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More reviews on the way!



VAADA recently undertook a sector survey exploring the impact of AOD sector recommissioning on system function. Amongst some of the preliminary findings there are concerns that access remains a significant issue for service users, their families and the broader community. The research identified respondent perceptions of a drop in service demand and a dissatisfaction with the new Intake and Assessment front end which is perceived by respondents as inflexible, impersonal and culturally insensitive. A range of service gaps have been outlined which include meeting the needs of families. A more detailed and final report will be available over coming weeks.

It was with some interest that we note Minister Foley's recent announcement of "A Review of new arrangements for the delivery of Mental Health Community Support Services and Alcohol and Drug Treatment Services". As we understand it Aspex consulting have been appointed to lead this quick review and will engage with the respective sectors through a variety of consultation methods including consultation forums, and an online survey in order to maximise participation of service providers, clients and carers.

On another note, despite a range of post recommissioning activity impacting the sector, VAADA was recently informed that DHHS can no longer fund our sector development position. As many would know this position has added considerable value to our work with the Victorian AOD sector over the past 6 years. Despite this significant setback VAADA staff and Board

have committed to persevere and undertake an extensive review (building on our recent survey) of the impacts of recommissioning through our statewide consultation process entitled "Regional Voices" which will be rolling out across the state in September and October. The principal objective for our consultation is to ascertain the needs of the sector and identify the perceived issues and the key solutions that can help repair a range of current systemic and operational issues. We are hopeful that despite current internal limitations we can utilise the findings from the Regional Voices consultation to contribute to the review work recently announced by Minister Foley. Over coming weeks information will be distributed regarding details about the consultation including information on dates and location.

As can be observed in this newsletter VAADA has continued its ground-breaking CALD project activity with the African, Vietnamese, Afghan Hazara, Arabic speaking Muslim, and Pacific Islander communities. At present we are seeking with the assistance of cultural liaison workers to develop five cultural inventories (community profiles) which include: an overview of each CALD community, CALD agency information, perception and health beliefs for each community and the perception of past and current CALD AOD service users.

VAADA staff have also made extensive submissions to the 'Royal Commission into Family Violence' and two Federal Ice inquiries. Details on these submissions and their various recommendations can be found in this newsletter.

Sam Biondo

Sector Development update

There is quite a bit of activity in the Sector Development program. We have been working with the various networks highlighted in previous communications and continuing dialogue with DHHS personnel and cross sectoral colleagues as to how the implementation of the recommissioned system is performing. To support findings of the VAADA sector survey and in consideration of the recently announced state government review of recommissioning in the AOD and mental health sectors, we are embarking on an exciting series of face to face consultations with the sector.

REGIONAL VOICES

Regional Voices will seek to engage sector representatives across the eight DHHS regions. These forums will be about understanding the needs of services and service users at a local level, and working towards the development of solutions to inform service delivery in the future. The forums will be facilitated throughout September and early October and seek to explore and document the opportunities and challenges directly as the sector sees them. The events will include:

- Feedback of findings from the recent VAADA sector survey
- Consultation for potential solutions to issues raised in the recommissioned AOD system
- Exploration of sector recommendations for the ongoing delivery of residential and youth AOD services
- The development of a project report to inform government understanding of the issues

VAADA looks forward to your involvement and we hope that CEOs, managers and clinicians from funded agencies are able to attend to contribute to what we hope is a very important piece of work.

Dates, locations and registration details for Regional Voices will be available soon.

SERVICE PROVIDERS CONFERENCE

We also have two other key activities planned for the second half of 2015. As previously communicated VAADA is organising the AOD Service Providers Conference. This forum, to be held on 4th September at the Darebin Arts Centre in Preston,

will be an opportunity for a range of people within funded organisations to come together. These conferences haven't been held for a number of years and we are excited to be part of these events moving forward.

Please register your attendance at:

<https://www.eventbrite.com.au/e/victorian-aod-service-providers-conference-tickets-17613194539>

WORKFORCE SURVEY PROJECT

Finally we wanted to note the delivery of the next Workforce Survey project, which you may recall was undertaken in late 2013. This involves surveying funded agencies, as well as workers across the system in relation to a range of workforce related issues. The intention is to facilitate these surveys every two years and it is believed that this

upcoming process will be critical to identify workforce impacts from recommissioning. We had an excellent response from the sector in the previous study and hope that the 2015 effort is as successful. Project details will be released when they become available.

If you have any queries or comments please contact Brad Pearce at bpearce@vaada.org.au

Findings from VAADA Sector Recommissioning Survey

In April 2015, VAADA distributed a survey to AOD service providers seeking feedback on a range of issues related to the recommissioning of AOD services. The survey covered various topics and included questions related to perceived changes to demand and numbers in treatment; staff and workforce issues and the perceived benefits and challenges of the Catchment Based Intake & Assessment model. The survey was not intended as an evaluation of recommissioning but as a tool to gather information on the impacts of recommissioning on AOD services.

VAADA received a total of 49 responses representing services across the 16 catchments and delivering a range of AOD treatment services including Intake & Assessment functions, Counselling, Care & Recovery Coordination and residential services amongst others.

A preliminary analysis of the survey findings was released in May with a final report on the survey findings due for release in July.

“The workforce is feeling bruised.” – survey respondent

It is clear that the changes associated with recommissioning have had wide-ranging impacts on AOD agencies, their staff and most importantly, on service users themselves.

The scale and complexity of the changes associated with recommissioning has meant the experience of AOD service providers is variable, yet the VAADA survey found some striking commonalities of experience as well. The findings of this survey indicate:

- Access remains a significant issue across the AOD sector with a view that the new system has reduced access points for service users, their families and the broader community
- Service user demand appears to have dropped, alongside the numbers of people in treatment

“I do not believe there are now fewer clients, but feel that many clients have had difficulty accessing services or have stopped trying to access service after initial difficulties.” – survey respondent

- The separation of the Intake & Assessment function from AOD treatment was viewed by many survey respondents as a barrier to access and may be contributing to fewer people reaching AOD treatment
- The new Intake & Assessment model was seen by some as impersonal, inflexible and not always culturally sensitive or age-appropriate
- There continue to be challenges with fragmentation within the AOD sector and between the AOD and other health and community sectors
- There appear to be substantial shifts in the AOD workforce as a result of recommissioning and ongoing challenges with recruitment and retention of highly skilled and experienced staff
- Recommissioning of AOD services appears to have created a number of service gaps including diminished capacity for responding to the needs of families

VAADA will use the findings of this survey, alongside other information gathered from service providers, to inform advocacy efforts going forward and to continue to support AOD services to find solutions to challenges brought about by recommissioning.

“It is difficult to pinpoint why there has been a drop in clients accessing AOD treatment, there are varying possibilities. However from speaking with other AOD services this is not limited to our local area it is across the state which would indicate that it is reform related. However, ascertaining if this is a positive outcome ie. Clients are contacting I&A services however being referred to primary health services, GPs who are meeting the clients’ needs by providing brief interventions and education or if it is a negative ie. the catchment based I&A system is not working and clients are not contacting I&A service due to the process in place.” – survey respondent

Federal ice inquiries – VAADA's submissions

Methamphetamines continue to feature prominently as a significant challenge in public life. Issues related to methamphetamines, including ice, are regularly reported across the spectrum of media and have been highlighted by politicians at state and federal levels as an acute and pressing problem, with some citing it as being the most significant AOD issue. There are mixed views on the severity the problem as well as its remedy.

The high level of political and social interest in this issue has generated a number of activities in a range of forums across the nation. A number of states have developed various strategies and plans, including Victoria, with the Ice Action Plan. At a federal level there are two areas of activity; the Ice Taskforce was convened earlier this year, chaired by former Victorian Chief Commissioner Ken Lay. There is also a Parliamentary Joint Committee on Law Enforcement inquiry into methamphetamine which is running simultaneously with the Ice Taskforce. VAADA completed submissions to both the Ice Taskforce and the Parliamentary inquiry with both submissions covering a fairly broad range of similar issues.

In brief, VAADA's submissions highlighted the following:

- The need for enhanced data collection tools at a range of levels to ascertain the level of consumption, harms and service demand related to methamphetamines
- The need to enhance the capacity of the public AOD sector to meet demand, as well as the need to address some of the service deficits evident in some rural and regional areas of Victoria
- Various means to divert individuals engaged in AOD related offending away from the justice system by enhancing diversion programs and expanding the Drug Court of Victoria
- The need to build the capacity of associated sectors which engage with methamphetamine dependent individuals to optimally respond to the needs of this population
- Ensure that there are robust supports in place to assist the families of individuals experiencing methamphetamine dependency

VAADA's submissions highlight the need to ensure that there is adequate treatment capacity to meet demand, that the measures in place to reduce the harms associated with methamphetamine are evidence informed and well resourced.

- The need to enhance harm reduction endeavours
- The need to enhance the capacity of the emergency department workforce to provide enduring positive outcomes for individuals frequently attending emergency with methamphetamine (and more broadly AOD) related issues through improved pathways into the treatment sector
- Ensuring that there are strategies in place to address the needs of identified at risk communities in relation to methamphetamines

VAADA's submissions note that there has been a general reduction in amphetamine consumption in the community from 2001 to 2013 (from respectively 3.4% of the population to 2.1%), however, we note that there has been an increase in more regular consumption, and of concern, a shift from powder to ice, the latter which generally is of greater purity and therefore potency. Our submission further notes the increase in consumption of amphetamine type substances in rural and regional areas of Victoria. There is also an increase in methamphetamine related mortality, ambulance attendances and AOD treatment demand, which is all indicative of, at a minimum, an increase in harms, but not necessarily an increase in population wide consumption.

VAADA's submissions highlight the need to ensure that there is adequate treatment capacity to meet demand, that the measures in place to reduce the harms associated with methamphetamine are evidence informed and well resourced. As noted above, there are a range of populations which are at heightened risk of methamphetamine related harms, including but not limited to Aboriginal communities, CALD communities, LGBTI communities as well as specific workforces, especially those which engage in long hours or a 'fly in/fly out or drive in/drive out' type of work, such as mining, transport or hospitality.

Finally, there is a need to ensure that the various plans and strategies are well coordinated and that the myriad of harms occurring through broader AOD use are not subsumed by the current emphasis on ice.

CALD AOD Project update

In the last project update (February 2015) we reported on the five communities we opted to focus on in the second half of the project, using a needs based model, including the African, Vietnamese Arabic speaking Muslim, Pacific Islander and Afghan Hazara communities. For each of these communities a specific location was chosen, with the aim of covering as broad a spread of catchments across the state as possible.

In order to more effectively engage these communities it was decided that we needed to involve CALD Liaison Workers (CLWs) – bi-cultural staff drawn from a range of different organisations who could act as intermediaries between their community, key service providers and VAADA.

More specifically their role has been to:

- Provide advice and guidance on the roll-out of the project and development of project resources
- Facilitate access to CALD communities and other key stakeholders using formal and informal networks
- Liaise with CALD community members and/or representatives about the project, their specific health literacy needs and ways CALD AOD issues are most effectively communicated

This has been a key element of the project, enabling us to establish relationships with key people from each community, and in the process, come to appreciate CALD AOD issues from each community's perspective.

The information and advice provided by the CLWs is currently being used to develop five cultural inventories (community profiles), one for each catchment. Each profile will incorporate information pertaining to four domains of enquiry.

1. **Overview of each CALD community** – focusing on how each community is structured as well as a description of the networks and key people within that community (centred on, but not limited to those catchments in which the CALD AOD Project is operating), as well as a description of the communication/media channels through which information is currently disseminated

In order to more effectively engage these communities it was decided that we needed to involve CALD Liaison Workers (CLWs) – bi-cultural staff drawn from a range of different organisations who could act as intermediaries between their community, key service providers and VAADA.

2. **Agency information** – including an overview of each agency in which CLWs are operating (i.e. mission and role of the agency, organisational structure and the services provided to CALD community members)
3. **Perceptions and health beliefs of CALD community members** – focusing on the perceptions and health beliefs of CALD community members related to alcohol and other drug (AOD) use, culturally appropriate treatment responses and ways CALD AOD issues are most effectively communicated within that community
4. **Perceptions of past and current service users** – identifying, where possible, the experiences of CALD community members navigating the AOD service system

In the next project update we will report on some of the key findings which have emerged, focusing on the:

- Challenges and opportunities of undertaking such a process (with particular reference to the measures undertaken to address the cultural sensitivities and taboos associated with CALD AOD issues)
- Key similarities and differences between the various CALD communities

We will also report on a second stream of activity, one intended to strengthen the ties between CALD communities, AOD treatment providers and other key decision makers in each catchment, including:

1. A roundtable discussion in each of the catchments
2. Site visits by CALD representatives to AOD services
3. CALD AOD forum

It is VAADA's hope that this will generate interest and commitment well beyond the life of the project, as well as promote greater levels of understanding and trust between all parties concerned. More details to come.

In the mean time, for more information about the CALD AOD Project please contact John Quiroga (Project Officer – Sector Development) on (03) 9412 5602 or jquiroga@vaada.org.au

calendar

4 AUGUST

What's the real story with ICE?

Mornington Information & Support Centre
Mornington

Registration:
www.trybooking.com/IGLF

13 – 14 AUGUST

Australian youth AOD conference

YSAS
Melbourne

Information and Registration:
www.youthaad.org.au/conference2015/

21 AUGUST

Adolescent AOD use: effects, impact and prevention – one day workshop

Turning Point
Fitzroy

Information and registration:
<http://www.turningpoint.org.au/Education/Professional-Development.aspx>

27 AUGUST

Injecting drug use research update

Burnet Institute – CREIDU
Melbourne

Information and registration:
elise.carrotte@burnet.edu.au

4 SEPTEMBER

Victorian AOD Sector Service Providers Conference

VAADA & DHHS
Darebin

Registration:
www.vaada.org.au/events/

21 - 23 OCTOBER

8th ACSO International Criminal Justice conference – Do prisons change lives?

ACSO
Melbourne

Registration and information:
<http://acso.conferenceworks.com.au/>

The VAADA website now hosts an online calendar where events can be uploaded and sighted. To access this free online service, go to www.vaada.org.au/events

Royal Commission into Family Violence

In May 2015, VAADA provided a submission to the Royal Commission into Family Violence. Our submission focussed on the links between AOD misuse and family violence, recognising the complex and multidimensional nature of this relationship.

Families experiencing violence are also likely to be dealing with multiple, complex and inter-related issues of which AOD misuse may be one factor. VAADA's submission recognised AOD misuse can be both a consequence of family violence as well as a contributing factor and that the capacity of AOD services to respond to family violence needs to be enhanced. Alongside this, there is a clear need for improved coordination and collaboration between AOD and family violence services.

A key recommendation called for the development and delivery of a comprehensive whole-of-sector capacity building project to enhance AOD services' capacity to respond to family violence. The submission also recommended cross-sector capacity building; ongoing resourcing for AOD services to allow for the continuation of family inclusive programs within AOD services; safe and appropriate accommodation options be made available for women experiencing family violence who also experience AOD issues; as well as ensuring future policy frameworks, strategies and action plans across AOD and family violence include greater recognition of the association between family violence and AOD misuse, including actions and priorities to address the co-occurrence.

A full copy of the submission can be found on VAADA's website:

http://www.vaada.org.au/wp-content/uploads/2015/06/VAADA-Submission-to-Royal-Commission-into-Family-Violence_29May.pdf

Copies of other submissions received by the Royal Commission can be found at:

<http://www.rcfv.com.au/Submission-Review>

The Royal Commission commenced Public Hearings in Melbourne on 13 July 2015.

Victorian Alcohol & Drugs Association

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