

Inclusion. Innovation. Impact. Sustainability.



Conference 2023

31 OCT - 2 NOV

Mercure Sydney

Conference Organising Committee:



Partnered by:



Platinum partner



Gold partner



Silver Partner



Bronze Partner



Bronze Partner



James A. Pitts Oration Partner



Networking Event Partner



Significant Contribution to the Therapeutic Community Movement: Individual Award



Significant Contribution to the Therapeutic Community Movement in Australasia: Program, Service or Intervention

Acknowledgments

The Australasian Therapeutic Communities Association acknowledges the Traditional Owners of Country throughout Australia and recognise their continuing connection to lands, waters and skies. We pay our respect to Elders, past, present and emerging in recognition of the Aboriginal and Torres Strait Islander cultures and communities of the lands on which our members live and work.

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 partners of the 34th ATCA Conference.

Our appreciation to:

- **Platinum Partner:** Department of Health and Aged Care
- **Gold Partner:** Cyrenian House
- **Silver Partner:** Palmerston Association
- **Bronze Partner:** Toora Women Inc
- **Bronze Partner:** Odyssey House NSW
- **James A. Pitts Oration Partner:** Odyssey House NSW
- **Networking Event Partner:** WHOS
- **Significant Contribution to the Therapeutic Community Movement – Individual Award:** Palmerston Association
- **Significant Contribution to the Therapeutic Community Movement in Australasia: Program, Service or Intervention:** DASA

We also acknowledge the Australian Government Department of Health and Aged Care for their financial support of the ATCA Secretariat.



Australian Government

Department of Health and Aged Care

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Welcome



Gerard Byrne

Chair, ATCA Conference Advisory Committee
Chair, ATCA Board

The Australasian Therapeutic Communities Association 2023 Conference is being held on Gadigal land and ATCA acknowledges the Gadigal People of the Eora Nation as the traditional custodians of the land on which we are meeting. In doing so, ATCA pays respect to Elders past, present, and emerging. We extend that respect to Aboriginal and Torres Strait Islander people here today.

ATCA acknowledges and recognises people with lived or living experience of alcohol or other drug use. The experiences and wisdom they share with us provides rich information and guidance to the AOD sector at all levels, and importantly has a major impact on the reduction of discrimination and stigma experienced by so many.

On behalf of ATCA, the Board of Directors, the Membership and the 2023 Conference Organising Committee, I thank you for attending the 2023 ATCA Conference.

The ATCA membership is made up of Therapeutic Communities (TCs) and Residential Rehabilitation Services (RRS) from across Australia and New Zealand. Many of you have travelled far to be here today, some intrastate, some interstate and some from overseas, thank you once again.

The themes for the Conference are Inclusion. Innovation. Impact. Sustainability. which have provided the direction for our Conference program as we come together to share the achievements and advancements of ATCA members, our research partners and other AOD services and professionals.

There is an impressive line-up of speakers and topics assembled for the 2023 ATCA Conference, which I am sure will provide an interesting, enriching, and informative conference experience. We are all here because we are committed to and share a passion for the TC approach and its continuation into the future.

The last ATCA Conference was held in Adelaide in 2019. Since then, we have all had to confront and overcome many significant challenges, including the COVID-19 pandemic, which brought with it never-before experienced challenges and hardship. And now here we are coming together in 2023 and looking to share our TC practice wisdom and accomplishments.

Building on the theme for Adelaide 2019, The Future is Today, we will hear from an amazing and impressive group of speakers as to how ATCA Members have continued to forge ahead and have embraced inclusive, innovative, impactful, and sustainable service offerings as they continue to focus on services for the future.

There has been a lot of work put into bringing the 2023 ATCA Conference together and I acknowledge the dedication of those on the Organising Committee and the Member Organisations they work with. These are David Kelly, Odyssey House NSW; Danielle Manton The Glen; Mark Ferry, Ted Noffs Foundation; and We Help Ourselves (WHOS). Lynne Magor-Blatch has become the driving force behind the Committee after taking over from Vanessa Dumbrell who moved on from the ATCA earlier this year. A heartfelt thank you to one and all, as the commitment in time and effort has been significant.

I wish each of you all the very best for your Conference experience, I trust that you will find it be an interesting, informative and invigorating time, as we meet to network and to share with each other.

General information

Registration

In Conference Foyer of the Mercure Hotel
818-820 George Street, Sydney, Level 2.

The registration desk will be open during these hours:

Monday 30 October 5.00pm - 7.00pm

Tuesday 31 October 5.00pm - 7.00pm

Wednesday 1 November 8.00am - 5.00pm

Thursday 2 November 8.00am - 12.00pm

Networking Event

This will be held on the Terrace on Wednesday evening
1 November, commencing at 5pm.



We thank WHOS for partnering with us in this event.

ATCA Annual General Meeting

All members are invited to this event, to be held in the
Central Room. Wednesday 1 November, commencing at
5pm.

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 Lynne Magor-
Blatch on (+61) 403 630 716

Awards Ceremony

Thursday 2 November, commencing at 4pm in the
Grand Central

Site visits: Metropolitan

The site visits play an important part in any ATCA Conference, as they provide the opportunity for delegates to visit the host programs and to experience first-hand the work which they are doing.



Site Visit 1

Odyssey House NSW

Since 1977, Odyssey House has built a comprehensive network of specialised withdrawal and rehabilitation programs through residential and community service hubs across Greater Sydney and the NSW Southern Highlands.

This visit will take in two of Odyssey's sites - the main residential facility in Eagle Vale where the rehabilitation process is undertaken in a structured environment, with treatment support provided by professional counsellors and medical staff. This site also includes the Parent's and Children's Program, which is one of only a handful of rehabilitation centres in Australia that allow men and women to undertake treatment whilst their children (0-12 years) live with them.

Delegates will also visit the Foundations of Recovery Program, a 12-week program designed to meet the needs of less complex clients who require residential treatment and can have their treatment needs best met in an intensive, shorter program. It provides an opportunity for people in addiction to live together and take responsibility for themselves and each other as a community. Odyssey's three-month residential program incorporates more mental health and relapse prevention.

Visitors will also learn about Odyssey College, which is the education arm of Odyssey House NSW and provides all clients in the residential program with a rich and worthwhile educational experience. Odyssey College is a registered school with NESA and incorporates key content that allows residents the opportunity to learn some of the necessary skills that will hold them in good stead post-Odyssey.



Site Visit 2

WHOS Lilyfield

The WHOS campus Callan Park Lilyfield, provides a unique treatment facility with four therapeutic communities in the same location. These are:

- Gunyah Therapeutic Community for men
- New Beginnings, Therapeutic Community for women
- WHOS OSTAR (Opioid Substitution to Abstinence Residential) Therapeutic Community
- RTOD (Residential Treatment of Opioid Dependence) Therapeutic Community

The WHOS TC Program encourages residents to look at the issues associated with their substance dependence and to learn practical skills to assist them in their recovery. They then progress to Transition stage and are encouraged to give back to their peers in the TC by supporting newer residents and taking on additional responsibilities in the TC.

Finally, residents enter Exit stage where they further develop career and educational options, and pursue employment and housing – gaining the skills and tools to continue their recovery.

A range of activities and groups are provided at each TC, such as: AOD education, harm reduction, CPR and overdose and relapse prevention. Social, communication, assertiveness, conflict resolution and self-esteem building skills. TAFE provide various courses.



based counselling is available to help youth reduce their drug use and involvement in crime and to improve their mental health and wellbeing.

Site Visit 3

The Ted Noffs Foundation

The Ted Noffs Foundation (Noffs) is Australia’s largest provider of drug treatment for young people. Originally named The Wayside Foundation, Noffs was established in 1970 by the great Australian humanitarian, Reverend Ted Noffs, and renamed in 1992 to honour his life’s work. Noffs’ services focus on helping young people with drug, crime and mental health issues and have achieved significant success in reducing all three.

The Program for Adolescent Life Management (PALM), based in Randwick, is a modified therapeutic community, which provides young people with problematic drug use with services and support that can divert them from the criminal justice system. The program is ‘holistic’ in its approach, focusing on broader issues in young people’s lives beyond their drug use and involvement in crime. It’s tailored for each young person to develop skills and support for life outside the program. The program offers up to 3 months of residential rehabilitation. Young people are provided with a single room and have access to information, employment support, training, relationship building, mood management, personal growth and development, relapse prevention skills, life skills, and group work.

Noffs also offers Street Universities to build safer communities by providing opportunities for disadvantaged young people. They are non-residential treatment centres based in NSW, ACT and Qld that help those aged 12-25 with drug, crime and mental health issues. Each centre is unique and is a safe environment where young people can engage in workshops ranging from music and dance to computer coding. Evidence-

Site Visit Timetable

Metropolitan

Tuesday 31 October

Arrival and departure times	Itinerary
8:00 am - Meet at bus	Bus departs from Mercure Hotel
8:30 am - Depart	
10:00 am - Arrive	Odyssey House, Campbelltown
	Morning tea and tour
	Information session and discussion
11:30 am - Depart	
1:00 pm - Arrive	WHOS, Lilyfield
	Lunch and tour
	Information session and discussion
2:30 pm - Depart	
3:00 pm - Arrive	Ted Noffs Foundation, Randwick
	Afternoon tea and tour
	Information session and discussion
4:30 pm - Depart	
5:00 pm - Arrive	Bus returns Mercure Hotel

Site visits: Regional

This tour will offer an additional stimulating dimension with travel by train from Sydney Central Station along a scenic route which takes in the Hawkesbury River, Woy Woy Waterfront, Brisbane Waters, and the Central Coast to arrive at Tuggerah Station, where you will be met by buses to transport you to WHOS Cessnock, The Glen for Men and The Glen for Women. Return to Sydney is also by train.



Site Visit 1 – WHOS Hunter

WHOS Hunter Valley TC is a 4 –6 month, 29 bed residential, AOD treatment program based on the Therapeutic Community model for men and women situated in Cessnock, a regional area of the Hunter Valley NSW. Its goal is to help individuals find freedom from substance dependence and discover a new way of living. Residents live in a large twostorey building with separate men’s and women’s accommodation. Known as Ken Trevallion House, it was established in 2002.

WHOS is accredited by ACHS under the EQulP 6 and the ATCA Standard. Our TC treatment approach incorporates harm minimisation and services for people with co - existing mental health conditions. A range of social and recreational activities and psychosocial groups and education which include, Harm Minimisation, communication, living skills, peer lead learning, and Aftercare Support Meetings, such as Narcotics Anonymous and Alcoholics Anonymous, are provided. Health needs are met by visiting health and allied health providers, and by the WHOS Nurse. Residents progress through a staged treatment program during which they are encouraged to give back to their peers by supporting newer residents and taking on additional responsibilities in the TC. WHOS Hunter also provides Transition and Exit Stages, which includes housing for both stages. These are provided to support residents to establish their own housing, career, training and educational options. They are also supported to access employment and housing providers.

WHOS Hunter recently established a Pre and Post Residential Treatment Day Program in Newcastle which provides a combination of case management and

group work. The Pre- Treatment Program is designed to assist clients navigate barriers impacting on their ability to enter residential treatment.

The Post Treatment Program provides an opportunity for those leaving treatment to access support and case management and, if requested, to maintain a connection with the service they have left in the event they wish to reengage with that service.

WHOS Hunter has recently celebrated 21 years of service to the community.



Site Visit 2 – The Glen for Men

The Glen Group operates residential drug and alcohol rehabilitation centres on the Central Coast of NSW – The Glen for Men at Chittaway Point (est. 1994) and The Glen for Women at Wyong Creek (est. 2022).

The programs welcome Indigenous and non-Indigenous men and women from all over Australia.

The Glen’s 12-week program offers a culturally safe, supportive environment to recover from addiction and start building practical life skills for clients over 18-years old. The Glen also offers a transition program to support clients achieve their psychosocial goals such as education, employing, finances and housing. Our aim is to empower men and women to be the leaders in their own lives. We will nurture the skills and behaviours that help you leave the program with a sense of purpose.



Site Visit 3 – The Glen for Women

The Glen for Women, is set on a 4.45 hectare property and is home to NSW first Aboriginal controlled women's drug and alcohol residential rehabilitation centre. It offers holistic addiction treatment for First Nations women in a culturally safe and supportive environment to help women recover from addiction and build practical life skills.

Located on Darkinjung Country, the 20-bed centre provides a 12-week abstinence-based residential program that includes group counselling, purposeful life skills, sports, cooking, personal training, parenting programs, Alcoholics Anonymous and Narcotics Anonymous meetings, and community work and education.

The Glen for Women also helps clients deal with grief and trauma, relationships, gambling and anger management.

The Glen for Women is the result of a decades-old dream of Malyangapa woman, Coral Hennessy, whose daughter struggled with alcohol addiction, and died in 2020. Her passion to improve lives through drug and alcohol rehabilitation is a legacy of her late brother Cyril, who founded the nearby men's centre in 1994. The name was in honour of his son, Glen, who died after a battle with addiction.

Site Visit Timetable

Regional

Tuesday 31 October

Arrival and departure times	Itinerary
7:30 am - Meet in hotel lobby	Walk from Mercure Hotel to Central Station (5 mins)
7:50 am - Depart hotel for Central Station	
7:55 am - Arrive at Central Station	Newcastle line train departs to Tuggerah
8:15 am - Depart from Central station	
9:50 am - Arrive Tuggerah Station to meet WHOS Cessnock bus	WHOS, Hunter Morning tea and tour
Depart - 12:30 pm	Information session and discussion
Arrive - 1:20 pm	The Glen for Men Lunch and tour
2:45 pm - Depart	Information session and discussion
3:00 pm - Arrive	The Glen for Women Afternoon tea and tour
4:20 pm - Depart from Tuggerah station	Information session and discussion
6:00 pm - Arrive Central Station	Walk from Central Station to Mercure Hotel (5 mins)

Keynote Session Speakers



Inclusion.

9:30 - 11:00 am Wednesday 1 November

Culture at the Core: The inclusion of the Aboriginal Drug and Alcohol Residential Rehabilitation Network Model of Care principles in a therapeutic community context

Danielle Manton, Senior Lecturer, Indigenous Teaching and Learning, UTS; ADARRN

The Aboriginal Drug and Alcohol Residential Rehabilitation Network (ADARRN) Model of Care (MoC) explicitly demonstrates First Nations peoples' leadership in AOD healing through Aboriginal community lead solutions and approaches that enhance service delivery and outcomes.

Culture is at the core of healing for First Nations peoples and cannot be separated from any aspect of treatment irrespective of the context – when healing in group, activities or general interactions. This is a strength that supports healing and grounding clients and staff through connection, sharing knowledge and investing in the future, for themselves and each other. The ADARRN Model of Care is developed using a strengths-

based approach. ADARRN recognises the strength and expertise within our own healing community of staff and clients, this embraces and amplifies those strengths to build knowledge and undertake actions, this is an example of a commonality shared with the Therapeutic Community model.

Aboriginal health encompasses the physical, social, emotional and cultural well-being of the whole community, elements of this are also reflected through the wholistic approach of the therapeutic community, however there is an opportunity to learn and build on similarity to continue to provide the best culturally safe service to all clients on their healing journey.



Danielle Manton (BA Dip Ed, MA Comm Mtg and current PhD Candidate) is a proud Barunggam woman and member of the Darug community. She is a Senior Lecturer in Indigenous Teaching and Learning at the University of Technology, Sydney. Danielle is passionate about Aboriginal and Torres Strait Islander health and wellbeing through self-determination, healthcare equity and healthcare access. Danielle works extensively with community to develop and implement strategies to influence positive change in these areas. She is a Director on the Board of the Aboriginal Drug Residential Rehabilitation Network (ADARRN), and through this role has worked with ADARRN member organisations, community, and stakeholders to develop, implement, and evaluate the ADARRN Model of Care.

∴ **Weaving Te Tiriti o Waitangi into Healthcare: Odyssey's Bold Approach**

Peter Sciascia, Pou Matua, Odyssey Auckland

Fiona Trevelyan, CEO, Tumuaki Rangatira, Odyssey Auckland

Discover how Odyssey Auckland has woven the principles of Te Tiriti o Waitangi into its core practices, creating a powerful blueprint for transformative change. This presentation at the Australasian Therapeutic Communities Conference unveils Odyssey's remarkable journey of aligning Te Tiriti principles with health sector reform, Pae Ora, and the groundbreaking Health and Disability Service Standards (Nga Paerewa).

Odyssey's dynamic integration of the principles of Te Tiriti o Waitangi transcends rhetoric, fostering Māori inclusion in decision-making and program design to achieve true equity in care. By seamlessly harmonising these principles with Pae Ora's holistic approach, Odyssey demonstrates how embracing cultural values enhances the wellbeing of individuals and communities.



Peter Sciascia joined Odyssey Auckland in early 2021 as Kaiwhakahaere Tikanga and has now taken up the role of Pou Matua - Cultural Strategy and Relationships Lead. He has a strong background in Mātauranga Māori from working in Māori tertiary education spaces with te Wananga-o-Raukawa and Ngāi Tahu Iwi.



Fiona Trevelyan, CEO, Tumuaki Rangatira. People first drew Fiona to her work at Odyssey Auckland in 2002. People – tāngata whai ora and staff – drew her back in 2016 for the role of CEO. Fiona loves how our pillars – trust, honesty, responsibility, concern, and love – are integral to everything we do, and part of the organisation's DNA.

Besides working in the alcohol and other drug sector for many years, Fiona brings a life-long commitment to supporting stronger relationships among whānau and in communities. She believes our purpose is about connection to others.

Everybody matters: Inclusion of people with a CALD background in AOD therapeutic care

Teguh Syahbahar, Manager Multicultural Programs, Odyssey NSW
Winifred Asare-Doku, NDARC, UNSW
Chris Keyes, Deputy CEO, NADA
Stella Settumba Stolk, NDARC, UNSW

While almost 50% of Australians are of culturally and linguistically diverse (CALD) background, they remain under-represented in alcohol and other drugs (AoD) treatment.

This keynote will discuss data capture limitations, service barriers to care, and the intersection of multiple issues that increase the risk of AoD harms among people from a CALD background. The presenters, who represent a partnership between the National Drug and Alcohol Research Centre (NDARC), Odyssey House Multicultural Program, and the Network of Alcohol and other Drugs Agencies (NADA), will discuss community interventions in NSW; research conducted with AoD residential

rehabilitation services to assess their readiness to address service barriers; and research being conducted with AoD consumers to understand their needs and preference for treatment.

Practical holistic approaches that services can incorporate in their practice to make their spaces and care inclusive to people from a CALD background will be shared. The uptake of these approaches among services could increase AoD service uptake and provide opportunities for addressing other comorbidities. Because everybody matters, people from a CALD background need to be equally included in every day service plans and interventions.



Teguh Syahbahar is the Manager of Multicultural Programs at Odyssey House NSW and leads Odyssey's Cultural and Linguistic Diverse (CALD) specialist program empowering CALD communities to support primary prevention, foster community resilience and access culturally appropriate AOD care. Teguh is also an Adjunct Associate Lecturer at NDARC contributing to an important body of research focused on substance use in CALD communities.

He has spent the last three years engaging at a grass roots level providing AOD treatment for people from CALD communities across South-West and Western Sydney. Teguh is passionate in improving the long-term health and recovery outcomes for people seeking support. Teguh holds qualifications in Exercise and Health Science, a Master of Rehabilitation Counselling and is currently completing a Master of Addictive Behaviours.



Dr. Winifred Asare-Doku is a Clinical Psychologist and Postdoctoral Research Fellow at the National Drug & Alcohol Research Centre, University of New South Wales. She is the Project Evaluation Coordinator leading the National Kava Importation Pilot Program; evaluating the impact of change in the policy and its associated social, cultural, economic and health outcomes. Her research interests focus on alcohol & other drugs, mental health and well-being, gender studies, and evaluation of programs and services.



Dr Stella Settumba Stolk is a research fellow and health economist at the National Drug and Alcohol Research Centre, University of New South Wales. Her expertise is in the use of applied empirical methods in health economics and health policy, and mixed research methods, to aid decision making in the uptake and development of health interventions to ensure economic returns on investment. Her evaluation research focuses on interventions to reduce AOD harm among priority populations including people from culturally and linguistically diverse backgrounds, Indigenous Australians, and people in contact with the criminal justice systems.



Chris Keyes is Deputy CEO at NADA, where she leads on AOD sector policy and advocacy. Chris has worked in government and non-government healthcare settings in Australia and the UK, including occupational therapy, mental health and peak body positions. Her background includes organisational leadership, planning and performance, workforce development and commissioning. Chris has supported implementation of various sector and workforce development initiatives that build AOD service capacity to effectively respond to the needs of priority populations.

📍 *The Journey to Rainbow Tick*

Tim Flora, Manager of Therapeutic Community, Odyssey House Victoria
Ti Hunt, Senior Trainer, Odyssey House Victoria

We recognise that being a Therapeutic Community, means to be inclusive and respectful for all who seek recovery. But that has not always been the experience of LGBTI+ residents. Using the Rainbow Tick framework

has been a core component of introducing and supporting cultural safety for all residents and staff. Hear about our insights from our journey.



Tim Flora is the Manager of the Therapeutic Community (TC) in Lower Plenty for Odyssey House Victoria. Tim has worked at the TC for over 15 years as a Therapist, Senior Therapist and Manager and has a strong belief in the Therapeutic Community model of care. Tim is passionate about working collaboratively with the various stakeholders in AOD to ensure excellent client outcomes across the treatment lifecycle.



Ti Hunt is the Senior Trainer of the Therapeutic Community in Lower Plenty for Odyssey House Victoria. They were on the Implementation Team of OHV's successful Rainbow Tick accreditation project, focusing on Residential Services. They have worked in therapeutic communities for over 7 years, including WHOS.

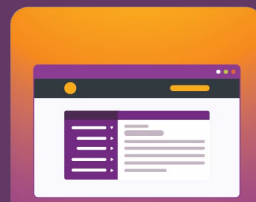
Ti is a member of the Victorian Pride Centre's Pride in Action Leadership Program and VAADA's Sex, Sexuality and Gender Diverse AOD Worker Network. They are a passionate advocate of developing the LGBTQIA+ workforce and improving equitable access in mainstream services.



Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings

THE GUIDELINES AIM TO:

- Increase the knowledge and awareness of co-occurring mental health conditions in alcohol and other drug (AOD) treatment settings.
- Improve the confidence and skills of AOD workers.
- Increase the uptake of evidence-based care.



A FREE ONLINE TRAINING PROGRAM AND WEBSITE HAVE ALSO BEEN DEVELOPED

ABOUT THE WEBSITE AND ONLINE TRAINING PROGRAM

- Aims to facilitate the translation and online dissemination of the Guidelines content.
- The website hosts the online content of the Guidelines, the online training program, and links to other resources.



Keynote Session Speakers

Innovation.

11:25am – 1:15 pm Wednesday 1 November



⋮ *Capturing Recovery Journeys in Therapeutic Communities through the Power of Recovery Capital*

Zeddy Chaudhry, Project Manager – Recovery Capital, Organisational Development and Support, Odyssey Auckland

Personal positive changes made in a therapeutic community are often recognised and celebrated by milestones, such as reaching a particular stage or graduating the programme. We are now able to capture positive changes that happen along the way, between these milestones and recognise what barriers exist for each person reaching their recovery goals, all through the lens of recovery capital.

Recovery capital refers to ‘the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery’ (Granfield & Cloud, 2009). It is a strengths-based concept that encourages people to build on existing assets, rather than focusing on deficits. Odyssey has partnered with Professor David Best to implement a groundbreaking recovery

capital-based evaluation, the REC-CAP, which is both a one-to-one intervention tool and outcomes measure. It includes a variety of recovery assessment measures that calculate key areas of positive recovery capital, unmet needs and barriers to recovery. A visual report is generated each time an evaluation is completed and is used to inform recovery planning. This has been implemented in Odyssey's adult therapeutic residential programmes. Progress and findings from implementing this tool will be discussed and data will be presented showing how recovery capital changes over time for people accessing our residential services. This presentation also reflects on findings that focus on the model's cultural acceptability in Aotearoa, New Zealand and other exciting innovations that have been developed as a result of this work.



Zeddy Chaudhry's role as Program Manager – Social Recovery at Odyssey Auckland, supports services to embed and utilise innovative and evidence-based approaches. She moved to Aotearoa, New Zealand after attending the Cutting Edge Conference 2018, where she fell in love with the culture, sector, and country. Previously she was studying in the U.K. under the supervision of Professor David Best who oversees the social model of recovery research at Odyssey. Learnings from a BSc Criminology Psychology and MSc Psychology compliment over ten years' experience working with people in criminal justice settings, addiction recovery in community and prison-based settings, and with children in care.

⋮ *WHOS Day Programs: Non-residential therapeutic communities*

Gerard Byrne, Operations Manager, WHOS Treatment Services

WHOS has established five Non-residential TC Programs in Qld and NSW, these programs meet the demand for AOD treatment for people who are unable to access the residential TC setting.

The TC model has traditionally been associated with residential settings, whilst this is a long standing and integral part of TC service offerings, WHOS recognised the benefit to utilising the TC approach in a community setting.

The use by WHOS of the TC practice principles, the Essential Elements, as they apply to the non-residential setting, ensure that the TC approach is embedded into

the service environment. Co-designing with staff and clients, WHOS explored how the TC approach and the Essential Elements could support an integration of the evidence-based TC model with non-residential AOD services.

What has resulted is a social, program and treatment system that utilises the components of the residential TC approach to offer a fresh style to the traditional non-residential AOD service. In implementing these Programs WHOS has provided guidelines for keeping the TC approach true to its origins, despite the differences in the treatment setting. WHOS is conscious of not letting the TC approach drift from its central

values, whilst recognising the value of the TC approach when adapted to a different treatment setting.

The TC is not necessarily about the buildings and the

beds, it is about the community being therapeutic and the elements that support the community to be therapeutic, and the ability to offer community as method as part of the treatment experience.



Gerard Byrne has 34 years' experience in AOD work, initially in frontline roles, then senior management positions within The Salvation Army, including Operations Manager for NSW, ACT and Qld. Gerard's current role is Operations Manager for WHOS Treatment Services.

Gerard has also worked in the private and government AOD sectors for 11 years, providing a range of specialist assessment / referral, counselling and case management services. He holds Board positions on peak bodies, including NADA, ATODA, ATCA and previously QNADA.

• *Innovative ways of working with young people: Utilising a modified therapeutic community approach to treatment*

Hannah Giles, Senior Adolescent and Family Counsellor, PALM, Ted Noffs Foundation

Adolescence is a complex, challenging and unique season of life. In this life stage, young people are faced with questions of identity formation, seeking out belonging from peers, meanwhile grasping for independence and a sense of unique self. When this season of life is compounded with experiences of trauma, poverty, abuse, mental health difficulties, and exposure to a lifestyle of crime, it can be incredibly isolating and difficult to navigate. Many will turn to the use of substances as an attempt to self-medicate and numb the pain. These young people so easily slip through the cracks in society due to behavioural issues and school dropouts, many ending up in correctional settings instead of receiving the treatment they so badly need.

The Ted Noffs Foundation PALM program is a 3-month residential rehabilitation program for young people

aged 13-18 adopting a modified therapeutic community approach. Working with young people in a therapeutic community setting reveals a distinct set of challenges, including working with a developmental stage that is ripe with angst, confusion, and treatment resistance. Utilising a diverse and creative treatment approach, with the young person at the centre, PALM works to modify difficult behaviours, resolve trauma, and produce a sense of self-efficacy and resilience in our young people.

This presentation will give an inside glimpse into the practicalities and innovative modifications underlying the therapeutic community approach for working with this unique and incredibly complex population to bring about renowned transformation in a young person's life.



Hannah Giles began working with the Ted Noffs Foundation in 2021 as an Adolescent and Family Counsellor at the PALM residential program in Sydney. Previously, Hannah was working in outpatient treatment with adults in addiction.

Hannah holds an Honours Bachelor degree in Psychology with a focus on lifespan development, followed by a Master of Counselling. Her areas of interest and expertise lie in youth mental health, trauma recovery, attachment disorders, and drug and alcohol.

Hannah has recently taken on the role of Senior Adolescent and Family Counsellor and continues her work with clients as well as overseeing clinical staff at PALM.

It's not just about teeth

Emma Jarvis, CEO, Palmerston Association
Professor Lisa Wood, University of Notre Dame

Teeth are not just about how we chew or smile. Missing teeth or poor oral health can negatively impact on confidence, resilience and self-worth. For people in AOD recovery, chronic dental issues are common, often caused or exacerbated by AOD use. In early 2022, Palmerston Association led a partnership to pilot a free oral health program to improve access to dental treatment for clients in our residential AOD treatment program, evaluated by Notre Dame University.

In a pre-dental treatment survey, four out of five clients reported feeling self-conscious and avoiding smiling due to the appearance of their teeth. Lack of confidence, pain, and difficulties eating were also experienced by many clients.

A total of forty-five people have accessed dental treatment through this project since June 2022. The response to the program has been exceedingly positive,

with many clients referring to physical, practical and psychological benefits of having 'their teeth fixed'. Many have reflected on how it compliments their AOD recovery goals, their broader wellbeing and bolsters their sense of it being a 'fresh start'.

The integration of this trauma informed oral healthcare program within an AOD therapeutic community has already yielded individual and therapeutic benefits beyond expectation. Findings are highly relevant to other populations that face barriers to accessing oral healthcare, and more broadly, to individuals or communities embarking on recovery. As noted by one client, 'it is not just about teeth', it's about mental health, confidence, self-esteem, and hope.... it's a massive part of recovery".



Since 2019, Emma Jarvis has been the Chief Executive Officer of Palmerston Association, a leading and respected alcohol and other drug service provider based in WA. Emma has more than 20 years' experience in a career across both government and non-Government sectors in Australia and the UK.



Professor Lisa Wood from the University of Notre Dame, is recognised nationally and internationally for her leadership in the homelessness and health field and for her work to reduce health inequalities. In 2017, she founded the Home2Health research team and leads its growing program of innovative, multidisciplinary research and evaluation.

Wasted Wisdom

Charmaine Diver, Registered Nurse
Lynne Glynn, Registered Social Worker; Odyssey Christchurch

The most recent International Narcotics Control Boards annual report labelled drug use among older adults as "a hidden epidemic". International experts agree substance abuse among people over 65 years old is a covert and growing problem globally. Older persons health has historically faced significant challenges to provide effective, meaningful, and appropriate responses to problematic substance use and misuse both in the community and in residential care settings and are presently under increasing pressure to support this doubly vulnerable population while ensuring co-existing problems are also addressed.

In 2012, Odyssey House (Christchurch NZ), following wide consultation with various key stake holders, secured funding to develop a pilot to facilitate what is now, the only dedicated program in New Zealand which services this cohort. This specialty community-based health programme is known as '65Alive' and is currently supporting Te Whatu Ora and other public/private primary healthcare organisations to address the demands being experienced. The 65Alive service discovered that when presented with a service which is tailored to their specific age group and circumstances, our communities' elders will more readily commit to

supporting each other through group support and are more likely to engage in harm reduction plans in order to achieve, and/or sustain, meaningful periods of abstinence. Review of the services through ADOM data,

coupled with positive consumer and agency feedback on the service, evidences a range of significantly improved health outcomes across the client group.



Charmaine Diver (Char), qualified as a New Zealand Registered Nurse in 1999. As a 14-year-old, growing up in Auckland, she took her first job as a Nurse's Aide in a private geriatric hospital and, resultingly, became passionate about the global 'changing ageing' movement. Since registering as a nurse, Char has practiced across many public and private settings, returning to her roots in Gerontology in 2006. Following post graduate study in advanced gerontological nursing through the University of Auckland, she has held both clinical and executive management level positions in older persons residential care settings since 2007. As a clinician with lived experience, Char joined the 65 Alive Team at Odyssey House in 2021 to continue her commitment to improving health outcomes for older New Zealanders.



Lynne Glynn is based in Christchurch, where her work experience includes case management and withdrawal support in both rehabilitation and withdrawal management services. Lynne has worked as a clinical assessor within Te Whatu Ora (Older Persons Health Specialty Service) and as a team supervisor in a nationwide Telehealth provider which offers AOD and MH Counselling. Each of these positions provided Lynne with streamlined learning in relation to what is needed to address the complexity of needs/problems faced by adults who are living with addiction as they age and inform her current role as a Registered Social Worker and AOD clinician.



DASA walks beside people in our community to help free them from the harmful effects of alcohol & other drug misuse

- Sobering Up Shelter
- Aboriginal Outreach Program
- Methamphetamine Outreach Program
- Aranda House Therapeutic Community
- Drink & Drug Driver Programs -Alice Springs, Arnhem Land & Remote Central Australia
- Transitional & Independent Living Programs
- Alternative to Custody Program for Aboriginal Women (Alice Springs)
- Alternative to Custody Program for Aboriginal Men (Groote Eylandt)

08 8950 5000

Alice Springs (Mparntwe), Northern Territory

reception@dasa.org.au

www.dasa.org.au



BREAKOUT SESSIONS

2:00 – 3:15 pm Wednesday 1 November



Stream 1:

Cultural Partnerships

Venue: Town Hall

Chair: Danielle Manton, ADAARN

Yarning Circle

Yarning is an informal conversation that is culturally friendly and recognised by Aboriginal people as meaning to talk about something, someone or provide and receive information (Dawn Bessarab, 2012).

In our conference context, it is a place where all people can have a casual or deep conversation about something or anything ... but the truth is always spoken in a yarning circle. Yarning circles are designed so that everyone has an opportunity to contribute in a safe and respectful setting.

Our yarning circle may have a few speakers who will lead discussion, however all attendees are encouraged to participate in the conversation if they feel comfortable.



(With thanks to The Glen for the photo of the Yarning Circle)

Stream 2:

Treatment Practice Session: Innovation

Venue: Central

Chair: Terri Roumanous, Odyssey House NSW

Saranna TC Program

Ciara Sheppard, Clinical Coordinator, Saranna Women's and Children's Program, Cyrenian House

Cyrenian House operates a unique Therapeutic Community Program (the Saranna Women's and Children's Program) for women and their children. The purpose of this presentation is to outline the program, and present key data and key learnings from the operation of this program over the past 20-plus years of its operation.

The Saranna Women and Children's Program (SWCP) allows mothers with their children (up to 12 years) in their care to access a residential alcohol and other drug (AOD) treatment service within a Therapeutic Community (TC) setting. This unique TC program is supported by a dedicated Aboriginal worker providing assessment and support for the high numbers of Aboriginal residents.

The program also supports mothers to develop parenting strategies, structure and routine whilst supporting the development of secure emotional attachment via Circle of Security – Parenting Program. Women and their children form an integral part of the TC, living in self-contained cottages to maintain the development of the family unit whilst engaging in the daily TC program of recovery.

Preschool children who are residing with their mother in the SWCP attend our onsite Saranna Early Childhood Education and Care Centre (SECECC). Data indicates that women in the Saranna Program stay significantly longer in treatment than women stay in our other Therapeutic Community Programs.



⋮ *Mentoring in Recovery*

Tim Flora, Manager, Therapeutic Community, Odyssey House Victoria

Helen Roberts, Early Career Development & Student Placement Coordinator, Odyssey House Victoria

Isolation (from family, community and social networks) is the single biggest risk factor for a range of issues including substance use, mental health issues and homelessness. Leaving a TC with the goal of continuing recovery is a daunting task where one is faced with the reality of creating a new support network in work, recreation and community.

Many would have accepted the need to distance themselves from their previous network, including family members, past acquaintances and friends, as part of their recovery journey and are therefore often left with a significantly smaller group of people to lean on.

For our residents, for whom connection and relationship is such a big part of the recovery journey, this can be

the difference between continued recovery or relapse. Odyssey House Victoria implemented a Mentoring Program to address the need for ongoing support as a preventative strategy to reduce risk of relapse and to take steps in recovery by building community connections and social capital.

This presentation will outline how the mentoring program has met a need for residents leaving residential treatment to expand their social capital and how this assists in reducing stigma and shame by introducing community volunteers into the TC environment and opening opportunities to explore a range of recovery orientated activities.

⋮ *Low-Medical Withdrawal & TC*

Deborah McManus, Manager, Serenity Lodge

Therese Mahoney, Manager, Nannup Therapeutic Community, Cyrenian House

This presentation will discuss the operation of the three Low-Medical Withdrawal Units operated by Cyrenian House in Western Australia, and their value as part of the treatment journey for people seeking Therapeutic Community treatment.

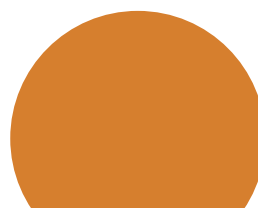
Low-Medical Withdrawal Management is a subset of withdrawal management which refers to a service that provides only limited medical supervision and interventions for people experiencing less severe and less complicated withdrawal symptoms and syndromes that can be safely managed with this type of intervention.

Cyrenian House operates three Low Medical Withdrawal Units (LMWU) comprising a total of 13 beds. The first was established in 2017 and the most recent opening

in 2021. The presentation will examine the history of the establishment of these units, and describe key aspects of their operation.

Residents in the LMWUs have educational groups as part of their treatment. The staged approach to recovery is similar conceptually to the staged approach in a TC.

The relationship between these units as part of a client journey leading to TC treatment will also be discussed and examined. This will include discussion of benefits of vicarious learning for LMWU residents experiencing Community as Method. A case study will also be presented demonstrating the value of having a Low-Medical Withdrawal Unit situated on the site of a Therapeutic Community.



BREAKOUT SESSIONS

2:00 – 3:15 pm Wednesday 1 November



Stream 3:

Treatment Practice Session: Innovation/Impact

Venue: Museum Room

Chair: Kieran Palmer, Ted Noffs Foundation

Financial Security and Freedom

Sharon Rowe, Business Manager, Residential Services, Odyssey House Victoria

As clients access our services, it is becoming increasingly obvious that many are not technologically literate and lack the underlying skills, resources, and identification requirements to be able to manage their lives in this new digital context. Increased online process, the reduced use of cash, an increase in pay day money providers short term loan availability, all contribute to the financial wellbeing of our residents.

While the need for a qualified financial counsellor is relatively self-explanatory, it is also recognised that a significant amount of administration work is required prior to meeting with the counsellor, particularly around identity and financial security.

The main objective of this role is to support residents to collate any required identification documents, such as birth certificates, Medicare number, drivers licence details, and then utilising those documents create a

myGov account and link any government required services. A secure digital identity will then assist with the groundwork required for financial counselling to be effective.

The financial facilitator is also working with victims of domestic violence, assisting them to secure their financial independence. As a community that accepts both adults and children, when these residents look to leave, it will be the first time they are financially independent and looking after their child/children which in part requires strong administrative support.

We also recognize the next step in gaining financial security is financial literacy. To gain long term benefits from working with a financial counsellor, our residents need to understand the financial system within which they exist and how their day-to-day financial decisions can impact their long-term financial security.

Munda Mia TC – the first 18 months

Claire Coni, Manager, Munda Mia Therapeutic Community

Munda Mia Therapeutic Community (MMTC) is Cyrenian House's newest TC. It is a twenty adult bed female only facility (including the staffing team) where residents have the opportunity to bring their children into treatment.

In April 2022, the Department of Communities contacted Cyrenian House, and discussions began about the takeover of another foundation that was going into administration in controversial circumstances. Cyrenian House was soon contracted to develop a TC program that provides not only alcohol and other drug treatment but also has a focus on Family and Domestic Violence issues, parenting skills, and homelessness. Cyrenian House not only took over the previous rehabilitation site,

it also inherited two transition houses and a café. This presentation will explore how MMTC was created; the first steps, how safety was established for residents and staff, how the media involvement was managed, how the remaining residents were supported, introducing the TC concepts, modality and methodology, how staff were supported and trained in TC concepts, creating the program with continual refinement, networking, how the property was returned to good working order, client demographics, take away learnings, challenges and goals for the next year.

Included will also be testimonies from current residents and from recent graduates as well as photos of the beautiful property.



Realistic Achievements

Douglas Shaw, Manager GTC, Windana

Understanding realistic achievements within a three-month therapeutic community residential rehabilitation program

Residential rehabilitation targets more than just AOD use. There is significant overlap with other domains of vulnerability, including: physical health; mental health; sociality; interpersonal relationships; housing; education/work; finances; and criminal activity. Understanding “what is a realistic achievement?” within a three month program is useful for a multitude of reasons. Firstly, it sets reasonable expectations for consumers. Secondly, it identifies accurate pathways

for referral agencies. Thirdly, it allows us as AOD professionals to begin to interlink more effectively, and to identify where there are current service delivery gaps.

This presentation aims to address several important factors for discussion. Most importantly: what is meant by “achievement” in the residential rehabilitation space; how we are measuring achievement; and what can be achieved in this period. Peripherally, we also highlight “What is a Therapeutic Community?”, and a lens of “getting the right client to the right site” to maximise their recovery.

ODYSSEY HOUSE
NEW SOUTH WALES

People who seek our support in their journey of recovery come from all walks and stages of life. Each person has different backgrounds, influences and needs that require a tailored approach to help them reduce and recover from their substance use.

Our trauma-informed programs and services wrap around each individual and give them timely supports when and how they need them in our residential and community programs.

odysseyhouse.com.au

The diagram is a circular infographic with a central figure of a person. It is divided into several segments:

- Reconnecting Families:** Family Recovery, Court Diversion.
- Reconnecting Communities:** Community Drug Action Teams, Odyssey College Adult Education.
- Reconnecting Culture:** Multicultural Programs AOD Support, First Nations AOD Support.
- Reconnecting Lives:** Case Management, Medical Detox, Recovery Stages, Continuing Care, Alcohol & other Drug Support, Mental Health Support, Relapse Prevention.

BREAKOUT SESSIONS

3:40 – 4:55 pm Wednesday 1 November



Stream 1:

WORKSHOP

Venue: Town Hall

Chair: Carol Daws, ATCA Board

• Lived and Living Experience Workforce: Exploring opportunities in • Therapeutic Communities.

Clare Davies CEO SHARC

Daria Healy-Aarons Senior Advisor, Lived Experience, Mental Health & Wellbeing, Department of Health, Victoria

Therapeutic Communities are, and have always been, places of healing and recovery through mutuality and community. Against a backdrop of emerging interest in and commitment to including the voices and perspectives of the Lived & Living Experience communities, the TC model is more relevant, and more important than ever.

We invite you to join us for a stimulating workshop and discussion to explore how TCs can model, share and consolidate decades of practical expertise in supporting

and nurturing the leadership of people with lived experience.

Come along to share your ideas and plan how TCs and residential services can highlight the many positive impacts that our communities have had on the AOD sector over decades of practice.

We look forward to sharing the possibilities and opportunities to lead on the future of the lived and living experience workforce and sector.



Clare Davies is the CEO of Self Help Addiction Resource Centre (SHARC). SHARC is a peer-led organisation that has co-produced programs to support people impacted by alcohol and other drugs and, more recently, gambling. Although the influence of lived experience is increasingly recognised in Australia, SHARC has been promoting and advocating for lived experience through services, programs, and policies for more than 25 years. Clare joined SHARC in 2022 having held leadership positions in the non-profit sector for over 15 years. She has qualifications in social work, psychology, AOD work, and is a current board member of the Victorian Alcohol and Drug Association (VAADA).



Daria Healy-Aarons is currently a Senior Advisor in the Lived Experience Branch of the Mental Health & Wellbeing Division at Department of Health, Victoria. She has previously worked at SHARC/APSU and Australian Drug Foundation on programs and projects that centred the voices and perspectives of people with Lived/Living Experience and has worked as a Lead Organiser at United Voice and Victorian Trades Hall Council, leading industrial and community organising campaigns to build power and leadership in marginalised communities and win professional recognition, better pay and safer working conditions for women, migrant and low-paid workers.

Now working in the Lived Experience Branch as Senior Advisor – AOD Consumer, Daria works to embed Lived & Living Experience perspectives in the implementation of the recommendations of the Royal Commission into Victoria's Mental Health System and Victorian AOD/MH systems more broadly.



Stream 2:

Treatment Practice Session: Inclusion

Venue: Central

Chair: Aaron More, The Glen

⋮ *Djinang Kadadjiny Karni Wangkiny*

Rohan Collard, Senior Executive, Palmerston Association

Waylon Hayden, Aboriginal Liaison, Palmerston Farm

A journey of improving our organisational cultural competence to support Aboriginal and Torres Strait Islander clients within our therapeutic community.

Palmerston is a not-for-profit organisation supporting individuals, families and communities affected by alcohol and other drug issues with a range of services including counselling, group support and residential rehabilitation located and operating on Noongar Country. Palmerston's vision is for equality and equity, so that Aboriginal and Torres Strait Islander people feel comfortable walking through Palmerston's doors, knowing they will be treated equally, respectfully, in a safe and culturally secure way, and with genuine inclusiveness. This requires building and sustaining genuine relationships and partnerships built on trust for our first nation peoples and the Aboriginal communities

that we work for, this is our Reconciliation Journey.

Palmerston has committed to a journey to further enhance Cultural Safety across the therapeutic community through Djinang (seeing), Kadadjiny (understanding) and Wangkiny (talking) to support cultural responsiveness and inclusion. This presentation will discuss how we have embraced improving our engagement and increase our partnerships with our Aboriginal residents in our therapeutic community and Elders through an ongoing commitment of respect, truth telling, listening, learning, celebrating and honouring cultural protocols and authority. It is through Karni (Truth) that we embrace Cultural Safety being central to our Organisational culture if we are to be responsive to the needs of our Aboriginal residents.

⋮ *Our Journey, Our Story - Learnings from participants cultural journeys and experiences though the Solid Steps AOD Program at Casuarina Prison (Perth / Boorloo)*

Emma Jarvis, CEO Palmerston Association;

Daniel Morrison, CEO Wungening Aboriginal Corporation;

Anna Calverley, General Manager, Justice Services, Palmerston Association

The Solid Steps AOD Program is a successful partnership between Palmerston Association and Wungening Aboriginal Corporation on Noongar Boodjar (Perth, Western Australia), delivering services at Casuarina Prison, with funding from the Department of Justice.

This is currently the most successful modified Therapeutic Community (TC) in a male maximum security prison in Australia and is receiving significant recognition across Australia for its work in the justice and AOD throughcare space.

Over the past 18 months a significant number of indigenous participants have graduated from the Solid Steps program and connection / reconnection to culture

has been identified as an important part of participants healing and ongoing AOD recovery.

This presentation will share the experiences of three Solid Steps participant journeys, through their 9-month journey in the AOD program and into their transition back to society and community. The journeys will focus on a range of qualitative interviews with the clients sharing their experience of culture, self-determination and healing in the program and how these aspects have contributed to their ongoing social and emotional wellbeing after leaving the program.

The program utilises the strengths of clinical approaches and cultural wisdom to ensure the importance of culture in healing and AOD recovery.

BREAKOUT SESSIONS

3:40 – 4:55 pm Wednesday 1 November



Virtual rehab: Glen metaverse

Alex Lee, CEO, The Glen Group of Residential Rehabilitations Services

In a world-first, The Glen has created a replica of The Glen on the metaverse that allows potential clients to walk through the rehab and learn about how to apply, reducing fear and anxiety. The metaverse also supports clients who've left the program with aftercare and recorded group counselling sessions.

The Glen has seen the average age of clients decrease over the last decade, and there is a cohort of younger clients seeking treatment. Some of this generation have grown up with e-games and the metaverse is designed to reach out to these clients. Most recent sector reports all identify a gap in services available to clients with long wait times. The metaverse is an available resource that provides some level of support to future and past clients.

The metaverse is a hyper-realistic 3D replica of The Glen using Web3 technology that allows easy access with a URL, just like a website. Clients have an avatar to walk around The Glen and access pre-recorded groups, information about intake and roam the familiar settings that is The Glen. The Glen's metaverse has been developed in consultation with clients and staff who have all enhanced the meta experience.

The Glen's metaverse currently holds pre-recorded information but in time, it will include LIVE chat rooms and group counselling sessions for clients to join online. This is the start of a new era where technology now allows 3D renditions of spaces to be easily accessible without the need to download large game files.

Stream 3:

Treatment Practice Session – Inclusion

Venue: Museum Room

Chair: **Jamie Young**, WHOS Cessnock

Developing a CALD audit tool

Chris Keyes, Deputy CEO, NADA

Mohamad Fenj, Manager, The Rehabilitation Project

Co-authors:

- **Alison Jaworski**, Consultant, Project Steering Committee
- **Ahmad Jadran**, Consultant, Project Steering Committee
- **Tata de Jesus**, Program Manager, NADA

Australia's National Drug Strategy identifies Culturally and Linguistically Diverse (CALD) communities as a priority population, given risk factors arising from migration, resettlement, acculturation, or refugee-like experiences. NADA and DAMEC developed and implemented an organisational audit tool to assess how Alcohol and other Drugs (AOD) residential treatment services respond to the needs of CALD clients across all aspects of service delivery, including governance, environment, community liaison and workforce profile.

UNSW's Centre for Social Research in Health evaluated the project through a mixed-methods approach to map organisational capacity to support CALD clients and to evaluate the efficacy and acceptability of the project.

Further consultations were conducted with CALD experts through a hypothetical case study on help-seeking behaviours in CALD communities.

Overall, cultural inclusion across organisational practices is not high, in contrast to staff perceptions of their own and their colleagues' competence. There was high acceptability of the audit process and participants expressed hope that this would be made available more broadly. Due to the diversity within and between communities, CALD experts stressed the importance of engaging with CALD clients holistically, with considerations around cultural practices reflecting in data collection.



Introducing MRT to a TC

Deborah McManus, Manager, Serenity Lodge,
Therese Mahoney, Manager, Nannup Therapeutic Community, Cyrenian House

Following the successful use of Moral Reconciliation Therapy (MRT) in a women's prison TC, Cyrenian House introduced MRT at Nannup TC in 2022, and Serenity Lodge TC in 2023.

This presentation looks at the ways MRT compliments the community as method approach both in keeping residents accountable and in taking more responsibility within the community. It also looks at some of the complexities and consideration that the services need to be aware of when introducing MRT to a community TC.

The presentation will follow one resident's journey via a case study with MRT commencing at Nannup TC.

Moral Reconciliation Therapy (MRT) is a systematic program designed to promote positive self-image, identity, prosocial behaviours, and beliefs. It also promotes the reset of the client's moral compass and judgement.

MRT seeks to re-educate residents to instill appropriate goals, motivation, and values by taking responsibility for their decisions and consequences for themselves and others who are impacted by their actions. This is accomplished through systematic self-evaluation and goal setting techniques (Little and Robinson, 1989; p38). As such it fits into the ethos of the TC model.

Working with Residents experiencing complex mental health concerns in a TC

Sarah Etter, Consultant, Odyssey House NSW
Ruby Maranoll, Team Leader, Odyssey House NSW

Odyssey House NSW works with people who are experiencing harms related to their AoD use and complex mental health concerns. Through the years of working with this client presentation there are many interventions and practices that OH puts in place to support the crucial work that is needed in this area.

Odyssey House has a strong multi-disciplinary team, including nurses, social workers, psychologists, and AoD treatment workers, who provide wrap around support for people accessing our service.

ATCA Conference Program

Wednesday 1 November

Times and venue	Event information and itinerary
8.00 – 9.00 am	Registration Tea and coffee
8:45 – 9:30 am The Grand Central	Official opening Session Chair: Gerard Byrne, ATCA Chair <ul style="list-style-type: none">• Welcome to Country: Uncle Allen Madden• Opening remarks: Gerard Byrne, ATCA Chair• The Glen Dancers• Official Opening and Launch of the 34th ATCA Conference
9:30 – 11:00 am The Grand Central	Keynote Session: Inclusion Session Chair: Gerard Byrne, ATCA Chair <ul style="list-style-type: none">• Culture at the Core: The inclusion of the Aboriginal Drug and Alcohol Residential Rehabilitation Network Model of Care principles in a therapeutic community context Danielle Manton, Senior Lecturer, Indigenous Teaching and Learning, UTS; Aboriginal Drug Residential Rehabilitation Network (ADARRN)• Weaving Te Tiriti o Waitangi into Healthcare: Odyssey's Bold Approach Peter Sciascia, Pou Matua, Odyssey Auckland Fiona Trevelyan, CEO, Tumuaki Rangatira, Odyssey Auckland• Everybody matters: Inclusion of people with a CALD background in AOD therapeutic care Teguh Syahbahar, Manager Multicultural Programs, Odyssey NSW Winifred Asare-Doku, NDARC, UNSW Chris Keyes, Deputy CEO, NADA Stella Settumba Stolk, NDARC, UNSW• The Journey to Rainbow Tick Tim Flora, Manager of Therapeutic Community, Odyssey House Victoria Ti Hunt, Senior Trainer, Odyssey House Victoria
11:00 – 11:25 am	Morning tea
11:25am – 1:15 pm The Grand Central	Keynote Session: Innovation Session Chair: Jenny Boyle, ATCA Board <ul style="list-style-type: none">• Capturing Recovery Journeys in Therapeutic Communities through the Power of Recovery Capital Zeddy Chaudhry, Project Manager – Recovery Capital, Organisational Development and Support, Odyssey Auckland• WHOS Day Programs – Non-residential therapeutic communities Gerard Byrne, Operations Manager, WHOS Treatment Services• Innovative ways of working with young people: Utilising a modified therapeutic community approach to treatment Hannah Giles, Senior Adolescent and Family Counsellor, PALM, Ted Noffs Foundation• It's not just about teeth Emma Jarvis, CEO, Palmerston Association Prof Lisa Wood, University of Notre Dame• Wasted Wisdom Charmaine Diver, Registered Nurse Lynne Glynn, Registered Social Worker; Odyssey Christchurch
1:15 – 2:00 pm	Lunch
2:00pm – 3:15 pm	Breakout sessions
3:15 – 3:35 pm	Afternoon tea
3:40 – 4:55 pm	Breakout sessions
5:00 – 6:00 pm Central	ATCA AGM
5:00 – 7:00 pm The Terrace	Networking event

ATCA Conference Program

BREAKOUT SESSIONS

2:00 – 3:15 pm Wednesday 1 November

Stream 1: Cultural Partnerships

Chair: Danielle Manton, ADARRN

Times and venue	Event information and itinerary
2:00 – 3:15 pm Town Hall	<p>Yarning Circle</p> <p>Yarning is an informal conversation that is culturally friendly and recognised by Aboriginal people as meaning to talk about something, someone or provide and receive information.</p> <p>In our conference context, it is a place where all people can have a casual or deep conversation about something or anything... but the truth is always spoken in a yarning circle. Yarning circles are designed so that everyone has an opportunity to contribute in a safe and respectful setting.</p> <p>Our yarning circle may have a few speakers who will lead discussion, however all attendees are encouraged to participate in the conversation if they feel comfortable.</p>

Stream 2: Treatment Practice Session – Innovation

Chair: Terri Roumanous, Odyssey NSW

Times and venue	Event information and itinerary
2:00 – 2:25 pm Central	<p>Saranna TC Program</p> <p>Ciara Sheppard, Clinical Coordinator, Saranna Women's and Children's Program, Cyrenian House</p>
2:25 – 2:50 pm Central	<p>Mentoring in Recovery</p> <p>Tim Flora, Manager, Therapeutic Community, Odyssey House Victoria Helen Roberts, Early Career Development & Student Placement Coordinator, Odyssey House Victoria</p>
2:50 – 3:15pm Central	<p>Low-Medical Withdrawal & TC</p> <p>Deborah McManus, Manager, Serenity Lodge Therese Mahoney, Manager, Nannup Therapeutic Community, Cyrenian House</p>

Stream 3: Treatment Practice Session – Innovation/Impact

Chair: Kieran Palmer, Noffs

Times and venue	Event information and itinerary
2:00 – 2:25 pm Museum Room	<p>Financial Security and Freedom</p> <p>Sharon Rowe, Business Manager, Residential Services, Odyssey House Victoria:</p>
2:25 – 2:50 pm Museum Room	<p>Munda Mia TC – the first 18 months</p> <p>Claire Coni, Manager, Munda Mia Therapeutic Community</p>
2:50 – 3:15 pm Museum Room	<p>Realistic Achievements</p> <p>Douglas Shaw, Manager GTC, Windana</p>

ATCA Conference Program

BREAKOUT SESSIONS

3:40 – 4:55 pm Wednesday 1 November

Stream 1: WORKSHOP

Chair: Carol Daws, ATCA Board

Times and venue

Event information and itinerary

3:40 – 4:55 pm

Town Hall

Lived and Living Experience Workforce: exploring opportunities in Therapeutic Communities

Clare Davies

Daria Healy-Aarons

Therapeutic Communities are, and have always been, places of healing and recovery through mutuality and community. Against a backdrop of emerging interest in and commitment to including the voices and perspectives of the Lived & Living Experience communities, the TC model is more relevant, and more important than ever.

We invite you to join us for a stimulating workshop and discussion to explore how TCs can model, share and consolidate decades of practical expertise in supporting and nurturing the leadership of people with lived experience.

Stream 2: Treatment Practice Session – Inclusion

Chair: Aaron More, The Glen

Times and venue

Event information and itinerary

3:40 – 4:05 pm

Central

Djinang Kadadjiny Karni Wangkiny

Rohan Collard, Senior Executive, Palmerston Association

Waylon Hayden, Aboriginal Liaison, Palmerston Farm

4:05 – 4:30 pm

Central

Our Journey, Our Story – Learnings from participants cultural journeys and experiences through the Solid Steps AOD Program at Casuarina Prison (Perth/Boorloo)

Emma Jarvis, CEO, Palmerston Association; Daniel Morrison, CEO Wungening Aboriginal Corporation

Anna Calverley, General Manager, Justice Services, Palmerston Association

4:30 – 4:55 pm

Central

Virtual rehab: Glen metaverse

Alex Lee, CEO, The Glen Group of Residential Rehabilitation Services

Stream 3: Treatment Practice Session – Impact

Chair: Jamie Young, WHOS Hunter

Times and venue

Event information and itinerary

3:40 – 4:05 pm

Museum Room

Developing a CALD audit tool

Chris Keyes, Deputy CEO, NADA

Mohamad Fenj, Manager, The Rehabilitation Project

4:05 – 4:30 pm

Museum Room

Introducing MRT to a TC

Deborah McManus, Manager, Serenity Lodge,

Therese Mahoney, Manager, Nannup Therapeutic Community, Cyrenian House

4:30 – 4:55 pm

Museum Room

Working with Residents experiencing complex mental health concerns in a TC

Sarah Etter, Consultant, Odyssey House NSW

Ruby Maranoll, Team Leader, Odyssey House NSW

Keynote Session Speakers

Impact.

Thursday 2 November



NSW Drug Court – A Model of Positive Impact

Her Honour Judge Jane Mottley, Senior Judge, Drug Court of NSW



Judge Jane Mottley commenced her career in the Petty Sessions Branch of Attorney General's Department in 1979. In 1988 she completed her Bachelor of Laws at UTS. After receiving her degree, she was employed as a Legal Officer with the NSW State Crime Commission and Legal Aid NSW.

In 2000 she was appointed as a Magistrate of the Local Court. During 2001-2004 she was also a Children's Magistrate. In 2009 she was appointed as Deputy Chief Magistrate, an appointment she held until her resignation in 2021.

While Deputy Chief Magistrate her Honour was also appointed as Part-time Member of the Law Reform Commission working on Bail, Sentencing & Early Appropriate Guilty Pleas. In 2017 she was appointed as a Judge of the Drug Court of NSW & in 2021 as Senior Judge.

Supporting parents in residential treatment: An overview of the Parents Under Pressure program

Sharon Dawe, Centre for Mental Health, Griffith University

Improving family functioning and child outcome in families with a multitude of problems – such as parental substance misuse, mental health problems, and parental childhood maltreatment – is essential if we are going to change an intergenerational pattern of adversity.

The PuP program was developed specifically for families facing multiple adversities. The two central tenets of the PuP program are a focus on parental emotional regulation and the enhancement of safe and nurturing caregiving relationships within the family. PuP has been delivered by over 400 nongovernment

and government agencies in Australia and the UK. There is a growing evidence base for effectiveness of the PuP program across a range of populations. Importantly, recent evaluations have focused on the underlying mechanisms of change with parental emotional regulation being key to reducing child abuse potential and improving mindful parenting.

Residential treatment provides a unique opportunity to provide an integrative approach that addresses these problems. We conclude with some suggestions as to how PuP may be integrated.



Sharon Dawe is a Professor in Clinical Psychology at Griffith University, Australia, an Adjunct Professor at Australian Centre for Child Protection, UniSA and a Visiting Fellow at Oxford University, UK. She has been working as a researcher and clinician in the field of substance misuse and mental health for over 30 years at the Institute of Psychiatry, University of London (UK), National Drug and Alcohol Research Centre, UNSW and currently Griffith University. She is the co-developer of the Parents Under Pressure program (www.pupprogram.net.au), designed for complex families that includes parental substance misuse. She leads a large consortium developing a diagnostic process around FASD and support for young children with prenatal alcohol exposure. Sharon is passionate about improving the outcomes for children living in adverse circumstances by supporting parents to manage difficult life situations.

• *Influencing policy and funding outcomes: The role of AADC in representing the residential AOD sector.*

Melanie Walker, Chief Executive Officer Australian Alcohol and other Drugs Council

What is the Australian Alcohol and other Drugs Council (AADC)? Where did it come from? What does it stand for? What are its strategic priorities? How does it advocate in line with those strategic priorities? And what does AADC's advocacy actually achieve for the benefit of the AOD sector? AADC's Chief Executive Officer

will talk about some of the hot topics and advocacy priorities in 2023, along with some of the achievements and ongoing work of AADC that will make a difference for the residential AOD sector moving forward. Ask not what you can do for your national peak, but what your national peak can do for you!



Melanie Walker is the CEO of the Australian Alcohol and other Drugs Council. Immediately prior to taking up this role, Melanie was Chief of Staff to the ACT's Deputy Chief Minister. She has also been the CEO of the Australian Injecting and Illicit Drug Users League (AIVL), a consultant in the ACT AOD sector, Deputy CEO of the Public Health Association of Australia and a senior public servant in the Australian Government Departments of Health and Human Services and ACT Health. Prior to that, Melanie was coordinator of an AOD service in the ACT, an adviser to a former ACT Chief Minister and Senator for QLD, as well as having worked with the former Alcohol and other Drugs Council of Australia and as a broadcast journalist.



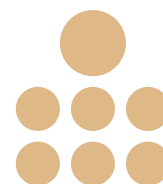
PALM (PROGRAM FOR ADOLESCENT LIFE MANAGEMENT)
OPERATING ADOLESCENT THERAPEUTIC COMMUNITIES FOR OVER 25 YEARS

WWW.NOFFS.ORG.AU

Seminar

TCs - Reducing Recidivism.

11:10am - 12:30 pm Thursday 2 November



The Importance of Connection: Therapeutic community rehabilitation in the context of the Walama List of the District Court of NSW

Judge Warwick Hunt, Walama List, District Court NSW

His Honour will be drawing on decades of experience as either a criminal defence lawyer, Magistrate and Judge to analyse what approaches to therapeutic and residential rehabilitation seem to take. A particular focus will be on the importance of culture, connection

and cultural safety in the healing of First Nations participants. His Honour proposes briefly to also explore the strengths and challenges of faith-based rehabilitation providers, if appropriate.



Judge Warwick Hunt was admitted as a solicitor of the Supreme Court of New South Wales in December 1981.

As a solicitor, Judge Warwick Hunt worked variously in private practice and at the Aboriginal Legal Service and Legal Aid NSW. He specialised, first, in civil litigation and then was among the earliest cohort to be accredited by the NSW Law Society as a specialist in criminal law. After some years sitting on various Tribunals from 1995, his Honour was appointed in 2000 as Local Court and Children's Court Magistrate, sitting principally in the Illawarra and Campbelltown areas.

His Honour was called to the Bar in 2007, practising at Forbes Chambers. He specialised in jury and appellate work, inquests, child protection and medical disciplinary law. His Honour served on Bar Council and numerous other Bar Association committees. In 2016, his Honour was appointed to the District Court of NSW sitting almost exclusively in crime in both metropolitan and regional Courts. He sits on the District Court's Education Committee and is often asked to speak on Advocacy and Ethics.

Since July 2022, his Honour is the principal Judge sitting in the Court's Walama List, an innovative program designed to address over-representation of First Nations in custody and before the criminal justice system. Before accepting that role, his Honour served for some years as a director of Weave Youth and Community Services.

Alternatives to Custody in the NT

Eloise Page, CEO, Drug and Alcohol Services Australia (DASA)

Brian McDonald, Aboriginal Outreach Worker, DASA

Cathy McCabe, Coordinator, Alternatives to Custody (ATC)

The Alternative to Custody (ATC) facility is a ten-bed life skills camp in Mparntwe (Alice Springs). It is a pilot project coming out of the Northern Territory Aboriginal Justice Agreement. Run by Drug and Alcohol Services Australia (DASA), the six-month residential program is an innovative, community-based approach to reducing Aboriginal incarceration and recidivism in the Northern Territory. The objective of the program is to deliver targeted, tailored rehabilitation programs to Aboriginal women at risk of offending or reoffending, referred by courts, police, lawyers, self, or others.

A harm minimisation and healing approach is taken to address concerns with alcohol and other drug use, as part of a broader program focussed on life skills as well as social, emotional, and physical wellbeing. The women

can bring their young children with them during the six-month residential program. DASA is the lead agency, partnering with several other key service providers in the region to provide treatment and psycho-educational programs.

As opposed to prison, residents and staff are on first name terms and much of the program is client driven, similar to the Therapeutic Community model of care. The program aims to provide women with the opportunity to address behaviours that impact offending risk, in a culturally competent setting. The first three months of the program is focussed on self, followed by a focus on family and community connections, housing, employment, and relapse prevention strategies. Evaluation tells us this is working.



Eloise Page is the CEO of Drug & Alcohol Services Australia (DASA), based in Mparntwe (Alice Springs). Eloise has a decade of experience in the AOD sector, with another decade in the correctional services setting. Eloise has qualifications in AOD, Community Services, Correctional Services, HR & Dementia Care.



Brian McDonald is an Eastern Arrente man, born and raised in Mparntwe. He is the Aboriginal Outreach Worker at DASA, where he has worked for 15 years and has boundless cultural and AOD sector knowledge to contribute to DASA and the ATC.



Cathy McCabe is the new Coordinator of the ATC. She has a Bachelor of Social Science & an Assoc Dip Arts. She is a Registered Clinical Counsellor & Sandplay Therapist.

Wandoo - A women's prison TC

Kim Kenny, Service Manager, Wandoo Rehabilitation Prison Therapeutic Community, Cyrenian House

Wandoo Rehabilitation Prison Therapeutic Community celebrated its fifth birthday this year. It is a women's prison and the whole prison is a Therapeutic Community (TC) dedicated to the treatment of substance misuse. This is a partnership between Cyrenian House and the Department of Justice in Western Australia.

It is Australia's first and only whole facility prison that is a TC. It is the most drug tested prison in WA, there has never been resident drug use detected at Wandoo. 96.2% of the women who have completed the program have not returned to prison with new charges. The Australian average for recidivism rate with new charges two years after release is 45.2% whereas at Wandoo it is 4.8%. Wandoo works – but not without its challenges.

This presentation will focus on the learnings, achievements, and outcomes from the first five years of the TC in a prison. You will hear from residents that attended our recent five-year reunion for graduates of Wandoo and get a glimpse of their lives after Wandoo. You will also hear what Stage four residents at Wandoo are doing to impact the wider community through facilitating SMART Recovery and video links to other prisons to promote intake.

Wandoo would not be possible without partnership between Cyrenian House and the Department of Justice. You will hear how we navigate TC rules and therapeutic decisions within the operating practices of a prison – which often do not align. We will share how we have sustained this relationship over five years.



Kim Kenny has a Master Social Work (Professional Qualifying) and has over 19 years experience in various fields of practice. She has worked in the mental health sector, the domestic violence sector, justice sector and alcohol and other drug sector. She is currently the service manager for Cyrenian House at the Wandoo Rehabilitation Prison Therapeutic Community. Having witnessed the revolving door through the prison system fuelled by entrenched addiction, Kim believes that Therapeutic Communities are the most effective way to reduce recidivism.



50 years of helping people help themselves

WHOS pioneering and innovating the TC approach

Operating across multiple states. Implementing TC based needle syringe program. Establishing a women's only TC. Providing a methadone to abstinence program, providing an opioid substitution treatment stabilisation program, being licenced to provide opioid substitution treatment dosing. Participating in TC based research conducted by World Health Organisation. Receiving award recognition from the Agency for Clinical Innovation for Cognitive Impairment Research.

WHOS Therapeutic Communities

Gunyah for men • New Beginnings for women • OSTAR • RTOD • Hunter
• Goulburn • Sunshine Coast

Day Programs

Penrith • Lilyfield • Goulburn • Windsor • Newcastle • Nambour

☸ **Karralika: The Circle of Growth**

Tristan O'Connor, Justice Service Manager, Solaris, Karralika Programs

Since 2009, Karralika Programs, in partnership with ACT Correctional Services, has provided the Solaris Therapeutic Community for male detainees in the Alexander Maconochie Centre (AMC).

For many years, there have been reports and recommendations that an AOD treatment program be available for female detainees in the AMC. In 2022-23 Karralika Programs had the opportunity to develop and deliver, in partnership with ACT Corrections, an innovative, pilot AOD program for women in the AMC. A new model was developed as it was recognised that simply replicating the Solaris TC model for the women was not possible due to lower participant numbers and the often-shorter custodial period compared to men and, current publicly available, evidence-based models were not suitable for their own for our particular needs.

The women's AOD program, which the participants unofficially named The Circle of Growth, was designed to be trauma-informed and gender-responsive, and specifically designed to meet the needs of the female detainees of the AMC.

The program model was drawn from three validated and evidence-based AOD therapeutic programs, including the Helping Women Recover program (S. Covington 2019), the Therapeutic Community model, and components of the Matrix Day program for relapse prevention. The Circle of Growth aims to address trauma and family in the context of AOD use for women within a forensic setting and promote a pro-social approach to recovery. Currently in the evaluation stage, our presentation will share our learnings, participant feedback and experience designing, delivering, and reviewing The Circle of Growth program.



Tristan O'Connor is a professional with a rich experience of over 20 years in the Community Services sector, having spent the last 7 years with Karralika Programs in the AOD space. Having held multiple roles in the organisation, Tristan's most recent role as Justice Services Manager with Karralika Programs for the last 3-and-a-half years, has only fuelled her passion for the space. Currently pursuing a degree in Social Work, Tristan is deeply committed to helping people find their voice and supporting her team in achieving their goals.

☸ **Working with gender diversity**

Vijetha Jamisetty, Clinical Psychologist, Department of Corrections, NZ

The Puna Tatari Special Treatment Unit (STU), (based in the Springhill Corrections Facility, Department of Corrections, New Zealand) provides psychological interventions for men who have engaged in violent and sexual offending behaviours, as they embark on their rehabilitation journey.

Our Therapeutic Community (TC) at Puna Tatari STU prides itself for its culturally responsive and inclusive approach to clinical practice that has always made our men feel a sense of belonging, acceptance and trust within the unit. This year, our TC has had the privilege of welcoming our first transgender woman who chose to engage in one of the treatment programs as part of

her rehabilitation journey. This opportunity has inspired us to adapt a number of measures to bring more robustness to our TC environment where a diversity of population from all walks of life continued to feel a sense of belonging, trust and acceptance.

In this verbal presentation I will share our experience of implementing a responsive clinical approach to meet our client's sexual identity and cultural needs while providing assessment and intervention services to facilitate a meaningful rehabilitation pathway for her. I will also briefly comment on the measures we have put in place to meet our client's needs during her stay in the unit to ensure her overall wellbeing.



Vijetha Jamisetty is a registered Clinical Psychologist who works at the Department of Corrections, New Zealand. Her role at the department primarily involves providing assessment and intervention for individuals who are considered to be a high risk of committing violent crimes including sexual offending towards adults.

Vijetha has a particular interest in providing interventions that aim to reduce sexual recidivism. Apart from her role with the Department of Corrections, Vijetha also provides clinical supervision and guidance to clinicians who work within a community organisation that provides therapeutic interventions to individuals who engage in sexual abuse behaviours towards children.

ABORIGINAL DRUG AND ALCOHOL RESIDENTIAL REHABILITATION NETWORK MODEL OF CARE (ADARRN MoC)

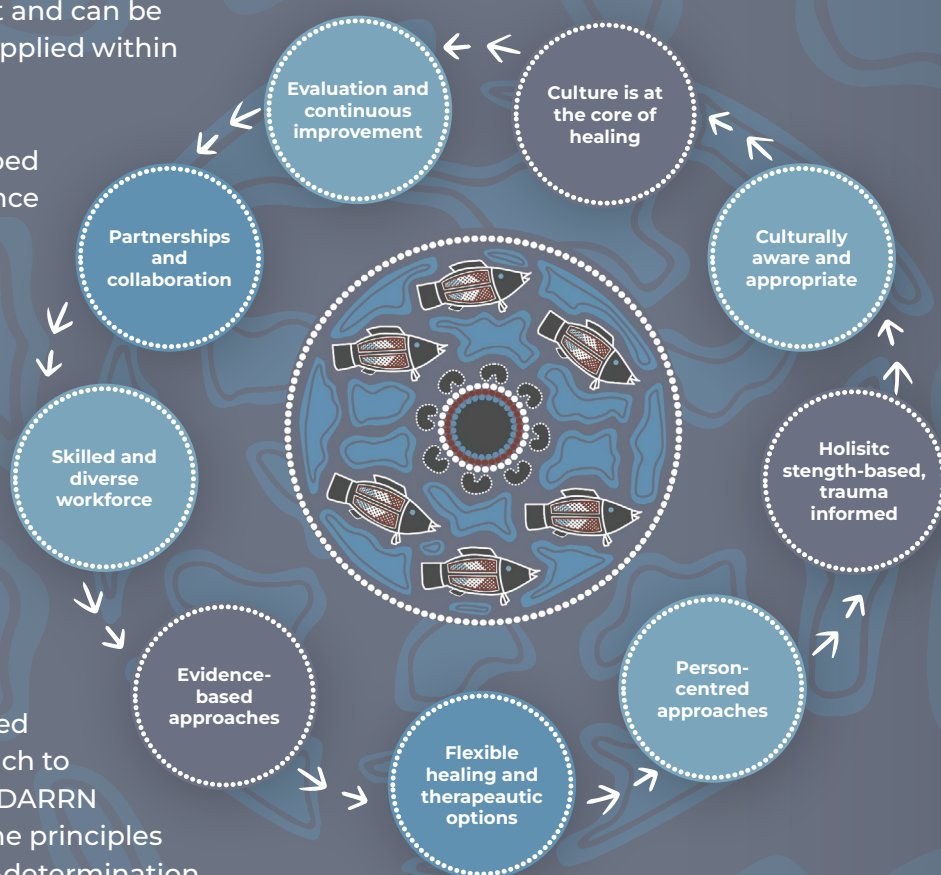
The Aboriginal Drug and Alcohol Residential Rehabilitation Network (ADARRN) Model of Care (MoC) explicitly demonstrates First Nations peoples' leadership in AOD healing through community lead solutions and approaches that enhance service delivery and outcomes¹.

The ADARRN MoC is a comprehensive suite of approaches firmly based in holistic healing practices^{2,3} guided by the knowledge culture is a determinant of wellness⁴, strong culture fosters strong people. The MoC is comprised of nine integrated elements each support the shared objectives of all rehabilitation services in Australia, as reflected throughout the National Drug Strategy 2017 – 2026⁵.

The MoC is designed to adapt to clients' needs and be reflexive to the local context and can be beneficial for all clients when applied within a mainstream context.

The ADARRN MoC was developed collaboratively, with the guidance and collective wisdom of Aboriginal and Torres Strait Islander leaders, formalising the expertise of Aboriginal community-controlled service providers, clients, and families, relevant evidence-based practice, literature, and current policies.

The ADARRN MoC demonstrates the centrality of culturally informed, culturally appropriate, and evidence-based practice as a successful approach to healing. Fundamental to the ADARRN MoC and service delivery are the principles of community-control and self-determination. "Efforts to close the gap in Indigenous disadvantage must recognise and build on the strength of Indigenous cultures and Identities"⁶ pp.1



¹ Gray, D., Stearne, A., Wilson, M and Doyle, M. (2010). *Indigenous specific alcohol and other drug interventions: continuities, changes and the areas of greatest need*. Australian Council on Drugs, Canberra. http://www.nidac.org.au/images/PDFs/rp20_indigenous.pdf

² Party, N. W. (1989). National Aboriginal Health Strategy Working Party. *A national Aboriginal Health Strategy*.

³ Intergovernmental Committee on Drugs. (2014). *National Aboriginal and Torres Strait Islander Peoples Drug Strategy 2014–2019*. Canberra: Australian Government

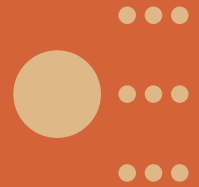
⁴ Verbunt, E., Luke, J., Paradies, Y., Bamblett, M., Salamone, C., Jones, A., & Kelaher, M. (2021). Cultural determinants of health for Aboriginal and Torres Strait Islander people—a narrative overview of reviews. *International Journal for Equity in Health*, 20(1), 1–9.

⁵ Department of Health. (2017). *National drug strategy 2017–2026*. Canberra: Commonwealth of Australia. Retrieved from <https://www.health.gov.au/sites/default/files/national-drug-strategy-2017-2026.pdf>

⁶ NSW Government., & Aboriginal Health and Medical Research Council. (2015). *Aboriginal Health Partnership Agreement*. Sydney: NSW Ministry of Health

James A. Pitts Oration

12:30pm - 1:00 pm Thursday 2 November



The James A. Pitts Oration has been established as an event on the ATCA Conference calendar 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 more than 40 years, the Australasian Therapeutic Communities Association (ATCA) takes great pleasure in partnering with Odyssey House NSW in this important event.



James retired as CEO of Odyssey House in 2016 after more than 32 years in that role. James was selected to a number of prominent boards over his career 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. In 2016, James was presented with the O. Hobart Mowrer Award, in Recognition of Excellence in the global field of Therapeutic Community Treatment, by the World Federation of Therapeutic Communities at a ceremony in Mallorca. James has also previously served as a Board Member of the ATCA Board over many years and was a founding member of ATCA.



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

The ATCA Board, together with the Board of Odyssey House NSW, are delighted to announce Garth Popple will this year present the James A. Pitts Oration.



Garth S.C. Popple

Garth is the Executive Director of We Help Ourselves (WHOS) and has been working in the alcohol and other drug (AOD) nonprofit sector since 1980, and in management roles since 1986. His focus has been primarily on the residential Therapeutic Community (TC) sector and its model of care for most of his career to date, including working with TCs throughout Asia. In 1986 he became involved in Harm Reduction initiatives as a result of the HIV/AIDS epidemic and became more focussed with staying in touch with individuals with Lived Experience both past and present. As Executive Director of We Help Ourselves (WHOS), Garth is responsible for a community-based organisation which operates seven residential Therapeutic Communities within NSW and Qld and associated Day Programs and admits approximately 1000 clients annually to its residential programs.

Current Appointments

- Deputy President, World Federation of Therapeutic Communities (WFTC)
- Advisor – International Federation of NGOs (IFNGO)
- Advisor – Federation of Therapeutic Communities – Asia

Past Appointments

- Co-Chair and Executive Member of the Australian National Council on Drugs (ANCD) reporting to Prime Ministers and Federal Health Minister
- Honours
- Made an Honorary Fellow of the University of Western Sydney and
- Received the Prime Minister's Award at the 2010 National Drug and Alcohol Awards.

Some Innovations within WHOS Under Garth's Watch

- WHOS expansion to operating across multiple states (1976)
- Introduced TC based needle syringe program (harm reduction) (1988)
- Established Women's TC (1992)
- 1st TC to run a separate methadone to abstinence program (2000)
- Reduce TC episode of care from 18 months to 3-4 months (2000)
- Research conducted by World Health Organisation on WHOS TC for use in Asia (2006)
- 1st TC to operate a residential TC opioid stabilisation program (2008)
- 1st NGO to be licensed to practice opioid dosing on site (2010)
- Winning Award by ACI (Agency for Clinical Innovation) for Cognitive Impairment Research (2016)
- Establishment and expansion of WHOS Day Programs throughout NSW and Qld.

Past James A. Pitts Orators

- 2014: James A. Pitts, CEO Odyssey House, NSW
- 2015: Dr John Howard, University NSW
- 2016: John Challis, Vice President, California, Center Point Inc
- 2017: Professor Jan Copeland, University NSW
- 2019: Associate Professor Gery Karantzas, Deakin University

BREAKOUT SESSIONS

1:45pm – 2:35 pm Thursday 2 November



Stream 1:

Treatment Practice Session: Sustainability

Venue: Town Hall

Chair: Trevor Hallewell, WHOS

⋮ Sustainability in Peer Support

Dave Burnside, Lived Experience Lead, Odyssey Auckland, NZ

The Consumer, Peer Support and Lived Experience (CPSLE) workforce has grown exponentially in recent years but there remain serious challenges to full integration of these roles in treatment and community settings.

In response to these challenges, Odyssey Auckland

has established Taupae Wheako, a Centre for Lived Experience Peer Support and Social Recovery. Taupae Wheako is a peer and lived experience led organisation that aims to support and sustain the development of the peer and lived experience workforce and enhance the way we support people to build recovery capital and support social justice and recovery.

⋮ Peer support workers in substance misuse treatment services: The challenges to recovery

Courtney du Plessis, PhD Candidate, Southern Cross University

Background: While informal peer support has long featured in substance misuse treatment, relatively little is known about the emerging peer support work role in this field, particularly the influence of the role on their recovery. With a shift toward a recovery-orientated approach, strong emphasis is placed on lived experience and the benefit of a peer workforce in promoting recovery. Peer support work has been identified as an integral element to treatment with the role an emerging area of interest. However, little is documented about the influence of the peer support work role on the recovery of peer support workers in substance misuse treatment settings.

Methodology: This qualitative study was framed with a constructionist epistemology and a hermeneutic phenomenology methodology. Through 2021 and 2022, twenty semi-structured interviews were

conducted and data analysed thematically using the hermeneutic circle. **Results:** The peer support work role poses potential challenges to recovery through job specific challenges, cross over between personal and professional life and recovery, triggers and burnout. When framed with a secure recovery and supportive environment, these challenges are positive experiences that provide potential for growth.

Discussion: Understanding the challenges of the role on recovery can inform the safe and ethical conduct of the practice. Providing insight to employers and supervisors of peer support workers, an understanding of the ways in which the role may put recovery at risk and how organisations can support peer support workers by promoting conditions that turn these challenges into growth has the potential to develop a strong peer workforce which ultimately supports service outcomes.



Stream 2:

Treatment Practice Session: Sustainability

Venue: Central

Chair: Bernice Smith, ATCA Board

Group Work – Essential Element

Adrian Hookham, Counsellor, Karralika Therapeutic Community

Therapeutic groups are an essential component of the TC model. TC groups provide a unique and significant instrument for residents to learn about themselves, their behaviours, and their relationships. They help individuals learn about how they impact others and how their behaviour, attitudes and beliefs contribute to their substance misuse, as well as supporting the development of skills, knowledge, and confidence.

It is essential for TC group facilitators to have a sound understanding of effective group work practice to be able to manage and coordinate the core objectives of group sessions whilst ensuring that the group process is also therapeutic.

Karralika Programs has developed a group work training package to support effective group work practice. The training aims to link evidence-based,

group work theory to practical facilitation skills.

A pilot training program was delivered in June 2023 and covered a range of topics including group work theories and approaches, group dynamics, facilitator skills, trouble shooting and pre and post group work practice. A comprehensive manual was created to assist the training with the intention that this be used as a resource for facilitators in day to day practice.

This presentation will discuss the rationale for the development of the training package, overview of session and training manual content, delivery methods and will also report on feedback from the pilot. The presentation will include 'next steps' in terms of Karralika's continuing commitment to the development and implementation of quality, innovative and sustainable programs and services for our communities.

TCs and Trauma Informed Care

Jim Adsett, Senior Psychologist, Goldbridge

How Goldbridge has changed with the times while remaining consistent with core TC values.

Several important paradigm shifts have taken place in the AOD sector that have led to growth and development within Therapeutic Communities; Namely "Dual Diagnosis" and "Trauma Informed Care."

Since inception, Therapeutic Communities have treated people with co-occurring mental health disorders. It just always wasn't the main focus.

The dual diagnosis framework was adopted by Queensland Health in 2011. Broadly speaking it created a "no wrong door policy" and the idea that co-occurring disorders are best treated at the same time. In the same year Goldbridge was funded to implement their own "Dual Diagnosis, No Wrong Door" Framework. The "Dual

Diagnosis Capability in Addiction Treatment" policy (DDCAT) involved 4 years of training to improve our service by building capacity for the whole organisation in Dual Diagnosis awareness and treatment.

Harris and Falot first used the term trauma-informed care (TIC) in 2001. It took a while until Goldbridge formally adopted the term by putting it in the strategic plan in 2019. In this talk I will speak about how Goldbridge has implemented trauma policy in line with (TIC) along with difficulties and successes we have experienced.

The sustainability of TCs is in their ability to change with the times. I think that TCs provide a unique place to treat trauma, especially complex trauma. This session gives an update on how GB is planning to measure the effect of the TC treatment on trauma symptoms.

BREAKOUT SESSIONS

1:45pm - 2:35 pm Thursday 2 November



Stream 3:

Treatment Practice Session: Sustainability

Venue: Museum Room

Chair: Nick Gouliaditis, WHOS

The Windana Health and Healing Program, a holistic complementary treatment approach, unique to Windana

Erika Wiseman, Coordinator of Health and Healing, Windana

Windana Health and Healing (WHH) is a complementary therapy program delivered across all Windana's sites, with a Community Clinic located in Bayside. WHH services a gap in Alcohol and other Drug (AOD) treatment by addressing holistic health in residential withdrawal and rehabilitation and community settings. The WHH Community Clinic encourages continuity of care following residential or outpatient AOD treatment.

WHH includes Naturopathy, Yoga, Acupuncture, "Food as Medicine", Osteopathy across Windana, aiming to improve health literacy, promoting lifelong preventative

health practices.

A recent evaluation of WHH has demonstrated benefits for residents and community members and recognises WHH as a holistic program unique to the Victorian AOD sector.

The presentation will show the benefits identified and discuss the integration of Complementary Therapies, Medical Model, Lived Experience and Professional disciplines within a holistic model of care for our client groups.

Have we lost "The War on Drugs"

Tanya Cavanagh, CEO Teen Challenge, Tasmania

Any substance, illegal/legal impacts a developing brain and thus future potential. Like adults, young people have a right to choose, however our right to choose does not extract us from the consequences of those choices. How do we make sound choices when we don't fully comprehend potential physical, mental and relational impacts of those choices?

Education's a start, an area NotEvenOnce Projects (NEO) have been working on since 2015 within Australia, to over 117,200 youth.

NEO delivers in-person and online seminars/workshops, in schools and communities, exploring this in a non-judgemental way, leaning on our work with those with life controlling addictions, addressing causation entwined in current scientific/medical evidence. Current deliveries address Vaping, deceptive, delivery devices of Nicotine, a highly addictive substance, targeting youth.

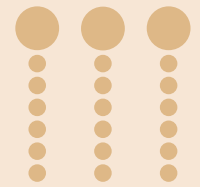
14-17yo Vaping and Cigarette uptake is increasing significantly. NEO is having an impact, pushing back bringing truth to counter online myths.

Program outcomes were evaluated by Western Sydney University, with one research question being: Does the program impact on knowledge and intentions regarding drug and alcohol use?

At pre seminar half (50.6%) of students indicated that they were not at all likely or were unlikely to consume alcohol, which at post seminar increased to 61.5%. Similarly, 77.2% of students indicated at pre seminar that they were not at all likely or were unlikely to use drugs, which at post seminar increased to 93.0%.

We're not fighting a War on Drugs, we're fighting for the Brains and future potential of our young people. We all have a role to play.

Keynote Session Speakers



Sustainability.

3:00pm – 4:00 pm Thursday 2 November

⋮ *Improving person centred care in alcohol and other drug treatment*

Professor Peter Kelly, School of Psychology, University of Wollongong

Person-centred care is an approach to healthcare that respects and responds to the preferences, needs and values of people accessing health services. Research examining the impact of person-centred care has concluded that there are demonstrable relationships between person experience, quality of care, and healthcare outcomes.

The aim of this presentation is to provide a practical overview of the research examining person-centred care and how it applies within Therapeutic Communities. It will include a description of a person reported experience measure that was developed for residential alcohol and other drug treatment services in Australia.



Peter Kelly is a Professor of Clinical Psychology at the University of Wollongong, where he is the Associate Dean of Research for the Faculty of Arts, Social Sciences, and Humanities. His research is focused on the development, implementation, and evaluation of evidence-based approaches within substance use treatment settings. He regularly works with government and non-government organisations across Australia. He is the Co-Director of an NHMRC Centre of Research Excellence: Meaningful Outcomes in Substance Use Treatment. Across his career he has published over 140 articles and book chapters, with his work being funded by the NHMRC, ARC, Heart Foundation, Cancer Institute NSW and NSW Health.

⋮ *Sustaining long term impacts for young people following treatment*

Associate Professor Sally Nathan, School of Population Health, University of NSW

This presentation will share some of the key findings of The Youth Pathways project – an Australian Research Council (LP140100429) and Ted Noffs funded project.

The team has collected and analysed qualitative, survey and linked (health, mortality and justice) data to understand the life pathways of young people 13–18 years referred to a residential Therapeutic Community drug and alcohol program. Many are referred from the Juvenile Justice system and over a third identify as Aboriginal. The findings show the positive impact of the program on short and longer-term outcomes for those who spend 30 days or more in the program compared

with those who leave early or do not attend.

Key changes include a reduction in drug and alcohol use, improvements in mental health, and reduced hospitalisations and criminal convictions post discharge. The qualitative data provides insights about what is working well in the program, areas for attention in service re-design and what are the needs of young people when they return to community. The findings are important to inform broader service provision and public debate to better address the needs of this group of young people with complex needs.



Associate Professor Sally Nathan is a public health social scientist at UNSW Sydney who actively partners with non-government organisations, including the Aboriginal Community Controlled (ACC) sector to improve health equity. The focus of much of her research is young people with complex needs, disadvantaged groups and communities. Sally's research involves the use of multiple methods to examine complex psychological, behavioural, community and socio-political change, including arts-based methodologies and methods. She has published research using linked data, surveys and qualitative methods including from studies investigating the outcomes from residential AOD treatment programs for young people.

ATCA Conference Program

Thursday 2 November

Times and venue	Event information and itinerary
8:30 – 9:00 am	Registration Tea and coffee
9:00 – 9:15 am The Grand Central	Day 2 Opening & Notices Session Chair: Carol Daws, ATCA Board <ul style="list-style-type: none">Introduction of elected ATCA Board
9:15 – 10:45 am The Grand Central	Keynote Session: Impact Session Chair: David Kelly, ATCA Board <ul style="list-style-type: none">NSW Drug Court – A Model of Positive Impact Her Honour Judge Jane Mottley, Senior Judge, Drug Court of NSWSupporting parents in residential treatment: An overview of the Parents Under Pressure program Professor Sharon Dawe, Centre for Mental Health, Griffith UniversityInfluencing policy and funding outcomes: The role of AADC in representing the residential AOD sector Melanie Walker, Chief Executive Officer Australian Alcohol and other Drugs Council
10:45 – 11:05 am	Morning tea
11:10am – 12:30 pm The Grand Central	Seminar: TCs – Reducing Recidivism Session Chair: Eloise Page, ATCA Board <ul style="list-style-type: none">The importance of Connection: Therapeutic community rehabilitation in the context of the Walama List of the District Court of NSWJudge Warwick Hunt, Walama List, District Court NSWAlternatives to Custody in the NT Eloise Page, CEO, Drug and Alcohol Services Australia (DASA) Brian McDonald, Aboriginal Outreach Worker, DASA Cathy McCabe, Coordinator, Alternatives to Custody (ATC)Wandoo – A women's prison TC Kim Kenny, Service Manager, Wandoo Rehabilitation Prison Therapeutic Community, Cyrenian HouseKarralika: The Circle of Growth Tristan O'Connor, Justice Service Manager, Solaris, Karralika ProgramsWorking with gender diversity Vijetha Jamisetty, Clinical Psychologist, Department of Corrections, NZ
12:30 – 1:00 pm	The James A. Pitts Oration Garth Popple, Executive Director, WHOS and Deputy President, WFTC Session Chair: Carmel Tebbutt, CEO, Odyssey House NSW
1:00 – 1:45 pm	Lunch
1:45pm – 2:35 pm	Breakout sessions
2:35 – 2:55 pm	Afternoon tea
3:00 – 4:00 pm The Grand Central	Keynote Session: Sustainability Session Chair: Mark Ferry, ATCA Board <ul style="list-style-type: none">Improving person centred care in alcohol and other drug treatment Professor Peter Kelly, School of Psychology, University of WollongongSustaining long term impacts for young people following treatment Associate Professor Sally Nathan, School of Population Health, University of NSW
4:00 – 4:30 pm The Grand Central	ATCA Awards Session Chair: ATCA Chair
4:30 – 5:00 pm	Closing Ceremony and Performance by Noffs Street University

ATCA Conference Program

BREAKOUT SESSIONS

1:45 - 2:35 pm Thursday 2 November

Stream 1: Treatment Practice Session: Sustainability

Chair: Trevor Hallewell, WHOS

Times and venue	Event information and itinerary
1:45 - 2:10 pm Town Hall	<i>Sustainability in Peer Support</i> Dave Burnside, Lived Experience Lead, Odyssey Auckland, NZ
2:10 - 2:35 pm Town Hall	<i>Peer support workers in substance misuse treatment services: The challenges to recovery</i> Courtney du Plessis, PhD Candidate, Southern Cross University

Stream 2: Treatment Practice Session: Sustainability

Chair: Bernice Smith, ATCA Board

Times and venue	Event information and itinerary
1:45 - 2:10 pm Central	<i>Group Work – Essential Element</i> Adrian Hookham, Counsellor, Karralika Therapeutic Community
2:10 - 2:35 pm Central	<i>TCs and Trauma Informed Care</i> Jim Adsett, Senior Psychologist, Goldbridge

Stream 3: Treatment Practice Session: Sustainability

Chair: Bernice Smith, WHOS Lilyfield

Times and venue	Event information and itinerary
1:45 - 2:10 pm Museum Room	<i>The Windana Health and Healing Program, a holistic complementary treatment approach, unique to Windana</i> Erika Wiseman, Coordinator of Health and Healing, Windana
2:10 - 2:35 pm Museum Room	<i>Have we lost "The War on Drugs"</i> Tanya Cavanagh, CEO Teen Challenge, Tasmania

