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## New Drugs Funding for Victoria

### Community Partnerships Funding

On the 3 February 2004 the Federal Government announced the fourth round of funding under the National Illicit Drugs Strategy Community Partnerships Initiative (CPI).

VAADA welcomes this new funding that provides more than \$6.5 million to 89 community-based organisations. This includes **\$1,700,233 for Victorian services**. These grants build on the 134 projects already funded under the Community Partnerships Initiative to date.

VAADA Executive Officer, Carol Bennett, represented VAADA on the Intergovernmental Committee of Drugs expert advisory group which was responsible for reviewing the applications for funding.

Victorian applicants who received funding include:

Dianella CHS; Taskforce Community Agency; Bounce Back Foundation; South Eastern Region Migrant Resource Centre; Youth Projects; Open Family Australia; Plenty Valley Community Health; North Richmond CHC; Inner South CHS; Yarra Valley CHS (Eastern Health); Odyssey House; The Cambodian Association of Victoria; Frankston City Council; Maribyrnong City Council (Youth Services); Springvale Indo-Chinese Mutual Assistance Association; Cyrene Centre; Murray Valley Aboriginal Cooperative Limited; Mary of the Cross Centre; Southern Health – Greater Dandenong CHS; Australian Vietnamese Women's Welfare Association; Jewish Care (Victoria); Turning Point and the Dunkley Drugs Forum.

VAADA would like to congratulate all of these services who were successful in securing funding and wish them well with their new projects.

### Local Government 'Hotspot' Funding

On Monday 9 February 2004, the State Government announced that the five Victorian Local Government 'Hotspots' will be provided with **\$13.2 million funding for over 3 years** under the second round of the initiative.

Each of the 5 hotspot municipalities will receive continued annual funding of \$720,000 to run their primary health care services. They will also receive project funding of \$2.4 million over 3 years.

Unfortunately not all programs from the first round were refunded.

The five hotspots LGA's received the following:

- City of Yarra - \$611,660
- City of Greater Dandenong - \$388,167
- Maribyrnong City Council - \$579,335
- City of Melbourne - \$ 87,000
- City of Port Phillip - \$509,626

At a time when agencies are reporting increases in heroin use, this funding is valuable.



*CPI funding will enable agencies such as Taskforce to conduct community projects (above). Taskforce has been funded for a new project under the round 'Keeping it real – why chrome?'*

## Month in Review

### AOD Workforce Development

The Victorian government has invested in a good overall strategy for addressing many of what VAADA's members have identified as being the most pressing concerns they face around workforce development in the sector.

VAADA is a member of the Workforce Development Steering Committee for the DHS project which has developed several important initiatives such as workforce recognition of current competencies (minimum standards) and agency accreditation. In addition, DHS are tendering training in a number of critical areas including forensic, clinical supervision, professional development and management.

While these issues are complex and require continued commitment and resourcing, VAADA welcomes the DHS workforce project initiatives as a positive move in strengthening the sector's capacity to attract and retain qualified staff.

### New VAADA Appointments

VAADA's major focus remains the NGO AOD sector's response to the Turning Point service system review report: *'Pathways a review of the Victorian Drug Treatment Service System.'*

VAADA has been appointed to reference groups for the youth and rural and regional service system reviews which are now underway.

VAADA is committed to the Funded Agency Partnership Project and is a member of the DHS/NGO working party for the project.

VAADA is now also represented on two of its project committees: one that will oversight the outcomes of the DHS/sector partnership survey and another that will explore improved communication and consultation between DHS and its funded agencies.

### New Chairperson for PDPC

Internationally recognised drug prevention advocate, Dr Rob Moodie, has been appointed permanent Chair of the Premier's Drug Prevention Council (PDPC).

Dr Moodie, the Chief Executive Officer of VicHealth, will lead the Council for the next three years. VAADA welcomes this appointment and looks forward to working with Dr Moodie and the council.

### Chroming protocols

VAADA received many responses from the sector about the draft chroming protocols for managing young people using inhalants in public spaces.

VAADA is a member of the joint DHS/Department of Justice Volatile Substance Abuse Protocols Advisory Committee comprising government departments, relevant peak and legal bodies. The legislation is due to come into effect on 1 July 2004. The protocols provide a set of guidelines for responding to young people affected by chroming under the legislation.

The legislation, supporting protocol and police regulations raise many questions about the most appropriate, safe and effective ways of managing young people affected by inhalant substances.

Many of these questions will not be answered until information is gathered about how the legislation works in practice. VAADA strongly supports the development and continued review of a comprehensive monitoring and review process. The legislation has a sunset clause of two years which will assist in reviewing its efficacy.

VAADA's feedback to DHS on the draft protocols highlight a number of issues including:

- The need for monitoring and review of the protocol
- The safe and effective management of inhalant affected young people referred to youth AOD agencies or detained in police lock up or cells
- The necessity of the age clause
- Medical options available to police officers who detain young people
- The importance of localised responses in rural areas.

VAADA is hopeful that the protocols will ensure the best available care and support to young people affected by volatile substances in Victoria.

Please contact VAADA if you would like a copy of its response.

### VAADA Submission to Senate Inquiry into the Disability Discrimination Amendment Bill

VAADA has now completed its written submission to the *Inquiry into the Disability Discrimination Amendment Bill 2003* being conducted by the Senate Legal and Constitutional Committee. A copy of VAADA's final submission is now available for download on the VAADA website at [www.vaada.org.au](http://www.vaada.org.au).

## Your Say

Major David Brunt

State Coordinator, Salvation Army The Bridge Programme and VAAA Board member  
*"Highlights of 30 years service to the Alcohol and Drug Sector"*

Becoming a member of the VAADA Board last year was a particular highlight of my work in the alcohol and drug field. Having now worked in the field for 30 years I felt that service on the board may give me the opportunity to give something back to the field that has given me so much.

As a young Salvation Army Officer in 1972 I was responsible for the development of one of the first youth specific rehabilitation centres in Queensland. A decade later I was able to develop a service in Kings Cross working with young people alienated and living on the streets there.

In both developments I was ably assisted by my late wife Doreen who passed away in September 1995. Following Doreen's death I was invited to come to Melbourne, and became the Director of The Bridge Programme in 1996.

In those early days, illicit drug use was clearly linked with street crime and prostitution, and very few people wanted to understand the dynamics of it all. During those days in the early 70's there were no detox facilities in Brisbane, and the Royal Brisbane Hospital (PAV 4) was the only place that an alcoholic who needed medical attention could be sent.

Unfortunately, for myself as a young Salvation Army Officer, I had to keep cheap "plonk" or brandy in my drawer, for one of the tests of the hospital was the 'smell test', so I would pour the cheap plonk over them so that they really smelt and this would guarantee admission to the hospital.

The question of harm minimisation, even though it wasn't part of our National Drug Strategy, was alive and well in our thinking. Keeping them out of gaol became the motto of our service.

Even today, I would remind drug and alcohol workers that this is perhaps one of the most important things that we do in helping young people.

The 80's saw a major explosion in illicit drugs, and Doreen and I were transferred to Kings Cross to operate a new service on the Streets of Sydney. How do you detox people when there were no detox services available? So we developed our own service, operating in the squats and from a bus helping young people live with their drug habits.

Heroin was an expensive proposition then, and it wasn't unusual to meet people with a \$1,000 a day habit, and it was clearly linked with crime and prostitution. Corruption abounded.

In 1983, the NSW Government held a major inquiry into prostitution, particularly looking at its links with the drug scene. I wrote The Salvation Army submission to that strategy, and it was significant that organised crime figures in Sydney knew what we had said before the Government.

A couple of months later, I was cross examined on this report with a guarantee of Government confidentiality. We named names, we named places, and we named amounts. The information that was given in the four and a half hours that I was cross-examined was known to the criminals of Kings Cross, before I got back to our centre. How could this be?

Heroin use continued to abound and the debate between those who sought total abstinence in rehabilitation and methadone providers became a major concern to everyone. It is significant that this debate still continues, and many people working in rehabilitation centres condemn methadone out of hand. Regardless of our personal feelings, methadone is still one of the main treatment options available in today's climate. Methadone is the main treatment choice for pregnant women and many of our clients today either in our residential or non-residential settings, are using controlled dosages of methadone. Other drug treatments are now available, but currently methadone is the main treatment available. In spite of the criticisms, the evidence of the effectiveness of methadone maintenance in reducing heroin use and increasing clients health and wellbeing is significant.

The drug debate took another dimension in the 80's with the onset of HIV and the use of needle and syringe exchanges. The Salvation Army now runs the largest needle and syringe exchange in Australia with approximately 70,000 needles exchanged every month. There is no doubt that NSPs have done much to lessen the spread of HIV and more recently Hepatitis. Harm minimisation was here in a real way.



*Continued on page 4...*

## Calendar of Events

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| 3 March                                     | <p><b><i>Building Self-Esteem and Confidence, TRANX Training Calendar</i></b><br/>                 Presented by Tomi Redman, TRANX. One Day Workshop held at St Paul's Lutheran Community Centre. 711 Station St, Box Hill. (Cnr Elland Ave) Community Room. For program details, call Anne Smarelli 03 9886 0649. Cost \$140 + \$4 GST.</p>   |
| 12 March                                    | <p><b><i>The Immediate and Long-Term Impact of Alcohol Ingestion - Turning Point</i></b><br/>                 Lunch time seminar from 1pm-2pm. Presented by Dr Alan J Gijbers Specialist Physician at Turning Point, St Vincent's and Epworth Hospitals. Held at 142 Gertrude Street Fitzroy. Bookings essential – call Turning Point on 8413 8413.</p>  |
| 19 March                                    | <p><b><i>Understanding Benzodiazepines and Appropriate Use, Benzodiazepine Reduction and Withdrawal Support. Understanding Analgesics and Management of Analgesic Dependency - TRANX Training Calendar</i></b><br/>                 Presented by Tomi Redman, TRANX. One Day Workshop held at St Paul's Lutheran Community Centre. 711 Station St, Box Hill. (Cnr Elland Ave) Community Room. For program details, call Anne Smarelli 03 9886 0649. Cost \$140 + \$14 GST.</p> |
| 26 March                                    | <p><b><i>National Anxiety Disorders Conference 2004 - PADA (Panic and Anxiety Disorders Assistance) Recovery, Risks and Resources</i></b><br/>                 To be held at the Darebin Arts &amp; Entertainment Centre, Preston. For program details, call Anne Smarelli 03 9886 0649 or visit <a href="http://www.pada.org.au">www.pada.org.au</a></p>  |
| <i>Advanced Notice</i><br>18-20 April       | <p><b><i>Club Health 2004 - 3rd International Conference on Nightlife, Substance Use and Related Health Issues, Melbourne</i></b><br/>                 Club Health 2004 will provide an international forum for exchange of information on nightlife policy and practice. Information available at <a href="http://www.clubhealth.org.uk">www.clubhealth.org.uk</a>.</p>   |
| <i>Advanced Notice</i><br>20-24 April       | <p><b><i>15<sup>th</sup> International Conference on the Reduction of Drug Related Harm - International Harm Reduction Association.</i></b><br/>                 To be held in Melbourne. For further details Telephone 9278 8104 or fax 9328 3008</p>   |
| <i>Advanced Notice</i><br>26-27 May         | <p><b><i>Adolescent Mental Health Symposium</i></b><br/>                 To be held at the Hotel Ibis, Therry Street, Melbourne. For further enquiries phone Ausmed Conferences on 03 9375 7311.</p>   |
| <i>Advanced Notice</i><br>First week in May | <p><b><i>VAADA Budget Briefing for the Sector with DHS Representatives</i></b><br/>                 Times, dates and venue to be confirmed. For further information or to register, please contact Litsa at VAADA on 9416 0899 or <a href="mailto:vaada@infoxchange.net.au">vaada@infoxchange.net.au</a>.</p>  |

### YOUR SAY...Continued from page 3

The drug user is now challenging us all in a way that has never happened before. It was in this context that the ACT heroin trial was first mooted. We all know the divisions that this has caused in the community and The Salvation Army, as a small part of the community, was not immune from these divisions. The debate will not go away and no doubt each of us will have to face it again over the next few years.

I am indebted to the many people that I have met, both users and non-users, who have made a marked impact on my life.

Many of them are now dead, but nevertheless, the challenge of attempting to meet the needs of the new breed of drug users is going to continue to test me.

My prayer is that we each may keep an open mind, allow ourselves to be challenged by new ideas and new concepts, and in a special way, we should aim to learn to walk in the footsteps of our clients. We should work to keep them alive and keep them out of gaol - so that they can make some decisions for their own lives.

### Condolences for the passing of Arthur Toon



VAADA would like to express its condolences following the passing of Arthur Toon. Arthur served as Executive Director of Perth's Cyrenian House for 15 years and Chairperson and Executive Member of WANADA for over 10 years. Arthur was also Vice Chairperson of the ADCA Board and a member of the ANCD for 6 years from 1998. Arthur was a strong supporter of state peak bodies and a friend to many of us who work at national and state AOD policy levels. He will be greatly missed by all who knew him.