



Committee Secretariat
House of Representatives Standing Committee on Health, Aged Care and Sport
PO Box 6021
Parliament House
Canberra ACT 2600
Health.Reps@aph.gov.au

Dear Secretariat,

Inquiry into the health impacts of alcohol and other drugs in Australia

Terms of Reference

- a) Assess whether current services across the alcohol and other drugs sector is delivering equity for all Australians, value for money, and the best outcomes for individuals, their families, and society;
 - b) Examine the effectiveness of current programs and initiatives across all jurisdictions to improve prevention and reduction of alcohol and other drug-related health, social and economic harms, including in relation to identified priority populations and ensuring equity of access for all Australians to relevant treatment and prevention services
 - c) Examine how sectors beyond health, including for example education, employment, justice, social services and housing can contribute to prevention, early intervention, recovery and reduction of alcohol and other drug-related harms in Australia; and
 - d) Draw on domestic and international policy experiences and best practice, where appropriate.
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[Family Drug Support](#) (FDS) thanks the Standing Committee for the opportunity to submit to this Inquiry. We (FDS) will comment generally on all terms of reference, while specifically focussing on the needs of families who are affected by another person's Alcohol and Other Drug (AOD) use.

FDS provides up-to-date information and support services on all aspects of AOD use relative to the families and friends of people who use substances, both legal and illegal. FDS was established after my son Damien lost his life to a heroin overdose in 1997. A personal story runs through the fabric of FDS including the operation of a national 24-hour, 7 day a week telephone line for families and friends. We also currently have operational staff based in five separate Australian jurisdictions: NSW, QLD, SA, ACT & VIC, facilitating family and friends peer support groups; educational and experiential group programs; family-inclusive training for health and social service workers; and provide online one-on-one support sessions.

All these jurisdictional staff, with the exception of Victoria, are funded by their respective State or Territory Governments. Federal funding allows FDS to provide services in Victoria, as well as some limited services in other jurisdictions.

1. We recommend that all State and Territory Governments commit to funding dedicated AOD Family Support Services.

Harm reduction philosophy underpins the FDS model that translates into neither condemning or condoning AOD use. We acknowledge that while abstinence may be considered by some as the gold standard of risk mitigation, it is unrealistic to expect people to 'just say no' or immediately cease their use if the person has an AOD dependency. We are guided by the evidence of what works and doesn't work and believe that everyone deserves access to universal healthcare, regardless of their substance use preference. In other words, a non-judgmental, empathetic approach of meeting families and friends where they are situated.

Over the last 27 years, FDS has learnt that families and friends actively conceal and keep secret their AOD issues in fear for the person they care about – and themselves – being judged by the broader community. The World Health Organisation has labelled illegal drug dependence as the most stigmatised health condition globally, along with alcohol dependence as the fourth most stigmatised condition.¹ Further, research has confirmed that AOD-related shame and stigma is not specific to the people who do so, but has negative effects towards their immediate circle and networks.² Many families and friends commonly feel responsible and to blame for their family member's drug dependence, which presents barriers to their ability to seek help and engage in both formal and informal support systems.³

For this reason, FDS encourages the Committee to consider families of someone with a substance dependence to be a hidden cohort of people with unique needs that are not very well understood by the health system in general. The Victorian Mental Health Royal Commission revealed that family and

¹ Room, R., Rehm, J., Trotter, R. T., II, Paglia, A., & Üstün, T. B. (2001). "Cross-cultural views on stigma valuation parity and societal attitudes towards disability". In T. B. Üstün, S. Chatterji, J. E. Bickenbach, R. T. Trotter II, R.

² McCann, T.V. & Lubman, D. (2018). Stigma experience of families supporting an adult member with substance misuse, *International Journal of Mental Health Nursing*, 27(2), p. 465-921, DOI: [Stigma experience of families supporting an adult member with substance misuse - McCann - 2018 - International Journal of Mental Health Nursing - Wiley Online Library](#)

³ McCann, T.V & Lubman, D. (2018) Help seeking barriers and facilitators for affected family members of a relative with alcohol and other drug misuse, *Journal of substance abuse treatment*, (93), p 7-14. DOI: [Help-seeking barriers and facilitators for affected family members of a relative with alcohol and other drug misuse: A qualitative study — Monash University](#)

friends faced specific obstacles when choosing to remain connected to somebody with the comorbidity of mental illness and substance use issues, such as:

- “[Providing] *high degrees of emotional support*
- managing crises*
- stigma and isolation*
- supporting care planning*
- needing to maintain high vigilance to prevent self-harm.”*⁴

The Royal Commission’s Final Report recommended that co-design measures be implemented in AOD treatment agencies to enhance family-inclusive practice including eight specific family and friends hubs to address the specific needs of this typically invisible group.⁵ FDS interprets this evidence to suggest that the stigma and discrimination associated with AOD use is pervasive, has impacts beyond the individual, is often unconscious and systematic in some settings and presents a need for intentional efforts to counter its effects. In this sense, we recommend that families be provided with increased access to tailored, AOD-specialist services that are responsive to their needs, including evidence-informed support, training and education programs.

2. We recommend that families and friends who are identified as being affected by AOD issues have increased access to tailored, specialist services that are responsive to their needs, including evidence-informed support, training and education programs.

FDS was the first family focused AOD organisation in Australia, and an external evaluation of its flagship ‘Stepping Stones’ program showed statistically significant improvements in coping and resilience for people who participated.^{6 7 8} It is not the purpose of this submission to advocate for the expansion of this program, but to offer it as an example of an effective psycho-social intervention that may open up entry points in the service system, especially for family and friends who have already attempted to access help without receiving meaningful support.

Additionally, statistics from our national telephone line confirm that the majority of people taking on the primary or unpaid care role of supporting a person with AOD issues are, on average, 70% female identifying. We believe that this trend aligns with international research that suggests national economies are largely propped up by the unpaid work of mothers and daughters fulfilling gendered care duties within their family context.⁹ Regardless of the recognition or lack thereof of unpaid care work across society, FDS supports the argument made by UN Women that more investment should

⁴ State of Victoria (2022) ‘Recommendation 31 Supporting families, carers and supporters’ *Department of Health*, available online: <https://www.health.vic.gov.au/mental-health-reform/recommendation-31>

⁵ State of Victoria (2021) Royal Commission into Victoria’s Mental Health System Final Report, available online: <https://finalreport.rcvmhs.vic.gov.au/download-report/>

⁶ Gethin, A., Trimmingham, T., Chang, T. et al. (2016) ‘Coping with problematic drug use in the family: An evaluation of the Stepping Stones program,’ *Alcohol and Drug Review*, Vol35, available online: [Coping with problematic drug use in the family: An evaluation of the Stepping Stones program - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/27111111/)

⁷ Rushton, C., Kelly, P., Rafferty, D., et al. (2023) ‘The effectiveness of psychological interventions for family members impacted by another’s substance use: A systematic review and meta-analysis,’ *Alcohol and Drug Review*, Vol42, available online: [The effectiveness of psychosocial interventions for family members impacted by another's substance use: A systematic review and meta-analysis - PubMed \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/41111111/)

⁸ Family Drug Support (2022) ‘Stepping Stones Promo Video’, *YouTube*, available online: <https://www.youtube.com/watch?v=ryJjaa6LU0c>

⁹ UN Women (2021) ‘Beyond COVID-19: A feminist plan for sustainability and social justice’ *Un Women*, available online: <https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/Library/Publications/2021/Feminist-plan-for-sustainability-and-social-justice-en.pdf>

be made in caring for the carers and to better value their essential contribution. By funding additional supports, such as programs meeting the needs of families and friends of people with AOD-related issues, the Australian Government would also be making an investment in progressing gender equity.

3. We recommend that health, mental health and social support agencies are trained in AOD, family-inclusive practice to increase service engagement and help seeking among families and friends who are affected by another person's substance dependence.

Similarly, FDS offers training to front-line community workers and treatment services who have direct contact with families and friends effected by AOD issues. Called the 'Support the Family' workshop the aim is to increase the confidence and efficacy of community organisations to adequately respond to AOD-related needs of family and friends without unintentionally repeating the cycle of shame and stigma.¹⁰ The term 'family-inclusive practice' does not mean having the family and/or friend in the same room with the person for family counselling, but more a boarder appreciation from all service staff that acknowledges the unique contribution of families, friends and networks to bringing about greater success for the person by remaining connected and engaged.

Family and friends play a fundamental role in facilitating healthier environments that foster desirable behaviour change, whatever that support may look like for the person and their entire family unit.¹¹ Again, Support the Family is used as a case study to detail to the Committee how an educational package, if made available to mainstream service staff, could fill a service gap for families supporting someone with AOD issues who typically have not had their needs met by the current system as it stands. By doing so, families and friends have a better chance at developing coping strategies that operate as a protective factor for their effected family member, by rebuilding trust, workable communication and respectful boundaries within the family.

We are grateful to the Committee for their efforts in setting up this Inquiry and respect the complex challenges confronting this type of reform in respect to AOD related-issues and unpaid care work. We recognise that mainstream understandings and often skewed media dialogue can present barriers to change and obstruct policy reform at odds with the best interests of families and friends. We hope the Committee will carefully consider the evidence presented to the Inquiry and that the final report will assist to inspire change in the future.

FDS welcomes the opportunity to elaborate on this submission, and to provide a verbal presentation to Inquiry committee members.

Yours sincerely,

Cigdem Watson
Acting CEO
Family Drug Support
16 September 2024

¹⁰ Family Drug Support (2023) 'Support the Family – Improve the Outcome' *Family Drug Support*, available online: <https://www.fds.org.au/meetings-events/support-the-family>

¹¹ Orford, P. (1994) 'Empowering family and friends: a new approach to the secondary prevention of addiction,' *Alcohol and Drug Review*, Vol14, available online: [Empowering family and friends: a new approach to the secondary prevention of addiction - ORFORD - 1994 - Drug and Alcohol Review - Wiley Online Library](#)