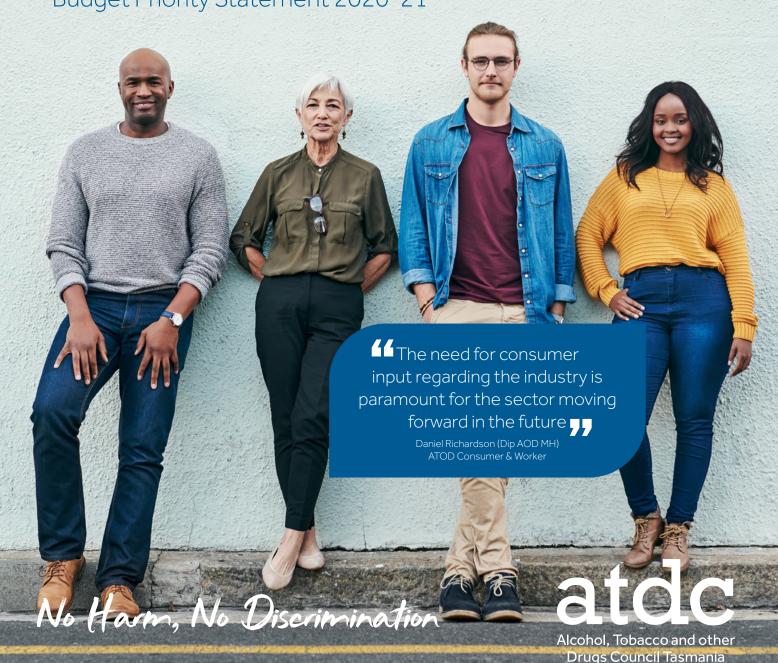
# Consumer Voices and Better Data: Foundations for our Future

Budget Priority Statement 2020-21





## **Our Vision for Tasmania**

By 2023 people with lived experience have a meaningful contribution to make in the alcohol, tobacco and other drugs sector. For the first time families and friends are asked about their experiences in having someone close be affected by drug use. Lived experience now helps drive change and innovation and most importantly, people are supported to get the help they need.

By 2023 the alcohol, tobacco and other drugs sector is supported by **data-driven decision making**. We are starting to use the information collected at each client encounter to paint a picture of the impact of our services, as well as to identify need and opportunities to **help more people**.

# Tasmanians drink alcohol, smoke cigarettes and take drugs

For some, it may be the occasional drink or cigarette on a special occasion or it may be prescription medication to manage chronic pain.

For others, their relationship with alcohol, tobacco and other drugs may be more complex, causing their drinking, smoking or other drug use to pose a health risk to themselves or those around them. For some, their drug use may involve substances that are not only considered dangerous, but also illegal.

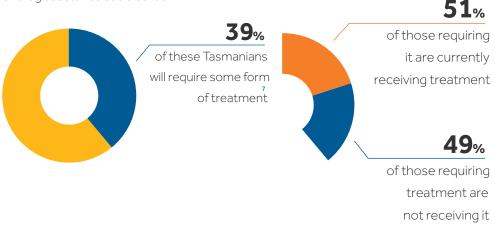
Despite the efforts of alcohol, tobacco and other drug promotion and prevention experts, the harms from problematic alcohol, tobacco and other drug use in our communities is significant. In Australia, one in 20 deaths every year can be attributed to alcohol or illicit drug use<sup>1</sup> and one in eight deaths attributed to tobacco<sup>2</sup>.

In Tasmania, alcohol, tobacco and other drugs account for 799 emergency presentations and 2,268 hospital admissions every year.³ Alcohol and illicit drugs also account for 52 per cent of burglary, assault and public disorder crimes⁴ and one third of our road traffic injuries⁵. In 2018-19 there were 889 public assaults in Tasmania related to alcohol and other drugs.⁶ which equates to two public assaults per day. There were also 1,905 drink drivers charged⁶, and these figures don't account for the social and emotional toll that alcohol, tobacco and drug dependence has on families and children across Tasmania.

For many Tasmanians, treatment is required so they can lead healthier, happier and more productive lives.

32,292

Tasmanians will experience an alcohol or drug substance use disorder



- 1 https://www.aihw.gov.au/news-media/media-releases/2018/march/1-in-20-australian-deaths-caused-by-alcohol-and-il
- $2\ https://www.tobaccoinaustralia.org.au/chapter-3-health-effects/3-30-total-burden-of-death-and-disease-attributable-to-tobacco-by-disease-category$
- 3 Siggins Miller, 2017. A single Tasmanian alcohol and other drugs (AOD) service system framework: Final report, accessed online 13/11/2018, found here: https://www.dhhs.tas.gov.au/\_\_data/assets/pdf\_file/0019/340129/Final\_Report.pdf
- 4 https://www.aihw.gov.au/getmedia/7554ecf9-2e7d-48a8-8d4b-7f2898621762/17904%20-%2023sept2015.pdf.aspx
- $5\ https://www.aihw.gov.au/reports/burden-of-disease/impact-alcohol-illicit-drug-use-on-burden-disease/contents/summary. \\$
- 6 https://www.police.tas.gov.au/uploads/DPFEM-Annual-Report-2018-19.pdf
- 7 The DASP model (as used in Siggins Miller) recognises that not all people with a diagnosable substance use disorder will demand clinical care or perceive a need for treatment. Service demand is quantified by excluding those persons who will not seek treatment.



## **Treatment options**

There are a range of treatment and support options available in Tasmania, including:

- Information and Education
- Counselling (one-on-one or group)
- Pharmacotherapy
- Withdrawal Management
- Residential Rehabilitation
- After-care support
- Support and case management

Tasmanians may seek these options from a once-off discussion with their GP or pharmacist, short-term counselling sessions, or alcohol, tobacco and other drug (ATOD) specialist services. Treatment may occur individually, in a group setting or in a live-in residential facility.

The majority of Tasmanians receiving treatment will require more than one session of treatment. This is because by its very nature substance use dependence is a chronic health issue and Tasmanians need to be supported through multiple attempts at treatment to reduce the risk of relapse. <sup>8</sup>

In addition to multiple sessions, we know that Tasmanians will likely receive treatment from more than one organisation.

Across Tasmania, there are a range of government, non-government and private providers delivering alcohol, tobacco and other drug services and these organisations will commonly provide their treatment services at differing stages of the recovery journey for the same people.

## Change is needed

As good as our treatment system is, we can and we must do better.

I'd like to say that I have never felt judged, persecuted or rejected by society for being a drug addict, but I have, and because of this I was reluctant to seek help in any recovery and abstinence maintenance programs.

Karer

You go to the mainland and they have an actual organisation for drug users that the government funds! It's amazing and helped me so much. It sends a message you know? It says 'we still recognise you as human beings, who deserve to be heard', and that made all the difference.

Tasha, 23, eastern shore resident

I realised that I could finally admit
I was struggling, that I needed help.
Because finally, I was talking to
someone who had been through it
too, and wouldn't judge me.

Andy, 38, on accessing a consumer representative service in QLD before returning to Tasmania

Government departments speak of social inclusion and diversity yet when a consumer attends a service, discrimination is blatantly obvious. I'm from an ethnic background, dark and I can speak English. I was slurring in my speech one day and went to the hospital. Immediately they asked if I had been drinking, and spoke loudly as if I couldn't understand them. Turns out, I had a stroke but the initial discrimination I faced was truly disconcerting.

Puspa Sherlock

<sup>8</sup> Reform Agenda for Alcohol and Drug Services in Tasmania: Consultation Draft, p28-9, accessed 21/10/2018, found here: https://www.dhhstas.gov.au/\_\_data/assets/pdf\_file/0020/350534/Reform\_Agenda\_for\_AOD\_Services\_-\_Consultation\_Draft\_FINAL\_3.pdf

## What do we need?

Through extensive consultation we have identified **two key innovations**.

Both have been identified as a high priority for well over a decade and both can **transform** Tasmania's alcohol, tobacco and other drugs sector:

- 1. An independent consumer organisation
- 2. Data-driven decision making, in the form of a **shared data framework**

These represent **real change**, ensuring a strong **foundation for the future** of Tasmania's alcohol, tobacco and other drugs sector.

## **Priority 1: Consumer Voices**

#### An independent consumer organisation

Tasmania remains the only state or territory that does not have a funded independent consumer organisation in the alcohol, tobacco and other drugs sector.

Consumer organisations are an essential feature of health service systems and deliver services through the lens of lived experience. This valuable expertise contributes to improved service delivery by making services (and the system generally) more responsive and accountable to the people they are funded to provide services to. A key role is to advance the health, human rights and dignity of people who use alcohol, tobacco and other drugs.

Calls to establish a consumer organisation commenced over 15 years ago, and the need for these services have significantly increased over this time. Reflecting this need, in 2018 the ATDC commenced work to develop a recommended business model for increasing consumer representation in Tasmania.

This work, supported through the Tasmanian Government and undertaken in partnership with the alcohol, tobacco and other drugs sector, clearly established that an independent incorporated organisation is the only vehicle that can deliver meaningful consumer engagement.

This recommendation is outlined in detail in the Consumer Organisation Options Paper submitted to the Tasmanian Government in August 2019, and has been endorsed by the Alcohol and Other Drug Expert Advisory Group, which includes representatives from the Tasmanian community alcohol, tobacco and other drugs sector, Primary Health Tasmania, the Tasmanian Health Service and the Tasmanian Department of Health.

Support for the establishment of a stand-alone consumer organisation has never been stronger. Combined with the clear need for these services, the ATDC is strongly advocating for funding to be prioritised in the 2020-21 State Budget to establish this service.

#### **Key deliverables**

The key deliverable will be the establishment of an independent consumer representative organisation supported by a Board of Governance, Executive Officer and project and operational staff that will:

- identify, support and connect Tasmanians with consumer representation opportunities in the alcohol, tobacco and other drugs sector
- deliver organisational and workforce initiatives that support and build the capacity of alcohol, tobacco and other drug treatment and support providers to increase consumer representation and comply with contemporary quality assurance requirements and consumer engagement requirements
- provide a representative voice for Tasmanians who use drugs, including our most vulnerable and marginalised, to proactively respond to issues that increase or encourage stigma around alcohol, tobacco or drug use in the community.

#### Time frame

July 2020 to June 2021

#### **Governance**

The ATDC would oversee the establishment of the inaugural organisation, with governance oversight from a steering committee comprising of key government, community and consumer representatives. This governance arrangement would remain in place until the ATDC finalises the operational requirements of the consumer organisation and transitions the governance responsibilities to the inaugural board of management.

#### **Investment**

The cost to establish and support the first year of operation is \$463 000. An investment of \$380 000 per annum is then required ongoing to sustain the organisation.

I was given very high pain relief for a toothache as I was allergic to other medication. When I went for a follow up, I told them the medication I was on, and their body language and whispers were transparent. I'm not an addict yet I was treated like one. If a consumer representative was there, I would have felt assured, not judged or stigmatised.

Puspa Sherlock

I am writing this as a former consumer in the A.O.D sector, as well as someone who now actively works in the sector as a counsellor. The need for consumer input regarding the industry is paramount for the sector moving forward in the future.

Daniel Richardson (Dip AOD Mental Health) ATOD Consumer & ATOD Worker

## **Priority 2: Better Data**

## Data-driven decision making, in the form of a shared data framework

Increasing access to alcohol, tobacco and other drug data is a key priority for the ATDC and our members. Using this data and information would provide numerous benefits, including:

- a mechanism to understand how existing alcohol, tobacco and other drug treatment services reduce harm in Tasmania
- a measure of client, organisation and system level outcomes to demonstrate the value of investment into treatment
- an effective manner to identify priorities for service improvement and development
- the provision of much-wanted data on drug trends and treatment presentations on a regional basis as well as a way to identify emerging issues and priorities for frontline services

Currently the Tasmanian community is unable to reap the benefits that such data could provide because the manner that data and information is captured, analysed and reported in Tasmania is fragmented or non-existent.

This needs to change, but the ATDC cannot do this in isolation.

With valuable ATOD treatment data spread across the private, public and not-for-profit sectors a collaborative approach is essential.

Over the past 18 months the ATDC has been proactively progressing discussions with the Tasmanian alcohol, tobacco and other drugs sector, Primary Health Tasmania and the Tasmanian Government to identify how this can be achieved.

It has been determined that the best approach is to start with undertaking work to capture the main elements of the service system (e.g. underlying principles, values, definitions and treatment types) in one document with the aim of developing a shared understanding of our sector, the services it provides and the expectations that consumers can have when entering it.

Following this, work can commence on identifying how these services are currently being measured and reported by each service organisation, with the view to consolidating these processes to increase consistency in reporting, data analysis and ultimately the quality and availability of data reporting and sharing

The ATDC has agreed to provide in-kind support to the completion of the first stage of this work, and with the support of Primary Health Tasmania, the Tasmanian Health Service and the Tasmanian Department of Health, will commence this work at the start of 2020 to be completed by 30 June 2020.

To enable the second part of the work to progress, investment is required to secure the required expertise and human resources to develop the underlying parameters for this piece.

#### Co-investment

Tasmanian Government investment sought: \$50,000 (GST excl.)

The total cost of undertaking this work is approximately \$125,000 over 12 months and Primary Health Tasmania has confirmed that they would financially contribute to this project subject to future renewal of the Federal Department of Health Alcohol and Other Drugs funding schedule beyond the current 2019-20 financial year and dependent upon a confirmation of an investment from the Tasmanian Government. The ATDC has also committed in-kind support, if this proposal is successful.

#### **Key deliverables**

The key deliverable is the development of a shared data framework that will:

- determine current approaches to data collection, outcome measurements and performance monitoring in the Tasmanian alcohol, tobacco and other drugs sector (e.g. what is being measured and how)
- review best practice current outcome measurement tools for the ATOD sector and identify the measures of success that should be captured (e.g. what should be measured)
- review relevant policies, funding contracts, quality improvement processes (e.q. how existing measurement can be improved)
- identify ways to build in additional measurement or reporting capacity such as data on drug trends in regions and treatment access in order to identify emerging issues (e.g. how new measurements can be introduced)

#### **Governance**

It has been determined that the role would be best placed within the Tasmanian Government, with the Alcohol and Other Drug Expert Advisory Group to act as the governing body for the project, with representatives from the Mental Health Alcohol and Drug Directorate, Tasmanian Health Service, Tasmanian Department of Health, Primary Health Tasmania, the ATDC and community sector service providers.

battle my demons every day, for the most part alone. There is very little available for free, at short notice, and that isn't just driven by a 'one size fits all' approach. The benefit of a mixture of life experiences and educational driven support is the only key that will allow a move forward for those choosing to stay sober.

Karer

# Why the Government should invest

Our two key priorities will help to deliver the targets in the Tasmanian Liberals' *Building your future* plan.

## Target 21 – reduce smoking rates to below the national average by 2025

Tasmania has the second highest smoking rates in the country with 17% of our population smoking. Those who live in regional and remote areas are more likely to smoke than those who live in capital cities and also have less access to health services. In some parts of Tasmania, such as Bridgewater the smoking rate is at 40%. We can do better through targeting services that work to those who need them. An independent consumer organisation could provide much needed advice from local people about how to tackle smoking in communities and data-driven decision making would identify those interventions that would have the best chance of lowering smoking.

## Target 25 – 90% of emergency presentations will be in and out of the emergency department within four hours by 2022

An improved data system would allow earlier identification of dangerous drugs especially in the regions. Data that shows what works and where would mean that our service system can better plan for the future. Responding to need in the right places will mean less people develop acute problems and end up in the hospital system.

# Target 26 – reduce emergency ambulance response times to national average waiting time by 2023

Service planning showing which interventions work will reduce the demand on ambulances through better access to treatment and support. A service system that is hard to access and not integrated can generate unnecessary and increased burdens placed on the justice system, acute health services such as hospitals and ambulances and ultimately to people presenting at emergency departments.

## Target 33- the lowest use of crystal methamphetamine (ice) of any state by 2022

Current and best intel from frontline services as well as researchers is suggesting that crystal methamphetamine use is still increasing in Tasmania. A health system that can respond better to changes in drug use will lead to less people having problems. With Devonport having high rates of crystal methamphetamine detected in wastewater analysis, a data system will show how services are responding in the region and what the opportunities are to do better. An independent consumer organisation would contribute through providing support to vulnerable and marginalised Tasmanians, including families and friends affected by ice as well as provide valuable advice to government and service providers.

As someone who spent [a long time in treatment in Tasmania], I witnessed a lot of areas for improvement on my journey. Namely, the lack of respect for the client. Treating the addiction and underlying co-morbidity issues, whilst showing the utmost respect for the individual, must be made paramount. [Some services] use a punishment-based business model for non-compliance with the rules, an approach which has been proven to be ineffective.

Kicking people to the side of the road for using whilst in care is counterproductive... It's like someone presenting to accident and emergency with chest pains, then kicking them out when they have a heart attack. Hold these people up, love them and help them. Don't name and shame them...

Daniel Richardson (Dip AOD Mental Health)
ATOD Consumer & ATOD Worker

## The Time is Now

## Supporting the State Government Reform Agenda for Alcohol and Drug Services in Tasmania

Extensive consultation has underpinned the State Government's *Reform Agenda for Alcohol and Drug Services in Tasmania*, and the two priorities identified in this submission are echoed in this document as priorities to be achieved between 2020 and 2022. The establishment of a funded consumer organisation will support Reform Direction 1 of a more client centred service system. Secondly, the Reform Agenda mandates the development of a "...data collection, collation, reporting and sharing of information mechanism" and the collaborative data project proposed will provide the required platform to deliver this mechanism, monitor progress against the 10 year Reform Agenda and ultimately provide the means to drive improvement for Tasmanians wanting to recover from alcohol, tobacco and other drug use. Both of these priorities constitute real reform and innovation for the Tasmanian alcohol, tobacco and other drugs sector.

#### **Review of the Tasmanian Drug Strategy**

The development of a new Tasmanian Drug Strategy (TDS) will commence in 2020. This process will be strengthened by the two priorities identified in this submission. The establishment of an independent consumer organisation will ensure that Tasmanians with lived experience have greater capacity to participate in the development of the new TDS, and ensure that a client-centred approach into any strategies developed. Secondly, the work to strengthen the availability of data and information on alcohol, tobacco and other drug outcomes will inform areas of need, while also providing a baseline for which progress can be measured against.

#### Services seeking quality accreditation

All service delivery organisations in the Tasmanian alcohol, tobacco and other drugs sector are subject to quality accreditation processes. These accreditation standards include a requirement for organisations to demonstrate the ways in which they engage with their clients to improve client outcomes. This requirement can be found in the National Safety and Quality Health Standards - Standard 2 'Partnering with Consumers' and the Quality Improvement Council's Health and Community Services Standards - Section 3 'Consumer and Community Engagement'.

The lack of a consumer organisation presents an accreditation risk for these organisations and the establishment of an independent organisation will assist to ensure all organisations have the necessary processes in place to incorporate the consumer voice and strengthen the rights of, and empowers those consumers using alcohol, tobacco and other drug services.

#### What are the risks if we don't act now?

An alcohol, tobacco and other drugs service system that remains static and is not accountable to the Tasmanians that it seeks to support.

Tasmania will never get a grip on

the drug use taking over our society if we

those deep in addiction, and how can we

possibly expect to do this if they/we/me are thrown to the wolves because of a label that holds no dignity or any sign of self-respect? Why seek help when it's made so difficult and often leaves you feeling lower than you already do?

Karen

Stock photo. Posed by models.

### About the ATDC

The Alcohol, Tobacco and other Drugs Council is the peak body representing and supporting community organisations, and the people they assist, to reduce alcohol, tobacco and other drug related harm for all Tasmanians.

It is our vision that Tasmania can be free from alcohol, tobacco or other drug related harm or discrimination.

Through advocacy, policy, research and workforce development initiatives, we seek to increase investment into alcohol, tobacco and other drugs services across Tasmania. It is also our aim to foster a collaborative, inclusive and effective alcohol, tobacco and other drugs sector and facilitate positive change in community attitudes and policy settings.

## **Acknowledgements**

The ATDC wishes to thank our member organisations who generously gave their time to contribute to this submission:

- Alcohol and Drug Foundation
- Advocacy Tasmania
- Alcohol & Drug Services (North & South)
- Anglicare Tasmania
- Bethlehem House Tas
- Cancer Council Tasmania
- Circular Head Aboriginal Corporation
- Drug Education Network
- Headspace/Cornerstone Youth Services
- Holyoake Tasmania
- Launceston City Mission (Missiondale)
- Mental Health Families & Friends Tasmania
- Mission Australia
- North West Private Hospital
- Pathways Tasmania
- Relationships Australia Tasmania
- Richmond Fellowship Tas
- Rural Alive and Well
- South East Tasmanian Aboriginal Corporation
- St Helens Private Hospital
- Tasmania Prison Service
- Tasmanian Aboriginal Centre
- Tasmanian Council on AIDS, Hepatitis & Related Diseases
- Tasmanian Council of Social Service
- Teen Challenge Tasmania
- The Hobart Clinic
- The Link Youth Health Service
- The Salvation Army
- Tasmanian Users Health & Support League

The ATDC also wishes to thank the consumers who contributed their experiences to this submission. We hope to see more opportunities for people with lived experience to make their voices heard through an independent consumer organisation.

We also thank the Tasmanian Government, and the members of the Alcohol and Other Drug Expert Advisory Group: Data Set Working Group and the Consumer Organisation Development Project Advisory Group for their contributions.



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The ATDC is a Quality Innovation Performance (QIP) accredited organisation against the QIC Health and Community Services Standards 7th Edition.