MISSION Australia

Harm Reduction Strategy for Addictive Behaviours in the NT 2018



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Mission Australia is a national non-denominational Christian organisation that delivers evidence-based, consumer-centred community services. In the 2016-17 financial year we supported over 140,000 Australians through 470 programs and services. We work with people experiencing homelessness and also provide specialist services for mental health, disability and alcohol and drug issues.

In the Northern Territory (NT), Mission Australia supported over 6,000 individuals in 2017-18 and nearly 3,000 of these people accessed alcohol and drug related services. These services include alcohol and drug harm minimisation support services, Stringybark Residential Rehabilitation Treatment Service, Sobering Up Shelters (SUS) in Katherine and Darwin, and SPIN 180 youth homelessness service.

Mission Australia welcomes the opportunity to provide a submission to the NT inquiry into the harm reduction strategy for addictive behaviours. This submission is based on a combination of research and insights from our direct service provision across the NT.

Recommendations

The NT Department of Health should meaningfully consult and collaborate with community organisations, Elders from different communities, other parallel government services when designing, developing and implementing harm reduction strategies. The harm reduction strategy should:

- Adopt a holistic approach and provide wrap-around supports to individuals, their families and the broader community;
- Increase the availability of culturally sensitive detoxification and rehabilitation facilities, particularly in areas or hubs where there are high number of Sobering up Shelter users;
- Invest in youth-specific alcohol and drug treatment services for young people, for whom adult facilities are not accessible or appropriate;
- Allocate additional resources for organisations to continue assertive outreach to engage rural and remote communities and provide information and education about the impacts of alcohol and drug dependence and the availability of culturally appropriate support services;
- Increase the number of Sobering up Shelters and their operating hours in areas where there is a high demand;
- Recognise and cater for comorbidity of substance dependence and mental illness;
- Provide links and clear pathways to a range of complementary supports for people receiving drug and alcohol treatment to re-engage in education, employment, find housing and receive mental health supports and better coordination of these services; and
- Ensuring that there are zero exits into homelessness when people are transitioning from institutionalised settings such as rehabilitation facilities to the community.

The NT Government should provide long-term funding arrangements to ensure successful programs with well-established networks within the communities can continue to achieve positive and sustainable outcomes.

Current Harm Reduction measures in the NT and other jurisdictions

Alcohol and other drug related harm impacts on the individual, their families and the community at large and increases the strain on public service systems such as health, justice and community services. However, with the appropriate supports and services, the negative impacts can be reduced or minimised.

Most harm reduction approaches¹ (such as opioid substitution therapy, outreach, drink driving campaigns, overdose responses, information and education) are comparatively inexpensive, easy to implement and are supported by cost-benefit analyses.² These strategies are a useful complementary approach to reduce injury or death from drug use in the hope that the individual will seek treatment and other support at a later stage.³

The NT government has adopted numerous strategies to address and reduce alcohol and drug related harm including Night Patrol and Sobering up Shelters. The Sobering up Shelters help to relieve pressure on police and other community resources, and provides safe and secure accommodation to people from potential victimisation and violence.⁴

Sobering up Shelters

Sobering up Shelters operate on a harm minimisation basis. The main function of the Shelter is to provide a safe and caring environment for clients to sober up, where clients are encouraged to stay a minimum of 6 hours. During their time at the shelter, clients are provided with a shower and a clean bed. Their clothes are laundered while they are asleep and they are provided with a light meal before they leave the facility.

Sobering up Shelter staff also provide them with information about the available supports such as rehabilitation facilities, educate them about harm minimisation and also assist them with other relevant referrals to housing and homelessness services, emergency relief and other medical services where appropriate.

Accessing the services at the Sobering up Shelter is voluntary. However, if a person who was brought to the Sobering up Shelter by the Police, leaves prior to the expiration of 6 hours, the

¹ The International Harm Reduction Association (IHRA) defines harm reduction as the 'policies, programmes and practices that aim to reduce the harms associated with the use of psychoactive drugs in people unable or unwilling to stop. The defining features are the focus on the prevention of harm, rather than on the prevention of drug use itself, and the focus on people who continue to use drugs. See further Harm Reduction Australia, What is Harm reduction?, accessible at: https://www.harmreductionaustralia.org.au/what-is-harm-reduction/

² Uniting Care, Harm Reduction Position Statement, accessible at:

http://www.regen.org.au/images/stories/Moreland Hall/Position Statements/HR Position Statement.pdf

³ Department of Health Victoria, Prevention and Harm Reduction, accessible at:

https://www2.health.vic.gov.au/alcohol-and-drugs/aod-treatment-services/aod-prevention-harm-reduction ⁴ Aboriginal Medical Services Alliance NT, Submission to the Alcohol Policies and Legislation Review in the NT, 2017, pp 18-19, accessible at: http://www.amsant.org.au/wp-content/uploads/2018/06/170719 AMSANT-Submission-to-the-Alcohol-Policies-and-Legislation-Review-in-the-NT.pdf? sm_au_=iTVns1ZJqMDqST5N

Police and the Community Night Patrol service are to be advised and the person must be recorded as absconding.

Mission Australia manages 2 Sobering up Facilities in Darwin and Katherine. The Darwin Sobering up Shelter is a 40 bed facility with 20 beds dedicated to females. The Katherine Sobering up Shelter is an 18 bed facility which has 6 beds allocated for females. The Katherine service also provides clients with transport assistance to access services when requested.

Sobering up shelters provide a harm reduction response and support people to access a range of complementary services. The Riley review as well as numerous community organisations have made recommendations highlighting the need for the operating hours of the shelters to reflect the demand for services.⁵

"We already see the positive impact of Sobering up Shelters in the community. But being able to place people in safer places during the day is something that's missing up here. Part of this problem can be solved if we can keep the Sobering up Shelters running 24/7."

Mission Australia, Program Manager NT

Therefore, the expansion of harm reduction strategies should encompass funding and resources to increase the operating hours of Sobering up Shelters.

In addition to the immediate harm reduction measures, a long-term strategy should incorporate clear processes to support individuals to access detoxification and rehabilitation facilities. For example, currently, those accessing Mission Australia's Sobering up Shelters are able to get referrals to the Stringybark rehabilitation facility. The co-location of these services in Darwin is advantageous to the clients as well as the services. Clear referral pathways such as these are likely to increase the number of people accessing rehabilitation and other support services.

A similar approach can be adopted to increase the availability of age appropriate and culturally sensitive detoxification and rehabilitation facilities, particularly in areas or hubs where there are high number of Sobering up Shelter users. Youth-specific treatment facilities are a particular gap in the service landscape and require further investment.

The detoxification process can be an extremely painful and a traumatic process. Unsupervised or poorly managed withdrawal management can result in severe and life-threatening complications particularly if the individual is a long-term user or if large doses of the drugs were used on a regular basis. People wishing to overcome their drug dependencies should have access to appropriately trained medical professionals to monitor the treatments irrespective of a person's place of residence. Therefore, there is an acute need for further investment in systemic and safe detoxification and rehabilitation facilities across the state.

⁵ See further: T. Riley, *et al*, Alcohol Policies and Legislation Review: Final Report, 2017, p.93 and Aboriginal Medical Services Alliance NT, Submission to the Alcohol Policies and Legislation Review in the NT, 2017, p. 19, accessible at: http://www.amsant.org.au/wp-content/uploads/2018/06/170719 AMSANT-Submission-to-the-Alcohol-Policies-and-Legislation-Review-in-the-NT.pdf? <a href="mailto:smaller:smalle

⁶ Department of Health and Ageing, Quick Reference Guide to the Treatment of Alcohol Problems: Companion Document to The Guidelines for the Treatment of Alcohol Problems, 2009, accessible at: http://alcohol.gov.au/internet/alcohol/publishing.nsf/Content/864FDC6AD475CB2CCA257693007CDE3A/\$File/treatqui.pdf

A sustainable harm reduction strategy also needs to address broader issues to prevent relapsing to drug and alcohol dependence post release from rehabilitation facilities. This includes ensuring that there are zero exits to homelessness when people are transitioning from institutionalised settings such as rehabilitation facilities to the community. These transitions can be particularly challenging for many people as there is a considerable shortage of crisis and transitional accommodation as well as social and affordable housing in the NT. Thus, the NT Department of Health should work in collaboration with the Department of Housing to address this issue as a matter of priority.

The Outcome Document of the 2016 United Nations General Assembly Special Session on drugs (UNGASS 2016), unanimously approved by the 193 Member States, recognised 'drug dependence as a complex multifactorial health disorder characterised by chronic and relapsing nature that is preventable and treatable.⁷ Thus, the broader harm reduction strategies should identify measures to categorise alcohol and drug dependence as a health issue and move away from criminal justice related responses.

Youth-specific treatment examples from other jurisdictions

Triple Care Farm⁸

Triple Care Farm is an alcohol and other drugs program based in the Southern Highlands for young people with co-morbid substance dependence and mental illness. Specialising in treating clients with co-morbid substance dependence and mental illness, the 18 bed program works with young people aged between 16 and 24 years. This program includes a 12-week residential rehabilitation program and a six-month aftercare program to ensure participants have a smooth transition back into the community.

David Martin Place - NSW

David Martin Place is a youth detox facility that supports up to 10 young people aged 16 to 24 years at a time, as they undertake a substance withdrawal and detoxification program that integrates a medical and therapeutic model for up to 28 days. It is located on 110 acres in the NSW Southern Highlands and accepts young people Australia wide. Funds to operate the program are raised from a number of sources including the Sir David Martin Foundation, the Federal Department of Health and community and corporate partners and individual donors.

The program offers a range of multi-disciplinary supports to young people including:

- Individualised case management: Support for young people from the point of referral to the program, through the 28-day detox and the six-month aftercare program.
- Safe and supported withdrawal: Young people are supported with 24/7 nursing supervision, help managing symptoms of withdrawal, and pharmacotherapy where

https://www.unodc.org/documents/postungass2016/outcome/V1603301-E.pdf

⁷ United Nations Office on Drugs and Crime, The Outcome Document of the 2016 United Nations General Assembly Special Session on drugs: Our joint commitment to effectively addressing and countering the world drug problem, 2016, p.6, New York, accessible at:

⁸ Mission Australia, Triple Care Farm, accessible at:

required. All young people have an individual room to maximise their safety and privacy.

- Medical care: Provided to young people throughout the withdrawal process. Severe withdrawals and emergencies are managed through engaging NSW Health services.
- Counselling and therapeutic intervention: Individual and group counselling is offered, including engagement with the young person's family where appropriate.
- Educational and recreational programs: Includes living skills, relapse prevention and 'How to cope without a smoke' workshops; sporting and leisure activities and outings; and wellbeing and fitness programs utilising the onsite gym.
- Family support: Families are given opportunities on weekends to visit program
 participants. Workshops are offered for families and carers to provide information
 and build their capacity to support young people.

Young people leaving the program may move on to the Mission Australia rehabilitation program at Triple Care Farm, alternative rehabilitation programs, other treatment services, or may be ready to transition back to the community.

Drug and Alcohol Youth Service (DAYS) - WA9

A number of co-located programs and services operate under this umbrella and aim to address the holistic needs of young people in Perth who are trying to deal with alcohol and/or other drug misuse and associated challenges such as mental illness, gender identity and a past history of trauma or abuse. Mission Australia works closely with young people, their families and other service providers in areas such as education, employment and housing. In particular, Mission Australia works collaboratively with Next Step, the clinical services arm of the WA Mental Health Commission, and court-related Juvenile Justice Teams to provide integrated services. DAYS offers case-management, individual and family counselling, access to mentors, psycho-education groups and clinical psychology, residential services and includes access to an allied health team of clinical psychology, nurses, GPs and psychiatry.

DAYS also offers the additional programs including; Youth Withdrawal and Respite Service; Youth Residential Rehabilitation Service; Transitional Accommodation; Youth Outreach Service; Cannabis Intervention Service; Young Person's Opportunity Program; Youth Detention Counsellor and a Methamphetamine Initiative.

The adoption of culturally relevant health and education interventions

Considering the significant proportion of Aboriginal and Torres Strait Islander people in the NT, it is crucial that any health and education interventions are delivered in a culturally appropriate manner. For instance, over 90% of the participants at both Stringybark and the Sobering up Shelter in Darwin are Aboriginal and Torres Strait Islander people. Therefore, engaging more Aboriginal and Torres

⁹ Mission Australia, Drug and Alcohol Youth Service, accessible at: https://www.missionaustralia.com.au/services?view=service&id=775

Strait Islander community controlled services, increasing the Aboriginal and Torres Strait Islander health workforce and working in collaboration with Elders and community organisations are vital steps to achieving positive outcomes.

Mission Australia's annual Youth Survey Report provides a snapshot of the aspirations, concerns and challenges experienced by young people aged 15-19 across the country. In 2017, over 24,000 young people in Australia indicated *mental health* (33.7%), *alcohol and drugs* (32%) and *equity and discrimination* (27.3%) as the most important issues in Australia. However, in the NT, young people identified *alcohol and drugs* (35%) as the most important issue in Australia followed by mental health, and equity and discrimination. This demonstrates that young people in the NT already recognise alcohol and drugs as the most significant issue in the community. This reflects what they see around them and their recognition of broader social harms in addition to any personal concerns. Thus, implementation of education and awareness raising measures about harm reduction strategies through schools, universities and youth organisations are required to minimise alcohol and drug related harm, but broader community efforts are also required.

The Association of Alcohol and other Drug Agencies NT (AADANT) found significant gaps in early intervention and prevention programs, day and other non-resident programs and family inclusive support that are targeted to support young people.¹²

Education institutions, youth organisations, sports clubs and other similar organisations that work with young people provide a platform to engage and educate the young people about the available services and safe practices.

"There should be support for a service that's like a travelling roadshow of sorts, where they go into the community with the permission of the Elders and provide ongoing education. The more you go into the community, the more people will become used to it and feel comfortable seeking support."

Mission Australia, Program Manager NT

A range of complementary services are needed to educate and support people who are experiencing challenges with alcohol and drug dependence. Existing resources, organisations and programs that are currently delivering education and outreach services are likely to have strong relationships with local communities and an understanding of the cultural expectations and gaps in service delivery. The NT Department of Health should consult these community organisations, Elders from different communities, other parallel government services when designing, developing and implementing harm reduction strategies.

¹⁰ Mission Australia, Youth Survey 2017, p.4, accessible at: https://www.missionaustralia.com.au/publications/research/young-people

¹¹ Ibid p. 86

¹² Association of Alcohol and other Drug Agencies NT, Youth Alcohol and Other Drugs Services, Northern Territory (Service mapping and development of youth alcohol and other drugs network in the Northern Territory), 2017, p. 4, accessible at: https://files.acrobat.com/a/preview/8812f355-8a3a-4551-9d6a-b46ba8a36e94

Case Study

Dan* is an Aboriginal man who decided to participate in Stringybark rehabilitation program after he was released from the Darwin Correctional Centre as he was concerned about his alcohol consumption and the impact it had on his personal relationships, health and employability.

Dan successfully completed the 12-week residential program. He also became a mentor within the program for younger male clients. He was also engaged in a range of programs including employment workshops, living skills programs, one on one and group counselling activities, health screening, psycho-social education and living languages (numeracy and literacy upskilling).

He has been a painter since he was 9 years old and understands the therapeutic benefits of art. Dan was taught to paint by his father and grandfather. He uses art to express his culture and his personal struggles. Mission Australia commissioned Dan to complete a series of murals at the Stringybark. One of the murals he completed depicts his memories at Stringybark.

Dan is currently working full time at Northern Territory Acrylic Plastics and has moved into independent accommodation.

* Name has been changed for confidentiality

Experiences of discrimination, intergenerational trauma and previous negative encounters with the justice system, the police and other government entities over many years may have contributed to mistrust in government services among Aboriginal and Torres Strait Islander people.¹³ Thus, harm reduction strategies should consider working with local communities and Elders to rebuild these relationships, particularly within the justice system.

There are numerous programs currently in operation that are effective in engaging and educating Aboriginal and Torres Strait Islander people in local communities to provide appropriate and timely interventions.

Living language

Stringybark engages an Aboriginal and Torres Strait Islander consulting firm in Darwin for the provision of 'living language' literacy and numeracy programs to Stringybark clients. This program is tailored to all clients and focuses on the benefit of its community participation model in learning.

The program focuses on supporting Aboriginal and Torres Strait Islander students who disengaged from education and experience challenges when moving into employment and further education.

¹³ See further: Blue Knot Foundation, Intergenerational and collective trauma within Aboriginal and Torres Strait Islander communities, Newsletter of the Blue Knot Foundation, June 2016, accessible at: https://www.blueknot.org.au/Portals/2/Newsletter/Blue%20Knot%20Foundation%20Newsletter_June%202016 https://www.blueknot.org.au/Portals/2/Newsletter/Blue%20Knot%20Foundation%20Newsletter_June%202016 https://www.blueknot.org.au/Portals/2/Newsletter/Blue%20Knot%20Foundation%20Newsletter_June%202016

Youth Development Programs (Warlpiri Youth Development Aboriginal Corporation)

The four Youth Development programs support Warlpiri youth in the creation of positive, meaningful futures as individuals and for the benefit of their communities. This occurs through a range of diversionary (youth program, culture and projects) and development (training, education and employment support) programs that develop a positive sense of self, family leadership and culture.

Level 1 engages young people (5-25 years) in a consistent program of positive, healthy and safe diversionary, cultural and project activities, aimed at increasing enjoyment, interests and challenges, whilst correspondingly reducing negative behaviours such as substance misuse or other at risk activity. These activities combine to establish a positive youth culture, that promotes key values such as healthy lifestyles, cultural strength and school attendance.

Level 2 creates productive and formal life pathways for Warlpiri youth through opportunities from Jaru Trainee membership, Training, Education and Employment.

Training and Education: Supports 5 -25 year olds to re-engage in learning and education, through a variety of informal and formal education/training opportunities. Provides young people aged 5-25 with a wide range of informal learning opportunities to promote re-engagement and development of their education, including support to return to school. Involves young people aged 16 and over as Jaru youth program trainees, developing work readiness. Provides formal learning through accredited courses.

Life and Employment Pathways: Young people aged 16 and over are supported to develop employment and life pathways, to participate in community life. Young people who have engaged in Jaru training and education are supported to find further employment, and/or community leadership roles.

The WYDAC Warlpiri Employment Pathway Policy allows for young people to assist the youth program as trainees. Regular and consistent trainees are eligible to be employed as casual or Permanent Part time staff. We will also facilitate employment with other local organisations and mentor new employees.

Support for affected families and communities

Families are in chronic stress irrespective of whether the person dependent on alcohol or drugs is a parent, child or sibling. Where it is the parent, there is a risk that the children will be neglected or exposed to violence and could be removed by child protection authorities. Drug and alcohol dependence can also increase the risk of family and domestic violence. Therefore, it is imperative that the harm reduction measures also take into account the needs of the families including providing access to emergency relief, crisis accommodation and other material supports until the person dependent on alcohol or drugs is not a threat to the family members or themselves.

It is also the family members who keep alcohol and drug dependent people safe, reach out to support services and maintain communication with them. Therefore, family members should be provided with clear and accurate information and education about the harm reduction measures

¹⁴ I. Wilson and A. Taft, Alcohol's link to domestic violence is in focus – now what? The Conversation, 24 February 2015, accessible at: https://theconversation.com/alcohols-link-to-domestic-violence-is-in-focus-now-what-37696

and other community services that support people who are affected by alcohol and drug dependence.

Alcohol and drug related issues intersect with many other challenges including mental health, housing and homelessness, poverty, education and employment. Thus, the harm reduction strategy should adopt a holistic approach and provide wrap-around supports to individuals, their families and the community. The Government should ensure that the successful programs that achieve positive outcomes receive long-term sustainable funding to maximise effectiveness and allow sufficient time for building relationships.

Healing Camp, Remote Community Programs

The Balunu Foundation's healing and therapeutic programs provide hope for Aboriginal and Torres Strait Islander young people and families by targeting the cycle of disadvantage. The programs cover health, education, life skills, training, and employment, and maintain a strong emphasis on emotional well-being.

The therapeutic aspects of the program help instil a greater emotional balance in participants, which plays an important role in helping the young people make stronger and wiser life choices. Currently, they operate a six-day healing camp and accommodate up to ten participants per camp program.

The focus on providing a culturally sensitive service allows program providers to better understand the needs of participants and to provide more appropriate responses that can deliver improved outcomes for youth, their families and communities. This is achieved by consulting with community leaders, such as Aboriginal Elders and other community-based agencies, in the decisions surrounding program design, delivery and obtaining feedback. This approach has provided a sense of community ownership over the program, which in turn can help to facilitate trust among community partners and among participants. Such trust is known to be instrumental in the effectiveness of programs delivered for Aboriginal and Torres Strait Islander families and communities.

Balunu seeks to extend existing program delivery to remote and regional areas and expand program delivery to include specific projects targeting mental health, substance misuse, education, training & employment, suicide prevention and healthy families.

Effective strategies for coordination across treatment facilities

Over the years Mission Australia has developed relationships with other sector organisations to support the clients accessing alcohol and drug services and are able to make cross referrals to other appropriate services. Government coordinated multi-agency partnerships such as the Safe Places Collaborative Committee are also vital for the community sector to build meaningful partnerships with relevant government and sector organisations.

One of the successful aspects of Mission Australia's Stringybark service is the allocation of funding to collaborate with Darwin City Council in assertive outreach activities. Through this, Mission Australia is able to travel within and outside of metropolitan areas and engage people to discuss the impact of alcohol and drug dependence and the available support services. However, this outreach service is limited to a few hours a week and does not have to capacity to reach some of the rural and remote

communities to build meaningful relationships with the community members due to time and funding constraints.

The Stringybark Residential Rehabilitation Centre

The Stringybark program in greater Darwin area strives to create independence for people using the service, through better integration between health, justice and community services. Mission Australia's services cater for male and female clients over 18 years. In partnership with Top End Health, the facility has 90 beds for men and women in the greater Darwin region. Including:

- a 10-bed specialist assessment and withdrawal service
- a 40-bed Sobering Up Shelter
- a 40-bed alcohol and other drug residential rehabilitation service
- a Stepping Out Aftercare service.

Mission Australia provides a service that is client centred and recognises the rich cultural diversity of the Northern Territory. Currently, over 30% of Stringybark and Darwin Sobering Up Shelter workforce consist of Aboriginal and Torres Strait Islander people and the aim is to increase the percentage of Aboriginal and Torres Strait Islander employees to 60% by 2020.

This service works closely with Larrakia Night Patrol service. The participants of this program also have access to the Travelling Doctors Service that visits the facility once a month and access to Centrelink staff who visit the facility twice a week. In addition to these, the facility receives therapeutic interventions and material supports such as clothes, footwear and feminine hygiene products from organisations such as Share the Dignity, Uniting Church, Catholic care, Top End mental health service, Danila Dilba Aboriginal Health Service, YWCA, and other similar organisations.

There is increasing evidence to support that integrated treatment models which have the capacity to address both mental illness and substance abuse are both feasible and effective.¹⁵ Therefore, it is imperative that there is better recognition of comorbidity, coordination between services, particularly mental health and alcohol and drug rehabilitation services.

Post release follow up supports are also crucial, particularly for those exiting residential rehabilitation facilities as they may need assistance with finding appropriate accommodation, to reengage with education and employment, and to engage in the community. These complementary services to reconnect with the communities or families are particularly important for Aboriginal and Torres Strait Islander people. Thus, providing complementary supports for people to overcome challenges and creating pathways for them to engage in the community should be essential elements of future harm reduction strategies.

Upon completion of rehabilitation at Stringybark rehabilitation, the case managers work with the clients to engage in Elders visiting Program or Territory Connect to support the Aboriginal and Torres Strait Islander people who wish to return to country.

¹⁵ M. Deady, M. Teeson, K. Mills, et al, One person, diverse needs: living with mental health and alcohol and drug difficulties, A review of best practice, Sydney: NHMRC Centre of Research Excellence in Mental Health and Substance Use, 2013.

"When clients are close to completing rehab, we start casually talking about their plans and link them to Territory Connect or Elders Visiting Program ... Sometimes people don't want to go because of shame, past issues or relationships have broken down. If that's the case, we try to help them find accommodation and refer to our accommodation and other relevant services."

Mission Australia, Program Manager NT

Elders Visiting Program

The Elders Visiting Program was developed in partnership between the NT Department of Justice, the Aboriginal and Torres Strait Islander Commission, Community Council and elders, and commenced in 2005 throughout NT Correctional facilities. The objectives are to support the mental health and wellbeing of Aboriginal and Torres Strait Islander prisoners by maintaining links to community and culture while in prison, and to improve the reintegration prospects by talking about their post release plans, obligations and expectations upon returning to the community.

The program also provides an important link between Indigenous prisoners and Corrections staff, advising staff on cultural and community issues that may impact on an inmate's behaviour or ability to address their offending.

Territory Connect

Formally known as the Return to Country Program provides travel and accommodation assistance to people who are living in metropolitan areas who intend to move back to their country. Users of the service are obliged to gradually repay the cost of the travel and administrative charges back to the service provider.

Given the unpredictable nature of alcohol and drug dependence, people often transition between community support services and alcohol and drug rehabilitation services. Thus, there should be better coordination not only between treatment facilities but also between various community services.

Case Study

Andy* is a 21-year-old young person who was referred to Café One program. However, it became clear that he had an ongoing substance dependence issue and a history of mental health problems including self-harm. The Café One staff referred Andy to Stringybark Rehabilitation Facility to support him to overcome his drug dependence. Whilst at Stringybark, his mental health deteriorated and required more intense support. Andy is currently receiving treatment for his mental health issues at the regional hospital.

Upon release from the hospital, he will return to Stringybark and will be welcomed back to the next Café One intake to complete his training.

*Name has been changed for confidentiality

Café one Coffee Trailer

Café One Coffee Trailer is a social enterprise that provides employment skills training for at risk young people aged 16-24 who are disconnect from education. The service engages and trains people experiencing homelessness, mental illness, alcohol and drug issues and difficulty securing training and employment, as well as other social and financial issues.

The NT government should ensure that there is better coordination between diverse range of services, and government and community sector support programs to meet the needs of those dependent on alcohol and drugs holistically.