 year history of working with people directly affected by drug use. Some of our proudest achievements include:

- Producing the highly regarded workforce development publication, the *Anex Bulletin*, which is used by front-line workers to learn about how to respectfully and effectively deliver cost effective needle and syringe program services.
- Leading the public discussion around the potential for saving lives through the expansion of naloxone distribution to community members, resulting in the Victorian Government funding of the Community Overdose Prevention and Education program (COPE).
- Generating support among leading medical professionals and eminent Australians for the trial of a regulated needle and syringe program in prison – a policy adopted by the ACT Government.
- Creating the breakthrough seminar series ‘Harmaceuticals’ to highlight the increasing rates of pharmaceutical misuse and related overdose.
- Establishing the Network of Victorian Pharmacotherapy Service Providers, uniting health workers and service providers and influencing increased pharmacotherapy system funding.
- Arguing for and developing the world’s first national Needle and Syringe Program Strategic Framework.