

## **Harm Reduction Strategy for Addictive Behaviours in the NT – Supplementary information to Mission Australia’s submission and evidence at the public hearing**

### **Stringybark rehabilitation service aftercare program**

Currently, the Stringybark case managers start working with clients to develop aftercare/post release plans after they complete the first 6 weeks of their 12-week residential rehabilitation program. This includes face to face consultations with Danila Dilba Aftercare Program.

Mission Australia’s aftercare program includes case managers following up with clients over the phone every fortnight for 6 months. Clients are also able to access aftercare supports and other complementary services through a range of other service providers including Danila Dilba Aftercare Program, Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) and supports to return to country through programs such as Territory Connect. The clients are provided with information about these services in order to assist them to make informed choices about their aftercare. Where clients are unable to return to their community, they are linked with a range of supports including access to transitional accommodation and other wrap around supports.

Due to a range of circumstances and financial reasons, aftercare clients often change their phone numbers, run out of phone credit or move out of the community and lose contact with the case managers. Mission Australia’s aftercare service does not have financial capacity to support clients with these issues which limits their ability to remain engaged with the service.

The phone contact alone is not sufficient for some clients who need intense and structured aftercare and follow up support to remain in the community. Stringybark service has seen a number of clients who return to the service during the initial 6 months as they are unable to maintain sobriety. Better long-term outcomes are likely to be achieved if the service was able to provide face to face follow up supports in the local communities.

For example, Triple Care Farm, Mission Australia’s residential rehabilitation and withdrawal service for young people in New South Wales, has 4 staff members based in 4 different locations providing assertive outreach services where they travel to different areas where clients reside to provide aftercare supports. A similar model where a dedicated person is funded to provide assertive outreach in the top end of the NT is vital to ensure that clients receive meaningful support.

### **Mission Australia’s engagement with Aboriginal and Torres Strait Islander community organisations**

Mission Australia understands the important role played by the Aboriginal and Torres Strait Islander organisations in service delivery and we are continuously engaging with the sector to ensure that our services are culturally appropriate and sensitive. Mission Australia has a diverse workforce with 7% of staff identifying as Aboriginal and Torres Strait Islander, 24% people born overseas with 15% speaking a language other than English at home.

Mission Australia is a signatory to the Principles for a Partnership-centred approach for NGOs working with Aboriginal and Torres Strait Islander Organisations and Communities.<sup>1</sup> These principles provide a platform for a collaborative approach between Aboriginal and Torres Strait Islander and mainstream NGOs and an environment in which Aboriginal and Torres Strait Islander organisations can be recognised for their unique role in building community capacity and participation in the provision of essential services.

We are currently implementing an Innovate Reconciliation Action Plan with commitments that include: adopting measurable and meaningful steps to improve and increase Aboriginal and Torres Strait Islander employment outcomes within the workplace; staff training across all levels of the organisation on cultural awareness, collaborating with Aboriginal and Torres Strait Islander organisations and incorporating Aboriginal and Torres Strait Islander supplier diversity.<sup>2</sup>

### **People accessing services in dry communities**

Mission Australia's Sobering up Shelters and Stringybark Rehabilitation Program have supported people who travel away from dry communities, however, we do not provide specific services within dry areas/communities and do not have an organisational position on this issue. We recommend consultation with Aboriginal communities and organisations to ascertain their views.

Existing evidence suggests that population based initiatives such as demarcated dry areas/communities or alcohol free zones offer certain benefits to address complexities associated with alcohol and other drug use. However, such policies need to give careful consideration in relation to the circumstances under which these policies are applied. Aboriginal and Torres Strait Islander representative organisations have identified concerns around the impact of these policies including dry communities pushing drinkers into towns, where their drinking often worsens.<sup>3</sup> Further, proscribed urban areas leave residents who can legally buy takeaway alcohol unable to legally drink it.<sup>4</sup>

Reports indicate that overall, alcohol consumption patterns have not changed markedly over the period since the introduction of legislation to regulate consumption of alcohol and that any change observed has not been proven to be statistically significant.<sup>5</sup> However, the report also indicates that many Aboriginal communities in the NT have decided to prohibit or restrict the consumption of alcohol within their boundaries and declare themselves 'dry'.<sup>6</sup>

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<sup>1</sup> ACROSS, Principles for a Partnership-centred Approach for NGOs working with Aboriginal and Torres Strait Islander Organisations and Communities, accessible at: <https://www.acoss.org.au/principles-for-a-partnership-centred-approach/>

<sup>2</sup> Mission Australia, Innovate Reconciliation Action Plan July 2017-June 2019, accessible at: <https://www.missionaustralia.com.au/what-we-do/policy-development-advocacy/reconciliation-action-plan>

<sup>3</sup> National Aboriginal Community Controlled Health Organisation, NACCHO Aboriginal health debate: Chronic drinking problem in the NT costs about \$642 million annually, accessible at: <https://nacchocommunique.com/2014/02/06/naccho-aboriginal-health-debate-chronic-drinking-problem-in-the-nt-costs-about-642-million-annually/>

<sup>4</sup> Ibid

<sup>5</sup> Department of the Prime Minister & Cabinet, Review of the Stronger Futures in the Northern Territory Act (2012), June 2016, p. 15.

<sup>6</sup> Ibid p.4

It is important that these measures are supported and led by community Elders and members and are provided with the requisite level of flexibility to tailor the requirements based on the local needs. Measures must be co-designed and implemented with the communities to improve efficacy.