

Magistrates Early Referral Into Treatment Program

2020 Annual Report

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Introduction

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1.1 What is MERIT?

MERIT is a voluntary, pre-plea program for adults in the Local Court who have issues related to their Alcohol and Other Drug (AOD) use. MERIT provides access to a wide range of AOD treatment services for 12 weeks while court matters are adjourned.

This program has operated since 2000 and is available in 62 of the 137 NSW Local Courts:

- Drug MERIT is available in 55 courts
- Drug and Alcohol MERIT (D&A MERIT) is available in 7 courts, where alcohol can be the principal drug of concern (PDC) for participants

1.2 Aims of the MERIT program

MERIT aims to intervene in the cycle of drug use and crime by addressing health and social welfare issues that may bring defendants into contact with the criminal justice system.

MERIT has shown to have positive outcomes for participants. Some of the benefits may include:

- decreased AOD use
- prevent and minimise harms from AOD use
- decreased offending behaviour
- improved health and well-being
- the possibility of a better sentence result
- reduced contact with the criminal justice system

1.3 About the MERIT Annual Report

The Women, Family and Community Safety Directorate, Department of Communities and Justice (DCJ) has prepared this report.

This report provides information about the performance of the Magistrates Early Referral Into Treatment (MERIT) Program between 1 January 2020 and 31 December 2020.

1.3.1 Objectives

MERIT aims to reduce reoffending and improve health outcomes. Therefore, the main objectives of the report is to describe the impact of these factors using the following measures:

- participant drug use frequency (measured pre and post MERIT program intervention)
- participant psychological status (measured pre and post MERIT program intervention)
- recidivism of MERIT program completers and non-completers

1.3.2 Methodology

To prepare this report, data from the 2020 MERIT cohort was analysed using several databases, including:

- MERIT Information Management System (MIMS)
- Local Court Database (Justice Link)
- Re-offending database (ROD)

1.4 MERIT Eligibility and Suitability

A defendant referred to MERIT will be accepted into the program based on whether they meet the eligibility and suitability requirements.

Generally, a magistrate, solicitor or the police will refer a defendant to MERIT. Defendants or their family/friends may also refer to the program.

To be eligible for MERIT the participant must:

- be an adult
- be on bail or not require bail
- not be charged with sexual assault offences, or any offence that will be heard in the District Court

A participant must also:

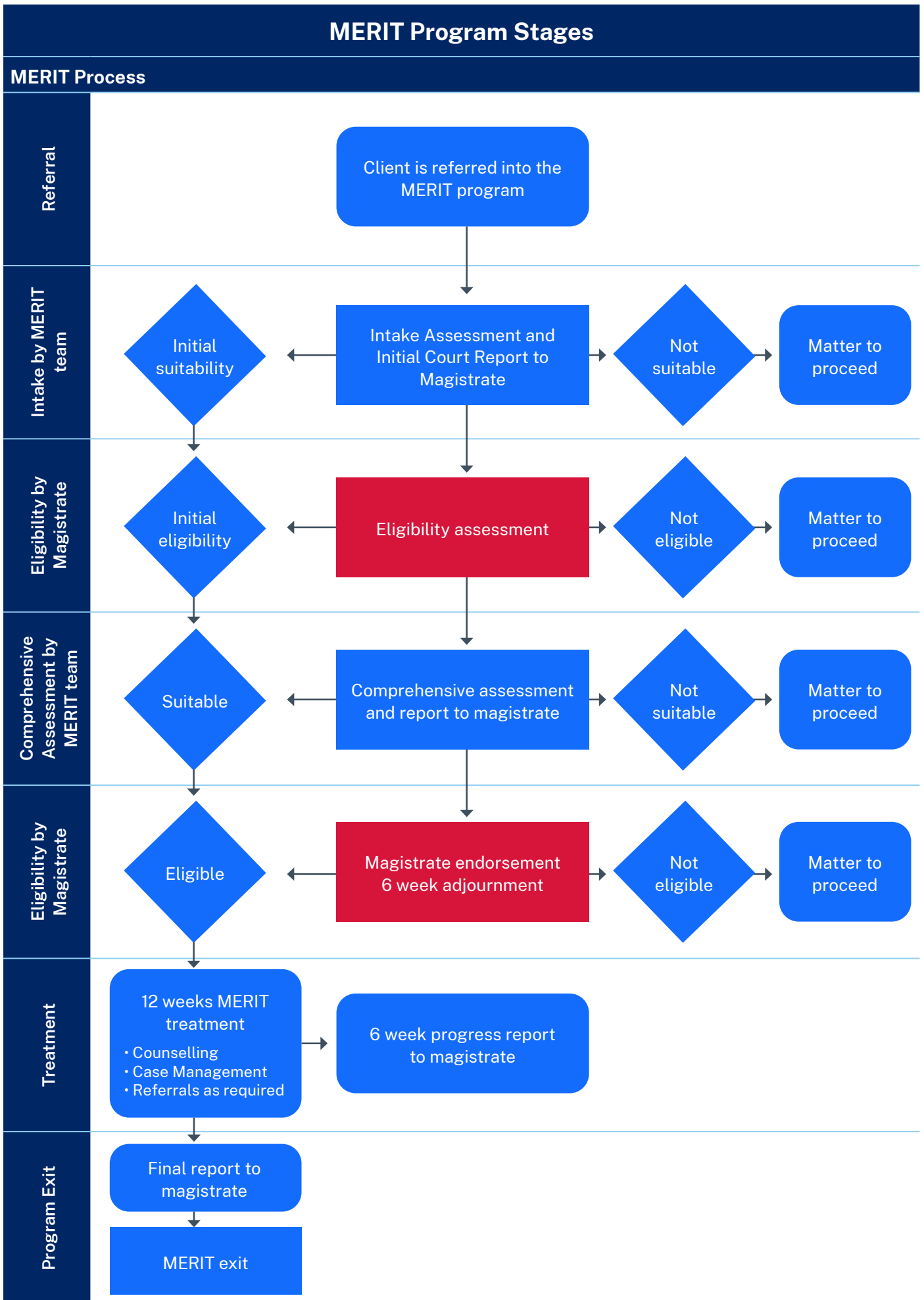
- be suspected of drug use or have a known history of AOD use issues
- have a treatable AOD problem
- live in or have a connection to an area (e.g. full-time work) that provides MERIT
- consent to participate

The MERIT process is described in Figure 1.

1.5 MERIT program partners

MERIT is a multi-agency initiative of the Department of Communities and Justice (DCJ), NSW Health, the Chief Magistrate's Office, Courts Tribunals and Service Delivery, and the NSW Police Force. MERIT also receives strategic and operational support from Legal Aid NSW and the Aboriginal Legal Service NSW/ACT.

Figure 1. MERIT process

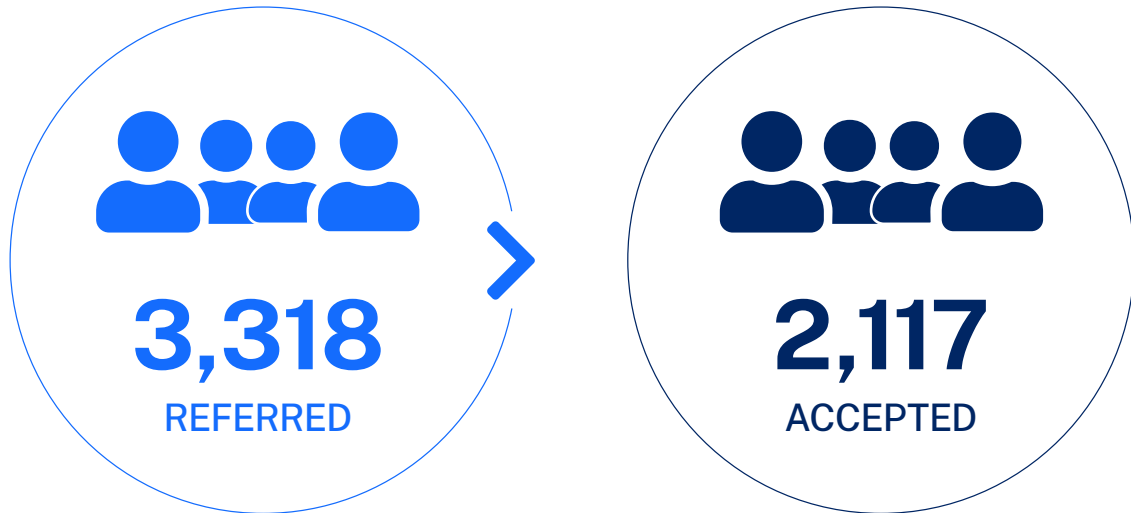


Year in focus

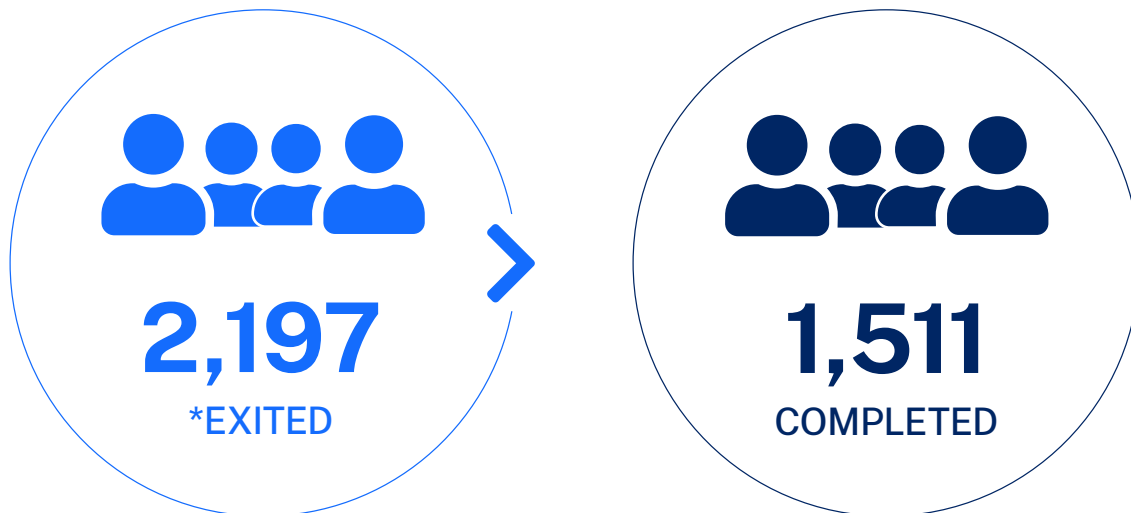
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2.1 Program snapshot

64% of defendants referred were accepted into the program



69% of participants completed the program



**Exited' are participants who have been accepted into the program and exited the program in 2020. This includes people who completed the program ('completers') and 'non-completers.' 'Exited' exceeds 'Accepted' because it includes participants who were accepted in 2019 but exited in 2020.*

2.2 Profile snapshot of accepted participants



41% were in the age ranges of 25–29 and 40–49 years



77% of participants identified as male



18% of participants identified as Aboriginal



The two most common principal drugs of concern (PDC) were methamphetamine (41%) and cannabis (30%)

The top three principal drugs of concern by geographic area were:

- Sydney: Stimulants (56%), Cannabis (26%), Opiates (11%)
- Non-metro Sydney: Stimulants (58%), Cannabis (37%), Opiates (3%)
- Regional NSW: Stimulants (44%), Cannabis (31%), *Alcohol (21%)

**In 2020, Drug and Alcohol MERIT was only available in 7 Local Courts: Wilcannia, Broken Hill, Coffs Harbour, Orange, Dubbo, Bathurst and Wellington.*

2.3 Program Outcomes

2.3.1 Frequency of alcohol and drug use

From MERIT entry to exit, average frequency for all PDC reduced, in particular:

- amphetamine use reduced by 46% (from 12 to 7 average days per month)
- heroin use reduced by 46% (from 12 days to 7 average days per month)
- *alcohol use reduced by 28% (from 10 days to 7 average days per month)
- cannabis use reduced by 23% (from 20 to 16 average days per month)

**In 2020, MERIT Alcohol was only available in 7 regional NSW Local Courts*

2.3.2 Change in psychological distress levels

In 2020, at program exit the proportion of participants reporting high to very high psychological distress reduced by 34%.

- At program entry, 56% of participants reported high to very high psychological distress
- At program exit, high to very high psychological distress reduced to 22%

2.3.3 Criminal justice outcomes

MERIT program completers were less likely to receive a custodial sentence (3% of completers, compared to 13% of non-completers).

The most common sentence outcomes for program completers were a:

- Community Corrections Order (27%)
- Intensive Corrections Order (18%)

MERIT program completers were less likely to reoffend following completion of the MERIT program compared with non-completers:

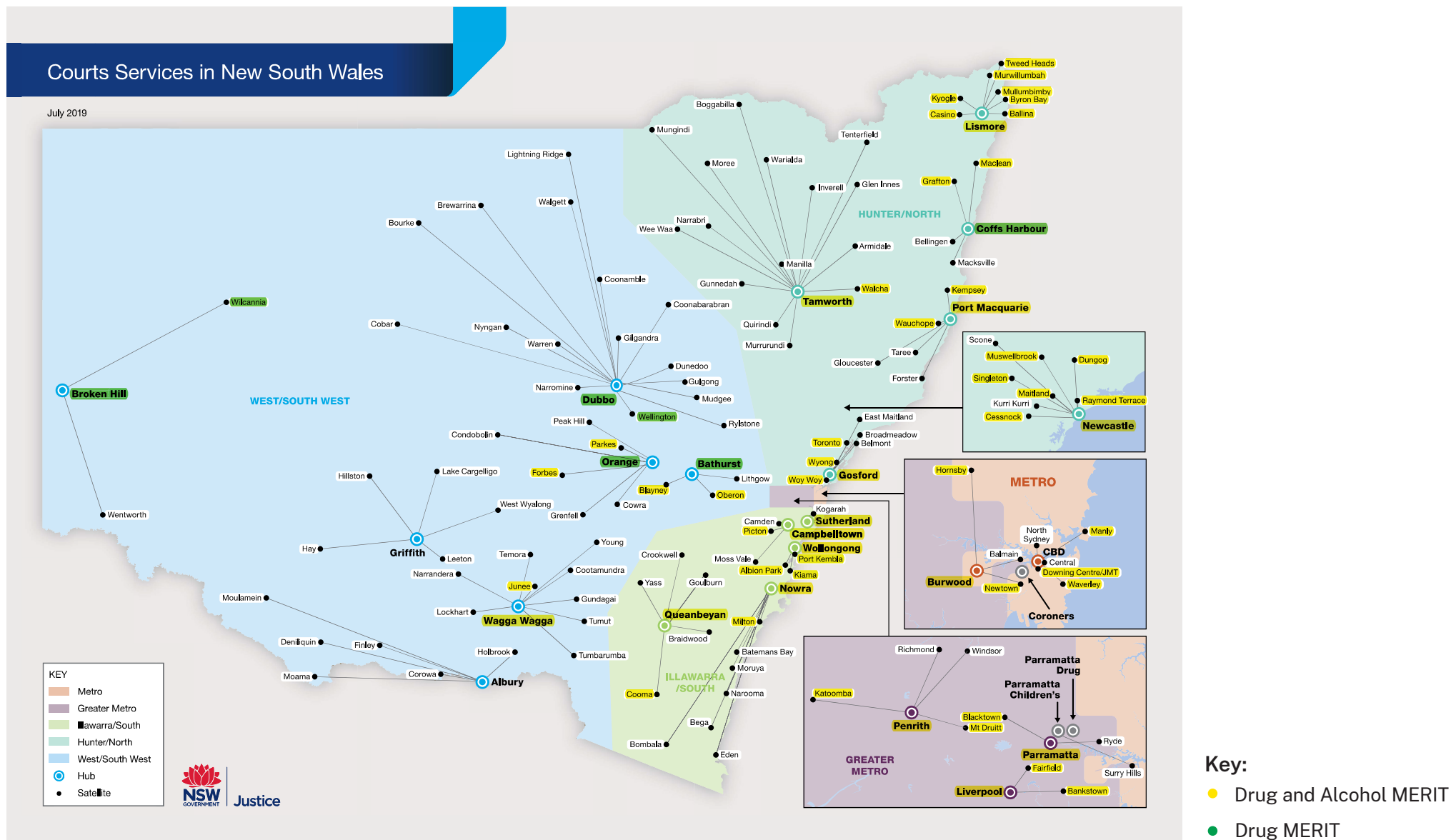
- 17% of program completers were convicted of a new offence in the 12 weeks following commencement of MERIT compared to 41% of program non-completers
- 26% of program completers were convicted of a new offence six months after exiting the program compared to 46% program non-completers
- 38% of program completers were convicted of a new offence 12 months after exiting the program compared to 62% program non-completers

MERIT state-wide coverage

3

In 2020, Drug MERIT operated in 55 Local Courts, and Drug and Alcohol MERIT operated in 7 Local Courts (Wilcannia, Broken Hill, Coffs Harbour, Orange, Dubbo, Bathurst, and Wellington). Figure 2 provides a map of NSW Local Court locations offering MERIT.

Figure 2. MERIT program available across NSW Local Courts



Program referral and acceptance

4

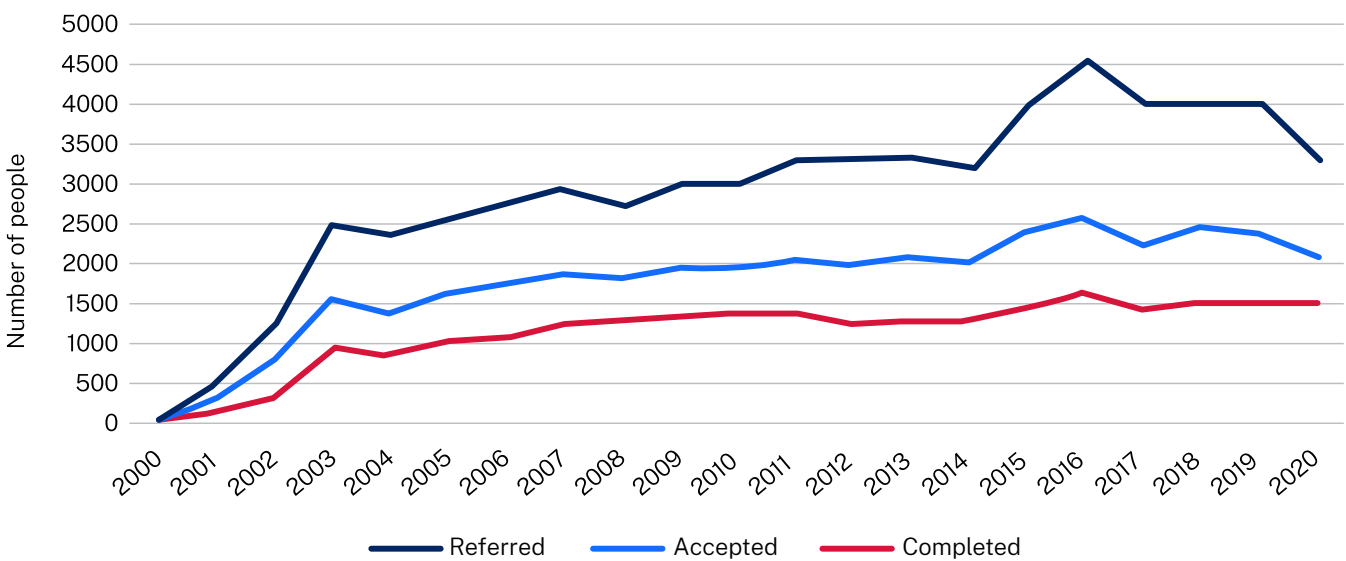
4.1 Program referral, acceptances and completion trends

In 2020, there were 3,318 referrals to the MERIT program, compared to 4,062 in 2019. This decrease of 18% is most likely due to the impacts of COVID-19 on service delivery and access. The program acceptance rate increased slightly in 2020 to 64%, from 59% in 2019.

Some participants referred to MERIT after September 2020 will not complete the program before 31 December 2020. Therefore, completion data for these participants is not included in this report and will be reported in the 2021 MERIT Annual Report.

In the first year of MERIT (2000), 79 defendants were referred to the program, 55 defendants were accepted, and 15 defendants completed the program. Since the program's inception, the number of referrals, acceptance and completions have increased, peaking in 2016. Since 2016, referrals and acceptances have been on a slight declining trend, while completions remained stable.

Figure 3. MERIT referral, acceptances and completions 2000–2020



Please see Appendix A for referral, acceptance and completion figures (2000 to 2020).

4.2 Source of referrals

In 2020, solicitors and magistrates accounted for 72% of the 3,318 referrals, a slight decrease of 4% compared to 2019. Self-referrals increased to 17%, up by 4% compared to 2019. Police, Community Corrections and family member/friend referrals remained low (all below 2%).

Acceptance rates were the highest for referrals made by solicitors (69% acceptance rate), defendants (63%), and magistrates (62%).

Table 1. MERIT referral and acceptance by referral source

Referral Source	No. Referred	Referred %	No. Accepted	% Accepted (from each referral source)
Solicitor	1,209	37%	834	69%
Magistrate	1,191	36%	740	62%
Self	579	17%	366	63%
Police	48	1%	26	54%
Community Corrections	50	2%	23	46%
Family member/friend	39	1%	18	46%
Not recorded	15	0%	6	40%
Other	187	6%	104	56%
Total	3,318	100%	2,117	64%

4.3 Reasons for non-acceptance into MERIT

In 2020, 64% (n=2,117) of defendants referred were accepted into the program, an increase of 5% compared to 2019.

The most common reasons for non-acceptance into the program were unsuitability (50%), ineligibility (33%), and entry not endorsed by magistrate (11%).

There were no significant differences between 2020 and 2019 in reasons for non-acceptance into the program.

Appropriate referrals facilitate access for participants and allow MERIT teams to focus on AOD treatment. MERIT teams monitor the number of inappropriate referrals on a quarterly basis. These teams work with program partners to ensure effective referral pathways are in place and identify and address issues as they arise. See *Appendix B* for the list of MERIT Monitoring Indicators.

Table 2. Reason for non-acceptance (2019 and 2020)

Non-Acceptance category	Reason for Non-Acceptance	N 2019	% 2019	N 2020	% 2020
Not Eligible	No demonstrable AOD problem	267	21%	184	21%
	Not eligible for bail or release	137	11%	90	10%
	Strictly Indictable offence(s)	19	1%	13	1%
	Not an adult	1	0%	0	0%
Total not eligible		424	34%	287	34%
Not Suitable	Unwilling to participate	558	45%	413	47%
	Mental health problem	38	3%	20	2%
	Already in court ordered treatment	8	1%	7	1%
Total not suitable		604	49%	440	50%
Program entry not endorsed by Magistrate	Magistrate Decision	124	10%	99	11%
Program logistics	Resides outside of effective treatment area	19	1%	12	1%
	Program full	21	2%	6	1%
Total Program Logistics		40	3%	18	2%
Other	Other	54	4%	29	3%
Total		1,246	100%	873	100%

4.4 Referrals and acceptances by gender

More males than females are referred and accepted into the MERIT program.

In 2020, 76% of defendants referred were male (n=2,511), 24% were female (n= 784) and 23 defendants preferred not to respond. Seventy seven percent of participants accepted into the program were male (n=1,632) and 23% were female (n=485).

The ratio of male to female defendants accepted into the program was 3:1. This ratio is comparable to women's rate of appearance in the NSW Local Courts¹. Males were slightly more likely to be accepted into the program (65% and 62% respectively). Referral and acceptance rates are monitored on a quarterly basis and these indicators are used to inform local and state-wide strategies to improve access for women into MERIT.

See Appendix B for the list of MERIT Monitoring Indicators.

4.5 Referrals and acceptances by age

Two age categories were more likely to be referred and accepted into the MERIT program. Defendants aged 25-29 years accounted for 20% of referrals, with an acceptance rate of 66%. Defendants aged 40-49 years also accounted for 20% of referrals, also with an acceptance rate of 66%.

Defendants aged 25 to 29 years and 40 to 49 years also had the highest acceptance rates, with rates for both age groups increasing compared to 2019 (by 8% and 4% respectively).

Table 3. MERIT acceptance rates by age (2019 and 2020)

Age	2019			2020		
	Referred	Accepted		Referred	Accepted	
	N	N	%	N	N	%
17*	2	1	50%	1	1	100%
18-20	393	222	57%	299	182	61%
21-24	622	371	60%	470	292	62%
25-29	722	420	58%	647	430	66%
30-34	645	383	59%	529	332	63%
35-39	653	383	59%	484	309	64%
40-49	765	477	62%	655	434	66%
Over 50	247	153	62%	210	137	65%
Total	4,049	2,410	59%	3,295*	2,117	64%

*In 2019 and 2020, several people were referred and accepted into MERIT who were turning 18 in the year of their participation in MERIT.

¹ NSW Criminal Court Statistics, BOCSAR: https://www.bocsar.nsw.gov.au/Pages/bocsar_publication/Pub_Summary/CCS-Annual/Criminal-Court-Statistics-Dec-2022.aspx

4.6 Referrals and acceptances by Aboriginal status

Of the 606 defendants referred to MERIT who identified as Aboriginal, 63% were accepted into MERIT.

As MERIT participants who identify as Aboriginal have historically had lower acceptance rates, MERIT teams monitor the proportion of Aboriginal people referred and accepted on a quarterly basis. These indicators inform local and state-wide strategies to improve access for Aboriginal people into MERIT. See *Appendix B for the list of MERIT Monitoring Indicators*.

Table 4. MERIT acceptance rates by Aboriginal status (2019 and 2020)

Aboriginal Status	2019			2020		
	Referred N	Accepted N	Accepted %	Referred N	Accepted N	Accepted %
Aboriginal	863	528	61%	606	378	63%
Non-Aboriginal	2,825	1,815	64%	2,503	1,698	68%
Unknown/Not Stated*	374	67	18%	209	41	20%
Total	4,062	2,410	59%	3,318	2,117	64%

**If a referred client does not attend their assessment, this results in both their Aboriginality not being captured (categorised as “unknown”) and their non-acceptance into the program (due to non-attendance). This results in low acceptance rates for the “unknown/not stated” category. This category also includes clients who have not disclosed their Aboriginal status.*

4.7 Principal Drug of Concern

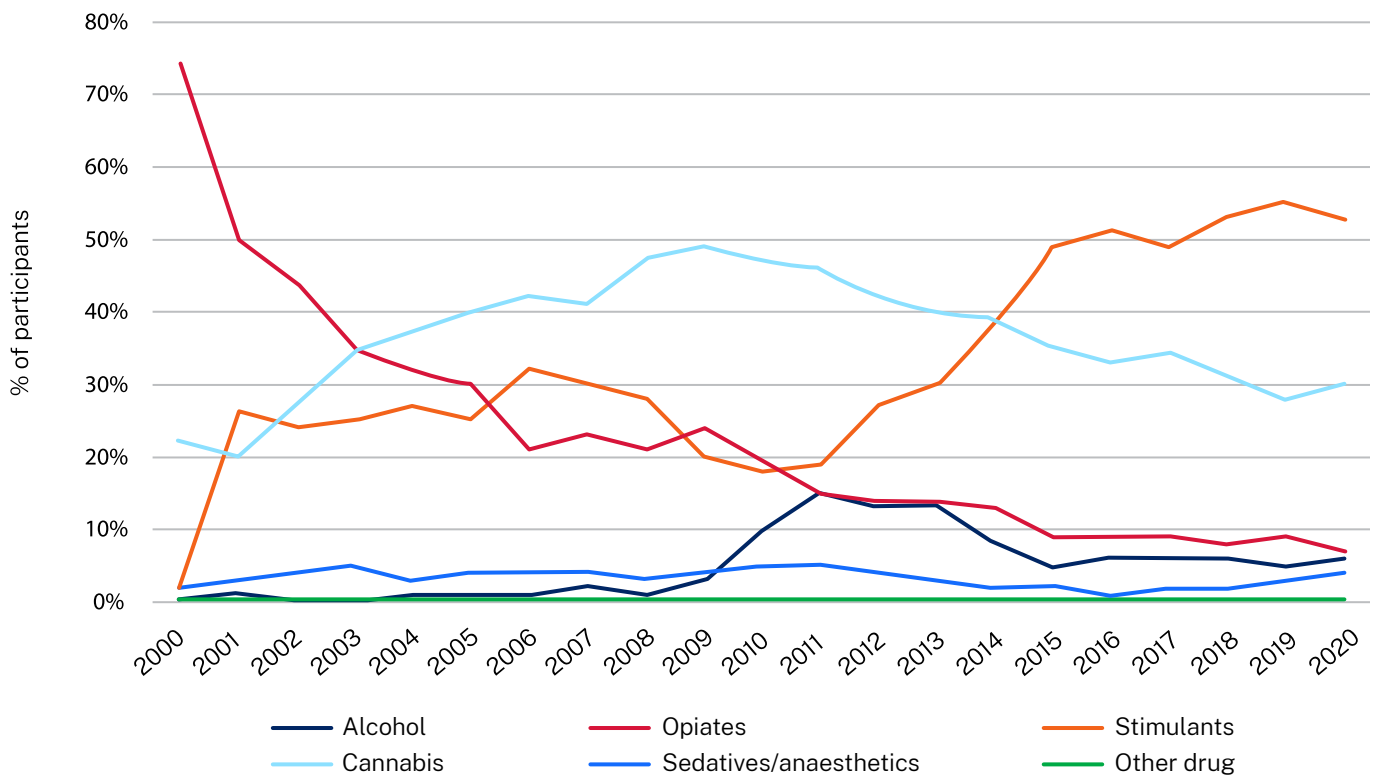
4.7.1 Principal Drug of Concern (PDC) for accepted participants

In 2000 (when MERIT commenced), opiates were the PDC for most participants (74%). Opiates have progressively decreased to 7% in 2020. Conversely, stimulants have been on the rise since 2011, now the PDC for over half of participants (53%). Cannabis as a PDC has steadily decreased since 2009 (from 49% to 30%). Sedatives/anaesthetics as a PDC have remained low since 2000.

In 2020, MERIT Alcohol was only available in 7 Regional NSW Local Courts.

MERIT teams monitor the referral, acceptance and completion rates for stimulant users in MERIT. These indicators inform local and state-wide strategies to improve access for stimulant users into MERIT. See *Appendix B for the list of MERIT Monitoring Indicators.*

Figure 4. PDC for accepted participants into MERIT – 20-year trend



Note: PDC is identified once a defendant is assessed as suitable and accepted into the program, not at time of referral.

4.7.2 PDC of participants – 2019 and 2020 comparison

In 2020, stimulants were the PDC for 53% of participants, followed by cannabis (29%), heroin (6%) and alcohol (8%).

When comparing PDC for participants accepted into MERIT in 2019 and 2020:

- stimulants declined by 4%
- heroin (opiate) declined by 2%
- cannabis increased by 2%
- sedative/anaesthetics remained stable

Table 5. PDC of participants (2019 and 2020)

Principal Drug of Concern	Substance description	N 2019	% 2019	N 2020	% 2020
Cannabis	Cannabinoids (plant extract)	587	24%	600	28%
	Cannabinoids nfd	76	3%	30	1%
	Cannabinoids (synthetic)	1	0%	2	0%
Stimulants	Methamphetamine (incl. Speed, Ice)	975	41%	862	41%
	Amphetamines	216	9%	117	6%
	Cocaine	119	5%	128	6%
	M.D.M.A. (Ecstasy)	24	1%	19	1%
	Lysergic acid diethylamide (LSD)	1	0%	1	0%
	Psilocybin (Magic Mushrooms)	0	0%	1	0%
	Caffeine	0	0%	1	0%
Opiates	Heroin	189	8%	129	6%
	Opioid analgesics nfd	14	1%	14	1%
	Morphine (incl. MS Contin, Opium)	0	0%	1	0%
	Buprenorphine	5	0%	2	0%
	Codeine (incl. Codral Forte, Disprin Forte, Panadeine)	1	0%	0	0%
	Oxycodone (incl. Endone)	1	0%	4	0%
	Fentanyl	2	0%	1	0%
	Methadone	2	0%	3	0%
	Psychostimulants nfd	1	0%	1	0%
Sedatives/ anaesthetics	Benzodiazepines nfd	53	2%	40	2%
	Gamma-hydroxybutyrate (incl. Liquid Ecstasy)	11	1%	27	1%
	Ketamine	1	0%	7	0%
	Other Sedatives and Hypnotics	0	0%	1	0%
	Clonazepam	0	0%	1	0%
Alcohol	Ethanol (Alcohol)	131	5%	125	6%
Other drug	Anabolic Androgenic Steroids	0	0%	0	0%
Total		2,410	100%	2,117	100%

4.7.3 PDC by Region: Sydney, Non-Sydney Metropolitan (NSM) and Regional²

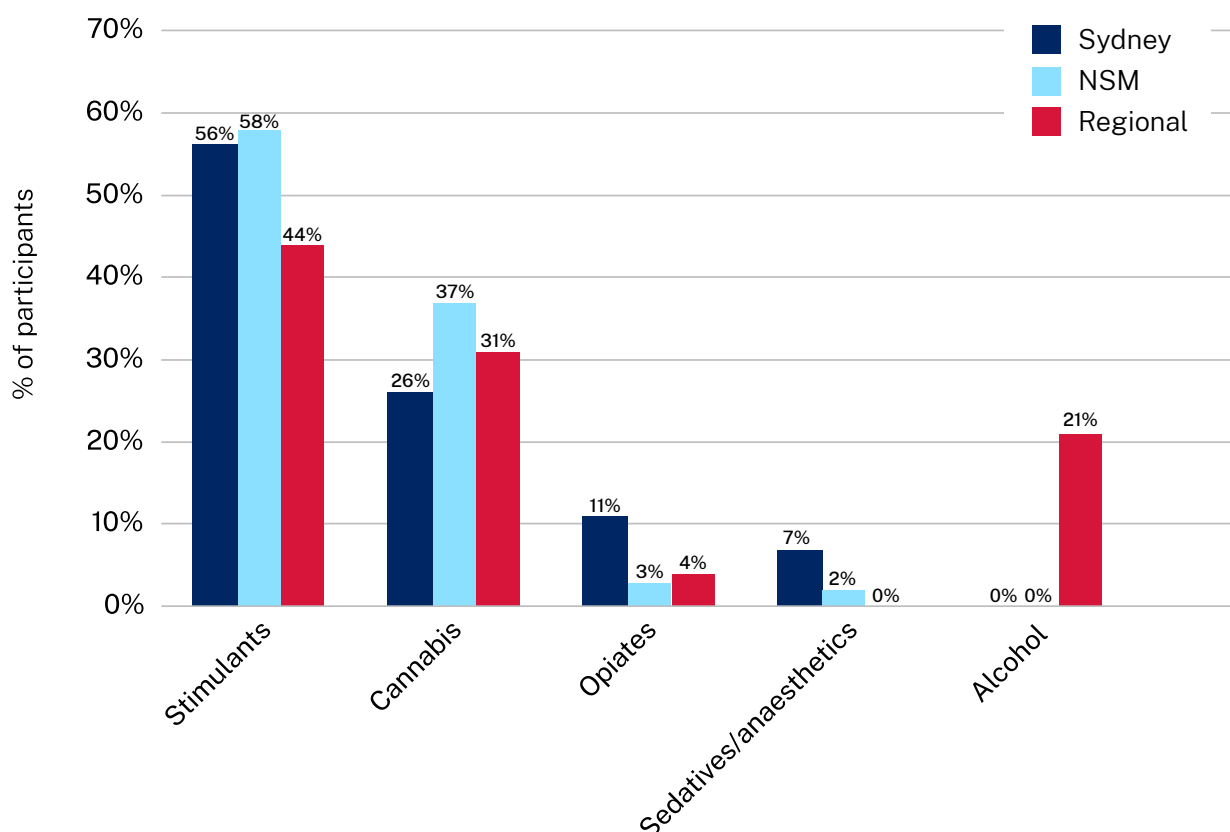
Stimulants were the PDC for the majority of participants in all geographic locations. Over half of MERIT participants in both Sydney (56%) and non-Sydney metro areas (58%) and just under half (44%) in regional NSW reported stimulants as their PDC.

Table 6. PDC of MERIT participants by region

PDC	Sydney N	Sydney %	NSM N	NSM %	Regional N	Regional %
Stimulants	592	56%	278	58%	259	44%
Cannabis	272	26%	176	37%	184	31%
Opiates	119	11%	15	3%	21	4%
Sedatives/anaesthetics	66	7%	8	2%	2	0%
Alcohol*	0	0%	0	0%	125	21%
Total	1,049	100%	477	100%	591	100%

*In 2020, Drug and Alcohol MERIT was only available in 7 Regional NSW Local Courts.

Figure 5. PDC of MERIT participants by region



² The 'Sydney' group is comprised of the Northern Sydney, Western Sydney, South Eastern Sydney, South Western Sydney, Sydney and Nepean/Blue Mountain MERIT teams. The 'Non-Sydney Metropolitan' region consists of the Hunter, Illawarra, and Central Coast MERIT teams. The 'Regional' area is made up of the Hunter New England, Western (Mid-West) NSW, Western (Macquarie) NSW, Far West, Mid North Coast, Northern NSW, Southern NSW and Murrumbidgee MERIT teams. It should be noted that participants in the Regional group may live in rural or remote areas.

Cannabis as a PDC was the highest among non-Sydney metro (37%) and regional NSW participants (31%). Cannabis as the PDC was the lowest in Sydney, at just over a quarter (26%).

MERIT participants who reported opiates as their PDC mainly resided in Sydney (11%, compared to 4% in regional NSW and 3% in NSM).

Regional NSW was the only area with participants identifying alcohol as their PDC, as MERIT Alcohol is only available in regional NSW Local Courts.

4.7.4 Demographic make-up by PDC

4.7.4.1 Gender by PDC

Slightly more females than males accepted into MERIT identified stimulants as their PDC (56% vs. 53% respectively). Females were also more likely to identify sedatives as their PDC than males (5% vs. 3%). More males than females reported cannabis as their PDC (31% vs. 26% respectively). There were no gender differences for opiates (both 7%) or alcohol (both 6%).

4.7.4.2 Aboriginal status by PDC

A larger proportion of participants who identified as Aboriginal reported alcohol as their PDC than those who identified as non-Aboriginal (14% and 4% respectively). Fewer Aboriginal than non-Aboriginal participants reported stimulants as their PDC (46% and 55% respectively).

There were no major differences between Aboriginal and non-Aboriginal participants for opiates, cannabis or sedatives as a PDC.

Program completion

5

MERIT is generally a 12-week program which cycles through three stages:

- i. Program entry and assessment
- ii. Treatment (which includes counselling and case management by MERIT teams)
- iii. Program completion and exit at 12 weeks

Reasons for program exit are recorded as:

- completion of program
- non-compliance with program conditions
- voluntary withdrawal
- removed by the Court
- court matters finalised/dismissed prior to completion
- death

Annual MERIT completion rates are calculated by comparing program completers against the total number of participants who exited the program (completers and non-completers) in the calendar year.

5.1 Completion status

In 2020, a total of 2,197 participants exited MERIT. Of these, 1,511 participants (69%) completed the program. A total of 686 (31%) did not complete the program. Non-compliance with program conditions was the most common reason for not completing the program, however it declined in 2020 compared to 2019 (21% and 25% respectively). All other reasons for program non-completion remained stable.

Studies show participants that completed AOD court diversion programs demonstrate reduced recidivism^{3,4,5} and increased health and wellbeing outcomes^{6,7} in comparison to non-completers. Women, Aboriginal people and participants with stimulants as a PDC consistently demonstrate lower MERIT completion rates. As a result, the completion rate for these populations are monitored to allow for early intervention to address any issues at the local and state-wide level. See *Appendix B for the list of all the MERIT Monitoring Indicators*.

3 Passey, M. et al. (2007). The Magistrates Early Referral Into Treatment (MERIT) Pilot Program: Court Outcomes and Recidivism. *Australian & New Zealand Journal of Criminology*. 40(2): 199-217.

4 Lulham, R. (2009). The Magistrates Early Referral Into Treatment Program: Impact of program participation on re-offending by defendants with a drug use problem. (Crime and Justice Bulletin NSW. No 131).

5 Weatherburn, D et al. (2008). The NSW Drug Court: A re-evaluation of its effectiveness. (Crime and Justice Bulletin NSW. No 121).

6 NSW Health. (2007). The Magistrates Early Referral Into Treatment (MERIT) program: Health Outcomes. NSW Health: North Sydney.

7 Jessimer, M. et al. (2014). Magistrates Early Referral Into Treatment Program Follow-up Pilot Study. *SAGE Open*. 8 April 2014.

Table 7. Exit status of MERIT participants (2019 and 2020)

Exit Status	N 2019	% 2019	N 2020	% 2020
Completed program	1,522	63%	1,511	69%
Non-compliance with program conditions	593	25%	454	21%
Withdrew voluntarily	172	7%	121	6%
Removed by Court	93	4%	69	3%
Court matters finalised/dismissed prior to completion	17	1%	28	1%
Died	2	0%	2	0%
Other	5	0%	12	0%
Total	2,404	100%	2,197	100%

In both 2019 and 2020 the average number of days in MERIT for program completers was 91. This corresponds closely with the expected length of the program (84 days or 12 weeks). The average number of days program non-completers were on MERIT was similar in 2019 and 2020 (56 and 57 respectively).

Table 8. Average number of days that participants were on MERIT (2019 and 2020)

Days on Program	2019 Average days	2020 Average days
Completers	91	91
Non-Completers	56	57

5.2 Demographic overview of program completers vs non-completers

This section shows the MERIT program completion proportions and completion rates by demographics.

5.2.1 Gender

Of participants who completed MERIT, 79% were male and 21% were female. The completion rate for males was higher than females (71% compared to 63%).

Table 9. Completion proportions by gender

Gender	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Female	514	324	21%	190	28%
Male	1,683	1,187	79%	496	72%
Total	2,197	1,511	100%	686	100%

Table 10. Completion rates by gender

Gender	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Female	514	324	63%	190	37%
Male	1,683	1,187	71%	496	29%
Total	2,197	1,511	68%	686	31%

5.2.2 Age

In 2020, two-thirds (66%) of MERIT program completers were aged between 20–39 years. The Table below shows the age ranges that had the highest completion rate. These included:

- 50–64 years (84%)
- 45–49 years (72%)
- 20–24 years (74%)

Table 11. Completion proportions by age

Age	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Under 20	123	84	6%	39	6%
20-24	367	270	18%	97	14%
25-29	448	290	19%	158	23%
30-34	338	218	14%	120	17%
35-39	338	219	14%	119	17%
40-44	248	170	11%	78	11%
45-49	184	133	9%	51	7%
50-64	149	125	8%	24	3%
Over 64	2	2	0%	0	0%
Total	2,197	1,511	100%	686	100%

Table 12. Completion rates by age

Age	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Under 20	123	84	68%	39	32%
20-24	367	270	74%	97	26%
25-29	448	290	65%	158	35%
30-34	338	218	64%	120	36%
35-39	338	219	65%	119	35%
40-44	248	170	69%	78	31%
45-49	184	133	72%	51	28%
50-64	149	125	84%	24	16%
Over 64	2	2	*	0	*
Total	2,197	1,511	69%	686	31%

*Sample size too small to report as %.

5.2.3 Aboriginal Status

In 2020, of the 1,511 participants who completed MERIT, 17% identified as Aboriginal (n=258), 81% identified as non-Aboriginal (n=1,220) and 2% did not provide a status.

Participants who identified as Aboriginal were 10% less likely to complete the MERIT program than those who identified as non-Aboriginal (61% and 71% respectively).

Aboriginal participants remain less likely to complete MERIT than non-Aboriginal participants. As a result, the completion rate is monitored to inform local and state-wide strategies. At the local level this has led to strategies such as one MERIT team partnering with Aboriginal Liaison Officers for all Aboriginal MERIT participants to enhance program retention.

Table 13. Completion proportions by Aboriginal status

Aboriginal Status	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Aboriginal	421	258	17%	163	24%
Non-Aboriginal	1,726	1,220	81%	506	74%
Unknown/Not Stated	50	33	2%	17	2%
Total	2,197	1,511	100%	686	100%

Table 14. Completion rates by Aboriginal status

Aboriginal Status	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Aboriginal	421	258	61%	163	39%
Non-Aboriginal	1,726	1,220	71%	506	29%
Unknown/Not Stated	50	33	66%	17	24%
Total	2,197	1,511	69%	686	31%

5.2.4 Principal source of income

The Table below shows the principal source of income of program participants in 2020. Half of program completers were receiving temporary benefits (e.g. employment benefits).

Participants most likely to complete the program were either employed or studying:

- employed full (83%) or part time (80%)
- on a student allowance (83%)

Participants least likely to complete the program, were receiving government allowances or had no income of their own:

- dependant on others for their principal source of income (50%)
- on temporary benefits (63%) or a pension (69%)
- had no income (69%)

Table 15. Completion proportions by principal source of income

Principal source of income	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Temporary benefit (e.g. unemployment)	1,203	761	50%	442	64%
Pension (e.g. aged, disability)	291	202	13%	89	13%
Full-time employment	287	238	16%	49	7%
Part-time employment	154	123	8%	31	5%
No income	121	83	5%	38	6%
Student allowance	12	10	1%	2	0%
Dependent on others	6	3	0%	3	0%
Retirement fund	1	1	0%	0	0%
Not stated/not known/inadequately described	79	60	4%	19	3%
Other	43	30	2%	13	2%
Total	2,197	1,511	100%	686	100%

Table 16. Completion rates by principal source of income

Principal source of income	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Temporary benefit e.g. unemployment)	1,203	761	63%	442	37%
Pension (e.g. aged, disability)	291	202	69%	89	31%
Full-time employment	287	238	83%	49	17%
Part-time employment	154	123	80%	31	20%
No income	121	83	69%	38	31%
Student allowance	12	10	83%	2	17%
Dependent on others	6	3	*	3	*
Retirement fund	1	1	*	0	*
Not stated/not known/inadequately described	79	60	76%	19	24%
Other	43	30	70%	13	30%
Total	2,197	1,511	69%	686	31%

*Sample size too small to report as %.

5.2.5 Accommodation type

The Table below shows the accommodation type of program participants. Most program completers lived in a rented house or flat (public or private) (64%), followed by privately owned house (26%). Seven per cent lived in temporary accommodation (i.e. boarding house or a supported accommodation), or were homeless.

Participants most likely to complete the program lived in a privately owned house/flat (77% completion rate) and a rented house/flat (68%). Participants least likely to complete the program lived in temporary accommodation (57% completion rate).

One of the largest barriers to participation in AOD treatment services is stable accommodation. As part of the program, the MERIT team works with the participant to provide treatment and support which may include assistance in securing stable accommodation.

Table 17. Completion proportions by accommodation type

Accommodation type	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Rented house or flat (public or private)	1,412	961	64%	451	66%
Privately owned house or flat	515	396	26%	119	17%
No usual residence/homeless	76	43	3%	33	5%
Hostel/supported accommodation services	46	23	2%	23	3%
Boarding house	39	26	2%	13	2%
Caravan on a serviced site	10	7	0%	3	0%
Shelter/refuge	9	3	0%	6	1%
Alcohol/other drug treatment residence	1	1	0%	0	0%
Prison/detention centre	1	0	0%	1	0%
Not known	42	29	2%	13	2%
Other	46	22	1%	24	3%
Total	2,197	1,511	100%	686	100%

Table 18. Completion rates by accommodation type

Accommodation type	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Rented house or flat (public or private)	1,412	961	68%	451	32%
Privately owned house or flat	515	396	77%	119	23%
No usual residence/homeless	76	43	57%	33	43%
Hostel/supported accommodation services	46	23	50%	23	50%
Boarding house	39	26	67%	13	33%
Caravan on a serviced site	10	7	70%	3	30%
Shelter/refuge	9	3	*	6	*
Alcohol/other drug treatment residence	1	1	*	0	*
Prison/detention centre	1	0	*	1	*
Not known	42	29	69%	13	31%
Other	46	22	48%	24	52%
Total	2,197	1,511	69%	686	31%

*Sample size too small to report as %.

5.2.6 Principal drug of concern

The Table below shows the principal drug of concern (PDC) for program participants.

Participants who reported cannabis or alcohol as their PDC were the most likely to complete the program (76% and 73% respectively). Participants who reported stimulants or opiates as their PDC were the least likely to complete the program (65% completion rate).

Table 19. Completion proportions by principal drug of concern (PDC)

Principal Drug of Concern	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Stimulants	1,204	787	52%	417	61%
Cannabis	634	479	32%	155	23%
Opiates	174	113	7%	61	9%
Alcohol*	117	85	6%	32	5%
Sedatives/ anaesthetics	68	47	3%	21	3%
Total	2,197	1,511	100%	686	100%

*In 2020, Drug and Alcohol MERIT was only available in 7 Regional NSW Local Courts.

Table 20. Completion rates by principal drug of concern (PDC)

Principal Drug of Concern	Exited (TOTAL) N	Completers N	Completers %	Non-Completers N	Non-Completers %
Stimulants	1,204	787	65%	417	35%
Cannabis	634	479	76%	155	24%
Opiates	174	113	65%	61	35%
Alcohol*	117	85	73%	32	27%
Sedatives/ anaesthetics	68	47	69%	21	31%
Total	2,197	1,511	69%	686	31%

*In 2020, Drug and Alcohol MERIT was only available in 7 Regional NSW Local Courts.

Alcohol and other drugs – use and health outcomes

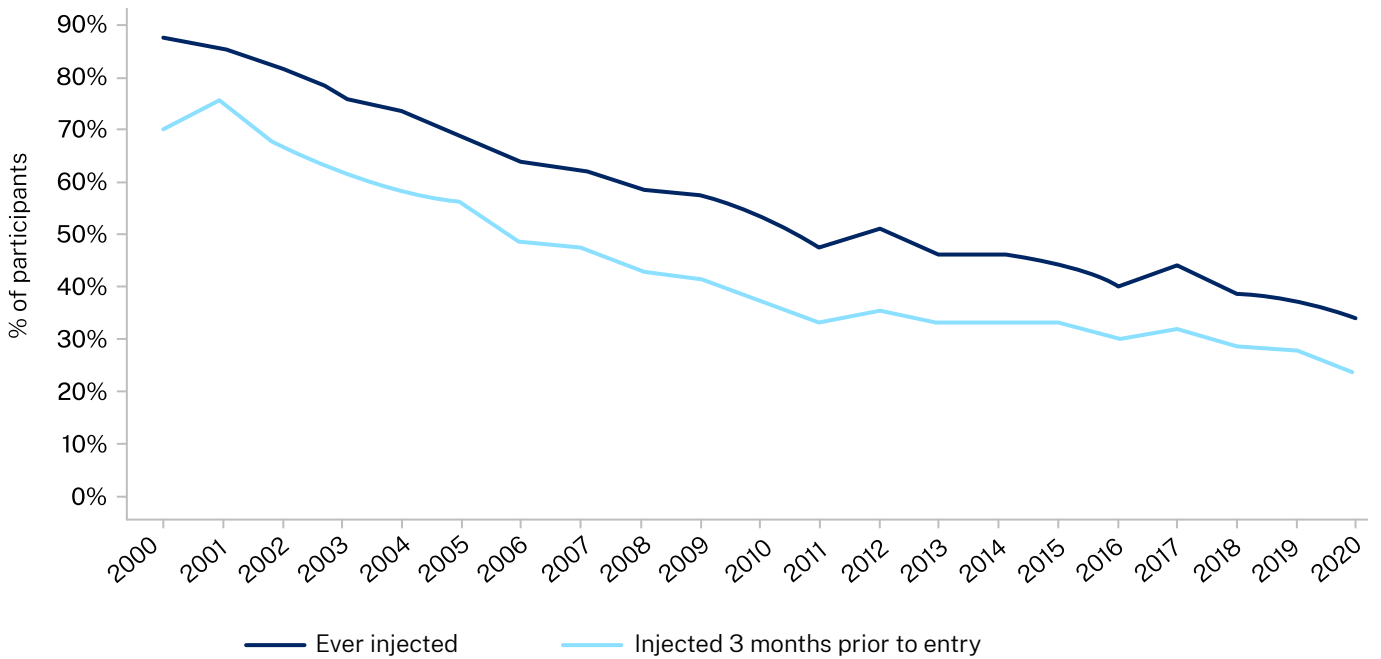
6

At MERIT program entry and exit, information is collected from participants about their health, well-being and AOD use. This information is used to understand individual participants' treatment needs and participant trends over time.

6.1 Injecting drug behaviour (entry)

In MERIT, self-reported injecting behaviour is recorded at program entry. In 2020, information about injecting drug behaviour was available for 2,117 participants. Of these participants, around one third (34%) had previously injected drugs, compared to 87% in 2000. In 2020, 70% of people who had ever injected, had done so in the past 3 months, compared to 81% in 2000. The proportion and frequency of participants injecting drugs has consistently declined since 2000. See Appendix C for the data table.

Figure 6. Trends in injecting drug use at program entry 2000–2020



6.2 Frequency of alcohol and other drug use (entry and exit)

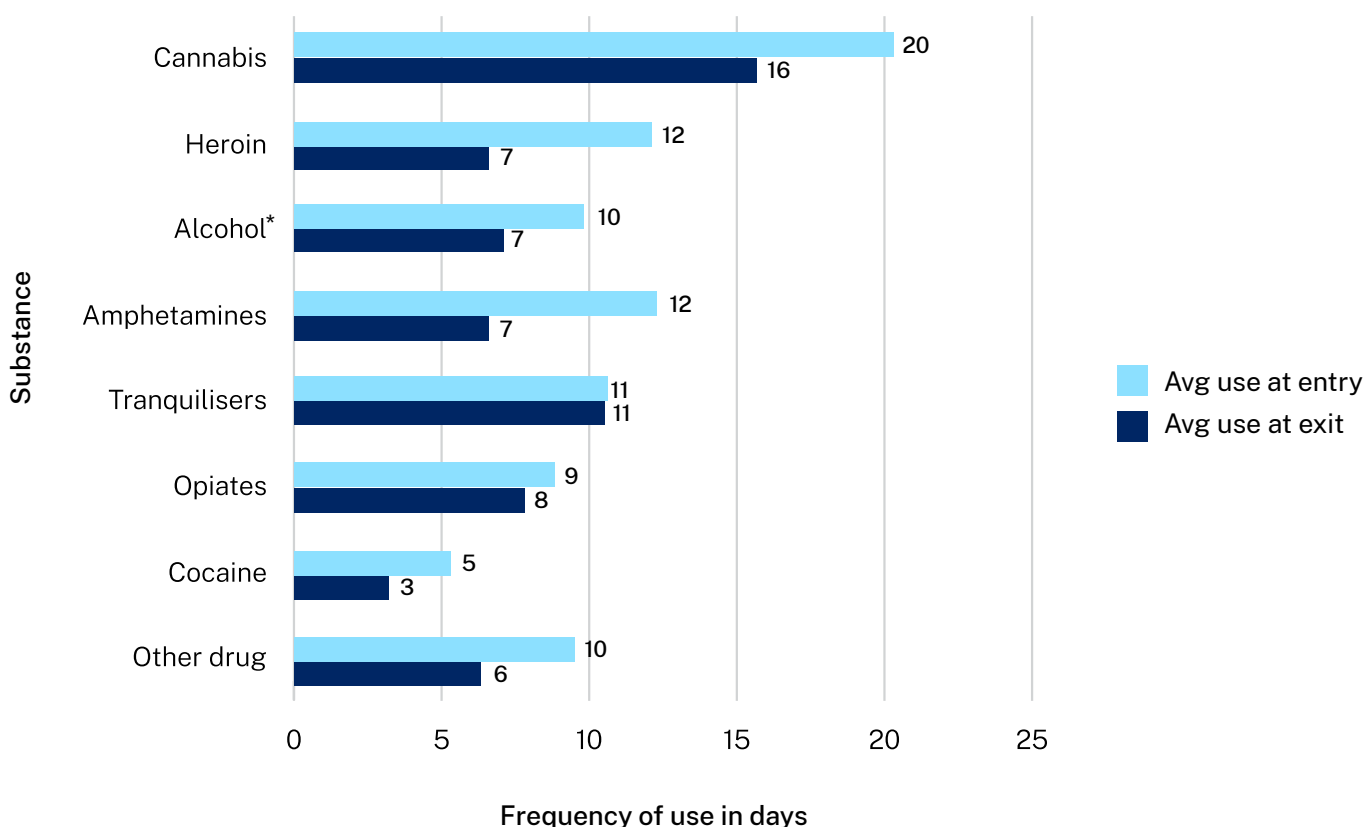
PDC frequency of use was collected for 1,104 MERIT participants at entry and exit. Upon entry, 33% (n=360) reported cannabis, 40% reported amphetamines (n=437), 6% reported alcohol (n=73), and 6% reported heroin (n=72) as their PDC.

Frequency of AOD use is the self-reported number of days a participant used their PDC in the previous 30 days.

From MERIT entry to exit, reductions in the average frequency of PDC use was reported for all alcohol and drugs. The greatest reductions in average frequency were reported for amphetamine and heroin use. The following reductions in average frequency were reported:

- amphetamine use reduced by 46% (from 12 to 7 days per 30 days)
- heroin use reduced by 46% (from 12 days to 7 days per 30 days)
- alcohol* use reduced by 28% (from 10 days to 7 days per 30 days)
- cannabis use reduced by 23% (from 20 to 16 days per 30 days)

Figure 7. Average frequency of substance use for PDC at entry and exit in 2020



*Alcohol MERIT is only available in 7 Regional NSW Local Courts.

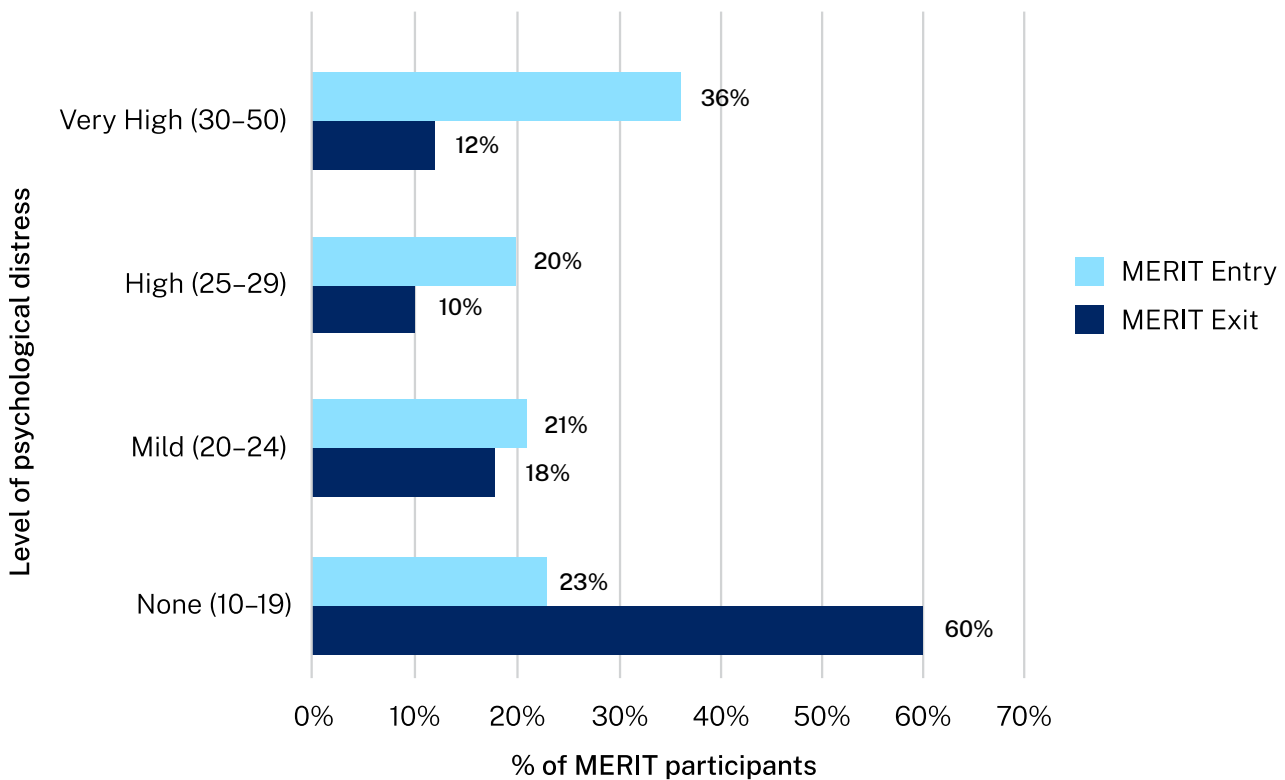
6.3 Psychological Health (entry and exit)

Levels of psychological distress amongst accepted MERIT participants is measured using the Kessler-10 (K10) Psychological Distress Scale⁸. K10 is a 10-item questionnaire that measures anxiety, depression, agitation, and psychological fatigue in the most recent 4-week period. Possible scores range from 10 to 50. The higher the K10 score, the higher the levels of psychological distress.

In 2020, 1,080 MERIT participants had K10 data available on entry and exit from the program. On entry to the program, 56% (n=599) of participants with available data had high (25–29 K10 score) to very high (30–50 K10 score) psychological distress. On exit, this proportion reduced to 22% (n=239) of participants with high to very high psychological distress. These results are similar to 2019, where 55% of participants with available data had high to very high psychological distress scores which reduced to 24% on program exit.

The NSW Population Health Survey measures psychological distress in adults in NSW using the K10. In 2020, 17% of adults in NSW reported high or very high psychological distress scores⁹. On MERIT program entry, a larger proportion of participants reported high levels of psychological distress than the NSW population (56% vs 17%). However, upon program exit, high psychological distress scores approach levels closer to the NSW population (24% vs. 17%)¹⁰, highlighting a potential positive mental health impact of participation in the MERIT program.

Figure 8. 2020 Psychological distress (K10) Entry and Exit scores



8 Kessler RC, Barker PR, Colpe LJ, Epstein JF, Gfroerer JC, Hiripi E, et al. Screening for serious mental illness in the general population. Arch Gen Psychiatry. 2003 Feb;60(2):184-9.

9 NSW Population Health Survey (SAPHaRI). Centre for Epidemiology and Evidence, NSW Ministry of Health, 2020.

10 Note: The NSW Population Health Survey defines ‘high psychological distress’ as K10: 22-29, while MERIT defines ‘high’ as K10: 25-29. In addition, an adult in the NSW Population Health Survey is defined as persons aged 16 years and over, while adults in MERIT are defined as persons aged 18 years and over.

Criminal justice outcomes

7

To ensure consistency with the approach in previous annual reports, sentencing outcomes and reconviction data are presented in this section for defendants completing MERIT in the previous calendar year (i.e. 2019).

By matching unique attributor codes for MERIT participants to Local Court and re-offending databases (ROD), the NSW Bureau of Crime Statistics and Research (BOCSAR) are able to provide measures of criminal justice outcomes. BOCSAR do this by comparing post-program sentences and reconviction rates for program completers and non-completers during the relevant years. This process provided information on:

- principal penalty received by MERIT defendants
- number of defendants reconvicted within 12 weeks of commencing MERIT
- number of defendants who were reconvicted within six and 12 months of exiting the program.

7.1 Record matching

MERIT program data is collected in the NSW Health MERIT Information Management System (MIMS). The NSW Bureau of Crime Statistics and Research (BOCSAR) match MERIT participants from MIMS to local court and re-offending databases (ROD) using unique participant record numbers including the Criminal Name Index (CNI) and JusticeLink case numbers.

There were 2,980 records in the data collection with 2,306 unique participant CNIs, and 1,296 JusticeLink case numbers. Of the 2,980 records, 2,247 were matched to actual unique person records. The difference between the numbers at the initial data collection (2,980) and the numbers matched to a person (2,247) can occur due to multiple program exit and entry points, duplicate profiles, and other system errors. Of the 2,247 unique person records that were matched, 2,150 participants were matched to a first court appearance either on or within 6 months of the program exit date or in the month before the program exit date.

7.2 Proven charges prior to entry into the program

To determine the proportion of participants with prior convictions within six months before program entry, relevant court data sets were examined. The data showed that 27% of MERIT participants had prior proven charges. Of these participants:

- 95% received a non-custodial sentence
- 5% received a custodial sentence

7.3 Sentencing outcomes for participants

There were considerable differences in the principal penalty outcome between program completers and non-completers.

The most notable penalty difference was that program completers were less likely to be imprisoned than program non-completers (3% compared to 13% of program non-completers).

The most common sentencing outcomes for MERIT program completers were:

- Community Correction Order, with supervision (27% of program completers)
- Intensive Correction Order (18% of program completers)

When interpreting this sentencing data, it is important to note that the penalties imposed against both program completers and non-completers will be influenced by a broad range of factors including defendant needs, circumstances, levels of risk posed (both of harm and reoffending), seriousness of the current offence(s) and engagement with the MERIT program.

Table 16. Principal penalty for program completers and non-completers

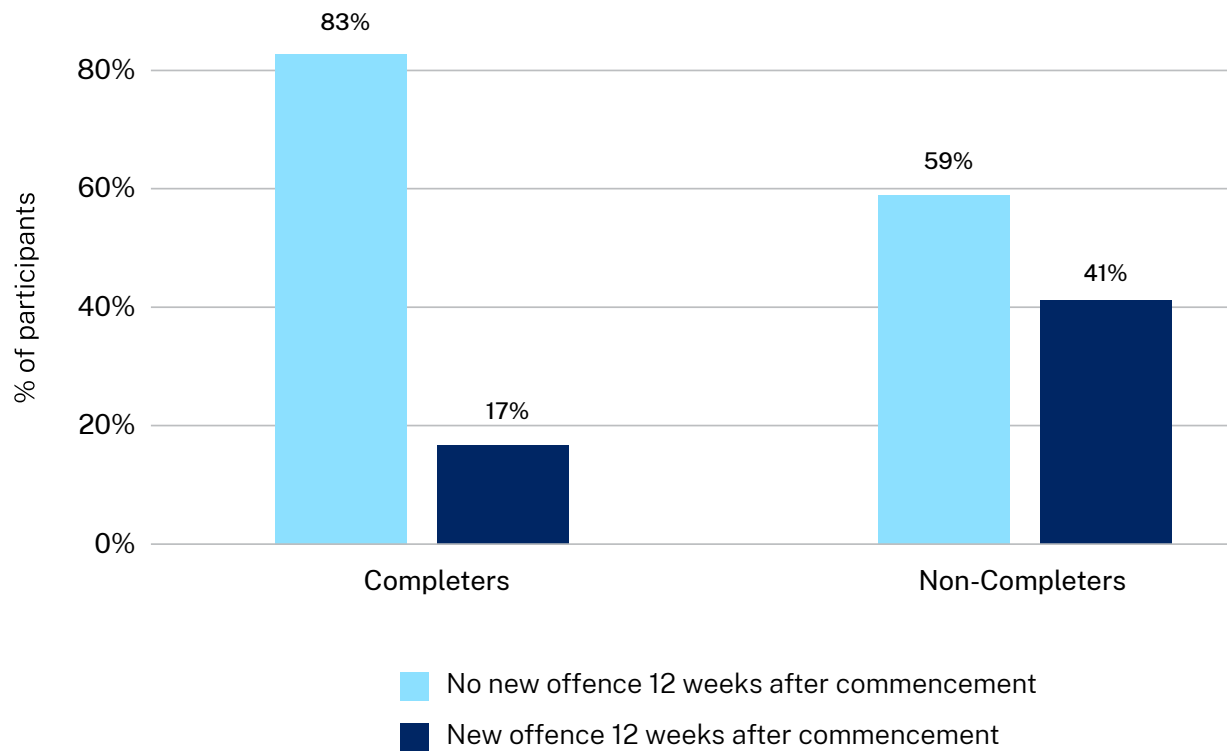
Principal Penalty	Program Exit Year 2019			
	Completers N	Completers %	Non-completers N	Non-completers %
Community Correction Order with supervision	376	27%	185	24%
Intensive Correction Order	247	18%	121	16%
Fine	180	13%	178	23%
Conditional Release Order without conviction, without supervision	176	13%	26	3%
Community Correction Order without supervision	149	11%	52	7%
Conditional Release Order with conviction, without supervision	73	5%	22	3%
Imprisonment	47	3%	102	13%
Conviction only	41	3%	28	4%
No penalty	28	2%	24	3%
Conditional Release Order with conviction, with supervision	24	2%	15	2%
Conditional Release Order without conviction, with supervision	18	1%	1	0%
No conviction recorded	17	1%	3	0%
No action taken on a breach of bond	7	1%	4	1%
Bond with supervision	1	0%	0	0%
Bond without conviction without supervision	1	0%	0	0%
Suspended sentence with supervision	0	0%	1	0%
Suspended sentence without supervision	0	0%	1	0%
Juvenile probation order	0	0%	1	0%
Bond without supervision	0	0%	1	0%
Total	1,385	100%	765	100%

7.4 Conviction within 12 weeks of commencing MERIT

In 2019, 17% of program completers were convicted of a new offence within 12 weeks of starting MERIT, compared to 41% of program non-completers. This is consistent with the findings from the previous annual report.

It should be noted that a new offence by a MERIT participant can be cause for them to be removed from the program and/or have their bail withdrawn.

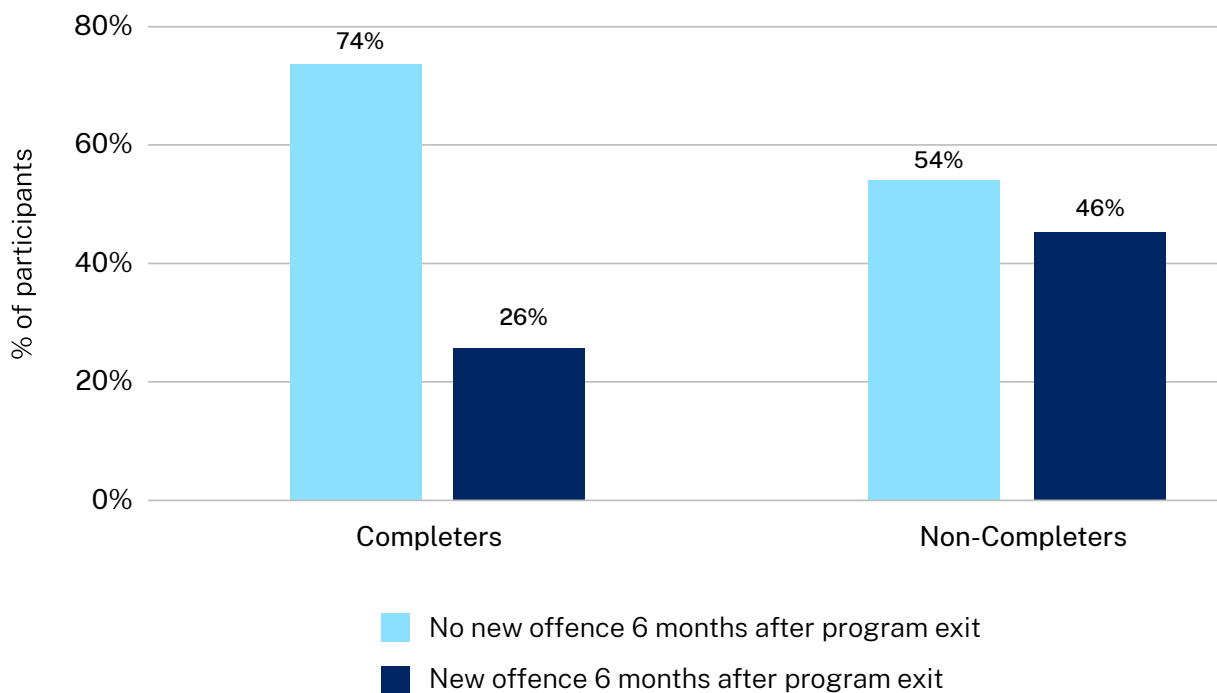
Figure 9. Conviction rates of new offences within 12 weeks of commencing MERIT



7.5 Conviction 6 months from MERIT exit

In 2019, 26% of program completers were convicted of a new offence 6 months after exiting the program, compared to 46% of program non-completers.

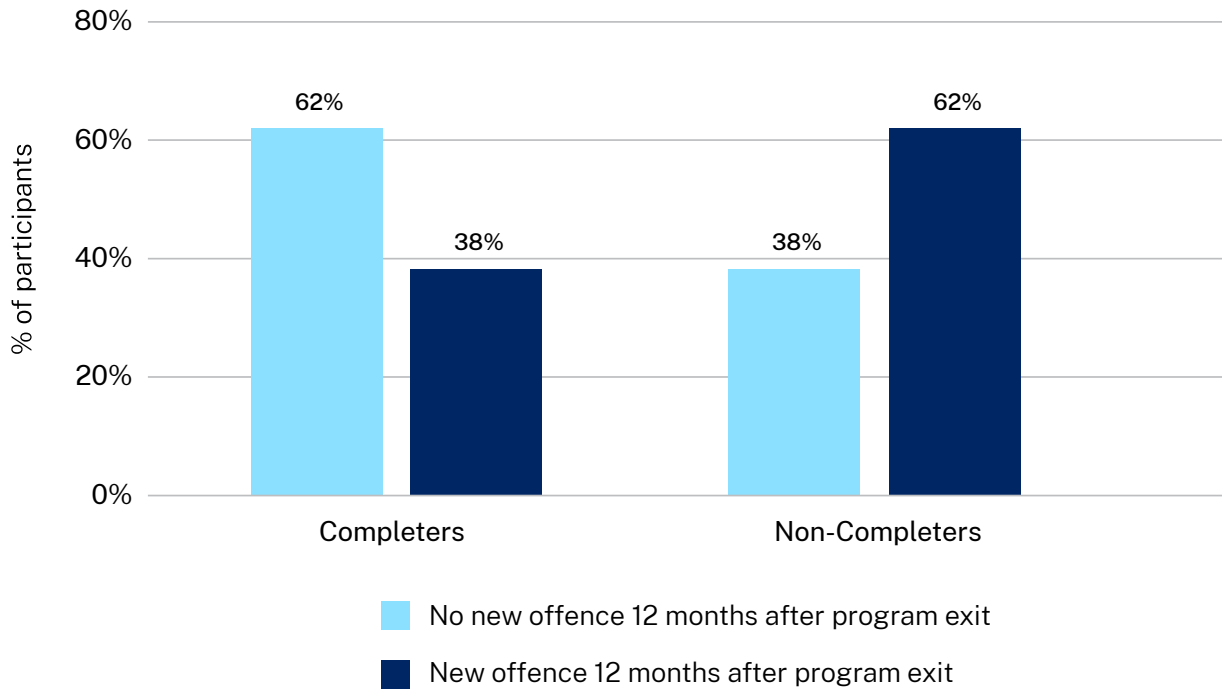
Figure 10. Conviction rates for new offences 6 months after exiting MERIT



7.6 Conviction 12 months from MERIT exit

In 2019, 38% of program completers were convicted of a new offence 12 months after exiting the program, compared to 62% of program non-completers.

Figure 11. Conviction rates of new offences 12 months after exiting MERIT



Appendix A

MERIT Referral, Acceptance and Completion Figures (2000 to 2020)

Year	2000 (N)	2001 (N)	2002 (N)	2003 (N)	2004 (N)	2005 (N)	2006 (N)	2007 (N)	2008 (N)	2009 (N)	2010 (N)	2011 (N)	2012 (N)	2013 (N)	2014 (N)	2015 (N)	2016 (N)	2017 (N)	2018 (N)	2019 (N)	2020 (N)
Referred	79	462	1274	2581	2392	2624	2811	2951	2733	3020	3035	3327	3318	3371	3251	4035	4596	4081	4073	4062	3318
Accepted	55	304	806	1547	1367	1622	1727	1870	1810	1930	1941	2042	1992	2072	2032	2442	2593	2246	2455	2410	2117
Completed	15	115	306	905	883	996	1064	1222	1279	1317	1382	1364	1247	1295	1305	1433	1635	1420	1504	1522	1511

Appendix B

MERIT Operational and Strategic Monitoring Indicators

1. Operational Monitoring - Service Access and Patient Flow		
Focus	Objectives	Performance indicators
Completed Clients	To provide an effective MERIT program	Proportion of accepted clients who completed MERIT
Timeliness of the assessment process	Provide appropriate assessment and timely entry into the program.	Number of days between initial assessment and comprehensive assessment
Suspension of MERIT services	To provide an effective MERIT program	Number of days a service has been suspended in a quarter
Appropriateness of referral	Referrers to MERIT to provide appropriate referrals	Proportion of referrals which do not lead to entry on to MERIT and reasons for non-acceptance

2. Strategic Monitoring- Focus populations		
Focus	Objectives	Performance indicators
Women	To provide MERIT to all populations (i.e. Equitable access policy)	Proportion of women – referred, accepted and completed
Aboriginal people	To provide MERIT to all populations (i.e. Equitable access policy)	Proportion of Aboriginal clients – referred, accepted and completed
Clients with stimulants as their principal drug of concern (PDC)	To monitor the growth of clients with stimulants as their PDC	Proportion of clients with stimulants as their PDC – referred, accepted and completed

Appendix C

Data Table for Figure 7

Year	2000 (N)	2001 (N)	2002 (N)	2003 (N)	2004 (N)	2005 (N)	2006 (N)	2007 (N)	2008 (N)	2009 (N)	2010 (N)	2011 (N)	2012 (N)	2013 (N)	2014 (N)	2015 (N)	2016 (N)	2017 (N)	2018 (N)	2019 (N)	2020 (N)
Ever injected	47	242	603	1125	988	1077	1065	1131	1046	1065	986	935	981	930	907	1001	998	901	902	898	713
Injected 3 months	38	214	489	918	787	878	805	859	766	774	682	649	679	666	655	741	729	656	654	667	498
Number with injecting data at entry	54	283	738	1472	1350	1572	1676	1815	1782	1857	1847	1966	1926	2006	1959	2259	2474	2063	2306	2410	2117

