

SUBMISSION TO THE INQUIRY INTO DRUG LAW REFORM ON BEHALF OF ECHUCA REGIONAL HEALTH (ERH)

The following is a summary of issues that have been identified by consumers or employees of Echuca Regional Health.

Incarceration for Alcohol and Other Drug (AOD) Related Offences

Issues identified related to AOD related incarceration

- Limited access to programs for AOD, Mental Health and individual counselling
- When programs and counselling were available, clients found this to be a positive experience.
- Exposure to illicit and prescription drugs in prison was identified as high
- Other Prisoners standing over clients for prescription medications
- Exposure to assault and abuse whilst incarcerated

Medical Issues

- Numbers of clients who have Acquired Brain Injury, Mental Health and or other disability appears high amongst people who identify using alcohol or other substances, yet this is rarely screened for pre-sentencing or whilst incarcerated.
- Opportunity for Neuropsychology Assessments and screening for cognitive function would indicate persons function and ability to commit to participate in treatment orders.
- Echuca Regional Health runs a Pharmacotherapy Program which includes GP, Nursing, access to AOD clinicians and Pharmacy which provides a holistic approach to addiction. This program enhances the holistic approach to health care and would benefit from additional specific funding.
- Specialist AOD Health clinics could be established that would address both medical and social issues.
- Prescriptions for Drugs of Dependence should be linked in an Australian Wide data base so that clients are unable to doctor shop for scripts.
- Residing on a boarder of VIC and NSW becomes problematic for funding and accessibility for clients. Services that are impacted by state funding for border regions includes, Child Protection, Mental Health, Pharmacotherapy Prescribing, Justice, Corrections.

Community Work

Many clients have identified concerns when partaking in group community work activities for Alcohol or other drug related offences.

Issues identified in this area are:

- The work is at times boring with too many breaks, not enough to keep them busy.
- Some clients state that they have difficulty getting to work, this is pertinent in regional areas where public transport is often limited.
- Clients have identified offending behaviours including being offered illicit drugs whilst on group community work activities.
- Clients who have Mental Health issues, including anxiety disorders, feel overwhelmed by the thought of participating in group community work.

General

- The number of clients who attend our service that have poor daily living skills is high. In order to break the cycle of Alcohol or drug use, clients seem to do better if they have supports, if they have social and daily living skills. This could include the introduction of access to daily living activities such as meal preparation, shopping, hygiene, budgeting, establish bill paying, housekeeping.... things often that our client group have not been shown.
- Clients could benefit from supported accommodation model where there are cluster type housing with a worker on site to assist them with daily living, completion of forms, medical and general support, referral and counselling if needed. There is a model as such in the UK that seems to have some great outcomes. See link to recent presentation –Lateline - 01/03/2017: Interview: Dr Cameron Parsell and Danni Addison www.abc.net.au/lateline/content/2016/s4628873.htm
- Transportation is a significant barrier to be able to access service and supports in a regional area.
- Clients from our local community are expected to travel more than an hour to complete urine drug screens. They may be pressured by Centrelink to look for employment and at the same time be expected to meet regularly with parole/corrections, undertake community work, see counsellor, look for housing and address medical issues. It would be great if people on orders were able to have a graduated requirement with Centrelink e.g. not needing to look for employment whilst on order, but undertake beneficial programs that would link them into real jobs.

- Clients may benefit from setting up a program that links offenders into employment. A group in Bendigo do this with youth where local community members offer jobs to youth exiting the justice system.
- Provide additional funding to obtain drivers licence, literacy programs, preparation for interviews and, grooming and presentation
- More emphasis on Detox and Rehabilitation programs and more availability, including transport and funding to access these programs.
- Police checks – many clients state that they have difficulty gaining employment once they have had a police record.
- Laws regarding media publicity impacts on clients. Local paper frequently names clients and writes up stories about court matters. This is a name and shame tactic that is not useful for clients' recovery or engagement back into the local community. Laws around media exposure should alter.
- System where the client who has committed a crime against another person or property may benefit from some type of program where the impact on the victim is able to be provided to the perpetrator.
- Many drink drive clients re-offend. Drink drive clients often then incur loss of employment and finance which at times adds to their social issues and recovery from alcohol and other Drug use.
- High numbers of people admitted to hospital are associated with Alcohol and/or drug dependence. Availability of funded Detoxification beds in rural communities could be beneficial.

Suggestions

- When sentencing offenders with Alcohol and Drug Dependency issues, Law reform should take into consideration the implementation of relevant assessment for Acquired Brain Injury, trauma, Mental Health and other cognitive impairments.
- Law reform should support broader opportunities for Community work in regional areas and extend availability of individualised community work opportunities for people who are vulnerable to continued drug use or who have significant Mental Health or cognitive impairments that may make it difficult for them to complete community work requirements.
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- Law reform should provide opportunities for people with Alcohol and or drug dependence to re-engage back into the community by providing greater opportunities for employment, training and support. These opportunities should be integrated into pre and post sentencing options and should also take into consideration housing and health. Changes to Centrelink reporting requirements should change so that clients are able to meet both Centrelink and legal requirements.

Services provided by Echuca Regional Health

Echuca Regional Health is funded through the Victorian State Government in the areas of counselling and Care and Recovery Coordination. Echuca Regional Health provides a Pharmacotherapy Program which is not state funded. A privately funded Drink Drive Program is co-ordinated through the organisation. ERH employees operate in the Alcohol and Other Drugs team. Details of the Manager of this service are below:

Neesha Woodward
Alcohol and Other Drug Services Manager
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Neesha is the Alcohol and Other Drug Services Manager at Echuca Regional Health and has been employed in this sector since 2000. She works directly with individuals, couples and families in a clinical counselling and case management role. Neesha also works with Forensic and Voluntary Clients. Neesha has a Diploma of Alcohol and Other Drugs Work, Certificate IV in Assessment and Workplace Training, Bachelor of Social Work and an Associate Diploma in Welfare Studies.