

# The NSW Non Government Alcohol and Other Drugs Sector

## CONTINUUM OF CARE SERVICES PROVIDED BY THE SECTOR

- ▶ Needle and syringe programs



- ▶ Health promotion / harm reduction
- ▶ Brief interventions
- ▶ Case management



- ▶ Withdrawal management
- ▶ Psychosocial counselling
- ▶ Residential rehabilitation
- ▶ Structured day programs
- ▶ Methadone to abstinence or stabilisation
- ▶ Supported and transitional housing



- ▶ Extended and continuing care

## SECTOR RESPONSES - SPECIALIST PROGRAMS ARE AVAILABLE FOR:

- ▶ women, women with children, young people, men and families, CALD, LGBTI



- ▶ Aboriginal and/or Torres Strait Islander people (**65%** of organisations, including five Aboriginal Community Controlled specialist services)
- ▶ clients with mild to moderate mental health issues (**75%** of organisations, with **40%** capable of responding to severe and persistent mental health issues)
- ▶ clients with criminal justice system contact (**62%** of organisations)
- ▶ clients with gambling issues (over **50%** of organisations)

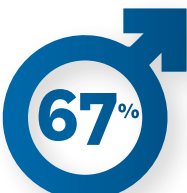


- ▶ clients with nicotine dependence (**87%** of organisations)

## NSW PEOPLE ACCESSING TREATMENT

**9,600**

episodes of care provided to the NSW public from the sector in 2012/13



**96%** concerned about their own drug use

**63%** are aged between 19 - 39 years

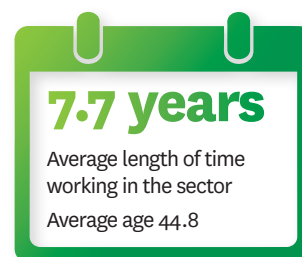
**80%** are non-Indigenous

A significant proportion of all treatment episodes are for alcohol use (**37%**), then amphetamines (including methamphetamine) (**22%**) and then cannabis (**18%**) as second and third highest principle drugs of concern. Alcohol also features among the top most identified "other drug of concern" along with nicotine, cannabis and amphetamines.

## A DIVERSE AND SKILLED WORKFORCE

**1,000**

people (approximately) work in the sector



- ▶ Specific alcohol and other drug qualification **57%**
- ▶ Hold a university qualification (any type) **48%**



## QUALITY SERVICES

The sector is engaged in formal quality improvement programs.



**75%**

of these having already attained formal accreditation.



## CLIENT OUTCOME MEASUREMENT DATA COLLECTION

**95%**

of organisations report the use of validated clinical screening and assessment tools used to assess clients and measure outcomes in the areas of drug and alcohol use, psychological health, general health and social functioning and blood borne virus exposure risk.



## FUNDING

Almost all organisations receive income from multiple sources. Of the specialist AOD organisations, the most common income source is NSW Health with **85%** receiving funds, followed by the Commonwealth Department of Health and client contributions.



## Reducing alcohol and drug related harms to individuals, families and communities for more than 40 years

NSW has a diverse, strong and effective non government alcohol and other drugs (AOD) sector and is a key partner in responding to the health and welfare needs of those affected by alcohol and drugs, particularly those experiencing marginalisation and complex social issues. Approximately 60 specialist non government AOD organisations operate in NSW, whose sole or primary focus is alcohol and other drugs prevention, and/or treatment. A similar number of organisations provide AOD service delivery as part of a broader health and/or social welfare service.

**Figure 3: NSW Non Government Alcohol and Other Drug Service Delivery Taxonomy**

Service level and intensity	Harm Reduction	Health Promotion and Harm Prevention	Treatment	Treatment +	Extended and Continuing Care
	LOW	MEDIUM	HIGH	HIGH +	MEDIUM
<b>Service type</b>	Needle and syringe program Brief intervention - information and education	Health promotion and prevention - information and education Health promotion and prevention - community development	Case management Psychosocial counselling Withdrawal management Rehabilitation day program Residential rehabilitation Opioid treatment program	As for treatment plus: Specialist programs (ie residential family, residential women with dependent children, Indigenous, residential pharmacotherapy stabilisation or reduction)	Case management Psychosocial counselling Supported living/transitional housing program
<b>Service setting</b>	Needle and syringe centre Community based health centre Health, welfare and homelessness service Youth service Aboriginal Medical Service Schools Community events	Specialist drug and alcohol service – out-client Community based health centre Health, welfare and homelessness service Youth service Aboriginal Medical Service Schools Community events Social media	Specialist drug and alcohol service – out-client and out-reach Specialist drug and alcohol service – residential detox Specialist drug and alcohol service – residential	As for treatment	Specialist drug and alcohol service – out-client and out-reach Supported living/transitional housing
<b>Workforce</b>	<ul style="list-style-type: none"> <li>- Health education officer</li> <li>- Community development officer</li> <li>- Welfare/youth worker</li> <li>- Drug and alcohol worker/counsellor</li> <li>- Aboriginal health worker</li> <li>- Peer worker</li> </ul>	<p>Drug and alcohol specialist knowledge and skills required.</p> <ul style="list-style-type: none"> <li>- Health education officer</li> <li>- Community development officer</li> <li>- Welfare/youth worker</li> <li>- Drug and alcohol worker/counsellor</li> <li>- Aboriginal health worker</li> </ul>	<p>Drug and alcohol specialist knowledge and skills required.</p> <ul style="list-style-type: none"> <li>- Drug and alcohol worker / counsellor</li> <li>- Aboriginal health worker</li> <li>- Mental health worker /counsellor</li> <li>- Psychologist</li> <li>- Social Worker</li> <li>- Nurse</li> <li>- General /medical practitioner</li> </ul>	As for treatment	<p>Drug and alcohol specialist knowledge and skills required.</p> <ul style="list-style-type: none"> <li>- Drug and alcohol worker/counsellor</li> <li>- Aboriginal health worker</li> <li>- Mental health worker /counsellor</li> <li>- Psychologist</li> <li>- Social Worker</li> </ul>
<b>Population &amp; drug use focus</b>	Individuals, families and communities Pre and contemplative, experimental and regular drug use Injecting drug use	As for harm reduction plus: Problematic drug use. At risk individuals and groups	Individuals and families. Problematic or dependent drug use. At risk individuals and groups	As for treatment plus: High complex health and social needs: <ul style="list-style-type: none"> <li>- Women and parents with children</li> <li>- Coexisting mental health issues</li> <li>- Cognitive impairment</li> <li>- Acute physical health issues</li> <li>- Criminal justice connection</li> <li>- Trauma histories</li> </ul>	Individuals and families Problematic or dependent drug use At risk individuals and groups