



ATCA

AUSTRALASIAN
THERAPEUTIC
COMMUNITIES
ASSOCIATION

Inclusion

Change

13 - 16 October 2014

Crowne Plaza

Coogee Beach

Love

SUPPORT

Health

Life

Positive

Happy

Hope

Trust



Recovery Families UNDERSTANDING

Conference

Handbook

28th INTERNATIONAL CONFERENCE
OF THE AUSTRALASIAN THERAPEUTIC
COMMUNITIES ASSOCIATION

Silver Sponsor



Foundation for Alcohol
Research & Education

Proudly supported by





STOPPING HARM CAUSED BY ALCOHOL

**World leading research
Strategic policy and advocacy
Community partnerships
Defending the public interest
Leading change**

The Foundation for Alcohol Research and Education (FARE) is an independent, not-for-profit organisation working to stop the harm caused by alcohol.

Alcohol harm in Australia is significant. More than 5,500 lives are lost every year and more than 157,000 people hospitalised, making alcohol one of our nation's greatest preventive health challenges. The devastation doesn't stop there; the high personal and financial toll extends well beyond the individual drinker. Each year nearly 400 people die, and 70,000 Australians are victims of alcohol-related assaults, including 24,000 victims of alcohol-related domestic violence. All these harms cost the nation an estimated \$36 billion annually.

FARE has been working since 2001 with communities, governments, health professionals and police across the country to stop alcohol harms. In that time FARE has helped more than 750 communities and organisations, and backed over 1,400 projects around Australia.

 @FAREAUSTRALIA
  FARE
  SUPPORTFARE
  INFO@FARE.ORG.AU
  FARE.ORG.AU
  02 6122 8600

FOUNDATION FOR ALCOHOL RESEARCH AND EDUCATION LTD Level 1, 40 Thesiger Court, Deakin ACT 2600 PO Box 19, Deakin West, ACT 2600

Acknowledgements

The Australasian Therapeutic Communities Association wishes to thank its members and colleagues in the alcohol and other drug sector for their interest and support. ATCA would especially like to acknowledge the Foundation for Alcohol Research and Education Ltd (FARE) as a Silver Sponsor of the 28th Annual Conference of the ATCA.

The Alcohol and Other Drugs Conference Program is supported by funding from the Australian Government under the Substance Misuse Prevention and Service Improvement Grants Fund and is managed by the Foundation for Alcohol Research and Education.

We also acknowledge the Australian Government Department of Health (DoH) for their financial support of the ATCA Secretariat and the development and implementation of the Australasian Therapeutic Communities Association (ATCA) Standard.

Australasian Therapeutic Communities Association
PO Box 464
YASS NSW 2582

T: 0422 904 040

E: atca@atca.com.au
W: www.atca.com.au



WELCOME



GARTH POPPLE
CHAIR, ATCA

On behalf of the ATCA Board and the 2014 Conference Organising Committee, I would like to welcome you to this 28th Annual Conference of the ATCA. Twenty-eight years is a magnificent achievement, and with a number of our TCs having been established for more than 10 years at the inception of the association, this represents a truly inspiring record – not only as a record of service to the community, but as an indication of the number of lives supported and saved over the past 42 years of Australasian TC treatment.

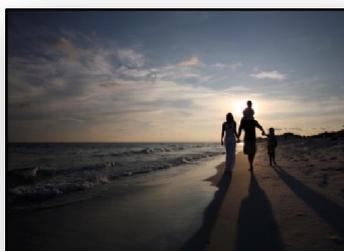
This year's conference theme: *TC's Positive Journey: Positive Outcomes*, reminds us that the process of recovery is a journey – and that 'one size' or one single approach will not in fact 'fit all'. The outcomes which we see on a daily basis from therapeutic community are extremely positive, and a growing body of research is illustrating this fact. Our services are also constantly evolving and changing as they develop more treatment options in community and correctional settings. As research evidence grows, our members are also widening their service provision in both residential and non-residential settings, and including both abstinence-based and medically-assisted treatment options within a harm-minimisation framework.

The stories we hear every day from our residents and clients, from families and service providers, show us the impact of treatment and the journey of those who are involved in the process. They inspire and encourage us to keep going.

This year's Conference Organising Committee of Gerard Byrne (Salvation Army Recovery Services), Mark Ferry (Ted Noffs Foundation), Lynne Magor-Blatch (ATCA Executive Officer), James Pitts (Odyssey House McGrath Foundation) and Garth Popple (WHOS) offers a program that is rich in variety. It includes the latest research from 11 years of the Australian Treatment Outcome Study (ATOS), which examined long-term trajectories of heroin use; Australian success stories in which the environment has been used to change alcohol-related behaviour; and positive outcomes for Aboriginal and Torres Strait Islander, Māori and Pasifika peoples undertaking treatment within both community and correctional settings. There are plenary and breakout sessions which will focus on innovation, new trends and old messages which speak of the roots of TC treatment and the quality framework in which the ATCA not only sits, but is leading the way.

The ATCA Conference fills an important role in the TC calendar as it provides the opportunity to learn, to be enthused with new ideas, and to meet colleagues and develop new friendships and networks. This year we have delegates from Australia and New Zealand, Europe, Canada and Asia.

We look forward to the next four days and welcome you to the 28th Annual Conference.



REGISTRATION

The registration area for the conference is at the Oceanic Ballroom entrance.

The registration table will be open during these hours.

Tuesday 14 October	8 am – 5 pm
Wednesday 15 October	8 am – 5 pm
Thursday 16 October	8 am – 5 pm

HOTEL CHECK IN & CHECK OUT

Check-In at the Crowne Plaza is from 2pm and Check-Out is 11:00am.

If you have requirements outside these times, please contact the hotel directly on: (+61)2 9315 9124.

Ensure that you notify staff that you are part of the ATCA Conference.

PRE CONFERENCE TC VISITS

Monday 13 October

- Tour 1** Odyssey House
Campbelltown & Art Therapy Workshop
8.45 am to 4.30 pm

- Tour 2** Salvation Army Dooralong Transformation Centre and Workshop: Using the
environment to promote growth and change.
8.15 am to 4.30 pm

- Tour 3** Ted Noffs Foundation Randwick and Interactive Workshop: Developing & sustaining
a modified Adolescent TC.
8.30 am to 2.00 pm.

- Tour 4** Ted Noffs Foundation Randwick; The Salvation Army's William Booth House Surry
Hills; and WHOS Rozelle.
8.30 am to 3.30 pm.

WELCOME FUNCTION

Monday 13 October Blue Salt Bar from 7.00 pm – 9.00 pm.

For those registered for the full conference, your attendance to the Welcome Function is included.

This function will not replace a dinner, and light canapés will be served. This function will include complimentary soft beverages for delegates.

SPECIAL MEALS

For those guests who have pre advised of special meal requirements, please advise at the registration desk of your arrival and further instructions will be provided.

PRESENTATIONS FROM THE CONFERENCE

Where permission has been provided by the presenter, all presentations will be available on the ATCA website within 2 weeks following the conference.

CONTACT

Running late or need conference help, call Sandy on 0416 559 334.

CONFERENCE DINNER

Wednesday 15 October Oceanic Ballroom, Crowne Plaza Coogee

6.30pm – 11.00pm.

This year's Awards dinner is set to be an outstanding evening of celebration and inspiration.

Our special guest is Paul Nunnari, Paul's journey highlights the power of self-belief and we are delighted that Paul is here to celebrate with us this evening.

We are also very lucky to have **The Pioneers** to perform. The Pioneers are a Megacrew from The Street University in Liverpool. They have been together since January 2013 and have competed and performed at various events. The group is culturally diverse and the members come from areas such as Blacktown, Mount Druitt, Liverpool, Campbelltown, The Shire, Bankstown, and the Blue Mountains. Some of their achievements include 1st place at HHI Sydney, 1st place at Street Legacy in 2013 and 2014, and making the Top 20 at Hip-hop International in Las Vegas in 2014.

They will entertain and inspire!

Join us for a personally selected 3 course dinner of entre, main meal and dessert. This is an alcohol free event, soft beverages will be provided.





AWARDS DINNER GUEST SPEAKER

Paul Nunnari won the hearts and minds of Australia when he recently appeared on Australia’s Got Talent as extreme wheelchair aerialist, “The Other Superman”. Flying his way all the way into the grand final, Paul enthralled judges and audiences alike by defying expectations through his extreme aerial performances that were a world first.

Paul is also a former Paralympic silver medallist, having represented Australia in road and track racing in Atlanta, Sydney and Athens Paralympic Games.

KEYNOTE SPEAKERS



Professor Amanda Baker is a National Health and Medical Research Council (NHMRC) Senior Research Fellow. Amanda is a clinical psychologist who has practised in the United Kingdom and Australia. Her research focuses on the challenging area of the psychological treatment of co-morbidity (co-existing mental health and tobacco, alcohol and other drug problems). She has been a Chief Investigator on numerous randomised controlled trials of psychological interventions among people with coexisting mental health and substance use problems, including smoking. Professor Baker is currently conducting several studies investigating the effectiveness of healthy lifestyle interventions among people with coexisting problems.

Amanda will provide two sessions – the first on **Tuesday at 10.45am** when she will address **Treatment of Co-existing Depression and Substance use**; and the second on **Wednesday at 12.30pm**. This session, **Tobacco and TCs – Fraternising with the Enemy?** will be followed by papers in Stream 2 at 2.15pm which highlight the challenges of establishing smoke-free TCs and healthy lifestyles.



Professor David Best, who until recently held a joint appointment with Monash University and Turning Point, Melbourne, has been appointed Professor of Criminology and Law at Sheffield Hallam University, UK. David has previously worked in academic research at Strathclyde University in Glasgow, the Institute of Psychiatry in London, Birmingham University and the University of the West of Scotland. He has worked in policy research at the Police Complaints Authority, the National Treatment Agency and the Prime Ministers' Delivery Unit. David has, since taking up his appointments in Australia, developed a number of research projects with TCs which have provided valuable evidence on the effectiveness of the TC model and specific program interventions. He has recently headed up a project in which Turning Point was the lead agency in a consortium of addiction academics, practitioners and experts in quality standards to develop a model for quality assurance across all of the agencies funded under two initiatives: the Non-Governmental Organisations Treatment Grants Program (NGOTGP) and Substance Misuse Services Development Grant Fund (SMSDGF).

David will present two papers – the first on **Tuesday at 3.15pm** will highlight TC and related research and will be followed by a plenary session when **Dr Jo Lunn** and **Gerard Byrne** will particularly focus on the How, When, Where and Why of TC research and suggest ways of closing the gap between research, evidence base and front-line service delivery. David's second paper, on **Thursday at 11.00am**, will provide a report on the Australian Government funded Quality Framework project and will form part of a Plenary Session when **Barry Evans**, consultant working with the ATCA on the Standards Project, and **Julie Nyland**, from Breaking New Ground (BNG), will present on developments with the ATCA Standard and ATCA Portal on BNG website.



Dr Bosco Rowland is a registered psychologist and currently an Alfred Deakin Post-Doctoral Fellow, with the School of Psychology at Deakin University. He has worked on a number of large community trials focussed on preventing and reducing alcohol related harm. Currently he manages the implementation of the Smart Generation ARC Linkage trial; a trial aiming to prevent the use and uptake of alcohol by Australian adolescents across Australia. He has worked on the Randomised Community Trial of the Good Sports Program, a program that helps community sports club manage and consume alcohol responsibly. He works collaboratively with academic institutions across Australia, including the Centre for Adolescent Health, Newcastle University, Turning Point Drug and Alcohol Centre, and Hunter New England Population Health and is an active member of Australian Research

Alliance for Children and Young people contributing to prevention evidence publications on key drug and alcohol topics.

Bosco will present on ***Using the environment to change alcohol-related behaviour for populations: Success stories in Australia***, on **Wednesday** as part of the morning's plenary session at **9.45am**, and then take part in the **panel discussion** which follows at **11.35am**.



Mr Steve Ella is the NSW Aboriginal Drug and Alcohol Traineeship Coordinator. Steve was inducted into the National Indigenous Drug and Alcohol Honour Roll in 2012 at the NIDAC conference in Fremantle, and awarded the First Peoples award at the Australasian Professional Society on Alcohol and other Drugs (APSAD) conference in Brisbane in 2013. Steve is a mentor for the NSW Aboriginal Drug and Alcohol Leadership group and previously lectured at Sydney University as an Adjunct lecturer. He has co-authored a handbook for Aboriginal Alcohol and Drug Work, and also serves on a variety of Aboriginal drug and alcohol committees in the state of NSW.

Steve will present on ***Issues and Sustainability of the Aboriginal Alcohol and Drug Workforce*** on **Wednesday** at **9.45am**.



The 2014 ATCA Conference Organising Committee is delighted to also welcome **Professor Maree Teesson** into the conference program to present the **Opening Address on Tuesday 14 October at 9.35am**. This follows the official opening by The Hon Jai Rowell, NSW Minister for Mental Health and Assistant Minister for Health. Maree will present: ***Longitudinal trajectories of heroin use***.

Longitudinal naturalistic studies of heroin dependence provide the unique opportunity to examine predictors of remission, criminality, mortality, psychopathology and long-term treatment outcomes. Indeed, although there has been much research examining heroin dependence from cross-sectional perspectives, the comparably few longitudinal cohort studies allow long-term trajectories of heroin use, abstinence and other comorbid disorders to be examined. Long-term patterns and trajectories of heroin use have important implications for treatment responses, clinical practice and policy. This presentation draws on data collected from the Australian Treatment Outcome Study (ATOS) over 11 years, to examine long-term trajectories of heroin use.

Participants were administered the ATOS structured interview, addressing demographics, treatment history, drug use, heroin overdose, criminality, health and mental health. 431 (70.1%) of the original 615 participants interviewed at baseline were reinterviewed at the 11-year follow-up, and 63 (10.2%) were deceased. Overall, 96.1% of the cohort completed at least one follow-up interview over the study period. Six distinct patterns of heroin use were seen over the 11 years: i) rapid decrease to maintained abstinence; ii) rapid decrease with rapid relapse; iii) rapid decrease with late relapse; iv) gradual decrease to near abstinence; v) gradual decrease; and vi) no decrease. The findings provide evidence for early and sustained intervention, a need to treat both mental health and substance use disorders in people with heroin dependence, and indicate periods of time where people in particular groups may be especially vulnerable to relapse, and may therefore benefit from additional support.

Professor Maree Teesson is Director of the NHMRC Centre of Research Excellence in Mental Health and Substance Use and NHMRC Senior Research Fellow at the National Drug and Alcohol Research Centre (NDARC). She is a ministerial appointed member of the NHMRC Health Care Committee and Professorial Fellow at the Black Dog Institute, UNSW. Maree was recently awarded Australian Museum Eureka Prize for Outstanding Mentor of Young Researchers. Maree has made a major contribution to Australia's health and medical research effort in the field of mental health and substance use. In particular, she is known nationally and internationally for her research on the

comorbidity between mental health and substance use disorders. Her research interests include the epidemiology mental health and substance use disorders, the effects of alcohol on brain development, internet delivered prevention and treatment programs, new treatments for individuals with comorbid mental health and substance use disorders, and improving treatment delivery. Prof Teesson has a strong track record of winning competitive scientific grant funding and has published extensively. She maintains strong links with treatment services and is a founding member (since 1990) of The Mental Health Services Conference (TheMHS) Inc, the largest mental health services conference and learning network in Australia.



Mr Ben McDevitt AM APM, is the CEO of ASADA, the government body responsible for protecting Australia's sporting integrity through the elimination of doping. Ben joined ASADA in May 2014, bringing with him 30 years of experience in various national and international law enforcement roles.

Ben served as a member of the Australian Federal Police (AFP) for 22 years, rising to the rank of Assistant Commissioner. He worked in a number of local, national and international policing roles, predominantly in criminal investigation areas. These included Commander of Operations for ACT Policing, General Manager for AFP National Operations and National Manager Counter Terrorism.

In May 2003, Ben was selected to plan and deploy a police-led peacekeeping operation to restore law and order to the Solomon Islands and subsequently served as Commander of the multinational participating police force and as Deputy Commissioner of the Royal Solomon Islands Police Force. He was later awarded the Cross of Solomon Islands for his distinguished service.

From 2006 - 2011, Ben was the Chief Executive of the CrimTrac Agency and in January 2011, he joined the Australian Crime Commission (ACC) as Special Advisor Knowledge Management. During his tenure Ben took on additional responsibilities as the State Manager, Queensland which included overseeing the Cyber Intelligence Unit. Ben also chaired the Australian Criminal Intelligence Forum which brings together heads of intelligence nationally to collaborate on strategic intelligence issues. Ben holds a Masters degree in Public Policy and Administration, a Graduate Diploma in Executive Leadership and is a graduate of the Police Management Development Program and the Police Executive Leadership Program. He was appointed a Member of the Order of Australia (AM) for his work on AFP investigations into the Bali bombings of 2002. He also received an Australian Police Medal (APM) in 2004 for his service to policing and was a finalist in the 2005 Australian (ACT) of the Year awards.

Ben will present on ***Drugs in Sport, Performance and Enhancing Drugs*** in the Plenary Session on **Wednesday** commencing at **3.50pm**.



Mr Dirk Vandeveld is the Secretariat of the European federation of Therapeutic Communities. In 2013, Rowdy Yates, president of the EFTC was our special guest and keynote speaker and this year, for the 28th Annual Conference of the ATCA, the ATCA Conference organising Committee is delighted to welcome Dirk Vandeveld.

The EFTC was founded in 1978 and formalised in 1981 on the initiative of a group of therapeutic communities for residential drug treatment, the EFTC is a European federative organisation supporting the psychopedagogical approach helping drug addicts to return to a drug free life style and to become contributing members of the wider community. The EFTC has become one of Europe's largest and longest-lived recovery network with members from over 70 organisations in 27 European countries.

Members provide in-prison therapeutic communities; community based therapeutic communities; structured day programs; peer-led after-care services and street-based advice services. Members receive - and are active contributors to - the peer-reviewed journal, *International Journal of Therapeutic Communities*, and the Federation manages an online discussion forum and has strong links at national and international level with a number of organisations including: the World Federation of Therapeutic Communities (WFTC); the Australasian Therapeutic Communities (ATCA); the Vienna NGO Committee on Narcotic Drugs (VNGOC); the Consortium for Therapeutic Communities; Narcotics Anonymous; the European Working Group on Drugs Oriented Research (EWODOR); and the Recovered Users' Network (RUN).

The current President of the Federation is Rowdy Yates (Scotland), facilitator of the academic network, Scottish Addiction Studies. Previous Presidents have been: Eric Broekaert (founding President), Martin Lutterjohan, James Comberton, David Tomlinson and Anthony Slater.

Conferences, Institutes and Research - From its inception the Federation recognised that a radical approach involving self-help communities of addicts delivering individual recovery would be met with some skepticism and resolved to encourage self-evaluation amongst its members and an active participation in research studies. As a result, the Federation has organised 15 biennial international conferences to present and evaluate research into all aspects of the therapeutic community and the wider issue of long-term recovery. It enjoys a close reciprocal relationship with EWODOR and has consistently been an active participant in that organisation's annual symposia.

The next conference: March, 11th – 14th, 2015, Malaga, Spain.

<http://leftc-congressmalaga2015.com>

In addition, the Federation - in conjunction with EWODOR, University of Ghent and the Scottish Addiction Studies - has organised training institutes for therapeutic community staff and university students (within the Socrates & Erasmus teaching framework) in collaboration with a range of other recovery organisations and more than 15 European universities.

And For the Future - The Federation continues to encourage its membership to refine and evaluate community as method approaches to addiction and recovery in a world increasingly concerned by the damage wreaked by ongoing drug misuse and the failure of national and international drug policy to do more than contain the problem. For the future, the Federation will pursue its dream to provide a bridge between the self-help recovery community and mainstream treatment and to explore the application of therapeutic community principles to other areas of concern and social dislocation.

President: Mr. Rowdy Yates (p.r.yates@stir.ac.uk)

Secretary: Mr. Dirk Vandeveldde (dirk.vandeveldde@dekiem.be)

The healing principle of the therapeutic community was evident 2,000 years ago and can be traced back to a group which dwelt in Egypt 'beyond' Lake Mareotis, and hence in the vicinity of 'wicked' Alexandria:

"... they are called therapeutae and therapeutrides ... because they profess an art of medicine more excellent than that in general use in cities; for that only heals bodies, but the other heals souls which are under the mastery of terrible and almost incurable diseases, which pleasures and appetites, fears and griefs, and covetousness, and follies, and injustices, and all the rest of the innumerable multitude of other passions and vices, have inflicted upon them..."

Philo Judaeus, Ca 25 BC-AD 45

ATCA CONFERENCE: TUESDAY 14 OCTOBER 2014

8.00am – 9.00am	Registration and Morning Coffee – Pre function space Outside Oceanic Room		
9.00am – 9.10am	Oceanic Room		Chair ATCA Board – Garth Popple
9.10am – 9.20am	Official opening and Introduction of Conference Organising Committee Welcome to Country		Uncle Chicka Madden , Metro Aboriginal Land Council
9.20am – 9.35am	Opening Address and Conference Launch		Hon Jai Rowell MP , Minister for Mental Health Assistant Minister for Health
9.35am – 10.15am			Prof Maree Teesson : <i>Longitudinal trajectories of heroin use</i>
10.15am – 10.25am	Ted Noffs Foundation – Cinema of the Streets – short films		
10.25am – 10.45am	MORNING TEA – Pre function space		
10.45am-11.40am	Oceanic Room - Keynote Address	James Pitts	Prof Amanda Baker : <i>Treatment of Co-existing Depression and Substance Use</i>
11.40am – 12.10pm	TCs in the Region and Beyond		Dirk Vandavelde, EFTC Secretariat : <i>Therapeutic communities in Europe: an overview, current practices and new challenges</i>
12.10pm – 12.40pm			John Howard and Tshewang Tenzin : <i>Bhutan and Beyond: Can ATCA accommodate an expanding regional presence?</i>
12.40pm – 1.40pm	LUNCH – Blue Salt Restaurant		
	Stream 1 – Mark Ferry Oceanic East	Stream 2 – Gerard Byrne Oceanic West	Stream 3 – Eric Allan Centennial Room
1.40pm – 2.05pm	Mapping Social Identity: A visual representation tool for addressing social identity within a TC program. Melinda Beckwith	WHOS improving organisational capacity project – supporting clients with PTSD symptoms. Jo Lunn	'De Kiem': A TC in Belgium. Improvement makes a difference! Dirk Vandavelde
2.05pm – 2.30m	Workings of a Modified Therapeutic Community. Wesley Stokes and Lachlan Dean	A Ten Foot High Barbed Wire Fence: <i>Integrating a drug reduction program into a drug free abstinence based therapeutic community– the challenges and triumphs of Organizational change at The Buttery.</i> Linda Beltrame and Trent Rees	Rehab vs. TC. A Workshop exploring the model. Tim Drown
2.30pm – 2.55pm	Using Facebook as a therapeutic tool for young people and their families. Kieran Palmer	The Healthy Recovery study: addressing smoking, diet and physical inactivity within The Salvation Army Therapeutic Communities. Peter Kelly	

2.55 pm – 3.15pm	AFTERNOON TEA - Pre function space		
3.15pm-4.00pm	Oceanic Room - Keynote Address	Gerard Byrne	Prof David Best: <i>TCs – What is the Research Agenda?</i>
4.00pm-4.30pm	TCs – The How, When, Where and Why of doing the Research		Jo Lunn: <i>The WHOS experience</i>
4.30pm-5.00pm			Gerard Byrne: <i>Development of systemic projects</i>
5.00pm- 6.00pm	ATCA AGM - Oceanic Room		

TCs in the Region and Beyond 11.15am – 11.45am

DIRK VANDEVELDE EFTC Secretariat

Therapeutic communities in Europe: an overview, current practices and new challenges

The European Federation of Therapeutic Communities (EFTC) is the umbrella organization for therapeutic communities for drug addicts in Europe. It covers 44 different countries and more than 25 different languages. The development of the TC movement is an inspiring journey over more than 35 years. This presentation covers in short the development and availability of TC's in Europe, referring to the new EMCDDA publication on 'Therapeutic Communities for treating addictions in Europe': a state of the art regarding the evidence, current practices and (future) challenges of present-day drug-free TCs. A changing social environment urges TC's to search for a new identity and to integrate in care networks.

Dirk Vandeveld holds a Master in Special Education, University of Ghent, Belgium, and has been working with drug users since 1987. He has been the General Manager of De Kiem since 1992, and Secretary of the European Federation of Therapeutic Communities (EFTC) since 1995. Dirk has also held the position of President of the Flemish Federation of Treatment Centers for Drug Addicts since 1995.

JOHN HOWARD Conjoint Senior Lecturer, National Drug and Alcohol Research Centre UNSW

TSHEWANG TENZIN Executive Director, Chithen Phendrey Association Bhutan

Bhutan and Beyond: Can ATCA accommodate an expanding regional presence?

Bhutan is a poor developing country, with educational, health and social services supported by external funding, including Australia. While having a small population (about 750,000), there is significant AOD use in youthful Bhutan. Alcohol is of particular concern, with a significant number of those dependent younger than 25. Among those under 30, alcohol associated suicide and violence are becoming common, and alcohol related liver disease, the top cause of death, is increasing. In addition to alcohol, glue and cough syrup are used, and oral use of a combination of pharmaceuticals (eg Spasmo, Proxyvon, Relepin

and Nitrazepam) is on the rise. Glue and other volatile substances are used to enhance the 'trip' via volatile substance induced hallucinations. A possible increase in injecting drug use, prevalent in neighbouring Nepal and north-eastern Indian states which have high levels of IDU-related HCV and HIV, is of concern, as is the regional spread of ATS.

Those struggling in Bhutan to develop appropriate and effective evidence-informed services for people and families with substance use-related difficulties, and to build a capable and effective workforce responsive to the complex and changing patterns of availability and use of these substances, have identified Australia as of potentially great assistance to them. Using Bhutan as an example, this presentation will explore the possibility of ATCA expanding its role in the Asia-Pacific region, showcase the development of its approach to TC programming, accreditation and ongoing enhancements to the approach, and capacity to engage with providers in other settings around adaptations that suit their own unique, cultural and economic settings.

Biographies

John Howard has worked in schools, juvenile justice, adolescent mental health and substance use programs, in various universities and NCPIC. He has worked with WHO, UNICEF, UNODC and UNESCAP and international NGOs in Bhutan, China, Egypt, India, Indonesia, Lao PDR, Malaysia, Myanmar, Nepal, Philippines, South Africa, Thailand and Vietnam on capacity-building for community treatment of young drug users and increasing access to harm reduction services for young injecting drug users.

Tshewang Tenzin has been active in developing capacity building activities for CPA staff, and the broader AOD field in Bhutan. He has a particular passion for initiating and developing Bhutanese TCs, and up-skilling his recovering staff – 'peer counsellors' who are often ineligible for formal tertiary education. Tshewang is in a key position to shape the development of AOD programs in Bhutan.

Stream I: 1.40pm – 2.55pm

MELINDA BECKWORTH

PhD Candidate

Tutor, Master of Addictive Behaviours, Monash University / Turning Point

Mapping Social Identity: A visual representation tool for addressing social identity within a TC program

Identity change is a key aspect of Therapeutic Community (TC) programs, which reflects well the findings from research into 'natural' recovery that highlight identity change as a key process within recovery. Another aspect of recovery highlighted by research is a change in social networks, specifically including more people supportive of recovery in one's social network.

Applying a social identity approach gives us a cohesive theoretical lens through which to view these seemingly disparate research findings. Social Identity Theory states that an individual's sense of self is derived from the groups to which they belong. Internalised social norms of these groups shape the individual's behaviour.

Social identity has been captured in social psychological research using a mapping task. Node-Link Mapping is a technique that has been used to great effect in the AOD field with both groups and individuals in outpatient settings. It involves the visual representation of concepts, processes, and other information, through the use of nodes (information points) and links (relationships between information points). Adapting this social identity mapping task for use in an inpatient AOD

environment has given us a useful tool for capturing and monitoring social identity change in a TC program.

This presentation will describe the adapted Social Identity Mapping (SIM) tool, its development, and how it has been used in groups in a TC in Victoria. Residents' feedback from trials will be discussed as well as suggestions for further use in clinical and research settings.

Biography

Melinda Beckworth has worked in the AOD field in various roles for the last decade, including research, clinical and teaching roles, often concurrently. She is a registered psychologist with an interest in interpersonal and systemic therapies, and is now undertaking a PhD in Social Science with a focus on social identity change in the process of recovery. The tool presented is being used within her PhD to explore social identity with TC residents and to examine changes in social identity through the course of their stay in the program.

WESLEY STOKES

Manager, PALM Program in Sydney

LACHLAN DEAN

Clinical Team Leader, PALM Program in the ACT

Workings of a Modified Therapeutic Community

The PALM (Program for Adolescent Life Management) program has been operating as a modified therapeutic community, in both the ACT and in Sydney NSW for over 12 years. The PALM program works with young people (13 to 18 years) who are addressing their problematic substance use/mental health issues. Working with children/adolescents, who are at times reluctant participants in a TC is challenging. Many of the young people entering the community are involved in the Juvenile Justice system and are from culturally diverse backgrounds.

The presentation will introduce the PALM program and will look at the systems and tools that are used by PALM to help support the residents in this modified therapeutic community setting. The presentation will look at the particular challenges of working with children/adolescents in modified TC.

Biographies

Wesley Stokes is the Manager for the PALM Program in Sydney. He is responsible for the management of 21 staff and has been with the Ted Noffs Foundation since 2009. Wesley has been immersed in child/adolescent TC for five years, first as an AODW before joining the management team. He has played a part in program innovation and development.

Lachlan Dean is the Clinical Team Leader for the PALM Program in the ACT. He is responsible for the clinical management of 25 staff and has been with the Ted Noffs Foundation since 2007. Lachlan has been immersed in child/adolescent TC for seven years and has been integral in program innovation and development.

KIERAN PALMER

Clinical Services Manager, Ted Noffs Foundation

Using Facebook as a therapeutic tool for young people and their families

Since 2010, the CALM (Continuing Adolescent Life Management) Sydney program has been using social media (Facebook) as a therapeutic tool to connect with young people who may require assistance and/or support. The advantage of using social media over other traditional forms of contact, such as the telephone, means that young people can access support worldwide, its free for the consumer and the host organisation, conversations can be recorded if needed and it has shown

to be less threatening for a young person to ask for support via online media compared to calling a service and/or access a service face-to-face. A further advantage of using social media is that events and information that may be shared with a larger audience can also be published to service users via Facebook. CALM Sydney has found since using Facebook, it has overtaken the traditional forms of contacting service users and continues to grow each year. Through the success of CALM using social media with clients, the PALM (Program for Adolescent Life Management) program has developed a Facebook page for parents, guardians and other family members of service users who may require support, guidance and any helpful information.

Through this presentation the audience will gain a practical understanding of the application and benefits of using social media tools in the treatment, evaluation and follow up of young people suffering AOD and mental health concerns.

Biography

Kieran Palmer began his work with the Ted Noffs Foundation in 2005 as an Alcohol and Other Drugs Worker and has held numerous positions with the foundation including Manager of the PALM residential treatment service and his current role of Clinical Services Manager of all Noffs programs nationwide. Kieran is a Registered Psychologist and has undertaken an advanced diploma in management. Kieran's areas of expertise lie in youth mental health, AOD and trauma development / treatment. Kieran maintains a high level of clinical knowledge and professional development and uses these insights to assist in staff training and development throughout the organisation.

Stream 2: 1.40pm – 2.55pm

JO LUNN

Improving Organisational Capacity Project Officer, WHOS

WHOS Improving Organisational Capacity Project – supporting clients with PTSD symptoms

Rates of co-existing Post Traumatic Stress Disorder (PTSD) for clients accessing AOD treatment are estimated to be up to 62% (Dore et al., 2012). Of note PTSD symptoms can worsen when drug use is ceased (Jacobsen, 2001). PTSD intervention research generally involves highly trained specialists delivering PTSD interventions in individual treatment sessions. The cost and access of providing this is beyond the capacity of most AOD treatment services, including WHOS. Further recent focus groups conducted by WHOS (n = approx. 144 clients, 45 staff) identified that improving the management of trauma was a significant priority across the service.

WHOS IOC successfully obtained a MHDAO Research Grant in 2013 and a NADA Women's Research Grant in 2014 to trial two group-based interventions. The interventions, to be delivered at a number of WHOS sites over a five-month period.

Project 1 reviews the efficacy of a group-based PTSD symptom management program. Individual clients will be taught trauma symptom management strategies and clients' peers will be trained in ways to offer support to a client experiencing PTSD symptoms. **Project 2** reviews the efficacy of introducing positive mental wellness groups, utilising an Acceptance and Commitment Therapy approach. Both projects will train existing AOD staff to facilitate the intervention ensuring long-term sustainability beyond the duration of the research projects.

This presentation will provide an update on the development and progress of the projects to date, including key findings from the literature review and group development. Preliminary statistical findings of the group-work will also be presented.

Biography

Jo Lunn is a registered Psychologist who has been working in the AOD field since 1996. Jo's

current position is with WHOS as the Improving Organisational Capacity Project Officer. The project aims to build the capacity of WHOS to work more effectively with clients with complex needs including co-existing mental health, cognitive impairment, involvement in the criminal justice system, homelessness or those clients who identify as Indigenous or from a culturally and linguistically diverse background. Jo's work was recognised by NADA in 2014 when she received the Outstanding Contribution to the AOD Industry award.

LINDA BELTRAME

Program Coordinator, The Buttery

TRENT REES

Program Manager Maintenance to Abstinence (MTA) Program, The Buttery

A Ten Foot High Barbed Wire Fence: Integrating a drug reduction program into a drug free abstinence based therapeutic community– the challenges and triumphs of Organizational change at The Buttery

For opioid-dependent people on a maintenance program, the need for detoxification prior to admission can be a significant barrier for those wishing to enter long-term residential treatment. This presentation describes the implementation of the Maintenance to Abstinence Program on the campus of the abstinence based Therapeutic Community at The Buttery in the Northern Rivers.

The presentation outlines the following aspect of the establishment of the MTA program:

- Rationale for the program
- Literature review
- Funding for maintenance/reduction programs – where did the money come from?
- Initial reactions to the notion of accommodating a reduction program on the same site as the abstinence based TC. Did we need the fence?
- Change Management Process for TC Staff and Residents –how the change was implemented
- Recruitment and Co-operation – getting the right people and continuing the consultation process
- Programs at start up; planning and further change – including what needed to change after day one?
- Where are we now? – early statistics, anecdotal reviews, and outcomes
- The future – increasing numbers in the community on methadone/suboxone maintenance; limited opportunities to exit in a supported and safe environment.

Biographies

For the past seven years **Linda Beltrame** has worked in the role of Program Coordinator for the Counselling Team in The Buttery's Therapeutic Community in the Northern Rivers. Prior to this she worked in the AOD sector in Sydney and holds qualifications in Generalist Counselling, AOD Work and Business Management. Linda also spent twenty years living in a co-operative community – this experience continues to inform and enrich her work in Therapeutic Communities.

Trent Rees has been working at The Buttery since April 2013. He was employed as the Program Manager for the newly funded Maintenance to Abstinence (MTA) Program. Prior to this he worked in Disability Employment and Mental Health sectors in the Northern Rivers and Greater Western NSW Regions respectively. Trent holds a Masters in Psychology and for the past 15 years has been managing and developing Teams in both Private and Not-for-Profit business settings.

PETER KELLY

Senior Research Fellow, School of Psychology, University of Wollongong

The Healthy Recovery study: addressing smoking, diet and physical inactivity within The Salvation Army Therapeutic Communities

People with a history of substance abuse problems have higher rates of cardiovascular disease and cancer. This is largely the result of behavioural lifestyle factors common to this group. These include extremely high rates of nicotine dependence, very poor dietary habits, and low levels of physical activity. There have been repeated calls for substance abuse services to address smoking cessation, improve diet and nutrition, and promote physical activity in a more systematic fashion.

The presentation will provide an overview of a randomized controlled trial that is currently underway. It is funded by the Cancer Institute NSW and conducted in partnership with The Australian Salvation Army. The study is examining the effectiveness of a multiple health behaviour change intervention (Healthy Recovery) within the Australian Salvation Army Therapeutic Communities.

Healthy Recovery is an 8-session group based program that encourages participants to quit smoking, improve their diet and increase their level of physical activity. Healthy Recovery involves a combination of health focused psycho-education, goal setting, monitoring, motivational interviewing, and cognitive behavioural therapy. Participants are provided with pedometers to monitor their steps and these are used as a motivational tool for participants. Contingency management is also used to promote reductions in smoking. Where clinically indicated, participants will be recommended to commence Nicotine Replacement Therapy (NRT), which will be supplied, free of charge.

Biography

Dr Kelly is a clinical psychologist and Senior Research Fellow based in the School of Psychology, University of Wollongong. He currently holds a 3-year Early Career Research Fellowship from the Cancer Institute NSW to trial Healthy Recovery across the Australian Salvation Army. Dr Kelly's research is focused on the non-government mental health and substance abuse sectors. He has published over 30 peer reviewed journal articles.

STREAM 3: 1.40PM – 2.55PM

DIRK VANDEVELDE **EFTC Secretariat**

'De Kiem': A TC in Belgium. Improvement makes a difference!

'De Kiem' is a therapeutic program for drug users and their environment near Ghent in Belgium. It is a multi-modality-program with an ambulatory centre (intake, outpatient treatment, groups in prison and groups with parents) and residential units (induction unit, therapeutic community, mother and child unit, residential re-entry and ambulatory re-entry). The mother and child-unit "De Tipi" started in 1996, in a separate building near the TC. Target group for this small-scale project are addicted women (alcohol, medication or illegal drugs), pregnant or with young children (until 6 years) who choose to follow a program in the TC.

While the mothers follow their 9 to 5-program in the TC, the children go to school or to a day-care-mother. The mother takes care of her child in the evenings, on Wednesday-afternoon and on the weekends. Every family has its own living room. Three part-time staff-members are at random present in 'De Tipi', supported by the team of the T.C. The project has a well defined procedure of intake and induction (postponed admission of the child) and crisis-intervention (external support). Through systematic observation and action-planning the evolution of mother and child is followed, with special attention to the father (figure) and the grandparents. In the past 6 years 16 mothers and 18 children stayed in 'De Tipi'.

TIM DROWN

Senior TC Worker, Cyrenian House

Rehab vs. TC. A Workshop exploring the model

The therapeutic community model is still relatively new to Australia. Many traditional drug and alcohol rehabs have transitioned to TC models over recent years, but how much of the old 'rehab' mentality and mode of treatment still underlies our treatment philosophy today? This workshop asks the question "Are old models of drug and alcohol rehabilitation undermining the potential of the Therapeutic Community model?" and explores the benefits of applying a purer TC philosophy to current practise.

Biography

Tim Drown is the Senior TC Worker at the Cyrenian House, Rick Hamersley Therapeutic Community in Perth, Western Australia. He has ten years' experience in residential AOD work, eight of those at Cyrenian House. His primary role is to maintain the integrity of the Therapeutic Community model in all aspects of community life and treatment.

Australia's Pioneer Therapeutic Community

Established in 1972, **We Help Ourselves** is the first Therapeutic Community in Australia for Drug and Alcohol treatment.

WHOS services today include residential drug-free and opioid TC programs across metro and regional areas. Services include family support, job readiness and aftercare support.

Some of WHOS major innovations in the sector include:

- Harm reduction initiatives within the TC model
- Establishing a Methadone to Abstinence TC
- Establishing an Opioid Stabilisation TC



WHOS
helping people help themselves

For more information about any of our services and employment opportunities, please contact us on phone (02) 85727444 | email info@whos.com.au

ATCA CONFERENCE: WEDNESDAY 15 OCTOBER 2014

8.00am – 8.45am	Registration and Morning Coffee - Pre function space Outside Oceanic Room		
8.45am – 9.00am	Oceanic Room - Recap on Yesterday's Highlights – Introducing Today		Mark Ferry
9.00am – 9.45am	James A Pitts Oration	Jan Copeland	James Pitts: <i>The Development of the Therapeutic Community Model in Australia, and Its Emerging Future</i>
9.45am – 10.30am	Plenary Session	Garth Pople	Steve Ella: <i>Issues and Sustainability of the Aboriginal Alcohol and Drug Workforce</i>
10.30am-11.15am			Bosco Rowland : <i>Using the environment to change alcohol-related behaviour for populations: Success stories in Australia</i>
11.15am – 11.35am	MORNING TEA – Pre function space		
11.35am-12.30pm	Panel Discussion facilitated by Gino Vumbaca – <i>Alcohol: Changing Cultures, Addressing the Needs: The Good, the Bad and the Ugly (with apologies to Clint)</i> – Scott Wilson, Bosco Rowland, Larry Pierce, Michael Thorn		
12.30pm-1.15pm	Keynote Address	Carol Daws	Amanda Baker: <i>Tobacco and TCs – Fraternising with the Enemy?</i>
1.15pm – 2.15pm	LUNCH - Restaurant		
	Stream 1 – Eric Allan Oceanic East	Stream 2 – Carol Daws Oceanic West	Stream 3 – Lynne Magor-Blatch Centennial Room
2.15pm – 2.40pm	Extended Care and Integration – It takes a village approach. Gerard Byrne	Becoming a smoke-free TC: Managing Change using TC Principles. Tim Drown	A Grief Tree Model (Experiential Workshop). Please note this is a 2hr experiential workshop – and will end at 4.30pm.
2.40pm-3.05pm	Odyssey House Mingu Yabun Group improves outcomes for Aboriginal Clients. Sharon Mestern and Leonie Murdoch	Is a smoke-free therapeutic community achievable? Johnny Dow and Philip Grady	This workshop will accept limited numbers - please register for this workshop at the registration desk
3.05pm – 3.30pm	Predictors and outcomes from an adolescent residential TC program. Sally Nathan, Patrick Rawstorne and Mark Ferry	Healthy Eating and Active lifestyles at Karralika Programs. Kerry Fitzroy	Marjorie McQuarrie
3.30pm – 3.50pm	AFTERNOON TEA – Pre function space		
3.50pm - 4.35pm	Oceanic Room - Plenary Session	Lynne Magor-Blatch	Ben McDevitt, CEO ASADA: <i>Drugs in Sport, Performance and Image Enhancing Drugs</i>
4.35pm – 5.00pm			Lynne Magor-Blatch: <i>Sports people behaving badly: Working with athletes with substance use issues.</i>
6.30pm- 11.00pm	ATCA Gala Dinner and Awards Presentation: Oceanic Ballroom The Pioneers – Megacrew from Liverpool Street University and Dinner Speaker – Paul Nunnari “The Other Superman”		

JAMES A PITTS ORATION

9.00am – 9.45am



The James A Pitts Oration has been established as an annual event to feature Australian and internationally renowned individuals who have been a significant contributor to research or practice in therapeutic communities. Named in honour of James A Pitts, who has worked in the Alcohol and other Drugs field for the past 35 years, the Australasian Therapeutic Communities Association (ATCA) takes great pleasure in partnering with Odyssey House McGrath Foundation in the establishment of this important event.

James is CEO of Odyssey House and is currently celebrating his 30th anniversary in this role. James has been selected to a number of prominent boards and was awarded the Ted Noffs Foundation Award for Individual Achievement in the AOD field in 2000; the Australia Day Medal in 2001 by the Alcohol and Other Drugs Council of Australia in recognition of his contribution and commitment to the field; the inaugural fellowship by the Harvard Club of Australia, Not For Profit Fellowship Program in 2001; and in 2007 was inducted to the Honour Roll of the National Drug and Alcohol Awards. James has previously served as a Board Member of the ATCA Board, and was elected as a Director in 2009.

The James A Pitts Oration has been made possible thanks to the generosity of a long-time Odyssey House donor.

The inaugural oration will be delivered by James A Pitts, entitled “*The Development of the Therapeutic Community Model in Australia, and Its Emerging Future*”.

Saving and improving the lives of people dependent on alcohol and other drugs.

Services include:-

- Admissions Intake Centre
- Assessment and Referral Centre
- Withdrawal Unit
- Drug and alcohol counseling
- Parents' and Children's Program
- Residential rehabilitation
- Progressive Learning Centre
- Magistrates Early Referral Into Treatment (MERIT) After Care

Ph: 02 9281 5144 or 02 9280 9999

www.odysseyhouse.com.au



A calm in the Sea
of Addiction



PANEL DISCUSSION

Facilitated by Gino Vumbaca, Executive Director ANCD

11.35am – 12.30pm



SCOTT WILSON

Director of Aboriginal Drug and Alcohol Council (ADAC)

Scott is the State Director of the Aboriginal Drug and Alcohol Council (SA) Inc (ADAC), and an Aboriginal man from the Stolen Generation. His other leadership roles include being Deputy Chair of both the National Indigenous Drug and Alcohol Committee (NIDAC) and the Alcohol Education Rehabilitation Foundation (AERF). Scott's personal and professional experience in substance misuse has made him a valued

member of nearly every major governmental and non-governmental committee in Australia for more than 20 years.

In 1997, he was awarded the Alcohol and other Drugs Council of Australia (ADCA) Australia Day Achievement Medallion and in 2003, a Centenary Medal for Services to the Community.



LARRY PIERCE

CEO, NADA

For the last fifteen years Larry has been directly involved in the drug and alcohol field in NSW. He was the Director of the Manly Drug Education and Counselling Centre, for the last thirteen years Larry has been the Chief Executive Officer of the Network of Alcohol & Other Drug Agencies (NADA) the peak organisation for AOD NGO's in NSW. For more information about NADA visit the website www.nada.org.au

Larry sits on a range of strategic committees including; the NSW Health Drug and Alcohol Program Council, the NSW Health NGO Advisory Committee, NCOSS Health Policy Advisory Committee, The NSW Premiers Council on Homelessness.



MICHAEL THORN

CEO, FARE

As the Chief Executive, Mr Thorn is responsible for leading FARE's efforts to reduce alcohol-related harm in Australia since January 2011. Michael previously worked for the federal government as a senior official in the Department of the Prime Minister and Cabinet. He was a project director in the department's strategy and delivery division.

Michael has a strong strategic policy background, with extensive experience in strategic social policy development and implementation, most recently in Canberra and previously as a policy director of the Western Australian Department of the Premier and Cabinet from 2001 until 2008. He has also worked as a policy and management consultant in the fields of housing, Indigenous affairs, regional economic development and employment, and early in his career was a policy adviser and chief of staff to a number of WA Cabinet ministers.



GINO VUMBACA

Executive Director, ANCD Secretariat

Gino has extensive experience in the HIV/ AIDS and drug and alcohol fields both in Australia and internationally. He is a Churchill Fellow, and has worked as the Manager of HIV/AIDS and related services with the NSW Department of Corrective Services, in a variety of drug and alcohol centres as a counsellor and was responsible for coordinating the

establishment of the NSW network of needle and syringe exchange programs for the NSW Health Department. He also continues to provide advice on prisons, HIV and drug issues for international organisations, such as the United Nations & World Health Organisation.



BOSCO ROWLAND

**Alfred Deakin Post-Doctoral Fellow,
School of Psychology, Deakin University**

Alcohol: Changing Cultures, Addressing the Needs: The Good, the Bad and the Ugly (with apologies to Clint)

Each of the speakers will firstly be invited to present on where they think Australia is doing well and not so well in its efforts to change our drinking culture, and will then note the key changes that need to take place. Gino will then open up to the floor for questions in a Q&A style to explore responses in more depth.

STREAM 1: 2.15pm – 2.40pm

GERARD BYRNE

Clinical Director, The Salvation Army Recovery Services

ExtendedCare and Integration – It takes a village approach

The Salvation Army Therapeutic Communities in Australia offer a comprehensive Extended Care and community integration framework which supports the interaction between the TCs, the broader community and most importantly optimises the recovery potential of participants.

Recovery from addiction rarely happens in isolation – so does continued recovery from addiction. Isolation often returns for people when they return to the wider community, after being in treatment in a therapeutic community. A holistic recovery focus is taken that encompasses direct and intentional links with Salvation Army, housing, employment, welfare, education programs and churches – additionally existing links with organisations that provide similar and additional services are utilised to ensure that participants are provided with the support they need to ensure sustained recovery.

Families of participants are also provided with a range of supports during and after treatment, including “The Family Empowerment Village Model” thereby assisting families to understand and participate in the recovery process of the participant and their own recovery process. A range of formal agreements, service linkages and ‘back scratching’ arrangements that support ongoing, sustainable linkages with other groups will be discussed.

Biography

Gerard Byrne has spent the past 25 years working in The Salvation Army Recovery Services, initially in counselling role, then Program Director, and currently as the Clinical Director for Recovery Services. He has also worked on a contractual basis in the private and government AOD sectors for 11 years, providing a range of specialist AOD assessment, referral, intervention and case management services.

SHARON MESTERN

Chief Clinical Officer, Odyssey House NSW

LEONIE MURDOCH

Quality Assurance Officer and Aboriginal Liaison Officer, Odyssey House NSW

Odyssey House Mingu Yabun Group improves outcomes for Aboriginal Clients

Mingu Yabun Meaning: The Spirit of Speaking and Sharing

Aboriginal clients make up approximately 11 per cent of residents in the Odyssey House program. However, staff had noted that many Aboriginal clients were emotionally and physically disconnected from their culture and their families, exacerbating self-esteem problems and resulting in a lack of community support, leading to low retention and completion rates. Odyssey House's Mingu Yabun Aboriginal Group was created within the main residential program to help indigenous clients reconnect with and celebrate their culture, build their self-esteem and share common experiences to assist them in their rehabilitation and prevent relapse in the long-term. Odyssey House also caters for Aboriginal families in our parents and children's program situated on our main facility.

Mingu Yabun Group has a strong focus on Dreamtime stories which talk about law, behaviour, family relationships, and relationship to the land etc. Group members learn the basic retelling and interpreting of Dreamtime Stories, The significance / meaning within the story, Explore what the story mean to them personally, how that meaning impacts in their life today, and how that helps them in their journey of recovery. Local Aboriginal Elders are also sometimes involved as mentors; this may be particularly appropriate where there is multigenerational drug misuse or violence in the client's family and a direct connection with family members may not be advisable at the time. Odyssey House is currently one of only a few rehabilitation providers to offer services tailored to Aboriginal clients. Mingu Yabun has become an integral part of the Odyssey House program and continues to be one of the highest rating groups.

Biographies

Sharon Mestern has been nursing for over thirty years. Sharon has a Masters of Advanced Clinical Education in Nursing, Advanced Diploma in Herbal Medicine and is one semester away from completing a graduate diploma of psychology. Her career has been mostly working with complex health. This includes, disability, mental health, drug and alcohol, and coexisting complex medical conditions.

Sharon has led teams in developing programs that won a premiers award for 'Excellence in treatment outcomes', built the organisations first quality assurance program with EA ratings on first and second cycles , and with funding through the improved services grants increased the organisations capacity to provide specialist mental health services alongside AOD services. In addition to this, Sharon has overseen the organisations development and improvements within the medical and psychology departments.

Leonie Murdoch Leonie is a WIRADJURI woman who has been living in Tharawal country of the D'harawal people for over twenty five years, Confirmation papers signed by Elder Uncle Tommy Smith. Leonie joined Odyssey House in November 2006. She first started as an AOD counsellor in the withdrawal Unit before moving to the main facility to be part of the ACHS Accreditation team as the Quality Assurance Officer and Aboriginal Liaison Officer. One of Leonie's foci is to provide pro active care to Aboriginal Residents by promoting the retention and completion of treatment for aboriginal residents in the Odyssey House Program. Leonie has overseen the organisations development of Aboriginal policy, development of culturally structured groups for aboriginal residents, reconnecting and participating in culture and community events, upon completion of treatment increase support networks for aboriginal residents with and through the support of Tharawal AMS.

SALLY NATHAN

School of Public Health and Community Medicine, UNSW

PATRICK RAWSTORNE

School of Public Health and Community Medicine, UNSW

MARK FERRY

Chief Operating Officer, Ted Noffs Foundation

Predictors and outcomes from an adolescent residential TC program

Young people in contact with the criminal justice system who have problematic use of drugs and alcohol often lack opportunities for social and economic participation in society and many continue offending into adulthood. Some of the literature suggests that addressing alcohol and drug use in a holistic manner, for example by providing accommodation and social support at the same time, as occurs in the Therapeutic Community and continuing care model of the Ted Noffs Program for Adolescent Life Management (PALM), may lead to improved legal and health outcomes for these young people. However, there is very little robust research in Australia and limited work internationally examining the impact of such programs for young people. This presentation will share findings based on analysis of the Ted Noffs PALM client data set from 2006 to 2013. Predictors of completion of the program and outcomes at three months follow up will be presented. Ensuring quality data collection and the challenges of follow-up with young people will also be discussed.

Biographies

Dr Sally Nathan's research at UNSW has focused on the use of innovative methodologies and methods to measure and understand complex social processes and social change. She has undertaken research into consumer and community participation in health as well as research approaches which engage and partner directly with vulnerable and marginalised communities and the organisations that represent and advocate for them. Sally is currently leading a team of researchers at UNSW together with the Ted Noffs Foundation (funded by an Australian Research Council Linkage Grant LPI40100429) in a study to examine the longer term outcomes and pathways of youth in contact with the justice system who have drug and alcohol problems, including the impact of a life management program comparing those who attend and those who do not. Findings will enable key agencies to better address multiple needs among this group.

Over the last thirteen years **Dr Patrick Rawstone's** research has focussed on marginalised and vulnerable groups, many of whom are stigmatised and experience discrimination. Often these groups are relatively 'hidden' and require particular strategies to effectively recruit and sample. His research is also characterised by engagement with civil society organisations (CSOs) representing the interests of vulnerable groups. He is also a Chief Investigator at UNSW in an Australian Research Council Linkage Grant LPI40100429) study partnering with the Ted Noffs Foundation to examine the longer term outcomes and pathways of youth in contact with the justice system who have drug and alcohol problems, including the impact of a life management program comparing those who attend and those who do not.

Mark Ferry holds a BA (Psych) Macquarie University, Dip. Frontline Management and has worked in the Youth Work/Drug and Alcohol field for the past twenty years. Mark first started working for the National Campaign Against Drug Abuse doing street work and progressed through a variety of youth work roles working with homeless and disadvantaged young people.

Mark has worked in several large housing organisations, secure facilities for young people and children's homes. He worked with young people and adults with drug and alcohol issues including running a twenty-five-bed drug and alcohol unit within a large men's hostel. Mark commenced with Ted Noffs Foundation in 2001, and has had various roles including managing a number of Therapeutic Communities. He is currently the Chief Operating Officer.

STREET UNI CLOTHING™



We print your
design on T-shirts.
Need inspiration?
We can design
something for you.
Orders from 1 -
1000

www.streetuniclothing.com
(02) 8785 8000

noffs™

Street Uni Clothing is a social enterprise that encourages creativity and customised designs. Our HQ is located inside the Street University at Liverpool. All profits go back into supporting the organisation to provide more employment opportunities for young people

STREAM 2: 2.15pm – 2.40pm

TIM DROWN

Senior TC Worker, Cyrenian House

Becoming a Smoke-Free TC - Managing Change using TC principles

On 1st July 2014, the TC's at Cyrenian House in WA officially became smoke-free. Managing organizational change is a challenging and delicate process. Add to this the TC principle of using community as the agent of change, and you have a process that requires extensive thought and careful planning. This presentation will explore the rationale, process, challenges and lessons of becoming a Non-Smoking Therapeutic Community, using the principle of community as method to facilitate community-driven change.

JOHNNY DOW

Director, Higher Ground, Auckland

PHILIP GRADY

CEO Odyssey Auckland

LEANNE KIRTON

Smokefree Project Manager, Northern Regional Alliance (NRA), Northland Region

RENEE DENNIS

Clinical Leader – Adult Residential Services, Odyssey

Is a Smokefree Therapeutic Community achievable?

Odyssey House and Higher Ground are two Therapeutic Communities in Auckland. Over the past two years there has been a national push for all providers of addiction and mental health services to become smoke free. In July 2013 smokefree became a contractual requirement. This requirement reflected a real sea-change in how we as therapeutic communities approach the concept of addiction, had the potential to impact access to our services and ultimately our viability as organisations.

This presentation will talk about the following; The context and background to smokefree TC; The challenges; The failed approach to block Smokefree; The change; Embracing the change; and The future

Biographies

Johnny Dow is the Director for Higher Ground Drug Rehabilitation Trust, a Therapeutic Community in Auckland, New Zealand. Johnny is a registered psychotherapist and has been working in the field of addiction for over 20 years. He has worked in both NGO and for a District Health Board. He specialised in group psychotherapy and has additional training in social work and family therapy.

Philip Grady is CEO at Odyssey one of New Zealand's largest community based addictions treatment organisations. Odyssey provides a range of therapeutic communities in both community and prison settings to adults, parents with children and youth, including specialist co-existing TCs. Odyssey also delivers a range of community based treatment services and is leading New Zealand Alcohol and Other Drug Treatment Court Pilot. Philip has worked clinically in therapeutic communities and has a strong background in both the commissioning and leadership of health services at a senior level. Philip is also the co-chair of the National Committee for Addictions Treatment.

Leanne Kirton has a background in organisational psychology but has a passion for social marketing, and an extensive background in health promotion. Last year, Leanne was employed to continue implementation of the Northern Regional Alliance Smokefree mental health and addictions NGO program. Prior to her current role Leanne held the position of DHB Smokefree Coordinator at Waitemata DHB, and before that managed a National workplace health promotion program.

Renee Dennis is the Clinical Leader – Adult Residential Services at Odyssey, overseeing a 60 bed adult therapeutic community including a family centre where parents and children are brought together in treatment. Renee comes from a nursing background and has worked extensively in the therapeutic community environment for a number of years. Renee is now one of a small group of trainers in Moral Reconciliation Therapy and is leading MRTs implementation in Odyssey's TC. Renee is also passionate about supporting clients to give up smoking and is Odyssey's Smokefree Champion for Adult Residential Services.

KERRY FITZROY

Manager Karralika Therapeutic Community

Healthy Eating and Active Lifestyles at Karralika Programs

Karralika Programs takes a holistic approach to supporting the recovery goals of our clients including placing importance on improving individual physical health and wellbeing.

In 2013, Karralika Programs launched a new and comprehensive 12 week health and wellbeing program within the Karralika Therapeutic Community combining weekly educational groups and practical hands-on sessions. The program, called Healthy Eating and Active Lifestyles (HEAL) Plus, is based on the accredited lifestyle modification program developed by South Western Sydney Medicare Local Ltd. (SWSML) and Exercise & Sports Science Australia (ESSA) called HEAL™.

HEAL™ supports participants to develop lifelong healthy eating and physical activity behaviours over 8 weeks. With the approval of the SWSML, Karralika Programs modified the eight session program and added four new sessions to create HEAL Plus to better suit the needs of our residents and complement the therapeutic community program and timetable.

Delivered by trained staff, residents of the Karralika Therapeutic Community participate in weekly sessions addressing nutrition, menu planning and budgeting, food handling, exercise and physical fitness, body image, sexual health and quit smoking. Elements of the program are also being rolled out in the Nexus Men's Program and the Solaris Therapeutic Community at the Alexander Maconochie Centre.

This presentation will share information about the program elements, the results of the evaluation of stage I implementation including data on health improvements and resident feedback.

Biography

Kerry Fitzroy has worked in the alcohol and drug sector for over 25 years, starting with Karralika Programs (formerly ADFACT) in 1988 within the Family Program. Dedicated to working with adults, families and children, Kerry leads the Karralika Therapeutic Community multi-disciplinary team offering residential treatment for people affected and impacted by problematic substance misuse.

Kerry participates in a number of community-sector forums with a particular focus on families and is a member of the Families ACT Advisory Committee. Kerry holds qualifications in children's services, management and alcohol and other drugs and is currently undertaking study to complete an undergraduate Degree in Social Work.

STREAM 3: 2.15pm – 2.40pm

MARJORIE MCQUARRIE **Clinical Counsellor**

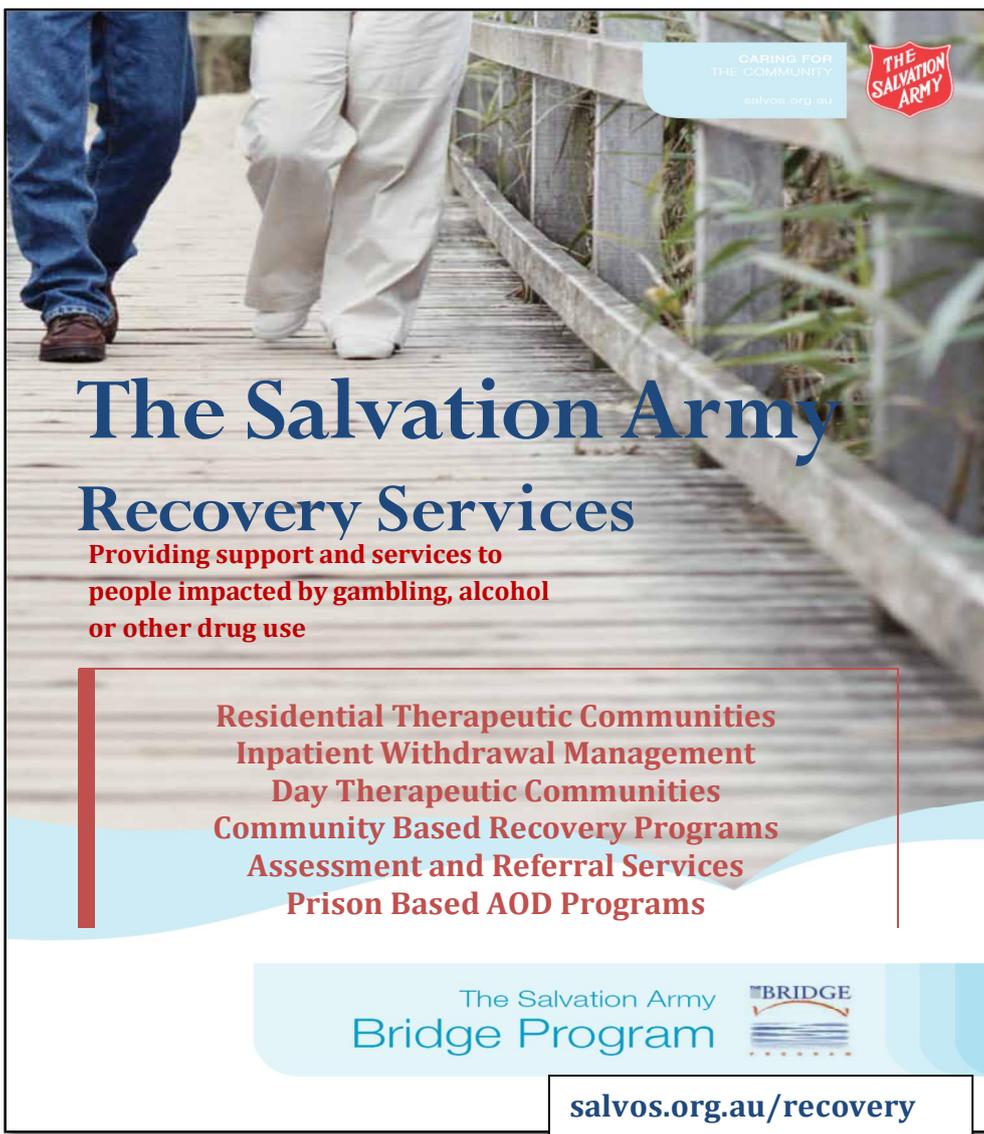
A Grief Tree Model

This presentation is based on my lived experience as a Clinical Counsellor in a remote Therapeutic Community in northern British Columbia, Canada. This experiential workshop presents a model called *The Grief Tree*. The narrative thread of the clients' stories is revealed through visual art and written word. In the therapy groups this model was used as a therapeutic underpinning after relationships were established. This proved to be an important tool in the group process. It supported participants to experience and understand their historical traumas, grief and losses by using art or writing. It allowed them to acknowledge the story of their relationship with substance use.

This workshop will provide examples of clients work using the Grief Tree Model. In this participatory workshop, group members will consider the applicability of the Grief Tree to practice, experiment with the model, and discuss potential practice applications and outcomes.

Biography

Marjorie McQuarrie has a Bachelor of Fine Arts from the University of Victoria, Canada, with a specialty in suicide intervention. She was a Child & Youth Counsellor at Vancouver Coastal Health, Aboriginal Wellness Program, partnering with Vancouver Aboriginal Child & Family Services Society. Most recently she was the Clinical Counsellor at a Therapeutic Community for men in recovery. She facilitated Trauma, Grief and Loss, Cognitive Behavioural Therapy educational groups and provided one on one counselling. She is a trained facilitator in the Hospice Model. Her therapeutic framework is strength based and client centered, using Narrative and Expressive Therapies.



CARING FOR THE COMMUNITY
salvos.org.au

THE SALVATION ARMY

The Salvation Army

Recovery Services

Providing support and services to people impacted by gambling, alcohol or other drug use

- Residential Therapeutic Communities
- Inpatient Withdrawal Management
- Day Therapeutic Communities
- Community Based Recovery Programs
- Assessment and Referral Services
- Prison Based AOD Programs

The Salvation Army
Bridge Program

BRIDGE

salvos.org.au/recovery

PLENARY SESSION

3.50pm – 5.00pm

BEN MCDEVITT AM APM
CEO, ASADA

LYNNE MAGOR-BLATCH
Associate Professor University of Canberra and University of Wollongong
Executive Officer, ATCA

Sports people behaving badly: Working with athletes with substance use issues

Athletes use drugs for a variety of reasons – some intentionally for medical or recreational purposes, and some inadvertently. Some will use drugs deliberately - either on their own initiative or at the behest of others - to cheat, to gain an advantage over others by artificially improving their advantage in order to win. Alcohol enjoys a strong association with sport in Australia at all levels. Drug use in sport continues to change. This presentation reviews the literature surrounding substance use and sport with reference to the models which underpin alcohol and other drug use and the expectations of competitors, sponsors, the media and spectators and provides an overview of the *APS Illicit Drugs in Sport* online training program for counsellors and health professionals.

ATCA CONFERENCE: THURSDAY 16 OCTOBER 2014

8.00am – 9.00am	Registration and Morning Coffee - Pre function space Outside Oceanic Room			
	Stream 1 – Johnny Dow Oceanic East	Stream 2 – Boardroom	Stream 3 – Eric Allan Oceanic West	Stream 4 – James Pitts Centennial Room
9.00am-9.25am	Legal Mandates & Perceived Coercion in TC treatment. Poppy Rourke	Focus group and workshop to review the ATCA Standard for TCs working with youth populations	Fostering mother and child relationship as part of drug rehabilitation: A follow-up study. J-F, Karen Bartlett and John Bartlett	Positive Stories, Positive Outcomes: Promoting TCs through positive media liaison. James Pitts and Carol Moore
9.25am-9.50am	Odyssey House – <i>MERIT</i> program. Michelle Tziarkas	Jaimie Northam and Lynne Magor-Blatch	Women with drug and alcohol use have higher rates of trauma and abnormal pap smears. Sharon Mestern	Data Collection for outcome and Impact measurement. Debi Ingram
9.50am-10.15am	Moral Reconciliation Therapy (MRT) within the TC. Johnny Dow, Philip Grady and Renee Dennis		Rethinking the parameters of community – Establishing TCs in Greenfields locations. Debra Zanella	Cost benefits of TC Programming. James Pitts
10.15am – 10.40am	MORNING TEA - Pre function space			
10.40am – 11.00am	Oceanic Room - ATCA Conference - 2015		Johnny Dow, Philip Grady and Justin Lee – New Zealand 2015	
11.00am – 11.45am	Plenary Session – The Quality Framework and ATCA Standard: Key developments and opportunities	Chair ATCA Board	Prof David Best: The development of a Quality Framework for the AOD sector: Challenges and Opportunities	
11.45am – 12.15pm			Barry Evans: Not your average Standard - TC Accreditation	
12.15pm-12.45pm			Julie Nyland: Not your standard website: The ATCA Quality Portal	
12.45am – 1.00pm			Odyssey House Choir	
12.45am – 1.00pm	Closing Ceremony			

STREAM 1: 9.00am – 10.15am

POPPY ROURKE (Authors: Poppy Rourke, Dr John Howard & Dr Kristy Martire)
Registrar Forensic Psychologist

Legal Mandates and Perceived Coercion in Therapeutic Community Treatment

Use of pressure (including legal mandates) to encourage those with alcohol and other drug (AOD) issues to enter treatment is widespread. The aims of this study were to examine how legal mandates to enter Therapeutic Community (TC) treatment, perceived coercion across sources, and motivation impact

upon treatment engagement and retention. To address this aim, 114 clients from two TCs completed self-report questionnaires with scales measuring these constructs. A subset of participants completed open-ended interviews. Results indicated legally mandated and voluntary clients were very similar to one another, but open-ended responses suggested there was some division between the groups. It was found being legally mandated to enter treatment, and perceived coercion across sources (legal, relational etc) did not predict treatment engagement, and being legally mandated did not relate to treatment retention. Significant predictors of treatment engagement included treatment motivation, self-efficacy, and peer-support.

Legal mandates and higher perceived legal coercion were associated with lower motivation, however open-ended responses suggested that motivation is dynamic and can grow during treatment. Practical applications: results support the practice of legally mandated clients being referred to treatment in TCs. The finding that motivation is an important factor, and is dynamic suggests that motivation enhancement is an important treatment target. The finding that the voluntary and legally mandated clients tend to not see that they probably have more in common than not, suggests that building cohesion between these groups is important especially in light of the finding that peer support is a predictor of treatment engagement.

Biography

Poppy Rorke has completed a Bachelor of Arts, Psychology (honours) at Macquarie University, and Masters of Forensic Psychology at the University of New South Wales (UNSW). She has worked in research for a number of years at both the Black Dog Institute and Department of Human Behaviour in the UNSW department of psychiatry. She is currently working as a registrar forensic psychologist in the fields of drug and alcohol treatment and forensic psychology assessment

MICHELLE TZIARKIS

Community Services Manager

Odyssey House MERIT Program

This paper will present the essential elements of the Magistrates Early Referral Into Treatment Program (MERIT) program – which Odyssey House operates. The program has been running since 2006 and as one of the few non government organisations running a MERIT Program the paper will discuss program performance and management of this program under the Therapeutic Community model. The MERIT program is a harm minimisation program and we will present two case studies highlighting the work of the program.

Biography

Michelle Tziarkis is Community Services Manager Odyssey House where she has managed the following services since 2003, of the Odyssey House Admissions Centre, the Waverley Court MERIT Program and the Odyssey House community based After Care Program. Michelle's qualifications include a Bachelor of Applied Science in Health Education; Post Graduate Diploma in Community Counselling and an Advanced Diploma in Community Services Management. Professional experience includes employment in therapeutic communities, women's crisis accommodation service, management of a detoxification facility and an alcohol and other drug counselling and information service.

JOHNNY DOW

Director, Higher Ground, Auckland

PHILIP GRADY

CEO Odyssey Auckland

RENEE DENNIS

Clinical Leader – Adult Residential Services, Odyssey

Moral Reconciliation Therapy (MRT) within the Therapeutic Community

Odyssey House and Higher Ground are two Therapeutic Communities in Auckland. Together with the Salvation Army they form the AOD court treatment provider network which supplies treatment to Auckland's Drug Court pilot (AODTC). The network has begun implementing Moral Reconciliation Therapy (MRT) within both its community and residential (Therapeutic Community) programmes. This is in response to both the flow on from the AODTC and an increase in referrals from both Corrections and Justice.

Moral Reconciliation Therapy (MRT) is a systematic treatment strategy that seeks to decrease recidivism among juvenile and adult criminal offenders by increasing moral reasoning. Its cognitive-behavioural approach combines elements from a variety of psychological traditions to progressively address ego, social, moral, and positive behavioural growth. This presentation will provide:

- The context for introduction of MRT;
- A Brief overview of the model; Implementation into Odyssey and Higher Grounds Therapeutic Communities and other programmes;
- Initial Findings from the implementation;
- Feedback from the participants; and
- Where too from here and the potential and limitations of MRT

STREAM 2: 9.00am – 10.15am

JAIMIE NORTHAM

Masters in Clinical Psychology Candidate

LYNNE MAGOR-BLATCH

**Associate Professor University of Canberra and University of Wollongong
Executive Officer, ATCA**

Focus group and workshop to review the ATCA Standard for TCs working with youth populations

Participants who are working with youth populations in residential and TC settings are invited to take part in this practical workshop designed to review and make recommendations on the modification of the ATCA Standard for youth services. Jaimie Northam is undertaking this project in partial fulfillment of her Masters studies in Clinical Psychology at the University of Canberra. Jaimie has a commitment to TCs modified for youth populations, and previously worked with the Ted Noffs Foundation's PALM Program in Canberra. Her project, *Towards Development of Quality Standards for Australian Adolescent Modified Therapeutic Communities*, aims to explore the potential use of the ATCA Standard within modified, youth TC programs; to explore the issues and methods for applying adult health care standards to youth populations; and to provide evidence for effective methods whereby adult health care standards can be adapted for services for youth specific populations.



ATCA Quality Portal

A quality management system for therapeutic communities and residential rehabilitation service providers

The ATCA Quality Portal is an easy-to-use system that helps you manage quality, risk and compliance. The Portal includes the new ATCA Standard for Therapeutic Communities & Residential Rehabilitation Services, as well as the main sets of community services and health standards.

KEY FEATURES

- **Self-assessment against standards**
Complete self-assessments against the criteria (indicators) of a set of standards. As you work through each assessment, the portal will identify gaps and let you know what the organisation needs to do to achieve completion.
- **External reviews and accreditation**
Prepares your organisation for external review and accreditation, with the ability to submit your results and evidence online.
- **Automatically generated Work Plans**
As you complete assessments, a Work Plan is automatically generated based on the actions required to meet the standard. You can edit and allocate tasks, set due dates and email reminders.
- **Schedule email reminders**
Set email alerts as due-date reminders in your work plan or registers.
- **Risk, compliance and quality registers**
Create, edit and customise registers for risk management, compliance and other quality monitoring. You can tailor registers to your organisation's needs.
- **Document Library**
Upload and manage pre-existing or newly completed documents, then link them to action items to provide evidence of compliance to external reviewers.
- **Immediate solution to multiple standards**
Cross-referencing with all other sets of standards means you can complete multiple sets of standards by completing a single set.
- **Progress tracking**
Displays graphs showing your organisation's progress against industry benchmarks.

KEY BENEFITS

- Increases service delivery capacity.
- Manages and monitors risk and compliance.
- Undertakes gap assessments.
- Work directly online – no need for paper-based reporting.
- A standards update and alert service keeps you on top of changes.
- Builds staff and organisational capacities.
- An immediate solution to multiple standards.
- Red-tape reduction.
- Increases productivity and saves up to 80% of time.

“The SPP has reduced our reporting time significantly. The system is intuitive, I found my way around quite easily.”

Ronnie Voigt,
Drug Education Network

Subscribe or register for a **free two-week trial:**

Visit www.ngoservicesonline.com.au

Email info@ngoservicesonline.com.au

15%
Discount
for ATCA
members

THE ATCA QUALITY PORTAL IS A
TAILORED VERSION OF STANDARDS
AND PERFORMANCE PATHWAYS



STREAM 3: 9.00am – 10.15am

KAREN BARTLETT

Director of Counselling/TC

JOHN BARTLETT

Executive Director

J-F

Lecturer, University of Tasmania

Fostering mother and child relationship as part of drug rehabilitation: A follow up study

Mothers with addiction bring complex array for problems. One of main problems is the quality of relationships between them and their children, which is likely to deteriorate over the course of their addiction. Fresh Hope a residential therapeutic community provides in-house residential therapeutic service to mothers and children. Fresh Hope focuses on family and embraces the ideology that a village raises a child and provides a unique program to foster and facilitate positive relationships between mothers and their children. Using a case-study framework, five families (mothers and children) were assessed prior to entering Fresh Hope and in post-release. Both mothers and children took part in a family relationship programs over an 18 month period and a number of pre and post tests on family relationships, parent-child attachments, and child temperament were conducted. Results showed that attachment between children and mothers significantly increased, further mothers indicated a higher of self-satisfaction with their children. There was a significant increase in child mobility toward mothers and their attachment both during the program and in post-release. A facility that operates with a culture of a family using language, rituals and symbols to foster family relationships is likely to have positive benefits for both parties (child and parents).

Biographies

Karen Bartlett is one of the cofounders of Fresh Hope Association Inc. in Queensland. Karen started Fresh Hope in 1999 along with her husband. She completed her BA in Counselling in 1996, a Grad Dip in Rehab Counselling 2001 & a Masters in Counselling in 2008. Karen is a mother of two, a Grandmother of 9 children and is known as Nannals to all 260+ children who have been a part of the Fresh Hope Program.

John Bartlett is the other co-founder of Fresh Hope Association Inc. For the past 15 years the work at Fresh Hope has been his and Karen's passion to help mothers and their children recover. John has a degree (BA) in Ministry and many years of business ownership. After 38 years of marriage they have much love to offer all the children they come in contact with. John is currently on the Queensland State Board (QNADA).

Working as a Lecturer at the University of Tasmania, **Dr J-F** is a forensic psychologist, criminologist and developmental specialist in adolescent mental health and psychological disorders. He is also a registered school teacher, counsellor and guidance officer. Prior to lecturing, he also worked in several maximum and medium security prisons in Australia, USA and New Zealand, delivering various life and education programs, and has reviewed efficacy of offender support and development programs against recidivism and KPIs. He has also worked within a School/Education context in the area of special education, high-risk adolescent aggressive behaviours, gangs, bullying, motivation, school violence, mental health, psycho-pharmacology, psychopathology and deviancy. In addition, Dr J-F has developed several individualized alternative education programs, behaviour support plans, risk management schedules and therapeutic support programs for school students and inmates with complex psychiatric behaviours to non-compliance symptomologies and behaviours.

SHARON MESTERN

Chief Clinical Officer, Odyssey House NSW

Women with problematic drug and alcohol use have higher rates of trauma and abnormal pap smears

It is estimated that 6.6 per 100,000 women are diagnosed with cervical cancer every year. This particular type of cancer is largely preventable as we now have a greater understanding of the natural history of cervical cancer and its primary causative factor, persistent infection with human papilloma virus (HPV). There was very limited Australian data on the gynaecological needs of women in addiction recovery and even less specifically about rates of Pap smear testing, abnormalities and follow up. The objective of this study was to compare the incidence of abnormal pap smears and under screening in two groups of women, those with problematic drug and alcohol use and those without. Additionally this study compared the prevalence of known risk factors for cervical cancer such as smoking and sexually transmitted infections as well as rates of trauma such as domestic violence and sexual assault.

Women from the rehabilitation setting were approximately ten times more likely to have an abnormal pap smear and more than twice as likely to be current smokers. Both groups of women had comparable screening rates however differences in psychosocial vulnerabilities were significant. Women from the rehabilitation setting were six times more likely to have had a history of domestic violence, twice as likely to have been sexually assaulted, twice as likely to have had a history of mental illness. This study supports opportunistic cervical screening clinics within drug and alcohol rehabilitation settings given the increased rates of abnormal pap smears and prevalence of vulnerabilities within this group as well as other risk factors for cervical cancer.

DEBRA ZANELLA

Chief Executive Officer, Hope Community Services Inc

Rethinking the parameters of community - Establishing Therapeutic Communities in Greenfields Locations

In 2012, DrugARM (WA) attempted to establish a therapeutic community in the Chapman Valley, in Western Australia's Mid West Region. The attempt was met with strong and organised community opposition that succeeded in creating a climate of fear and conflict. This resulted in the Council rejecting a development application and the vendor selling the property to another purchaser.

Fast forward to 2014. Hope Community Services (previously named DrugARM) announces its plans to establish a therapeutic community in Walkaway, a small town in the City of Greater Geraldton, in Western Australia's Mid West region. The announcement is greeted with a front page story in the local paper "Walkaway on the international rehabilitation stage" and the local development association expresses its support for the proposal. In July 2014, the City of Greater Geraldton consents to the development application.

Hope Community Services will share its experience and learning's of attempting to establish therapeutic communities in two greenfields location in regional Western Australia. This presentation will explore the differences and similarities between the two experiences and the role played by the local community. It will also explore the methods of engaging the local community to move beyond models of acceptance to active participation.

Biography

Debra Zanella has a strong commitment to public health, social justice, education and values based organizations. Previous to her current role as CEO of Hope Community Services, Debra worked in Nursing, Education and over the last 10 years in Executive Management positions in Health Care in Western Australia and Tasmania. She has undergraduate and post graduate qualifications in Nursing, Education, Arts and Counselling and is a graduate of the Institute of Company Directors. She is

currently sitting on the Board of WANADA, WACOSS and is a member of the WA State Government Partnership Forum. In 2010 Debra became the CEO of Hope Community Services (formerly DrugARM WA), a state wide organisation that has been offering a variety of services to people struggling with drugs, alcohol and social exclusion for over a century.

STREAM 4: 9.00am – 10.15am

JAMES PITTS

CEO Odyssey House McGrath Foundation

CAROL MOORE

Moore Public Relations

Positive stories, positive outcomes: promoting TCs through proactive media liaison

How can TCs liaise effectively with media to publicise positive outcomes, build and protect reputation, encourage people to seek treatment, and enhance the perceived value of rehabilitation with the community, referral sources, donors and funding bodies?

Odyssey House NSW commenced a proactive media relations campaign in 2005 to increase positive media coverage. From 28 media items in 2005, in FY 2013-14 Odyssey achieved 356 positive media items, with an audience reach of more than 24.5 million and an impact/quality rating of 4.3 out of 5. CEO James Pitts has become a regular media commentator on AOD issues and Odyssey news, while clients' recovery journeys and successful outcomes have featured across radio, television, newspapers, online and magazines.

The presenters share insights and practical learnings about Odyssey's long-term public relations campaign to: generate "good news" coverage in an environment where "bad news" sells; publicise clients' personal stories while maintaining duty of care; and be prepared to deal with less-than-positive news.

The presentation discusses:

- The value of fostering media relationships, becoming a valued source of information, and being available for interview/comment
- Methods of dealing with the media e.g. newsworthy releases on events/AOD trends; promoting client successes; commenting on news of the day; providing background information
- "Packaging" your story for media e.g. articulate spokesperson; latest data/figures; client story to illustrate the personal impact; well written media materials; professional media liaison
- Being ready to deal with positive (and negative) media attention, from briefing staff and supporting clients, to issues management preparedness and media protocols
- Monitoring and analysing media coverage to measure success and plan future media activities

Biographies

James Pitts is the CEO of rehabilitation service provider Odyssey House NSW and has worked in the field of alcohol and other drugs since 1978. Highly respected in the Australian and international treatment sectors and the community, James is a founding member and director of ATCA. He has contributed to state and national drug policy through boards, working parties and expert committees and was a delegate to the Australia 2020 Summit. He is often called upon to speak publicly and in the media about alcohol and other drug issues.

Carol Moore is the principal of communication and training consultancy Moore Public Relations and has worked closely with Odyssey House since 2005 to develop and implement its successful media relations and issues management strategies and other communication initiatives. Carol has more than 26 years' public relations experience, with particular expertise and interest in social issues and healthcare in the not-for-profit sectors.

DEBI INGRAM

Quality Assurance Coordinator Odyssey House Sydney

Data Collection for Outcome and Impact Measurement

Therapeutic Communities (TCs) deliver many activities designed to assist residents in their recovery from alcohol and other drugs use, misuse and addictions. But, how do TC's know they are doing what is intend to be doing? How do TC's know activities are effective? One method is by data collection for measuring outcomes and impact, reviewing and analysing the data and using that information to inform practice. Effective data collection supports measurement of types of indicators such as performance, impact and satisfaction. Performance indicators measure the performance of a program or activity. Impact indicators measure the impact of the activity such as how many people received an intervention. Satisfaction indicators measure the satisfaction residents feel with programs or activities. Odyssey House implements the Impact Chain. This explains the flow of measuring outcomes in a step by step manner: Goals of the organisation, Organisation's activities, Output, Outcomes, and Impact. Some of the tools available to staff assisting data collection and measurement include: Flow charting, Brainstorming, Affinity diagrams, Cause and Effect Diagram, Histograms, Pareto Charting, Run Charting, Bar Charting, Control Charts, Benchmarking, Root Cause Analysis. All of this occurs within the original grounded philosophy of a therapeutic community, progress without loss of core beliefs and values.

Biography

Debi Ingram the Quality Assurance Coordinator for Odyssey House Sydney has been instrumental in developing data collecting systems that inform policy and practice. Debi will discuss how a TC can face the challenge of using outcome data to improve client outcomes. Debi will share the tools and processes currently being used that is sustainable and progressive.

JAMES PITTS

CEO Odyssey House McGrath Foundation

The Cost Benefits of Therapeutic Community Programming: A Survey of the ATCA membership

Therapeutic communities for the treatment of alcohol and other drugs misuse have been in operation since 1972. The therapeutic community movement was formalised in Australia in 1985 during the Premiers Conference, held in Melbourne, Victoria which was the forerunner of the National Campaign Against Drug Abuse (NCADA). An organisation, Australian (later Australasian) Therapeutic Communities Association (ATCA) was established at this time to represent and promote the interests of its members. Under the ATCA umbrella members have benefitted from processes of accountability, information sharing, and more recently the establishment of what are standards of best practice in therapeutic community treatment.

The extent to which therapeutic communities contribute to the attainment of desired outcomes in alcohol and other drugs treatment has been questioned at times. The criticisms have been levelled mainly at the costs of treatment in TC's and the length and duration of treatment. In order to determine the extent to which therapeutic communities contribute to the alcohol and other drugs sector a survey was conducted of its membership. The survey was conducted on April 15, 2014 with all members of ATCA participating.

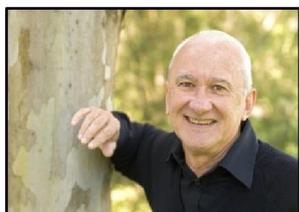
Cost benefits were determined by calculating the costs to society as a result of each person's drug misuse in the year prior to their entry into therapeutic community treatment. Determining indices included: criminal activity; drug misuse; court costs; legal costs; hospital and doctor's costs; welfare payments; and work histories.

These costs were measured against the amount of time spent in Therapeutic Community treatment indicated by drug free, crime free days and the monetary value apportioned to them.

PLENARY SESSION

11.45am – 12.45pm

The Quality Framework and ATCA Standard: Key developments and opportunities



BARRY EVANS
Consultant

A major concern for the ATCA from its inception has been the implementation of a program of continuous quality improvement, and associated with this, an evaluation process to ensure both the quality of service provided by therapeutic communities in Australia, and to ensure adherence to the Therapeutic Community model. A Peer Review mechanism was first introduced in 1995 by ATCA, this was the precursor to work which began in 2001-2 looking at the essential elements which define a therapeutic community, work which culminated in the development of the ATCA Standard for Residential Rehabilitation Services and Therapeutic Communities.

This presentation will provide an overview of the Standard today, the first specific standard for residential rehabilitation services and therapeutic communities in Australia. The Standard has recently been certified by JAS-ANZ and is now ready to be applied by agencies wishing to be accredited under this Standard. The presentation will place the Standard within the context of a national framework and discuss the future for accreditation of therapeutic communities and residential rehabilitation services in Australia.



JULIE NYLAND
Director of Breaking New Ground and BNG NGO Services Online

Julie Nyland is a Director of Breaking New Ground and BNG NGO Services Online. She and co-Director Jane Bradfield are the leading specialists in developing online services and solutions for Australian service providers working in community services and health, in the areas of quality service standards, quality performance management and organisational development.

With over 30 years experience in the community services and health industries and with a real interest in designing innovative, easy to use online resources for the sector, Julie and Jane combined their expertise with their considerable experience to tackle the problem of multiple quality service standards and compliance requirements and the impact on community and health services. BNG's most recent online service is the Standards and Performance Pathways (SPP) - a patented online platform and integrated quality management system for service provider organisations and assessors.

