**Discussion; National Drug Strategy**

The National Drug Strategy 2017-2026 is a vital framework that aims to reduce social, economic, and health harms among individuals and communities. These harms arise from the continued use of alcohol, tobacco, and other illegal drugs. Although health harms that include injuries, chronic diseases, and mental problems are directly linked to alcohol and drug misuse, family and social problems do arise (Moss, 2013). To overcome these problems, policies and strategies need to be in place to help the populations at risk. The policies should encourage collaboration and formation of partnerships among different stakeholders in the society. For instance, public health departments and substance abuse treatment centers should educate and have mobile clinics to offer treatment to the addicts (Freshman et al., 2010). While the government has the mandate of using laws to oversee and improve the health status of its citizens, other players including non-profit organizations have a role to play (Gakh, 2015). Moreover, there is need for continued collaboration between the health sector and law enforcement. Neither the law enforcement agencies nor individuals and agencies in the health sector can work alone to offer solutions to minimize the harms (Gakh, 2015).

If the issue of drug use and addiction remains unattended, the country and its people could be headed to a doomed future. It worries to note that the problem does not affect the youths only, but also the elderly in the society. According to Li and Caltabiano (2017), drug use among the elderly is often misdiagnosed and this poses a major health issue. Although the elderly, aged 65 and above, do abuse alcohol, the prevalence of abuse is not as high as among the youths. Unfortunately, all forms of alcohol or drug related problems have adverse impacts on individuals and the community (Caltabiano, 2017). However, all that mess can be corrected using the three pillars of harm minimization; supply reduction, demand reduction, and harm reduction (NDS, 2017). By utilizing the three pillars of harm minimization, there is hope that the National Drug Strategy can help the country overcome alcohol and drug-related problems.

Out of the seven priority actions, enhancing access to treatment seems to be the most appealing. Although prevention is always the best strategy, that is need to be mindful towards where damage has already occurred. As a result, the government ought to enhance access to effective and affordable treatment that is backed up by evidence (NDS, 2017). While there can be measures to diagnose individuals with alcohol disorders or drug dependence, only a few of them receive treatment services. While some opt out of the treatment programs because they are unaffordable, others do so because they are ineffective. Therefore, there is need to ensure treatments for alcohol, tobacco, and drug abuse are safe and effective (Hagedorn et al., 2016). Like in the U.S., the Australian government needs to implement public insurance that will facilitate access to substance abuse treatment (Lowinson, 2005). Also, the treatment centers should provide culturally responsive care especially to individuals from the minority groups. Such measures with increase retention and reduce dropout from the treatment programs (Guerrero, 2013).

Based on my professional work experience, I believe alcohol and substance abusers need long-term care to recover from this problem. Addiction to tobacco, alcohol, and drugs is a chronic disease and it cannot be treated in a few days. Instead, the treatment should be prolonged to several months or years where necessary. However, all this can be possible if the cost for treatment is subsidized and made affordable to all. Once it is made affordable, numerous treatment approaches should be used since not all individuals can be response to a single treatment. Moreover, the treatment should not focus on drugs alone but must address other areas such social and financial obligations of a person in the society.

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