

25 February 2007

The Secretary of the Committee
Inquiry into the support of illicit drug use on families
House of Representatives
P O Box 6021
Parliament House
Canberra ACT 2600

STANDING COMMITTEE

Submission No:9
AUTHORISED

21/3/07

RS

Dear Secretary,

I am a volunteer of an organisation Family Drug Support (FDS) involved with families across Australia needing support with relatives/friends drug and alcohol issues. Lately, the phone lines are busy with callers experiencing problems mainly with "ice" and "heroin" both injecting and using special smoking pipes. FDS deals with the reality of drug use, the shame and stigma and traumatic daily consequences on families and friends.

The plight of these families and friends with drug dependant problems is largely overlooked by politicians except when they want to make an issue about closing or opening something. The tough on drugs policy is not working with harm minimisation a more helpful option.

I also work with Hepatitis C Council of NSW and am aware of the increasing amount of assistance required around injecting drug use and prevention of disease spreading. As you may know Hepatitis C is a growing concern in our society and I was one person, who found out in 2001, that I also had this virus which has probably been active since the 1970's. I have since had two treatments which were very taxing on me and my family at the time with the hepatitis being no longer active.

Sydney does not need the Medically Supervised Injection Centre (MSIC) at Kings Cross closed as this is a much used and well run centre providing a necessary service to the community in the prevention of spread of virus/diseases. The needle support programmes are also required in the community for this reason and I am sure if it was available when I was a teenager growing up in the 70's drug scene I may not have needed the (expensive) treatment program. Needles were very hard to get unless you were a diabetic, often you had to travel miles and sometimes the only option was to share a needle. Luckily I am well away from that part of my life as a recovering alcoholic and addict giving back to society in what ever way I can by working in the drug and alcohol fields of recovery.

Closing down the Kings Cross injecting rooms would be a step backward with this service which also provides other health and treatment options to their clients and has saved many lives. It shows we have an innovative, supportive and courageous government.

The financial, social and personal cost to families who have a member(s) using illicit drugs, including the impact of drug induced psychosis or other mental disorders can be devastating upsetting the way in which they function in society. This can lead to further depression, anxieties, mental and physical medical problems which are ongoing for these families. That is, the repercussions of the drug user can be wide spread through affecting the whole community. It can take a long time in detoxification and rehabilitation programs for the drug user to change and lead a productive life again. As you may be aware there are not enough drug and alcohol programmes to accommodate the drug and alcohol users/abusers in our society.

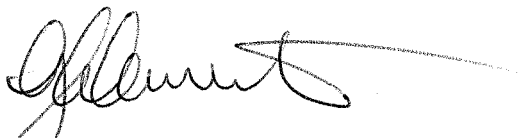
I have children who have had drug/alcohol problems and are daily faced with either their own issues or their friends. Unfortunately it is still a large problem with the youths on the Northern Beaches and Australia-wide. In my work I see the after effects of drug/alcohol use/abuse being both psychotic and mentally disordered with these people struggling to become clean and stay clean in a supportive environment.

Many do not wish to stop, preferring to learn to use occasionally only to find abstinence may be the only option they have. Awareness, information and more education with families is also needed along with support and programs of their own like those provided by FDS. We need more programs like FDS and, for example, those run by South Pacific Hospital for families. Al-anon and Nar-anon also provide support for families but what does the government provide?

Families provide the main strength, support and services to drug users and are essential in the recovery process. We, as a society, need to be supported by a strong public policy on drugs with more funding for organisations like FDS etc. Closing injecting rooms like MSIC or limiting needle syringe programs is not the answer in today's society and should never be a political knee jerk response or a media one.

I hope this letter will be considered in determining your own position on drug policy and the inquiry into illicit drug use on families. I would be willing to meet with you to discuss any issues at a further date.

Yours sincerely,



GLEND A CLEMENTSON

Program Outline:

Paving ways is a six-week structured program consisting of two-hour sessions per week.

Session 1 - Introduction to the program, stages of change model, and goals for the program

Session 2 - Fears and coping strategies

Session 3 - Responsibility, trust and letting go

Session 4 - Self esteem issues

Session 5 – Communication, identifying blocks to communication, and how to use effective communication

Session 6 – Revision of personal goals and course content and future directions

Key Outcomes:

- Participants are less isolated with the problems they are experiencing
- Improvement in participant's problem solving, communication and general functioning
- Participants gained more confidence, therefore they began to practice and implement the skills and strategies that are gained in the program
- Participants learned to take less responsibility for the family member who uses drugs
- Treatment outcomes show that there has been a healthy average improvement in participants' problem solving, communication, family roles, affective responsiveness, affective involvement, behaviour control, and general family functioning.

Attachment B

Parents Prepared Peer Education Program

Background

The Parents Prepared Program is one component of MDECC's community drug action strategy to address drug and alcohol use. This well evaluated program utilises peer education as a strategy to educate parents about the harms of both illicit and licit drug use whilst also acting as an early intervention addressing familial issues. It was developed in 1999 as a result of community consultation and since then over 200 parents have participated, sharing the information learnt with many other parents and families in the community.

Rationale

Adolescence is a time when it is normal for young people to experiment with a range of ideas and choices and for some this includes experimentation with alcohol, tobacco and possibly illicit drugs. Adolescence can also signal a significant change in relationship between young people and their parents. To be able to talk confidently with their children about drugs, it is imperative that parents have correct and up-to-date information. Without this, credibility is damaged and having an open and honest conversation about potential or current drug use is hampered.

The Parents Prepared Program not only provides education in regards to alcohol and drug use, but also provides skills based training to ensure that parents have the competence and confidence to communicate effectively about the issues. This means parents are in a better position to be able to prevent drug related harm amongst young people.

Target Population

The primary target group for this project are parents of young people either in their adolescence or younger, who may or may not have experimented with licit or illicit drugs.

Philosophy

The Parents Prepared Program is based on the principle of eliminating or reducing the harm associated with alcohol or other drug use through education and early intervention.

Program Aim

The primary aim of Parents Prepared is to provide parents with up to date alcohol and drug knowledge and the skills to address drug related harm in their families and local communities.

Program Outline

The program consists of two components:

1. Parents Prepared Program Training Session –

Comprehensive 14-hour information and skills based program conducted over either two Saturdays or four evenings. Participants are provided with up to date information about drugs, drug issues, normal adolescent development and some skills and strategies to improve communication, conflict resolution and address issues of responsibility in families.

2. Parents Prepared Network & Web-Link –

The Network enhances sustainability of the peer education component by ensuring that the Parents Prepared peer educators are kept motivated and updated with accurate information. In addition, an interactive email-based group is being developed whereby Parents Prepared peer educators can interact with each other and the MDECC Intervention Program Team in relation to alcohol and drug education and family and community issues.

Key Outcomes

As a result of completing the Parents Prepared Program parents:

- Gain improved knowledge of alcohol and drug effects, patterns of use and factors that may contribute to harmful drug use including issues around mental health
- Gain increased knowledge and understanding of normal adolescent development
- Are able to identify and practise effective methods of communication for use with their children and families
- Gain the ability to apply appropriate strategies to address issues around drug use with their children
- Act as peer educators by sharing information with friends and social networks
- Are able to identify and participate in community initiatives that aim to reduce the harms related to drug use.

In general, parents are more confident, competent and less fearful in addressing drug issues. Positive role modeling by parents and the provision of accurate harm prevention information contributes to attitudinal change by children, family members and peers in terms of alcohol and drug using behaviour.

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