

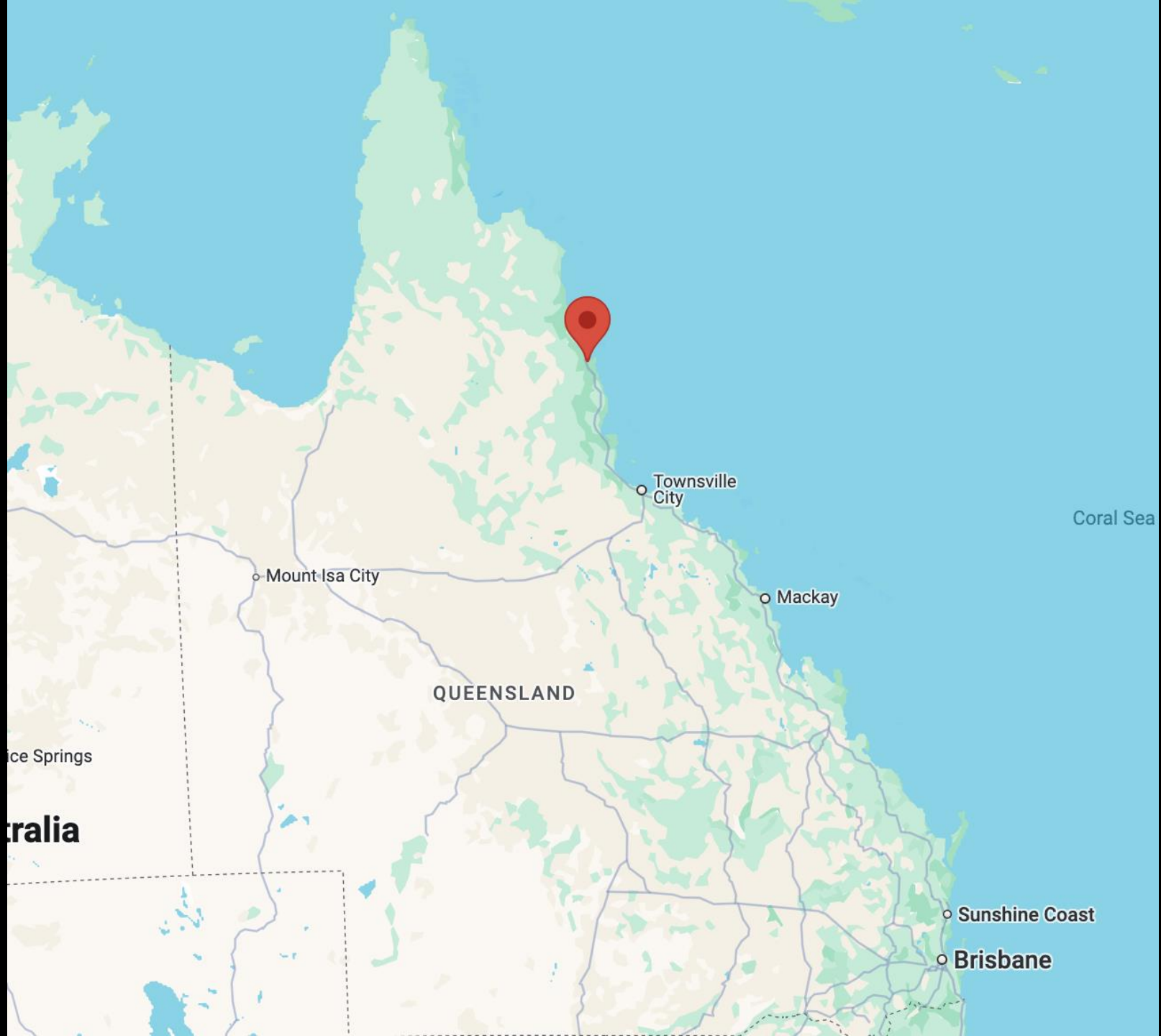
Exploring the individual multidisciplinary team roles in alcohol and other drugs

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Wurundjeri Woi-wurrung and Bunurong / Boon
Wurrung peoples of the Kulin





1.What we did

2.What were our conclusion

3.Why should we care about the AOD space

4.Dive into the individual disciplines

5.Summary

Mini Review

Harm Reduction

Peer Work

Social Work

Pharmacy

Nursing/Nurse Practitioners

Psychology

The worrying, current state of addictions training in medicine



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Peer and Harm reduction work ----→ Distinctive disciplines

NPs and Pharmacists-----→ More scope of Practice

More Research -----→ Metro Vs Rural

Q1- In 2013, death from stimulant were sitting at 0.8 per 100,000 population.

What is the number in 2022?

a. 0.7 b. 1.5 c. 0.5 d. 1.8

d. 1.8 per 100,000

Q2- Opioids is even higher than stimulant and remains the cause of most drug - induced death in Australia.

How high is it? Per 100,000.

a. 10 b. 2.0 c. 4.0 d. 7.0

c. 4.0 per 100,000

Q3- According to WHO, in 2019, alcohol consumption can be attributed 2.6 million deaths.

What percentage is this to all deaths in the world that year?

a. 4.7% b. 0.2% c. 6.0% d. 0.6%

c. 4.7%

In 2022, there were 1742 alcohol induced deaths in Australia

0.91% of all deaths in 2022

9.1% increase from 2021



National Survey

2005 ---→ 5 Professions groups

2020 ---→ 35 Professions

Workforce ---→ Women and middle age

Most vocational and tertiary qualified

A third with no AOD related qualification

Nursing

- Graduate Nurse ----- Very little AOD Training
- Selected Regional Nurses ----- Minimal confident in referral protocols
- NEW AOD Nursing Subject 2021 + 2022 Trial

Nurse Practitioners

1. Medication-Assisted Treatment for Opioid Dependence (MATOD)
2. Managing withdrawals
3. Blood-borne viruses
4. Sexually transmitted diseases

Nurse Practitioners

- From 2022 – Connecting, Coaching and Changing Lives (CCC)
- Improved self confidence and capability
- NPs value the peer supporting and mentoring
- Position Shortage, Colleagues resistance, Lack of MBS reimbursement

Psychology

- Preventative approach, addressing risk factors
- <40% Clinical Psychology program focus on addiction
- Bridging mental health and substance use treatment important
- Trauma focus therapy and Integrated CBT for PTSD + Substance

Pharmacist

- MATOD ----- Methadone or buprenorphine
- South Australia ----- Co-prescribe MATOD
- Continuity of care and convenience
- Nicotine vaping products
- Drug courts and in patient addiction team

Social Work

- Limited addiction training
- Social isolation and disconnection ---→ Addiction
- Dislocation theory = Individual treatment ineffective
- Fragmented intimacy theory = Substance ---→ destruction of other intimacy
- Mostly direct contact with patient

Harm Reduction

Pragmatic strategies, programs and intervention ---→ Minimise Harm

Safe injecting

Safe sex product

Drug testing

Drug safety education

MATOD

Overdose prevention

Reduce blood-borne viruses

Harm Reduction

Recognise

Pleasure in drug use experience + Functional mediator of life

Harm Reduction ---→ Challenge stigma

Peer Work

Lived or living experience of substance use

RHDUTPLN

Reducing Harmful Drug Use Through Peer Led Networks

2017

Peer Work

Feeling of pride, purpose and belonging ---→ Protective factor

Overlap between Harm Reduction and Peer Work

Where from here?

Urban vs rural

Systematic review for each field

Cover more fields such as Occupational Therapy

Summary

1. Morbidity statistics of AOD
2. Demographic data of the workforce
3. Nursing
4. Nurse Practitioners
5. Psychology
6. Pharmacy
7. Social Work
8. Harm Reduction
9. Peer Work

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Thank you for listening

Questions?