



**WELCOME TO A NEW TC YEAR!**



As impossible as it seems, January is behind us and February has arrived. To all ATCA members and friends – we hope you had a restful and enjoyable break over the festive season, and that this year will be a successful one for all working in our field.

**2015 ATCA CONFERENCE: AUCKLAND  
NEW ZEALAND  
MONDAY 12 TO WEDNESDAY 14 OCTOBER  
2015**



Odyssey House (Auckland), CARE NZ and Higher Ground have the privilege of hosting the ATCA international conference 2015 in Auckland, New Zealand.

The overall conference theme will be ‘Partnerships in Treatment,’ which will focus on the numerous partnerships that are integral in providing a therapeutic community, which includes the client, their families and support networks, including the health boards, justice and corrections departments, community agencies, bi-cultural & multicultural relationships.

**Conference Topics**

- TC practice: New ideas and new initiatives
- Working in the region: Partnerships home and abroad
- Cultural practices: working with Aboriginal and Torres Strait Islander, CALD and Māori and Pasifika peoples
- Families and Children: Family involvement in treatment, interventions for children affected by parental drug use and associated issues, with a focus on early intervention and preventing the continuing cycle of intergenerational alcohol and drug use
- Use of technology: Embracing change in the TC community
- Continuing care: Re-thinking the parameters of community
- Co-morbidity: Best practice for people with co-occurring AOD and mental health issues
- Corrective services and coerced clients: Working collaboratively with our partners in the justice system

**Other topics of importance include:**

- Methamphetamine treatment, evaluation and research
- The importance of research partnerships in the development of an evidence base to underpin the work of TCs, both in the residential setting and in the community
- Development of TC training modules
- A quality framework for practice – the certification of the ATCA Standard and its place in a national model

## The conference program features:

### Monday 12 October:

- Site visits to Odyssey House (Auckland), CARE NZ Drug Treatment Unit (DTU) at Spring Hill Correctional Facility and Higher Ground.
- Evening: a welcome function at the Rendezvous Hotel, Auckland CBD.

### Tuesday 13 October – Wednesday 14 October:

An exciting and stimulating conference program is forming which includes international speakers focusing on a range of topics of importance to TCs. As well as covering a range of other important TC issues we also want to invite presentations on Cultural Indigenous issues from Australian and Bicultural issues from New Zealand.

**Keynote Speakers:** So far we have 3 keynote speakers.

- **Dr Ken Robinson:** from the USA on “Breaking the chains of Trauma” and “Moral Reconciliation Therapy” (MRT). His work will be tremendously important to TCs as PTSD and legal issues for residents are of great significance. Dr Robinson received his Doctor of Education degree in educational psychology and counselling and his Master of Science degree in psychology from Memphis State University. He co-authored “How to Escape Your Prison,” “Your Inner Enemy,” “Filling the Inner Void,” and all the MRT programs and materials.
- **Judge Lisa Tremewan:** The focus of Judge Tremewan’s keynote will be on the unique ways in which therapeutic jurisprudence practices are being applied in the context of the AODT Court pilot. She may also give insight into her working relationship with TCs.
- **Julian King:** research & evaluation of Methamphetamine treatment in a TC setting. Julian works with government, non-government and private sector organisations throughout New Zealand and Australia.

**Optional Workshops Thursday / Friday 15 & 16 October:** These are still being organised and we can tentatively say a Professional Development Workshop and Training by Dr Ken Robinson on “Moral Reconciliation Therapy” and “Breaking the chains of Trauma”

If you have any questions or queries regarding the conference do not hesitate to email Johnny Dow on [johnnyd@higherground.org.nz](mailto:johnnyd@higherground.org.nz)



**The Rendezvous Hotel in the Auckland CBD is the venue for the 2015 ATCA Conference. There are many things to do in Auckland, from the mild to the wild. Experience Auckland’s fantastic food, world-class shopping and exciting adventure activities. Get out on the harbour or check out the galleries.**

**Mark the date in your calendar now and start planning your trip. Book early for best prices. Right now there are some good deals in air travel!**

## Establishment of ANACAD, Advisory Council to Government

Already in 2015 we are looking at some important changes in the sector. On 14 December 2014 the Australian National Advisory Council on Alcohol and Drugs (ANACAD) was established to replace the ANCD. The role of ANACAD, according to the statement released by Senator Nash, who has responsibility for drugs and alcohol policy as Assistant Minister for Health, “will be to provide advice to the Government on a range of national drug and alcohol issues, including advice on emerging issues and new substances, to ensure the Government is well placed to respond”. ICE has been identified as a key issue of concern.

There are some significant changes from ANCD to ANACAD. The new council will advise the Minister (Senator Nash), rather than the Prime Minister. The new Council will be chaired by Ms Kay Hull, who was Chair of the Standing Committee on Family and Community Affairs Inquiry into substance abuse in Australian communities which delivered the *Road to Recovery* report in 2003.

Council members are: Dr Robert Ali, Professor Steve Allsop, Ms Jo Baxter, Dr Diana Egerton-Warburton, Dr James Fitzpatrick, Mr Anthony Fleming, Dr Jenny May, Mr Michael Phelan APM, Mr Frank Quinlan, and Mr John Rogerson. The ATCA congratulates the new members of the council. A/Prof Ted Wilkes AO, will be Principal Advisor, Indigenous drug and alcohol matters.

The ATCA looks forward to working with the new secretariat as it is established over the coming months.

The ATCA membership acknowledges the continuing work of Gino Vumbaca, Denise Gilchrist and Jenny Tinworth (Managing Editor, *Of Substance*), who are maintaining their roles within the ANCD Secretariat during this change-over period.

The ANCD has played a key role in the development of policy advice and its broad membership has ensured that all areas of the sector have a voice. Once again, our sincere thanks to all departing members of the ANCD for the valuable support you have provided to the sector over many years.

We would like to publically acknowledge the work of all members of the ANCD since its inception in 1998 to the present time, including most recently Dr John Herron, Associate Professor Robert Ali, Professor Margaret Hamilton AO, Garth Popple, Donna Ah Chee, Professor Steve Allsop, Professor Jon Currie, Magistrate Margaret Gill Harding, Nick Heath, Carrie Fowlie, Annie Madden, Commissioner Karl O'Callaghan, Frank Quinlan, Emeritus Professor Dorothy Scott OAM, Assistant Commissioner Julian Slater, Sheree Vertigan, Commissioner Paul White, Associate Professor Ted Wilkes, and Wilma Gallet – thank you for your dedication to the sector over many years, both as members of the ANCD and in your considerable work roles.

Congratulations to Robert Ali, Steve Allsop and Frank Quinlan, who will be continuing into the new council.

### Future of Funding

Eric Allan (ATCA Chair), Gerard Byrne (Treasurer) and Lynne met during the past week with Mr Kelvin King, Director, Grants Management Unit and Ms Linda Young, who is the newly appointed Assistant Secretary of the Drug Strategy Branch, in the

Department of Health. Linda replaces Kathy Dennis, who had taken up the position towards the end of 2014.

This was a positive meeting, in which the work of the ATCA was presented, and Linda was particularly interested in the role we have taken in the development of the ATCA Standard and what that means in terms of quality assurance.

The importance of evidence-based practice was stressed to us, and we were able to provide a substantial list of published papers stemming from the relationships which our members have been able to build with university researchers. Building this evidence base is of outmost importance. While innovation should not be sacrificed, continued funding and government support will be very much dependent on providing the evidence of successful outcomes. We have been heavily promoting the research agenda over the past years – and cannot stress enough the importance of this continued research activity.

We have also gained a new Minister for Health over the last weeks, with Sussan Ley assuming the portfolios of Minister for Health and Minister for Sport. It is our understanding that Senator Fiona Nash will maintain the responsibility for drugs and alcohol policy as Assistant Minister for Health.

Nevertheless, Minister Ley, as senior minister, has a keen interest in this area. She is also concerned with quality standards, and has signalled this as an area of importance. With the development and certification of the ATCA Standard, we are in a good position to meet Government expectations in this area.

TCs are also well-placed to carry the Government's agenda forward in terms of treatment services, and the ATCA Board will be working to ensure the voice of the NGO treatment sector, families and consumers is heard by the Government's advisory council, the Department and the Government itself.

The next months are incredibly important as the report from the Advisory Committee for the Review of Drug and Alcohol Prevention and Treatment Services Sector, on which the ATCA was an appointed member, is considered.

Both the ATCA Secretariat and most of our members are in a position of uncertainty as we approach the end of the current funding period – now only 5 months away – without any direction



about funding priorities and processes.

Linda Young and Kelvin King were not able to provide any information in relation to timing of announcements, but we are looking at the moment at a further extension to funding for another year. However, we are all very aware that the climate is by no means certain.

Some of our members have already been faced with funding cuts in recent weeks. Karralika Programs was notified on 23 December 2014 that funding to their Family Program, which has been operating since 1989, was to be cut by the Australian Government (Department of Social Services). As a consequence, all funding for this program from DSS will cease on 28 February 2015.



*Karralika Family Program at Fadden, ACT*

The organisation is making representation to the ACT Government and other areas of Government to ensure this vital service for vulnerable families continues to operate. However, as we move into 2015, there is still some uncertainty about the fate of the service.

Please maintain your support to all our members, and especially those working with special populations. Provision of support and treatment for families is one huge area of concern. Currently we have very few beds across our services available for families with children. At a time when family violence and child protection are clearly on the agenda – this is not the time to cut off treatment options for families and children.

In our discussion with Linda and Kelvin, we particularly highlighted the importance of our family programs, as well as the growth within the ATCA of programs working with Aboriginal and Torres Strait Islander populations. As Linda has most recently been working in the NT, she is very

aware of the considerable treatment needs of Aboriginal people, and was particularly interested in how the TC method of treatment is being applied.

Please keep the ATCA Secretariat informed about what is happening for your TC and other services in the coming months so that we can provide appropriate support.

### 2014 Conference declared a Huge Success by delegates

Delegates attending the 2014 conference, **TCs – Positive Journey: Positive Outcomes** have declared last year's conference as one of ATCA's best.



Sincere appreciation must be given to our **SILVER SPONSOR**, FARE, for funding support provided to the conference. This

certainly assisted us in bringing speakers and delegates to Sydney.

We realise that there are many competing demands on funds, and attendance at conferences may therefore be difficult for some of our members. The ATCA conference is unique in that it focuses on the work we are undertaking, and the tremendous outcomes evident from TC treatment. As such, it is an important event in the TC training calendar.



The majority of delegates noted the opportunity for professional development and networking as the prime reasons for attending the conference.



The changed format for the Monday tours was largely endorsed and particularly where the tour was effectively incorporated into the workshop activity.

There was strong endorsement for all keynote speakers, with delegates particularly noting presentations by Professor Maree Teesson, Professor Amanda Baker, Steve Ella,

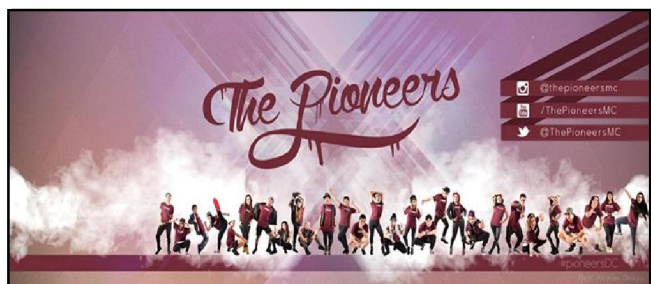


Lynne Magor-Blatch, James Pitts and Dr John Howard, which included the information provided on Bhutan.

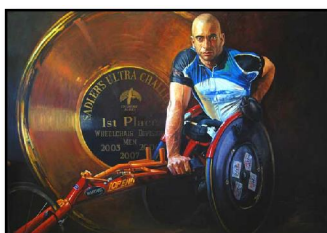
The panel session, chaired by Gino Vumbaca and including Dr Bosco Rowland, Larry Pierce and Michael Thorn was considered “excellent”, with “great content” and “interesting panel members”. We did have some last minute changes with the panel, and the organisers are grateful to the four members who took part in this important discussion. Alcohol concerns were noted as an area of importance by a number of people, highlighting this as an ongoing concern for future discussion.



Delegates also commented on a number and variety of speakers, the diversity of presentations, and the overall organisation as real strengths.



The dinner was enjoyed by delegates – and particularly the performance by *The Pioneers*, and the inspirational talk by Paul Nunnari.



However, some delegates missed the dancing – and asked for this to be brought back.

The difficulty of managing the mix so that the conference remains relevant for all attending was highlighted – and therefore the need for information sharing through

the website and other avenues noted. One person commented, “the challenges are many, but an inspiring TC community will solve them”.

In terms of the sharing of information – we would like to encourage all members to use the ATCA News listserver as a discussion forum and to keep others informed of activities and events.

If you have not yet added your name to the ATCA News – please send an email to [news@atca.com.au](mailto:news@atca.com.au) placing ‘Subscribe’ in the subject line. Some of our members are using this forum very effectively to discuss ideas and gain feedback, and to get news updates out to others. (Thanks to Clare Davies at Windana for the news on Windana’s 30<sup>th</sup> birthday celebrations, and Johnny Dow at Higher Ground for the advance notice on the 2015 Conference).

Conference organisers are reliant on the submission of abstracts – and each year we are keen to provide insights into project development – the good, and the not so good. We all like to hear the success stories – but it is also important to hear about what could have been done differently to provide a better outcome, what lessons were learnt, and to open a conversation amongst the audience about how things could be tackled, improved, redeveloped for a different population, different location.

To be truly effective, we would like to encourage all members as we approach the 2015 conference in New Zealand, to consider the way in which presentations can be part of an active learning and discussion forum.

The conference organisers particularly want to encourage you to share this information – because this is how we learn and develop an evidence base. This will certainly include the research being undertaken in all of our programs, and which will help to ensure continued funding in a difficult financial environment, but will also highlight practice-based presentations – workshops, innovations, finding new pathways to address both old and emerging issues.

Each year we strive to find the balance between sector information, vital for Management and Clinical/Frontline workers, as well as professional development for staff. In terms of what is happening at the TC and service level, we are to a very large extent limited by the abstracts we receive. Perhaps people are reluctant to share the

‘what didn’t work so well’ – but not reinventing the wheel, and learning from others is a key element in TC training.

As we approach the 2015 conference, we would like to invite CEOs/Managers to consult with your TC staff regarding areas for professional development which would be valuable for them. We want to speak to the day to day work of the Case Workers who deal with highly charged emotions, moods, breaches of rules and guidelines, personal relationships and the myriad of issues which might destabilise a community, generate stress, and potentially lead to burn out for the staff or discharge for the residents.

## 2014 AWARD WINNERS

Nineteen staff from our TCs received Recognition Awards for service of 10 years or more to the TC movement. For some, their 10 years has been spent with more than one TC and in a variety of roles. Some work in administration, some in client contact, in correctional settings and in community-based services. On behalf of the membership, we congratulate the following for their considerable service and commitment to TCs. TCs are renowned for staff retention, and the commitment and passion which those who work with us, bring to their roles. Thank you and congratulations to the following:

- Annette D’amore (Odyssey Vic)
- Barry Daley (WHOS)
- David Thornton (Windana)
- Debi Ingram (Odyssey House NSW)
- Dennis Humphrys (Palmerston)
- Derek Dunworth (WHOS)
- Elaine King (Palmerston)
- Ian O’Brien (Cyrenian House)
- Ian Porter (Palmerston)
- Kerrie Lloyd (WHOS)
- Lea Griffiths (Odyssey House NSW)
- Min Ni (WHOS)
- Peter Townsend (WHOS)
- Rhonda Rooklyn (WHOS)
- Richard Hillas-Brown (Karralika Programs)
- Robert Phelps (WHOS)
- Scott Parker (WHOS)
- Steve Hocking (WHOS)
- Troy German (WHOS)

**The award for Significant Contribution to the Therapeutic Community Movement in Australasia:**

**Program, Service or Intervention** recognises an exemplary or commendable contribution to the Therapeutic Community (TC) movement in Australasia made by a program or intervention.

The criteria for this award are based on current best practice; effectiveness on a range of measures, including the improvement of social and psychological functioning; and acknowledgement that the awardee is making a meaningful contribution.

In 2014, the judging panel decided to award two nominees in this category and to highly commend a third. **The Rick Hammersley Centre Therapeutic Community for Improved AOD Treatment Services to GLBTIQ Consumers** was highly commended as a program that is making a real difference in breaking down the barriers by creating a culture which fosters continuous quality improvement through staff and consumer participation. This includes building a culture within the organisation that supports GLBTIQ people both at a governance, human resource, and program element levels.

**The WHOS Opioid Treatment Program and The Rick Hammersley Centre Mixed Gender Program and Madjitil Moorna Choir of Aboriginal Reconciliation** were jointly awarded for their Significant Contribution to the Therapeutic Community Movement in Australasia.

A number of TCs are now embarking on the important program area of combining medically assisted treatments within the TC environment. The **WHOS Opioid Treatment Program** is acknowledged as the leader in this area of treatment, operating two TCs – the WHOS Residential Treatment of Opioid Dependence (RTOD) stabilisation program and the WHOS Methadone to Abstinence Residential (MTAR) reduction program. Expansion of OTP services in 2013 included the Newcastle Day Program, family and aftercare support and onsite dispensing of OST. WHOS OTP Services have been at the in service provision since 1999.

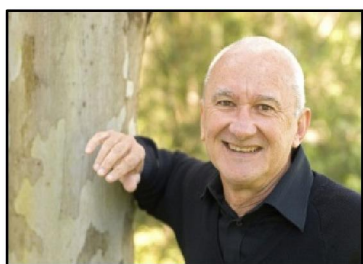
**The Rick Hammersley Centre Mixed Gender Program and Madjitil Moorna Choir of Aboriginal Reconciliation** was also recognised within this award category. The Madjitil Moorna Choir has been established to develop Partnerships to enable Aboriginal People to connect back to Community. This innovative partnership provides an avenue for Aboriginal People seeking treatment for their AOD



issues to connect back into community in healthy, life affirming ways. Aboriginal residents who attend the choir learn how to sing in Noongar language, perform at public events, and can take up administrative and coordinating roles within the choir upon completion of treatment.

Lead by award-winning Aboriginal songwriters, Madjitol Moorna has performed at major cultural events throughout metropolitan and regional Western Australia. The most recent performance by Aboriginal People in treatment at the TC with Madjitol Moorna was at the 2014 Perth International Arts Festival and at St Georges Cathedral for the NAIDOC Week celebrations.

In 2014, the award for **Significant Contribution: Individual Award** was made to three people who have made a significant contribution to the TC movement in Australasia over a considerable period of time. This award acknowledges and publicly recognises the exceptional work done by people who have worked tirelessly over a number of years to promote and develop the therapeutic community approach to treatment within the sector.



**Barry Evans** has had a long association with the ATCA and The Buttery, beginning in 1983 when he joined the team at The Buttery as the

Art Therapist and counsellor. In 1987 Barry moved into management, and was offered the position of Director in 1988, a position he held until his retirement from The Buttery in July this year.

Barry was one of the founding members of the ATCA and has worked diligently since that time to maintain and develop the TC method of treatment. In particular, he has spearheaded the association's work in the development of the ATCA Standard, and it is therefore very fitting that he will be maintain some of this work – even in his “so called” retirement.

Barry has been Director and Chair of the ATCA Board over a number of years, has served on the NADA Board and has been an active member of a number of organisations in the Northern Rivers. In 2009, Barry was inducted into the National Drug and Alcohol Awards Honour Roll.



**Wesley Noffs** entered the field in 1986 as manager of Life Education Australia, and in 1987 after his father, Ted Noffs, suffered a massive stroke, Wes took up the leadership role of that organisation. By 1990 it was evident that Youth Treatment was an under-resourced area, if not, non-existent. Wes, together with his wife, Amanda, felt compelled to focus on evidence-based treatment and turned the Wayside Foundation into the Ted Noffs Foundation.

Wes has had a long term commitment to evidence based, accountable and accessible services for young people and has guided Ted Noffs through changes which have impacted on the AOD, youth and related fields as a whole, providing an ever improving benchmark for good practice and accountability. Ted Noffs now works collaboratively across Australia to provide outreach evidence based, specialised care to rural, urban, indigenous and culturally and linguistically diverse youth and their families.

In 1999 the Ted Noffs Awards were established to honour outstanding individual and organisational contributions in the AOD field and in 2003, and these were followed the National Drug and Alcohol Awards as a collaboration between Ted Noffs, the Alcohol and other Drugs Council of Australia (ADCA), the Australian Drug Foundation (ADF) and the Australian National Council on Drugs (ANCD).

**Mandy Noffs** has 45 years management experience, and in 1988 joined the Life Education Centre as Public Relations Officer. In 1990 Mandy joined Wes and turned the Wayside Foundation into Ted Noffs Foundation. Since 1990 she has played a critical role in the ongoing development of Ted Noffs Foundation and its programs. Amanda was the Chief Operating Officer up until July of this year.

Mandy has also served as a Board member of the Network of Alcohol & Other Drugs Agencies (NADA) and as a Board Member of Greenpeace Asia Pacific, and alongside Wes has pioneered rehabilitation services for adolescents in Australia and is proud to have built an organisation that continues to grow and help young people in need.

The ATCA is fortunate to have had these three pioneers leading the way over a number of years, and fortunately it seems that we will be able to retain their expertise and knowledge for a little while yet from a true 'retirement'.

On behalf of the membership, we again extend congratulations and appreciation for the commitment of Barry, Wes and Mandy.

### THE ATCA STANDARD ROLLED OUT TO SERVICES

As members are aware, the ATCA Standard has achieved certification with the Joint Accreditation System of Australia and New Zealand (JAS-ANZ) the government-appointed accreditation body for Australia and New Zealand, responsible for providing accreditation of conformity assessment bodies (CABs) in the fields of certification and inspection. Accreditation by JAS-ANZ demonstrates the competence and independence of these CABs.

Certification by JAS-ANZ has brought to a conclusion more than 12 years of work by the ATCA Board, beginning with the 2002 *Towards Better Practice in Therapeutic Communities* project, and the development of the *Modified Essential Elements Questionnaire (MEEQ)*, which became the basis on the ATCA Standards project, funded in 2008 by the Australian Government.

During the conference we heard from Barry Evans, who was able to provide an overview of the ATCA Standard, placing it within the context of a national framework, and presenting on 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, together with 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 and quality performance management.



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.

ATCA has its own tailored version of the SPP – the ATCA Quality Portal, carrying the ATCA Standard for Therapeutic Communities and Residential Rehabilitation Services. The ATCA Quality Portal provides therapeutic communities and residential rehabilitation services with an easy, electronic system for managing quality, risk and compliance.

It features quality standards assessments, an automatically generated quality improvement plan, with guides and resources to support organisations in meeting the ATCA Standard as well as other relevant quality or service standards.

Through the standards cross referencing system, a way of completing multiple sets of standards through a single assessment process is provided. It also provides progress graphs, benchmarking, global reporting, as well as a document management system and compliance registers, with calendar and email alerts.

The general SPP is now used widely by service providers, peak bodies and government departments throughout Australia. For more information about the ATCA Quality Portal and the 15% discount to ATCA members, please visit our website: <http://www.atca.com.au/>

Although he has now retired from his role as Executive Director of The Buttery, Barry Evans has maintained his interest in the therapeutic community model and the ATCA Standard for TCs and Residential Rehabilitation Services.

The ATCA Board has contracted Barry to continue the work of the Association in promoting the





## 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

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Standard to members and to Certifying Bodies, encouraging both to take up the Standard. With the Standard now registered with JAS-ANZ and through the gracious assistance of WANADA, an alternate pathway to Full Membership of ATCA has been created.

Provisional members now have a choice when they are ready to move from Provisional to Full Membership; they can either participate in a Peer Review or be audited against the Standard by an external Certifying Body. The ATCA Board is currently seeking expressions of interest from Certifying Bodies that are prepared to meet the JAS-ANZ requirements for certification so that this option becomes more readily available.

The ATCA Board is keen to assist Provisional Members planning for a review in the near future. If you have any questions or concerns please contact Barry to discuss, you can email him at [bjevans49@gmail.com](mailto:bjevans49@gmail.com). Over the coming weeks Barry will be in contact with all Provisional Members to discuss their future plans for a review.

### ATCA WELCOMES NEW MEMBERS

In recent months, the ATCA Board has approved the applications of **Te Utuhina Manaakitanga Trust, AOD Counselling Service, Rotorua** and **Hope Community Services in WA** as Provisional Members of the Association. This brings our membership to 67 TCs in community and correctional settings – a growth of 60% since 2006.



**Te Utuhina Manaakitanga Trust** provides a 12-week residential program which aims to positively impact on the resident's thoughts and perceptions, emotional self-regulation, spiritual strengths and pro-social skills and behaviours. The program is integrated into a 'therapeutic community of whanau' who have input into a continual unfolding of quality interventions in an overall environment of safety, respect and learning. The program has a tiered structure and is based on the Poutama concept.

**Hope Community Services'** therapeutic community is located in Geraldton, offering a caring, non-judgmental environment, where residents participating in the program live in a highly cooperative relational environment that encourages self reflection, positive change and engagement in their own recovery.

The varied and intensive daily program includes vocational and life skills training, group work and one-on-one counselling, recreation, participation in peer support groups, and physical activity. Residents also participate in the development and creation of the Mount Hill Community Farm.



The Mount Hill Community Farm is a sustainable social enterprise with community and residential members. Using permaculture principles, the farm will grow quality produce that sustains its residents and community members. Surplus produce will be sold to the local community.

Welcome to our two newest members!

### ATCA MEMBERS INVITED TO PARTICIPATE IN BHUTAN PROJECT

The possibility of a project to support the development of a therapeutic community in Bhutan was presented at the 2014 ATCA conference by Dr John Howard, Conjoint Senior Lecturer, National Drug and Alcohol Research Centre. Conference survey results showed support for this project, and since then a number of our TCs have approached John directly to register their willingness to undertake fund raising activities to assist in bringing staff from the Chithuen Phendrey Association (CPA) to Australia for training within Australian-based TCs.



It is proposed that this will occur in September/October 2015 so that the trainees can also journey to New Zealand for the 2015 conference and visits to New Zealand programs.

Areas of drug use concern include alcohol, Glue ('Dendrite') and correction fluid ('Dilute'), Cough syrup ('Corex'), Cannabis, marijuana (leaf, and flowering parts of cannabis plants) and hashish, Pharmaceutical drugs: SP (Spasmo Proxyvon), RP (Relepin) [both similar to digesic, and containing paracetamol], and N10 (Nitrazepam - Mogadon), Amphetamine Type Stimulants (ATS), Cocaine and Opiates.



Injecting of drugs appears to be limited, but should injecting become popular, as is the case in neighbouring Nepal and parts of north-east India, the associated difficulties will be immense and include HCV and HIV.

As the ATCA's focus is on Australia and New Zealand, the Board has determined that funding an activity in Bhutan or travel from membership funds is outside the Board's core business. ATCA EO, Lynne Magor-Blatch will therefore travel privately to Bhutan in April on invitation from the CPA to work with the staff in Paro and Thimphu. Together with John Howard, Lynne will provide workshops for peer counsellors at the CPA residential treatment program (Samzang) and Thimphu. A one day seminar on residential treatment is also planned.

CPA strongly wants to ensure that their programs have an evidence base, reflect local cultural values and requirements, and are not imported facilities. To this end they have identified ATCA members as a key point to seek guidance and ideas. Already connected with some Australians with TC backgrounds or connections, limited capacity

building activities have been provided free of charge to them in Bhutan by these Australians. Other capacity building has occurred for very few staff via the Colombo Plan. However, none of this is as helpful as actual site visits and immersion in TC programs.

John is now keen to hear from ATCA members who are interested in working with him to establish an Australasian-Bhutan Working Group. It is suggested the group will work to develop evidence-informed responses to the concerning levels of drug use and related health, social, economic and development impacts of their use, cultivation, manufacture and trafficking.

What could be explored by the Working Group includes:

- a) What of the Australasian experience might be relevant to the Bhutanese context?
- b) Avenues and opportunities for capacity building within Bhutan and Australasia.
- c) Developing a formal and structured Australasian TC experience ('placement') for selected staff from CPA, and/or other appropriate organisations, with required tasks both during the placement and on return to Bhutan. Such tasks should be aligned to recognised 'competencies'.
- d) Explore partnerships with tertiary education providers – university, college and vocational institutes to consider 'offshore' courses, RPL for activities undertaken during 'placement' visits in Australia. This exploration would include the training program being developed currently in New Zealand as a joint project of Matura Raki and ATCA.
- e) Develop a research agenda
- f) Possibilities for joining 'faculty' to provide elective course units within existing tertiary studies in Bhutan, such as 'Mental Health and Drug Use', 'Interventions for People who use Drugs' etc. At this stage, the only appropriate course is the Post-graduate Diploma in Guidance and Counselling at the Royal University of Bhutan.

If you are interested in being part of this project, John is keen to hear from you and to discuss the establishment of the Working Group. Please email John directly at - [jphoward.work@gmail.com](mailto:jphoward.work@gmail.com).