



European Federation of Therapeutic Communities (EFTC) Conference: issues for Europe and Australia

As we prepare for our own Symposium in August, I thought it would be worthwhile to reflect on the European Federation of Therapeutic Communities (EFTC) conference which a number of us attended in September last year – particularly in light of the funding crisis which has been evident both here and abroad.



A small delegation from Australia attended, with Lynne Magor-Blatch, Gerard Byrne and Major David Pullen presenting papers on Australasian TC research and development and the Salvation Army Recovery Service programs. Others attending included Mary Alcorn, Charlie Blatch and Robbie Ferris. We have continued to develop a close bond with the EFTC, with many of our services having an affinity with the European, and particularly the UK model, and our presentations were warmly received by the audience,

which included delegates from throughout Europe and the US.

The conference was held in the beautiful Keble College, adopting the “community” process we had previously undertaken in Byron Bay, with delegates all staying at the college during the conference. It was a delightful setting – the dining room known to Harry Potter fans as the Hogwarts Dining Room.



For three of us, Oxford had also marked a special occasion as the Ley Community celebrated its 40th birthday. This is where Charlie Blatch, Robbie Ferris (pictured here with one of the founders of the Ley, Dr Peter Agulnik) and Lynne had their introduction to TCs, and catching up with staff and graduates from the early days reinforced again the way lives have been changed through the TC.

In the past weeks, however, we have had both our own funding crisis here and similar news from overseas. While we were in Oxford, the Greek TC Kethea, found itself under threat – and there was worldwide action to keep it alive and supported. In the last few weeks similar news has arrived about Phoenix Haga in Norway – at which Anthony Slater had been long-time Director until his recent retirement. Once again, the troops worldwide have mobilized and it is hoped that the valuable work of Phoenix Haga will continue.

Turmoil in wake of funding decision

As we are all aware, the funding issues in Australia over recent months have resulted in a huge amount of uncertainty and stress in the sector. With

organisations, and a number of our TC members, losing funding on the first round – only to be reinstated a few days later. For a number, the first round brought cuts – providing a rather absurd outcome of being ‘successful’ in the first round and receiving a cut – and the ‘unsuccessful’ programs then being refunded in the second round at the original level. As at least one of our members has commented, “In the end you would have been better to have been unsuccessful first time around”.

Barry Evans and Lynne Magor-Blatch met with Gayle Anderson (who has of course since left DoHA) and Alan Philp shortly after the first announcement and provided initial feedback from our members – and particularly the effects of the defunding across Australia. Of huge concern was the fact that some of our members who are working with families had lost funding, and the flow on effect this would have to the sector, especially in relation to family support and treatment places for women. It was therefore especially pleasing to see these programs reinstated.

Of Substance devoted an e-bulletin to the issue, which included a comment from the ATCA. The initial information told us that \$560 million had been committed over four years to organisations which deliver AOD services. Of this, the SMSDGF fund was providing \$233 million to 100 Indigenous AOD treatment services and \$61.2 million to other AOD treatment programs. The NGOTGP was providing \$125 million over three years.

Of the 526 applicants who applied for NGOTGP and SMSDGF grants, 323 were initially unsuccessful. However, the actual number of agencies whose services were to close or be restricted would be less than this, as many treatment providers submitted a number of applications to fund different programs or branches in different towns. Although DoHA did not release the names of these unsuccessful applicants, we were particularly concerned about the impact on AOD service delivery to families and the Indigenous community.

As members will be aware, unsuccessful applicants have been asked to register with DoHA to receive feedback about their applications. These services were also to receive an additional month's funding to July 31 to finalise services which had no longer been funded. Of course this all changed a few days later with the extraordinary announcement from Minister Butler's office late at night to say that the defunded

services had now been reinstated, and that this was in fact for a further three year period.

Reaction

Within the AOD sector, many agencies reacted to the initial funding announcement with anger and confusion. While this may have turned now to disbelief and relief, the fact remains that many have lost valuable staff in the process and turned away clients whose lives may have been lost while waiting for a treatment place.

Lynne noted in the *Of Substance* bulletin that while the majority of ATCA's members had received funding, a number would only be funded for some of the services they currently offered, and others had received reduced level of funds to maintain valuable and essential programs. At that time (after the first announcement) it appeared families and people with complex presentations, including dual diagnosis of substance dependence and mental health problems, appeared to be among the groups most disadvantaged by the funding decisions involving our members. ATCA had commenced a mapping process across Australia to determine what this would mean in terms of treatment provision as some jurisdictions had lost programs which would now mean service users having to travel interstate to access particular services.

Lynne stated, “The recent Commonwealth rounds of funding for the AOD sector have been extremely disappointing both in terms of the outcome and the process. The loss of funding to many agencies and the subsequent loss of jobs will not only reduce the level of service provision to the community but it will also create a climate of uncertainty going forward. The fragile nature of this funding will compromise agencies’ capacity and confidence to make long term plans for service delivery. At a time when both the sector and governments of all persuasions have agreed to cut the red tape that binds NGOs, the recent funding process has been convoluted and drawn out, adding to the insecurity and anxiety of many staff employed in the sector.”

In the final analysis, it would appear that it was the Minister himself who took the unprecedented action of reinstating the funds after recognising the inadequacy of the original process. Minister Butler will be attending the ADCA Council meeting in Adelaide in July, which Lynne will also be attending as a member of the ADCA Board – so it will provide an opportunity to talk more about the process. In

particular, we are concerned that this is not repeated again in three years time – so we will be looking for ways in which we can influence the process more effectively from here on.

The ATCA Symposium will provide a forum for discussion – please consider this issue and provide input to this.



**Stigma, and other
Barriers to
Treatment**



**ATCA Symposium
27 – 30 August
2012
Hotel Grand
Chancellor
Launceston,**

The ATCA Symposium in Launceston is fast approaching and promises to be an incredibly interesting and stimulating opportunity for discussion and professional development.

The Tasmanian Organising Committee has decided to tackle the ‘difficult’ issues – with a theme of *Stigma, and other Barriers to Treatment*. The Symposium kicks off on Monday evening with a reception hosted by **Launceston Mayor Albert van Zetten**, who is a former CEO of Missiondale. All delegates and guests are invited to this event at the Town Hall. On Tuesday all are invited to visit Missiondale, setting out from the Hotel Grand Chancellor at 9am, and returning for lunch and the official opening of the Symposium at 12.30pm.

Tuesday’s keynote speakers **Dr Nicole Lee** and **Mark Lamont** will focus on Acquired Brain Injury, the causes and effects on the individual and the challenges for treatment provision.

On Wednesday we will look at the issues for other population groups when **Rodney Croome** addresses the issue of homophobia and mental health, and **Connie Donato-Hunt** focuses our attention on



multicultural issues, looking particularly at pathways to treatment.



The important role of research for TCs will also be discussed on Wednesday, when **Dr Richard Chenhall** and **Dr Peter Kelly**, both of whom have been working with our TCs in the development of research projects, will provide a report and overview of the projects they have undertaken to date, discussing research related to understanding resident progress in TCs through the application of theory-based assessment processes. This presentation will be based on longitudinal data that has been collected from The Salvation Army Recovery Service Centres (Queensland, New South Wales and the Australian Capital Territory) and Banyan House (Northern Territory).

We are all aware that the call for evidence-based practice is strong, and as George DeLeon has recently noted in the past weeks through the EFTC discussion, “One of our problems is that so much research has been about proving that the TC works that we’ve had little time for research that explores HOW it works! The result is that we have a model that is indisputably “evidence based” ... but no definitive view of what the essential elements are or the optimal mix of those elements”.

Richard and Peter, together with Lynne and other researchers currently have an application in for an NHMRC grant to more fully explore just what it is about TCs that “work”. We don’t yet know the result of that application, but hopefully the Symposium will provide a forum to assist us to more effectively work together to develop, undertake and publish research into TCs.





The topic of “Recovery” has led to some heated debate in AOD circles over recent months – and **Associate Professor David Best** will again focus on this on the final day of the Symposium, when we will also bring

together a roundtable discussion to consider just what this means in our context. *Of Substance* will also discuss this in the next edition – considering how this is variously interpreted across AOD settings, and the different interpretations in mental health and other settings.

If you have not yet registered for the Symposium, Early Bird has closed, but the rates are very reasonable, and the Symposium in Launceston in August will provide a wonderful opportunity for collegial discussion and development.

Please remember, hotel bookings should be made directly with the Grand Chancellor. They are currently still holding rooms for us – but we will need to let some of these go in the next weeks if they are not taken up.

Symposium attendance Scholarship Program

The Foundation for Alcohol Research & Education (FARE), formerly known as the Alcohol Education & Rehabilitation Foundation, has partnered with the ATCA to support the attendance of workers in the alcohol and other drug field at the upcoming symposium in August.

This is a tremendous offer, and we are incredibly grateful to FARE for providing the \$9,000 Symposium Attendance Scholarship Program.

Sponsorship is available for organisations that pursue best-practice goals by developing the knowledge and expertise of staff that work in the alcohol and other drug sector. Organisations need to demonstrate the benefits that staff will gain through attendance at the symposium.

Scholarship funding for attendance will be a maximum of \$2000 ex GST per person and 1 person per organisation can receive such funding. Justification of the expenditure items proposed must be provided at the time of applying for the scholarship funding round.

Symposium Attendance Sponsorship will cover:

- Necessary travel to the location of the symposium by rural and remote workers and early career researchers;
- Accommodation close to the symposium to reduce daily travel;
- Symposium Registration (standard price and Symposium Dinner);

Symposium Attendance Sponsorship will not cover:

- Travel allowance including meals (except symposium dinner)
- Backfill of positions during conferences
- Airport transfers

This project aims to:

- Assist individuals in rural and remote Australia to attend the conference.
- Assist new researchers (in the first three years of their career) to attend the symposium.

The ATCA Board and Symposium Organising Committee invites organisations and individuals who believe they fit the criteria to apply for funding. Further details are available by contacting Lynne Magor-Blatch by email: atca@atca.com.au

Goodwill visit from U.N. Ambassador

American author, actor and activist Chris Kennedy Lawford recently visited Higher Ground in Auckland, New Zealand with an uplifting message of hope and recovery. He is the United Nation’s first Goodwill Ambassador on Drug Dependence, Treatment and Care. Chris spoke to residents about his personal journey from 20 years of addiction to being now more than 24 years drug-free.

“I was spellbound,” says one Higher Ground resident. “He’s a really charismatic guy, but he related to us so well. He used the analogy of every day of addiction being like dancing with an 800 pound gorilla. He made it clear just how strong the addiction process was.”

Chris Kennedy Lawford campaigns tirelessly on behalf of the recovery community in both the public and private sectors, speaking around the world on issues related to addiction, mental health and Hepatitis C. Born into the influential Kennedy family in the United States, his mother Pat was sister to President John F. Kennedy and Senators Robert and Teddy Kennedy.

“What really touched me,” says another resident, “was hearing his story as a person born into such privilege and opportunity, but that it was still no defence against the disease of addiction. And his courage. I was really grateful to hear of the work he does on behalf of all of us.

“He gave a strong message that we still counted, that we must never give up. The world still needs us and there is a way out and it is what we are doing here. He is a firm believer in the 12 Step programme that we follow at Higher Ground.”

While in New Zealand Chris spoke at two public events and met with politicians and key people in the alcohol and drug treatment sector. He spent two hours at Higher Ground where he was welcomed by Trust Board members, staff and residents with a powhiri and watched a play about how paua reclaimed its true colours – a story paralleling the person’s journey through recovery.

Another resident commented that he was aware of the tikanga Maori of Higher Ground’s programme, and Chris’s response. “This is a unique aspect of the way treatment is run here at Higher Ground. I think he really appreciated that, I know I did, I was definitely proud to be part of it.”



Chris Kennedy Lawford (In Sunglasses) with, from left, Staff Rawiri Pene and Otto Mengedoh and Trustees Janet Colby and Marino Sherwin

Palmerston Farm Therapeutic Community

Palmerston Association Farm Therapeutic Community has been transformed, thanks to a great partnership between the Association and Polytechnic West, a WA training college. CEO Sheila McHale said, “As a result of this partnership, we now have a new administration building, a great new art/craft and

training room, and a new four bedroom house for residents getting ready to move out into the community. We have increased our overall bed capacity by four.”

Funding from the Prime Minister’s stimulus package in 2009 and a LotteryWest grant in 2010 augmented the building program to include a new group room, providing twice the space of the Farm’s old and white anted facility.

“What we have at our TC are four buildings which will stand as testimony to a partnership that has been respectful, methodical and above all else driven by a common goal to provide the best quality facilities for the hundreds of residents who put their trust in organisations such as Palmerston Association to support them in their recovery”, Sheila added.



Palmerston Farm administration building

The construction was undertaken by the TAFE students under strict professional supervision from their lecturing staff and external builders. Over 230 people were employed on the project and many of the students have subsequently found employment because of the experience the project gave them.

“The quality of the buildings has really lifted the overall capacity of the TC program and the spirits of our residents and staff”, Residential Services Manager, Wendy Shannon observed. She said that the additional beds created an opportunity to review the TC program.

The buildings have achieved a six star environmental rating - the new gardens are watered from the waste water from the reverse osmosis system, the electricity from the solar panels is currently powering the transitional house and the art/craft room and the design and orientation of the buildings have optimised energy efficiency. All the landscaping, as

seen in the accompanying photos, was designed and undertaken by the residents who embraced the ambitious task. "Being actively involved in this way gave the residents a deep sense of pride", Wendy said.



Group Room at Palmerston Farm

Sheila said that whilst buildings alone do not make a successful TC program and ultimately it is the strength of the community itself that is the best asset of any TC, this building program has had a fantastic impact on the overall effect and feel of our Farm TC on our residents.



Above and below, views of the Transitional House



Drug and Alcohol Nurses of Australasia (DANA) Conference in Melbourne

The 2012 DANA Conference, *In the Age of Complexity*, will take place in Melbourne from 13 – 15 June 2012 at The Citigate and Sebel, Albert Park, Melbourne.

In the Age of Complexity will highlight issues around drug and alcohol nursing and will identify and examine the current issues and problems facing drug and alcohol nursing.

For more information visit the DANA website:

<http://www.danaconference.com.au/>

email: dana@rcna.org.au or call 02 6283 3424.

ATCA Reconciliation Action Plan (RAP) development

The ATCA has registered with Reconciliation Australia as an organisation which is undertaking the development of a RAP. In order to make this process as consultative as possible, and to ensure a national focus, we invite our member agencies to provide us with their own State/Territory and regional priorities for reconciliation. Please forward information to Lynne and Bec at atca@atca.com.au. These will then be incorporated into a draft plan which will then be distributed to members for comment.

What is a Reconciliation Action Plan?

A Reconciliation Action Plan is a business plan that turns good intentions into actions. They are about creating respectful relationships and sustainable opportunities between Aboriginal and Torres Strait Islander people and other Australians.

We understand a number of our TCs have already embarked on or completed this process, and these RAPs will therefore be of help in the development of the ATCA's own Reconciliation Action Plan.

Cyrenian House Reconciliation Day

Cyrenian House recognizes the unique status of the Aboriginal and Torres Strait Islander peoples. Our Therapeutic Community is committed to playing a part in the journey of Reconciliation by helping all residents and staff to move forward with a better understanding of the shared past, and importantly how this affects the lives of Aboriginal and Torres

Strait Islander peoples today and how we might build a better future together.

The theme for this year was **Let's Talk Recognition**—with a focus on how we can better recognize each other, and recognize the contributions, cultures and histories of Aboriginal and Torres Strait Islander peoples. As a community we interpreted the theme by coming together at our Meeting Place.



The design for the meeting place was depicted from a painting created by Karen Ward (pictured above) our past Aboriginal TC worker. Karen joined us for the day to share her story and the story of the meeting place.

With the help of our present Aboriginal TC worker, Jim Cain, our Aboriginal residents put together a fabulous day of sharing food, stories, tears and laughter.



At present we are proud to have 20 Aboriginal residents including 10 children in our Therapeutic Community.

The feedback from our Aboriginal residents was that the TC has become their community, that they are feeling very much a part of and that like in Aboriginal culture where elders are role models; they hope to become role models for all Aboriginal peoples seeking treatment. What more could you ask for!!!!!!!

Eleven TCs peer reviewed under ATCA Standard's project

The ATCA has undertaken a very busy period of peer reviews, culminating in the review of 11 Therapeutic Communities by the end of the current financial year. Seven of these reviews have been completed since January 2012. The initial four reviews undertaken in 2010-2011 with Karralika Programs (ACT), Cyrenian House (WA), Selah Farm (NSW) and Logan House (Qld) helped us to begin the process of reviewing the Standard in preparation for certification through the Joint Accreditation System of Australia and New Zealand (JAS-ANZ).

Since then we have completed a further six reviews and will complete the last of those scheduled in the current round by the end of June to inform the review and modification of the Standard in preparation for its certification through JAS-ANZ.

Once certified, and dependent on funding agreement requirements and jurisdictional conditions, organisations may then have the opportunity to utilise the ATCA Standard as their primary form of accreditation. Accreditation would therefore be undertaken through an independent Certifying Assessment Body (CAB) which will include an expert representative in Therapeutic Communities.

The Board believes, however, that there is immense value in continuing to work with members through the peer review process. This would involve members continuing to utilise the modules and packages as an ongoing quality improvement tool within their own organisation, and undertaking an external review prior to the Accreditation process.

The modules are an extremely valuable resource for supporting organisations to undertake a self assessment into their progress against the essential elements of therapeutic communities, focusing on community as method and identifying areas for self improvement.

As the ATCA was unsuccessful in the recent DoHA funding round in gaining workforce development funds to enable us to continue to cover costs of peer reviews as part of a capacity building process for TCs, the Board is therefore considering ways in which these might continue in the most cost-effective way for member organisations. As an Association, we continue to be committed to the support and development of TCs and our members.

ATCA Peer Review at Missiondale – a positive experience

In around 2005 Missiondale management identified that a resident run community was the most appropriate model to implement to increase the effective support to clients working through substance use issues. In 2009 the commitment led to becoming a provisional member of ATCA with a commitment to seeking full membership.

In April 2012 City Mission achieved a key milestone – a Peer Review.

The Board, Chief Executive Officer, management and staff have all been extremely pleased to achieve this milestone and are greatly encouraged by both the feedback, evaluation and the framework and direction this gives for future development.

Overall, the review was a highly positive experience for everyone in the community; however, some particular highlights included the following:

- A realisation across the organisation that many of the TC standards refer to things that Missiondale is already doing, such as offering graduating stages of treatment with increasing opportunities and responsibilities, providing a secure community environment where residents and staff interact daily in a variety of formal and informal ways, and ensuring resident access to a full spectrum of care, including spiritual development;
- Assurance gained through resident consultations during the peer review that Missiondale participants are invested in their community and eager for greater levels of autonomy and responsibility in its management;
- Positive and constructive feedback from peer reviewers and other experienced TC sector professionals that Missiondale is promoting practical organisational learning and lending support to change processes.

Preliminary findings from the peer review have identified some improvement priorities to allow Missiondale to continue moving forward and maturing as a TC. In accordance with residents' expressed willingness for further autonomy, ways to build capacity for community self-governance are currently being explored.

City Mission aims to provide strong leadership in the drug and alcohol sector in Tasmania and achieving this point is both positive and encouraging in our endeavors to support people aiming to improve their physical, mental, emotional and spiritual health.

ATCA's new website coming!

The ATCA Board is in the process of updating and revitalizing the ATCA website. As part of this whole "new look", we will be updating the members' page to include a short introduction to your services and links to your own website. We will also be including "Inspirational Stories" – human stories of success through TC treatment.

In the next few weeks you will receive, along with your membership renewal, a proforma asking you for updated details and a short program overview, together with any new photographs you would like included. There will also be a letter for your residents – past and present – inviting them to provide their own inspirational stories of recovery. These will remain anonymous, and no photos will be included. Personal stories are important for the person who is telling them and for those who hear them - and often provide the inspiration to others to take the first step.

In the meantime, please review the information currently on the website in preparation.

Aljazeera documentary features Odyssey House Sydney

Odyssey House Sydney recently took part in a documentary, filmed by Aljazeera. In this half hour documentary, *101 East* looks at how drinking alcohol has long been a part of Australian culture. A recent report estimated that the tangible cost for alcohol misuse is \$25bn a year, including medical expenses, lost wages and productivity. There are concerns of increasing number of young people binge-drinking, with children as young as 10 seeking treatment for alcohol addiction.

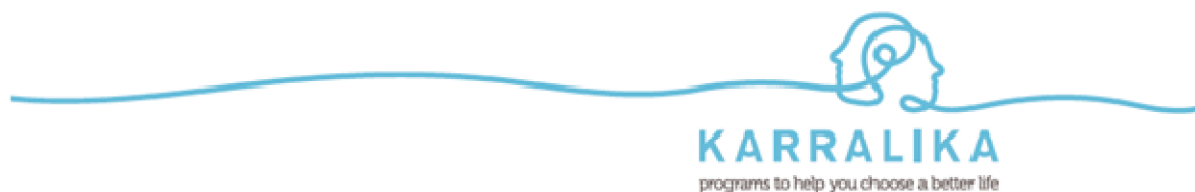
The program is now available at the following links:
Website:

<http://www.aljazeera.com/programmes/101east/2012/04/20124307543489111.html>

Facebook: www.facebook.com/101East

Youtube:

http://www.youtube.com/watch?v=7JTD_wlp3xs



Karralika Programs is a not-for-profit organisation providing an extensive range of alcohol and other drug services to the ACT community and surrounding regions.

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CLINICAL MANAGER

Karralika Programs operates a range of programs, including the Solaris Therapeutic Community (in a corrective services setting), The Karralika adult and child & family Therapeutic Communities, The Nexus Program (incorporating the Men's Halfway House Program and After-care Program), the Early Birds Program, and drink drug driving education programs.

This position is full-time and works across programs to provide clinical advice and support to the Executive and Program Managers within the scope of Karralika Programs service, with primary focus on the Solaris Program. This position investigates and provides contemporary best practice advice and use of leadership to guide appropriate treatment. The role implements and promotes evidence based standards and policies that are compliant with relevant requirements. It will provide coordination, implementation, and evaluation of quality improvement activities, and education and training programs. The role includes line management responsibility for the Solaris Therapeutic Community Program within the Alexander Maconochie Centre

Salary packaging including PBI fringe benefits-free threshold is available.

Essential Qualifications and Skills

- Alcohol and Other Drug (AOD) qualifications including a degree in a relevant field
- Demonstrated extensive knowledge of AOD treatment services and in particular, therapeutic community models
- Demonstrated experience in clinical management, quality assurance, and clinical supervision
- Extensive experience in client case work
- Demonstrated experience working as part of a multidisciplinary team, providing supervision and support to other staff
- Adhere to professional and agency ethics, boundaries and practices; and have a flexible work attitude
- Knowledge of work health and safety principles and practices
- Current drivers licence

Desirable Skills

- Experience working within a therapeutic community setting
- Experience working with vulnerable children and families
- Experience working within a corrective services environment

Karralika Programs is seeking applications addressing the selection criteria (including a CV) from interested people. For enquiries please contact the CEO, Camilla Rowland, on (02) 6163 0200. Deadline for submission of applications is 20 June 2012 and these may be sent by email to ceo@karralika.org.au or to Karralika Programs, PO Box 2230, Tuggeranong, ACT 2901.