

VICTORIAN ALCOHOL & DRUG ASSOCIATION

ENEWS – daily electronic news, views and drug information
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211 Victoria Parade Collingwood VIC 3066

Phone: 03 9416 0899 Fax: 03 9416 2085

vaada@infoxchange.net.au

www.vaada.org.au

VAADA AGM

VAADA held its 2005 Annual General Meeting on Friday 30 September 2005. The meeting opened with a presentation by Prof Robert Power, Director Centre for Harm Reduction Burnet Institute. The presentation outlined the improved outcomes communities had experienced in relation to HIV and Hepatitis C infection rates through the implementation of harm reduction policies. He also touched upon the challenges for those advocating for the implementation of harm reduction policies.

This year's board elections saw five board positions become available, including:

- President
- Vice President
- Treasurer
- one ordinary member (non-metropolitan)
- one ordinary member

This is consistent with VAADA's constitution, which allows for the election of half of the board membership each year, ensuring a degree of continuity and stability within the organisation.

The three executive positions were uncontested; with the Presidents and Treasurers positions being filled by sitting members Jenny Blakey (Mary of the Cross Centre) and Geoff Soma (WRAD) respectively. Simon Ruth (PenDAP) has been elected as the new Vice President. Kate Harrington-O'Brien (Bendigo Community Health Centre) was elected to the non-

metropolitan position and Laurence Alvis (Moreland Hall) was successful in the ordinary member position.

VAADA would like to congratulate all the successful nominees and welcome them to the VAADA Board. VAADA would like to sincerely thank retiring board members Alison Ritter, David Brunt, Nic Bolto (Vice President) and Stephen Mihaly. A special thanks must be made to both Neos Zavrou (President) and Charlie Stewart (Treasurer) for their tireless service to VAADA over many years.

Thank you to those members who nominated for positions and to the forty VAADA members who attended. VAADA is grateful to all members for their continued support and involvement. Copies of VAADA's Annual Report have been sent out to members. Additional copies may be obtained by contacting Sarah at VAADA on 9416 0899.

Other business arose at the AGM in relation to an Enterprise Bargaining Agreement (EBA) for the alcohol and other drug sector (AOD). Neos Zavrou invited members to participate in a working group to progress VAADA's investigation of an EBA agreement. He added that EBA agreements are complex and would require legal and industrial relations expertise as well as additional resources for VAADA to successfully undertake this exercise. Any members interested in sitting on the working group can contact Janine Bush on 9416 0899.



*Voters at
VAADA's
AGM*



*New
VAADA
President
Jenny
Blakey*

Month in Review

Children's Bill & White Paper

VAADA provided a submission to the recently released White Paper and Children's Bill.

In sum, VAADA indicated its support for the principles underlying the new directions outlined in the new policy and accompanying legislation to protect the wellbeing and healthy development of children in Victoria. The reforms provide the potential for more effectively addressing the unique issues faced by families and young people where substance use and dependency are impacting on the well-being and future development of children and young people.

At the same time, however, without the commitment of strategic funding, VAADA's submission outlined the challenges it foresees in the effective implementation of the proposed reforms.

VAADA also emphasised its concerns about the inadequacy of the reforms to effectively articulate how alcohol & other drug (AOD) services might fit within the proposed new structures.

ADDP Act Submission

VAADA is making a submission to the review of the *Alcoholics and Drug-dependent Persons Act 1968* (the Act). The Act as it currently stands allows for individuals to be civilly committed for treatment and assessment under various sections of the Act; with section 11 being the most commonly invoked part of the act. Section 11 allows for an individual, who has committed no legal transgressions, to be assessed by an AOD service under an assessment order provided by a magistrate. There are a wide range of individuals who can request that such an assessment be made, including family members, a business partner, police or welfare officer. Evidence is provided in the form of two signed statements by medical practitioners. Section 12 allows that once committed, mechanisms are available to commit the individual to a treatment centre for an indefinite period: over the last 15 years there have no recorded cases of this part of the Act being used.

With significant developments in drug treatment theory the relevancy of this Act is being questioned in relation to the current Victorian drug treatment system.

In effect, drug treatment theory has changed in Victoria; alcoholism and drug addiction are no longer viewed as acute illnesses where cures can be imposed on individuals. Dependencies are regarded as a chronic and relapsing disorder with treatment relying on individuals to be personally motivated to alter their behaviours. The Victorian Government is reviewing the appropriateness and relevancy of the Act.

VAADA is canvassing member views on the pros and cons of keeping or repealing the legislation. Any members in relaying their views to VAADA can contact Chris or Janine on 9416 0899.

Staff Changes at VAADA

There have been some staff changes at VAADA, with Evan Sycamniyas resigning from VAADA to take up a new position at Turning Point. The staff at VAADA would like to wish Evan all the best in his new position and thank him for his contribution while at VAADA.

Leonie Farrell joined the VAADA team on a part time basis to facilitate the organisation of the February conference.

VAADA has Moved!

VAADA has moved to brighter, single floored offices that have a more effective layout for VAADA's purposes and give us a flexibility that the old space didn't allow. The new office is located at **211 Victoria Street Collingwood 3066** Other than our mail all of the VAADA contact details will remain the same.



New
VAADA
Office at
211
Victoria
Pde

YOUR SAY

Development of National Clinical Guidelines for the Management of Drug Use During Pregnancy, Birth and the Early Development Years of the Newborn Veronica Love - Women's Alcohol & Drug Service The Royal Women's Hospital

Internationally and in Australia, pregnant women with drug and alcohol issues and their babies have varying levels of pregnancy care, support and intervention, depending on where they receive their pregnancy care.

Available data on pregnancy and birth also indicates varying outcomes in relation to gestation and clinical intervention at the time of birth, birth weight, withdrawal in the newborn, and length of hospital stay after birth.

For example, reported rates of significant infant withdrawal after birth vary from 20% to 60% for infants exposed to opioids in utero. There is little data about rates of successful drug and alcohol treatment, clinical interventions, breastfeeding support, separation of mother and babies, and long term outcomes for families.

The insufficient data across Australia may be explained in several ways. Pregnant women are often excluded from research and trials, and pregnant women with drug and alcohol use are often streamed into 'high risk' models of care, likewise excluding them from pregnancy related research. Even where antenatal services report outcomes from specialist D&A clinics, the rate of nondisclosure of D&A use amongst pregnant women attending all antenatal clinics is unknown.

Reasons cited for pregnant women not disclosing D&A use include fear of judgmental attitudes by providers, and fear of child protection involvement. In Victoria there is no requirement to document pregnancy when applying for pharmacotherapy prescriber permits.

There are currently no national guidelines supporting best practice for the management of substance dependent pregnant women or their babies.

In 2001 the National Expert Advisory Committee on Illicit Drugs (NEACID) submitted a proposal to the Intergovernmental Committee on Drugs (IGCD), for the development of national guidelines for the management of neonates born to substance dependent women. This initial proposal was discussed with committees including the National Expert

Advisory Committee on Tobacco (NEACT) and National Expert Advisory Committee on Alcohol (NEACA), and with researchers and secretariats. All agreed that the increasing incidence of babies born to substance dependent women was a concern.

Ongoing discussions confirmed strong support for the development of national guidelines that would contribute to a comprehensive, coherent and consistent approach across all jurisdictions to the care of pregnant substance dependent women throughout pregnancy and childbirth, fetal and neonatal care, and care of mother and child in the crucial early developmental stages of the child's life. There was recognition of the need for multidisciplinary care providing an interface between the acute health maternity and neonatal sector, and community providers.

The project commenced as a shared funding project with the IGCD and a steering committee was formed. The major outcome for this project would be nationally endorsed, evidence-based practice guidelines on which to base a coherent and structured approach to the management of pregnant substance dependent women and their babies throughout pregnancy, birth, postnatally and early development of the infant.

The guidelines would identify the roles and responsibilities of all providers involved in the care and after-care of pregnant substance dependent women and their babies, including general practitioners, obstetricians, midwives, social workers, neonatologists, and alcohol and other drug workers, so that an inclusive, holistic and effective management approach could be planned and implemented.

Experts in pregnancy care, childbirth, developmental care in the early childhood years and drug and alcohol dependence from around Australia were invited to present trigger papers on issues representing pivotal decision points in the management of substance dependent mothers and their babies. In 2004/05 these trigger papers, subsequent review papers and a national summit have contributed to draft guidelines that are based on evidence or consensus.

Continued on back page PTO

Calendar of Events

October 13	<p><i>Responding to sexual assault – Level 2 CASA House</i> This one day workshop will extend the skills of those working with victims/survivors of sexual assault who have completed Responding to Sexual Assault – Level 1 training or have some experience working with victim/survivors and will be held between 9.30am – 4.30pm. The workshop will be held at the Conference Room, 4th Floor, Queen Victoria Women’s Centre, 210 Lonsdale Street Melbourne. Cost is \$50.00 and attendance is by booking only and limited to 20 places. Registration forms are available by contacting CASA House on 9347 3066</p>
October 14	<p><i>Counselling skills using Cognitive Behavioural Therapy (CBT) for anxiety and depression: Difficulties and solutions TRANX/PADA</i> To be held between 9.30am-4.00pm at Darebin Arts and Entertainment Centre. Costs for workshops are: \$88 inc GST for a half day workshops; full day workshops \$192.50 inc GST. Workshops will include morning tea, lunch and afternoon tea. TRANX/PADA members will receive a 10% discount as will agencies enrolling more than three staff members. For further information call TRANX on 9886 0955</p>
October 21	<p><i>Age of Drinking Onset Research: U.S. and Europe - Turning Point Talking Point Series</i> Presented by Prof Lee Strunin, Deputy Director, Partners in Health and Housing Prevention Research Center, Boston University, at 1-2 pm, Training Room, 142 Gertrude St Fitzroy, bookings essential. Call Turning Point on 8413 8413</p>
October 21	<p><i>Meditation in the Helping Professions – Mindfulness and practices Compassion for Counsellors and Their Clients TRANX/PADA</i> To be held between 9.30am-4.00pm at Darebin Arts and Entertainment Centre. Costs for workshops are: \$88 including GST for a half day workshops; full day workshops \$192.50 inc GST. Workshops will include morning tea, lunch and afternoon tea. TRANX/PADA members will receive a 10% discount as will agencies enrolling more than three staff members. For further information call TRANX on 9886 0955</p>
October 27	<p><i>Cognitive Behavioural Therapy for anxiety and depression TRANX/PADA Session to be held in Bairnsdale</i> Costs for workshops are: \$88 inc GST for a half day workshops; full day workshops \$192.50 including GST. Workshops will include morning tea, lunch and afternoon tea. TRANX/PADA members will receive a 10% discount as will agencies enrolling more than three staff members. For further information call TRANX on 9886 0955</p>
October 28	<p><i>Strategies For Working With Aboriginal And Torres Strait Islanders – Moreland Hall Lunchtime Seminar series.</i> This presentation explores some of the needs of Aboriginal and Torres Strait Islanders including a discussion of culturally sensitive strategies and practices for AOD workers. Presented by Dan Laws, Supported Accommodation Worker, Ngwala Willumbong Co-operative Ltd; Alan Thorpe, Koori Access Worker, Ngwala Willumbong Co-operative Ltd; and Matthew Graham, Koori Drug and Alcohol Linkage Worker, UnitingCare Moreland Hall. The seminar will be held from 12.30-1.30pm at Moreland Hall. For information or to register to attend please phone 9386 2876</p>

The guidelines process has included wide consultation and review at several stages, and input from international experts. The comprehensive guidelines in summary recommend that pregnant women with problematic drug or alcohol use would benefit from multidisciplinary midwifery and obstetric care and the following interventions, including:

- Appropriate referral e.g. to a drug and alcohol specialist for assessment;
- Appointment of a case manager and care team who remain consistent throughout the pregnancy;

- A range of treatments which may include counselling, pharmacotherapies; and relapse prevention.

The guidelines also make comment on issues including disclosure of D&A use, workforce development, secondary consultation, child protection, client information and partner involvement.

The draft national guidelines are now in the final phase and are awaiting endorsement from the MCDS, and are expected to be published by end of 2005.