

ACT AOD Sector Project eBulletin: December 2008

The monthly ACT AOD Sector eBulletin is a concise summary of information, important developments, publications, events and other information relevant to AOD workers in the ACT. The eBulletin is an activity of the ACT AOD Sector Project, Youth Coalition of the ACT. To subscribe, submit an item or to provide feedback email ebulletin@aodsector.org.au.

News from the ACT AOD Sector Project

ACT AOD Sector Project

The ACT AOD Sector Project is a capacity building Project that began in July 2007, and is funded by ACT Health. The Youth Coalition of the ACT provides support to ACT AOD workers to conduct the Project. The Project aims to build the capacity and identity of the ACT AOD sector, foster intra and cross-sectoral relationships, and improve outcomes while maintaining respect for the diversity of services and for people who are affected by AOD.

For more information visit www.aodsector.org.au or contact Amanda Bode, ACT AOD Sector Project Officer, Youth Coalition of the ACT on info@aodsector.org.au or (02) 6247 3540.

ACT AOD Services Directory, Version 2

The ACT AOD Services Directory aims to support workers to make referrals to AOD services in the ACT, increase cross and intra-sectoral knowledge and foster collaborations. It also aims to better communicate the diverse range of services and programs in the ACT AOD Sector. The Directory is produced as a partnership between the ACT AOD Sector Project and the ACT AOD Workers' Group. Version 2 of the ACT AOD Services Directory contains over 34 program profiles, and includes information on services delivered to people experiencing comorbid AOD and mental health issue. The Directory is available electronically and in a downloadable pdf from www.aodsector.org.au

For more information contact Amanda Bode, ACT AOD Sector Project Officer, Youth Coalition of the ACT on info@aodsector.org.au or (02) 6247 3540.

See also:

Training and Professional Development section for the 'ACT Training and Professional Development Calendar'
Sector Activities and Events section for the 'Centacare Comorbidity Interagency Day'.

ACT AOD Sector Forum Update

This section reports on information shared by services, programs and workers who attend the ACT AOD Sector Forum. For further information about the following services visit www.aodsector.org.au

Alcohol and Drug Foundation ACT (ADFACT)

Service spokesperson: Kim Fleming

Phone: 6292 2733, Email: kim.f@adfact.org

Christmas Shutdown: ADFACT will remain open over the Christmas period, except for public holidays.

Karralika admissions will close 19 December 2008 and reopen 5 January 2009.

Some programs currently being offered by ADFACT include:

Karralika Program (Adult and Family):

- Provides up to 12 months of residential rehabilitative care for adults with alcohol and other drug dependencies and accompanying children, using the Therapeutic Community approach to treatment.
- The induction program which is the first 6 weeks within the Karralika program now operates on a separate site and is a stand alone program.

Family Liaison Worker:

Service spokesperson: Ian Pennell

In This Edition...

News from the ACT AOD Sector Project

Update on Project activities.

ACT AOD Sector Forum Update

Information from services that attended the AOD sector monthly forum.

Sector Activities and Events

Launches, key weeks, international days and program and service activities.

News from the Executive Directors' Group

Information from the EDs' group that is relevant to the AOD sector and workers.

Sector Development

Information on networks, resources, websites, factsheets and tools for workers.

Training and Professional Development

Training for the AOD and allied sectors, including upcoming seminars, conferences, bus tours, courses and other professional development opportunities.

Policy, Reports and Research

New research, reports, inquiry findings, and any key policy activities effecting the AOD sector.

Media

Media releases and news items relevant to the ACT AOD Sector.

Consumer Participation

Information items about consumer participation that are relevant to the AOD sector and workers.

Youth, Mental Health and Allied Sectors

Information from and about allied sectors that is relevant to the AOD sector and workers.

Employment Opportunities

Employment opportunities in the ACT AOD and allied sectors.

Grants and Funding Opportunities

Phone: 6292 2733, Email: ian.p@adfact.org

- The Family Liaison Worker within the Karralika Program provides parent support, as well as organising child visits for clients of Karralika. The Government agencies including Care and Protection.

Early Birds Program:

Service spokesperson: *Vanessa Dumbrell*

Phone: 6292 2733, Email: vanessa.d@adfact.org

- Provides pre and post treatment support for people on the waiting list of programs. Outreach, case management, and referrals are provided.

Therapeutic Community in the Alexander Maconochie Centre (currently being

- ADFACT will be establishing a therapeutic community in the Alexander Maconochie Centre in partnership with ACT Corrective Services and Corrections Health. The program aims to reduce relapse and recidivism post release. ADFACT has currently been providing support to custodial staff that will work in the therapeutic community.

Outreach to headspace ACT:

- ADFACT has been part of the headspace consortium of partners, and provides support one day a week within headspace ACT.

The Nexus Halfway House Program

Service spokesperson: *Alan Rodwa*

Phone: 6292 2733, Email: alan.r@adfact.org

- Provides a community based treatment program for people who have completed detoxification. The Program provides case management, relapse prevention, medical and health support, housing support, education and employment support.
- People accessing the service are required to be substance free but can receive pharmacotherapies (not including benzodiazepine reduction).
- The Men's Halfway House Program can also provide a maximum of 9 months of support into independent accommodation.

For more information on ADFACT programs visit www.adfact.org

Alcohol and Drug Program (ADP), ACT Health

Service spokesperson: *Kate Gardner*

Phone: 6205 8381, Email: kate.gardner@act.gov.au

Some programs currently being offered by the ADP include:

Aboriginal Liaison Officer:

Service spokesperson: *Gabrielle Sledge*

Phone: 6205 8387, Email: gabrielle.sledge@act.gov.au

- Provides support to Aboriginal and Torres Strait Islander people to access services. Gabrielle is new to the role, and is currently following up with clients.

Comorbidity Officer:

Service spokesperson: *Janet Smith*

Phone: 6244 2741, Email: janet.smith@act.gov.au

Christmas Shutdown: Close on 23 December 2008 and reopen on 2 January 2009

Upcoming grants, funding opportunities and tenders.

- The Comorbidity Officer within the ADP provides community liaison and development, clinical work for individuals, groups, education and training. Groups include Coming Off Pills Effectively (COPE) for people who use benzodiazepines.

Counselling and Treatment Service:

Phone: 6205 0955

- Provides counselling and care coordination including a range of therapeutic and educational groups to individuals, families and carers. The Stepping Stones Course to help families cope with AOD issues has recently commenced.

Diversion Service:

Service spokesperson: Kate Gardner

Phone: 6205 8381, Email: kate.gardner@act.gov.au

Christmas Shutdown: Diversion Services will close 24 December 2008 and reopen 2 January 2009.

The Diversion Service is an assessment, referral and support service for people referred by the Australian Federal Police and ACT Courts. Services provided include:

- Police Early Diversion (PED) Program: provides for those who have been apprehended by the Police for possession of a small amount of illicit drugs (or licit drugs used illicitly). Rather than charge the client, Police can divert them to the health sector.
- Court Alcohol and Drug Assessment Service (CADAS): a pre-sentencing treatment option for clients charged with AOD related offences.
- Treatment Referral Program: is a post sentencing option, for clients who have either committed a crime to get drugs, or money for drugs, or while under the influence of drugs. The magistrate or judge may, as part of the sentence imposed, instruct a client to undergo a treatment order rather than receive a custodial sentence or as an option to reduce their custodial time.
- Aboriginal Liaison Officer (ALO): provides support to Indigenous clients accessing ADP and Non Government Organisations, support to Ngambra Court and information to other service providers.

Opioid Treatment Service:

Service spokesperson: Amy Faden

Phone: 6244 2591, Email: amy.faden@act.gov.au

Christmas Shutdown: The dosing clinic will open for reduced hours on Christmas (25 December 2008), Boxing Day (26 December 2008) and New Years Day (1 January 2009). The clinic will be opened for weekend hours on other public holidays including the ACT Public Service Holiday (29 December 2008). Minimal medical services (one doctor only) will be available between 24 December 2008 and 2 January 2009.

- Provides prescriptions and dosing of pharmacotherapies, and coordinated care by working with other health and pharmacotherapy services.
- All ADP doctors and some General Practitioners are now requesting volume expansion of methadone takeaways. Some pharmacies may not provide volume expanding takeaways for clients, so people will need to change dosing points. GP's should be, or have already notified clients of this. Clients need to contact the ADP as the clinic will coordinate moves between pharmacies.

Withdrawal Unit:

Service spokesperson: Di Allende

Phone: 6207 9977, Email: diane.allende@act.gov.au

Christmas Shutdown: The Withdrawal Unit will close 24 December 2008 and reopen 5 January 2009.

- Provides up to 7 days of medicated residential or non-residential support for people experiencing withdrawal.

Canberra Alliance for Harm Minimisation and Advocacy (CAHMA) & The Connection Program

Service spokesperson: Nicole Wiggins

Phone: 6279 1670, Email: nicolew@aivl.org.au

Christmas Shutdown: CAHMA and The Connection will close 23 December 2008 and will reopen 5 January 2009.

CAHMA:

Some activities and programs currently being offered by CAHMA include:

- Coordinating consultations for consumer input into the new ACT Alcohol, Tobacco and Other Drugs Strategy.
- Providing education sessions and information packs regarding the Commonwealth Dental Program. Staff are also meeting with the ACT Dental Program to try and resolve issues relating to the lack of private dentists being involved in public programs.
- Hosting a weekly radio show on 2XX. Services are invited to advertise relevant events.
- Liaising with ACT Health to assess the viability of implementing a trial consumer participation project in the ACT as part of the Treatment Service Users Research Project, Australian Injecting and Illicit Drug Users League.
- Producing a magazine 3 times per year. Services are invited to advertise relevant events and programs.
- Facilitating the Methadone / Buprenorphine Consumers Pharmacotherapy Action and Advocacy Team who are progressing a survey of consumers.
- Providing input into National Strategies including the Needle and Syringe Program Framework and National Evaluation of Buprenorphine.
- Liaising with Amnesty International, Families and Friends for Drug Law Reform and Family Drug Support to work on a strategy that will assist with lobbying for Australians facing the death penalty internationally on drug related offences.

The Connection (now a program of CAHMA):

Some activities and programs currently being offered by CAHMA include:

- Hosting a Family BBQ and 'Art Attack' Program at Boomerang Centre, Allawah flats, on the third Thursday of each month.

Comorbidity Project, ACT AOD Sector Project, Youth Coalition of the ACT

Service spokesperson: Erin Barry

Phone: 6247 3540, Email: erin@youthcoalition.net

The aim of the Comorbidity Project is to assist and support non-government ACT AOD services to undertake service improvement processes to better identify and manage clients experiencing comorbid AOD and mental health issues. Some current activities of the Project include:

- Monthly Comorbidity Strategic Working Group meetings
- Providing input into the ACT Alcohol, Tobacco and Other Drugs Strategy and ACT Mental Health Services Plan.
- Progressing a mapping of existing comorbidity resources in the ACT
- Progressing a needs analysis of Improved Services Grant Recipients
- Monthly Improved Services Grant Recipient Network Meetings
- Fortnightly AOD Peaks teleconferences

DIRECTIONS ACT

Service spokesperson: Jo Smith

Phone: 6122 8000, Email: jos@directionsact.com

Some programs currently being offered by DIRECTIONS ACT include:

- Althea Wellness Centre
- Comorbidity Program
- Counselling Services
- Needle and Syringe Program
- Community Education
- Counselling Services
- Arcadia House Detox and Withdrawal Services
- Treatment Support Service

For more information on DIRECTIONS ACT visit www.directionsact.com

Womens Information, Resources and Education on Drugs and Dependency (WIREDD), Toora Women Inc

Service spokesperson: Paulina Hellec

Phone: 6248 8600, Email: wiredcoord@toora.org.au

Christmas Shutdown: WIREDD will close 24 December 2008 and reopen 5 January 2009.

Some programs or activities currently being offered by WIREDD include:

- Providing the Relapse Prevention Group, Family of Origin Group and Beautiful me Group
- Establishing a new Amphetamine Train the Trainer Project.
- Providing outreach to women in detox, Psychiatric Services Unit and Symonston Remand Centre.
- 2 new full time workers have commenced at WIREDD.

Sector Activities and Events

Draft Mental Health Services Plan Community Consultations

ACT Health

Two public forums are being held to give members of the public an opportunity to contribute their views on the type and range of Mental Health Services in the ACT. The forums will be facilitated by Biff Ward on behalf of ACT Health. Two forums will be held:

Belconnen

Date: Monday 8 December 2008

Time: 5.30 - 7pm

Venue: Belconnen Library, Community Room, First Floor, 12 Chandler Street, Belconnen

Tuggeranong

Date: Wednesday 10 December 2008

Time: 5.30 - 7pm

Venue: Tuggeranong Community Centre, Room One, 245 Cowlishaw Street, Tuggeranong

For more information phone 6207 1066

ACT Alcohol, Tobacco and Other Drugs Strategy 2009 - 2013

Alcohol and Other Drug Policy Unit, ACT Health

The current ACT Alcohol, Tobacco and Other Drugs Strategy is expiring and the strategy is currently being updated. Annual evaluation reports on progress made towards the implementation of the current strategy are available from www.health.act.gov.au/c/health?a=da&did=10133064&pid=1156381026

Launch of new Mental Health Carer Respite Services

The Mental Health Foundation, CarersACT and Communities@ Work Respite Options ACT

Senator Kate Lundy will open the new facility and Louise Maher from ABC local radio will be the MC on the day.

Date: Tuesday 9 December

Time: 10 - 11am

Venue: Mark's Place, 1 Loranah Street, Narrabundah

Food: Light Refreshments will be provided

RSVP: By Friday 5 December to Lindy Walker at Carers ACT on 6296 9900 or lindyw@carersact.asn.au

Community Forum And Picnic To Get Ideas On the Mental Health Foundations 25th Anniversary In 2009

Mental Health Foundation (MHF)

The Mental Health Foundation will host a picnic to celebrate its 25th Anniversary. The picnic in Glebe Park is open to everyone. All food and drink is supplied.

Date: Wednesday 10 December 2008

Time: 5.30 – 7.30pm

Venue: Glebe Park

RSVP: info@mhf.org.au or (02) 6282 6658.

For more information contact Rupert Gerritsen on (02) 6282 6658.

ACT Human Rights Commission Forum: 60th Anniversary of Universal Declaration of Human Rights

ACT Human Rights Commission

This community forum will be held to celebrate the 60th anniversary of the Universal Declaration on Human Rights. Helen Watchirs, ACT Human Rights and Discrimination Commissioner will chair the forum. Guest Speakers include:

- Simon Corbell MLA, ACT Attorney-General will present on the Human Rights Act amendments, which require public authorities to act consistently with human rights.
- Roslyn Dundas, Director of ACT Council of Social Service Inc, and
- Helen Dalley, Solicitor at the Welfare Rights and Legal Centre, will both provide community perspective on some of the potential impacts of the amendments.

Date: Wednesday 10 December 2008

Time: 12.30 - 2.30pm, with light lunch provided from 12

Venue: Reception Room, ACT Legislative Assembly

RSVP: By 3 December 2008 to 6205 2222 or human.rights@act.gov.au

2008 Early Intervention Awards

Support Link, Domestic Violence Crisis Service (DVCS) and Parentline

The Early Intervention Awards are designed to highlight the significance of early intervention services in the prevention of (including but not exclusive to) child and elder abuse, family violence, substance abuse, suicide and mental illness, crime, social isolation, preventable family breakdown and homelessness. The awards also aim to promote "best practice" and excellence in community service delivery in particular, the willingness to collaborate with other agencies and deliver flexible and responsive services to clients.

Date: Thursday 11 December 2008

Time: 9.30 - 11.30am

To register email awards@supportlink.com.au

For more information visit www.earlyinterventionawards.com.au

New Alcohol and Drug Foundation ACT Board Elected

Alcohol and Drug Foundation ACT (ADFACT)

A new ADFACT Board was elected at the Annual General Meeting held at ADFACT's Karralika Therapeutic Community Centre in Canberra on 19 November 2008. Based on nominations received, the composition of the ADFACT Board for the next 12 months is a blend of professionals from the national alcohol and other drugs environment, the Canberra corporate/ business community, local government legal services, and the private sector.

For more information visit www.adfact.org

New Alcohol and other Drug Council of Australia Board Elected

Alcohol and other Drug Council of Australia (ADCA)

The ADCA governance framework was implemented in conjunction with the election of a new Board, effective 21 November 2008. The new Board held its inaugural meeting on 22 November 2008.

Visit www.adca.org.au/content/view/195/111/ for more information on the composition of the new ADCA board.

News from the Executive Directors' Group

In December 2008 Dr Adam Winstock will be returning to the ACT to facilitate the following two workshops with staff across the AOD sector:

Workshop 1: Common Assessment Tool

The purpose of the Common Assessment Tool Workshop is:

1. for the Alcohol and Drug Program and DIRECTIONS ACT to provide feedback on the common assessment tool developed to trial on their withdrawal units (tool to be sent out closer to the workshop)
2. AOD services to consider the assessment tool, its strengths and weaknesses & opportunities to adopt it/ a common assessment tool/ or common assessment criteria across sector
3. consideration of implications of the Comorbidity Project (eg. potential roll-out of Psycheck)

Workers and Executive Directors of AOD services and members of the ACT Comorbidity Strategic Working Group will participate in the workshop.

Date: Friday 5 December

Time: 11.30 - 1.30pm

Venue: 1st Floor, 1 Moore St Civic

Workshop 2: Client Pathways

The purpose of the Client Pathways Workshop is:

1. for services to feedback outcomes from *Workshop 1: Common Assessment Tool*
2. to develop common client pathways across services

Workers and Executive Directors of AOD services and members of the ACT Comorbidity Strategic Working Group will participate in the workshop.

Date: The week commencing Monday 15 December

For further information about the workshops contact marty.owen@act.gov

Sector Development

Evaluation of the National Drug Strategy Aboriginal and Torres Strait Islander Peoples Complementary Action Plan 2003 - 2009

Department of Health and Ageing

The Complementary Action Plan was developed to help provide a nationally coordinated and integrated

approach to reduce drug-related harm among Aboriginal and Torres Strait Islander People. In order to undertake the evaluation, workshops are being conducted around Australia with interested stakeholders. The Department is inviting people who are working to address Indigenous alcohol and other drugs use to provide their views on the implementation of the Complementary Action Plan. For your information copies of the Complementary Action Plan can be downloaded from

www.nationaldrugstrategy.gov.au/internet/drugstrategy/publishing.nsf/Content/indigenous-drug-strategy-lp

and hard copies may be ordered through

www.nationaldrugstrategy.gov.au/internet/drugstrategy/publishing.nsf/Content/publications-order

Date: Wednesday 10 December 2008

Time: 10am - 3pm

Venue: Department of Health and Ageing, Level 2, Meeting Room 5, Scarborough House, Atlantic Street, Woden

RSVP: Essential to Elvira Konig at elvira.konig@health.gov.au or 6289 4436

2008/09 CONTACT Directory Now Available

Citizens Advice Bureau ACT

The CONTACT directory is the definitive guide to Canberra's community services, produced by the Citizens Advice Bureau ACT each year. The latest edition, 2008/09, which is out now with nearly 2,500 local groups, organisations, and services listed in the book. At only \$16.50 per book, it is an important resource for any community group to have on their shelf. To order your copy, visit www.citizensadvice.org.au

For more information email susank@citizensadvice.org.au

Queanbeyan Community Directory Now Available

Queanbeyan City Council

The Council has recently released its *Queanbeyan Contact Directory 2008-09*. This year, the directory contains over 470 entries, listing organisations that provide community-oriented services to the Queanbeyan community. The entries include all the available contact details for the organisation: street and postal addresses, phone and fax numbers, websites and email addresses. An outstanding feature of the directory is that each listing contains a brief description of the function each organisation performs in and around the Queanbeyan region.

The Queanbeyan Contact Directory is available by contacting the Queanbeyan City Council on (02) 6299 6000.

The Little Red Yellow Black Book

Aboriginal Studies Press, Australian Institute of Aboriginal and Torres Strait Islander Studies

The Little Red Yellow Black Book is the first wide-ranging introduction to Aboriginal and Torres Strait Islander history and culture. From the Dreaming to the present, the book includes stories by and about our first Australians from Tasmania to the Torres Strait, from the west to the east coast.

Visit

www.aiatsis.gov.au/aboriginal_studies_press/find_a_book/recent_releases/the_little_red_yellow_black_book

for more information about the book

The National Binge Drinking Campaign

Australian Government Department of Health and Ageing

On 10 March 2008, the Australian Government announced the \$53.5 million National Binge Drinking Strategy to address the high levels of binge drinking among young Australians. Binge drinking among young people is a community wide problem that demands a community wide response, including an emphasis on young people taking greater personal responsibility for their behaviour.

The campaign includes a \$20 million hard-hitting social marketing campaign that will run over two years to confront young people about the costs and consequences of binge drinking. A new website for the campaign has now gone live which includes media clips and other resources and can be visited at

www.drinkingnightmare.gov.au/internet/DrinkingNightmare/publishing.nsf

Training and Professional Development

ACT Training and Professional Development Calendar (November - December 2008)

ACT AOD Sector Project and the Drugs in the Family Project, Youth Coalition of the ACT

The bi-monthly Training and Professional Development Calendar is produced as a partnership between the ACT AOD Sector Project and the Youth Coalition of the ACT. The calendar compiles training and professional development opportunities available for workers from the AOD and allied sectors.

[Click here](#) to download the current Training and Professional Development Calendar or visit www.aodsector.org.au

For more information contact Erin Barry, Youth Coalition of the ACT on (02) 6247 3540 or info@aodsector.org.au

Aboriginal Culture, History & Heritage Training

ACT Council of Social Service (ACTCOSS)

Facilitated by Kerry Reed-Gilbert, this one-day workshop for both Aboriginal and non-Aboriginal workers gives participants a general introduction into the recent history of Aboriginal people in Australia. It aims to improve knowledge of Aboriginal culture and dispossession, and explores ways that organisations might improve their practice to respond to the needs of Aboriginal people.

Date: Friday 5 December 2008

Time: 9.30am - 4.30pm

Venue: ACT Aboriginal and Torres Strait Islander Cultural Centre, Lady Denman Drive, Yarramundi Reach

Cost: \$44 - \$231. Invoices for payment are sent following the training.

To register for this seminar, Please phone Julie on (02) 6202 7200 or email julie@actcoss.org.au for bookings or further information.

Cannabis: Focus on Young People for YSAAP workers

National Cannabis Prevention and Information Centre (NCPIC) and Youth Coalition of the ACT

Presented by John Howard & Annie Bleeker this interactive workshop aims to provide Youth Supported Accommodation and Assistance Program (YSAAP) workers with the latest information in relation to cannabis; specific interventions and supporting change in young people.

Date: Wednesday 10 December 2008

Time: 9am – 5pm

Venue: 46 Clianthus St, O'Connor (Youth Coalition Office)

Note: This training is specifically designed for Youth Support Accommodation and Assistance Program (YSAAP) workers.

RSVP: Essential by Wednesday 3 December. Only 20 spots available.

Please send your RSVP to Justin, Youth Coalition of the ACT on justin@youthcoalition.net or (02) 6247 3540

[Click here](#) to download a flyer and training outline.

Change Management Workshop

ACT Council of Social Service (ACTCOSS)

This workshop is a must for anyone involved in setting the strategic direction, influencing the culture or managing the day-to-day operations of a community organisation. This workshop will provide participants with tools that are essential in building a long-term sustainable future for community-based organisations. Topics include:

- Change Management Business Resilience
- Governance
- Strategic planning

- Risk Management

Date: Thursday 11 December 2008

Time: 9am - 5pm

Venue: Centre for Teaching and Learning, 51 Freemantle Drive, Stirling ACT 2611

Cost: Members \$165; Non-Members \$220; Corporate/Government \$275.

For more information contact Susan or Caterina on (02) 6202 7200.

Safeguarding Children Living With Trauma & Family Violence: An Evidence Based Approach To Assessment & Intervention: A Seven Staged Model

Institute for Child Protection Studies, Australian Catholic University

The Australian Catholic University will host a free two day workshop with international experts on assessment and therapeutic interventions for children and young people who have suffered developmental trauma. Day One will focus on assessment while Day Two will focus on intervention.

Date/s: Wednesday 10 and Thursday 11 December 2008

Time: 9.30am - 4pm

Venue: Room S 3, Australian Catholic University, Signadou Campus, Signadou Building, 223 Anthill Street, Watson. Parking usually available.

Cost: Free

Catering: \$25/day (\$50 if attending both days of the workshop) for morning tea, lunch and afternoon tea.

Payment for catering on the day at registration desk.

RSVP: To pam.floro@acu.edu.au by Monday 1 December 2008 indicating whether you will be attending only the first day or both days of the workshop and whether you have any special dietary requirements.

[Click here](#) for a workshop flyer and [here](#) for a program. For more information contact Kate Jones on (02) 6207 1082

Policy, Reports and Research

Note: Most of the reports and research items referenced below are available from the Alcohol and Other Drug Council of Australia's National Drugs Sector Information Service (NDSIS) www.adca.org.au/content/view/19/57/

What has the Canadian heroin trial discovered about the heroin- and hydromorphone-assisted therapy for people with chronic heroin dependence?

The North American Opiate Medication Initiative (NAOMI) is a randomised controlled trial, at St Paul's Hospital in Vancouver and Hôpital Saint-Luc du CHUM in Montreal, aimed at testing whether heroin assisted treatment offers benefits over and above optimised methadone therapy in the treatment of individuals with chronic dependence who continue to use heroin despite having tried conventional treatments in the past. The trial includes long-term follow-up of participants for a total of 24 months and this phase is still ongoing. The treatment phase was completed in June 2008; therefore the primary outcomes are now available. The research team will continue to gather and analyse data until full study closure in mid-2009.

The primary outcomes are as follows:

1. Heroin-assisted therapy proved to be a safe and highly effective treatment for people with chronic, treatment-refractory heroin dependence. Marked improvements were observed including decreased use of illicit 'street' heroin, decreased criminal activity, decreased money spent on drugs, and improved physical and psychological health.
2. The NAOMI trial attracted the most chronic and marginalised heroin users who were outside the treatment system and continued to use heroin despite numerous previous treatment attempts. Both heroin-assisted therapy and optimised methadone maintenance treatment achieved high retention rates and remarkable response rates in this difficult-to-treat group.
3. The treatment clinics appeared to have no negative impacts on the surrounding neighbourhoods.
4. Participants on hydromorphone did not distinguish this drug from heroin. Moreover, hydromorphone appeared to be equally effective as heroin although the study was not designed to test this conclusively. If this were

proven to be true, hydromorphone assisted therapy could offer legal, political and logistical advantages over heroin and could be made more widely available.

NAOMI Study Team 2008, *Reaching the hardest to reach –treating the hardest-to-treat: summary of the primary outcomes of the North American Opiate Medication Initiative (NAOMI)*, North American Opiate Medication Initiative, Canadian Institutes for Health Research, Vancouver and Montreal, www.naomistudy.ca/

Is the New South Wales Drug Court more cost-effective than prison in reducing the rate of re-offending?

An evaluation of the NSW Drug Court by the NSW Bureau of Crime Statistics and Research (BOCSAR) and the Centre for Health Economics Research and Evaluation (CHERE) covering the period 2003 – 2007 has confirmed that participants in the Drug Court were less likely to be reconvicted than offenders given conventional sanctions (mostly imprisonment). Compared with those in a comparison group, Drug Court participants were 17 % less likely to be reconvicted for any offence, 30 % less likely to be reconvicted for a violent offence and 38 % less likely to be reconvicted for a drug offence at any point during the follow-up period.

An economic analysis by CHERE showed that the Drug Court program appeared to be a cost-effective use of resources, leading to significant reduction of and delay in recidivism, and saving considerable resource use as a result of reduced incarceration. Also, there are likely to be significant health gains for the participants.

Weatherburn, Don; Jones, Craig; Snowball, Lucy; Hua, Jiuzhao 2008, *The NSW Drug Court: a re-evaluation of its effectiveness*, Crime and Justice Bulletin no. 121, NSW Bureau of Crime Statistics and Research, Sydney, <http://tinyurl.com/66aua9> and Centre for Health Economics Research and Evaluation 2008, *The costs of NSW Drug Court: final report*, Centre for Health Economics Research and Evaluation, University of Technology, Sydney, <http://tinyurl.com/6ferx9>

Does the introduction of smoke-free legislation affect the rate of smoking cessation?

We often think of the introduction of smoke-free clubs, restaurants, etc. as being about amenity and avoiding passive smoking, but does it have any impacts on smoking prevalence? Smoke-free legislation was introduced in Scotland in March 2006. Researchers investigated trends in smoking cessation before and after the introduction of the legislation. The researchers found that the odds of smokers quitting annually increased throughout the 7 year period prior to introduction of the smoke-free legislation to 2 years afterwards. During 2006, the pattern of quarterly quitting rates changed, with an increase in quit rates in the 3-month period prior to introduction of the legislation. Socio-economic status was not related to smoking cessation.

The researchers also assessed the perceived influence of the legislation on giving up smoking and perceptions of the legislation in smokers by means of a survey of 474 participants who had smoked in the year prior to the introduction of the legislation. Of these, 57 quit smoking between June 2005 and May 2007, with 44% of them saying that the smoke-free legislation had helped them to quit. More than 70% of smokers were positive about the legislation, especially those from more affluent compared with more deprived communities.

Fowkes, FJI, Stewart, MCW, Fowkes, FGR, Amos, A & Price, JF 2008, 'Scottish smoke-free legislation and trends in smoking cessation', *Addiction*, vol. 103, no. 11, pp. 1888-95.

Is smoking cessation treatment effective in community-based substance abuse rehabilitation programs?

A multisite clinical trial of smoking cessation treatment was performed at outpatient community-based substance abuse rehabilitation programs affiliated with the United States National Drug Abuse Treatment Clinical Trials Network. Cigarette smokers from five methadone maintenance programs and two drug and

alcohol dependence treatment programs were randomly assigned to receive either smoking cessation treatment as an adjunct to substance abuse treatment as usual, or substance abuse treatment as usual. Smoking cessation treatment consisted of 1 week of group counselling before the target quit date and 8 weeks of group counselling plus transdermal nicotine patch treatment after the target quit date.

Smoking abstinence rates in the group receiving smoking cessation treatment were significantly better than those in treatment as usual only. In addition, smoking cessation treatment was associated with significantly greater reductions as compared with treatment as usual in cigarettes smoked per day, exhaled carbon monoxide levels, cigarette craving, and nicotine withdrawal. Involvement in smoking cessation treatment did not differ from treatment as usual with regard to rates of retention in substance abuse treatment, abstinence from primary substance of abuse, and craving for primary substance of abuse.

The researchers concluded that smoking cessation treatment resulted in significant reductions in daily smoking and modest smoking abstinence rates without having an adverse impact on substance abuse rehabilitation when given concurrently with outpatient substance abuse treatment. They recommended that substance abuse treatment programs implement smoking cessation treatment for established patients.

Reid, MS, Fallon, B, Sonne, S, Flammino, F, Nunes, EV, Jiang, H, Kourniotis, E, Lima, J, Brady, R, Burgess, C, Arfken, C, Pihlgren, E, Giordano, L, Starosta, A, Robinson, J & Rotrosen, J 2008, 'Smoking cessation treatment in community-based substance abuse rehabilitation programs', *Journal of Substance Abuse Treatment*, vol. 35, no. 1, pp. 68-77.

Is client/staff conflict in treatment settings reduced through client involvement strategies?

A recent study in the United Kingdom examined client/staff conflict and user involvement in drug misuse treatment decision-making. The researchers found that drug users did not expect, desire or prepare for conflict at treatment entry, and reported few actual conflicts within the treatment setting. Where conflict did occur, it resulted in a number of possible outcomes, including the premature termination of treatment, staff deciding on the appropriate outcome, the client appealing to the governance structure of the agency, brokered compromise, and staff skilfully eliciting client consent for staff decisions.

The researchers concluded that although the implementation of user involvement in drug treatment decision-making has the potential to trigger high levels of staff-client conflict, latent conflict is more common than overt conflict and not all conflict is negative. Drug users generally want to be cooperative at treatment entry and often adopt non-confrontational forms of covert resistance to decisions about which they disagree. Staff sometimes deploy user involvement as a strategy for managing conflict and soliciting client compliance to treatment protocols. The report gives suggestions for minimising and avoiding harmful conflict in treatment settings.

Fischer, J, Neale, J, Bloor, M & Jenkins, N 2008, 'Conflict and user involvement in drug misuse treatment decision-making: a qualitative study', *Subst Abuse Treat Prev Policy*, vol. 3, no. 1, p. 21.

What types of interventions work best in preventing young people from smoking?

An evaluation of the recent behavioural interventions in the prevention of cigarette use among children and youth compares the effectiveness of different school-based, community-based and multisectorial intervention strategies. Thirty-five randomised controlled trials published in English or German between August 2001 and August 2006 targeting youths up to 18 years of age were assessed. The majority of studies reported some positive long-term effects for behavioural smoking prevention programs. There was evidence that community-based and multisectorial interventions were effective in reducing smoking rates. In contrast, the evidence for school-based programs alone was inconclusive. Regardless of the type of intervention, the reductions observed in smoking rates were only modest.

Muller-Riemenschneider, F, Bockelbrink, A, Reinhold, T, Rasch, A, Greiner, W & Willich, SN 2008, 'Long-term effectiveness of behavioural interventions to prevent smoking among children and youth', *Tobacco Control*, vol. 17, no. 5, pp. 301-2.

How do drug policy makers access research evidence?

Dr Alison Ritter is the Director of the National Drug Modelling Project (DPMP) based at The University of Sydney. She examined the sources of research evidence that Australian government drug policy makers accessed when faced with their most recent decision-making opportunity. She interviewed 31 drug policy makers across health and police government portfolios, asking them to report on the sources of research evidence used in their most recent decision-making. Nine sources were reported, the most frequent of which were seeking advice from an expert and consulting technical reports. Accessing the internet, using statistical data and consulting policy makers in other jurisdictions were used in about half the cases. The least frequently used sources were academic literature, relying on internal expertise, policy documents and employing a consultant.

The study concluded that a simple, single-message, summative and accessible type of information source most suited to policy makers, in contrast to the types of information produced and valued by researchers which are largely academic publications that are nuanced and complex. Researchers need to consider the sources that policy makers use if they wish their research to be utilised as one part of policy making.

Ritter, A 2008, 'How do drug policy makers access research evidence', *Int J Drug Policy*, in press citation, available online 15 January 2008.

What treatments are effective for cannabis use disorder?

A recently published National Cannabis Prevention and Information Centre (NCPIC) Research Brief , 'Evidence-based interventions for cannabis use disorder', focuses on treatment options and the need for randomly controlled trials on the effectiveness of treatments such as pharmacological interventions and those designed for comorbid cannabis users. Cognitive behavioural therapy and motivational enhancement therapy, amongst others, have been found to be most effective in reducing cannabis use, dependence and related problems but more exploration of the effectiveness of other forms of treatments and models of delivery is recommended. This publication can be found at <http://ncpic.org.au/ncpic/publications/research-briefs/>

What have we learned from half a century of policies prohibiting the use of cannabis?

Professor Robin Room of the University of Melbourne and Turning Point Alcohol and Drug Centre and his colleagues have produced a book which aims to contribute to informed policymaking in relation to cannabis use. They cover areas including:

- what is known about the existence and extent of various potential harms from cannabis use;
- the present situation and trends, after half a century of a full global cannabis prohibition regime;
- ways in which the prohibition regime can be ameliorated, to reduce adverse secondary effects;
- evidence of the effects of these different cannabis policy reform initiatives, on levels and patterns of use, on problems from use, and in reducing the adverse effects of full prohibition;
- alternatives under international law for a country or a group of countries wishing to move away from the full prohibition of the present international regime; and
- conclusions and recommendations for cannabis control policy from their analysis.

They conclude that the principal aim of a cannabis control system should be to minimise any harms from cannabis use, explaining that 'In our view this means grudgingly allowing use and attempting to channel such use into less harmful patterns (e.g. by delaying onset of use until early adulthood, encouraging all users to avoid substantial daily use, driving a car after using, and smoking cannabis mixed with tobacco)'.

Room, R, Fischer, B, Hall, W, Lenton, S & Reuter, P 2008, *Cannabis policy: moving beyond stalemate*, The Global Cannabis Commission Report, The Beckley Foundation, Oxford, England,
www.beckleyfoundation.org/policy/cannabis_commission.html

Does increasing the tax on alcoholic beverages reduce deaths from alcohol-related disease?

An evaluation of the effects of tax increases on alcoholic beverages in Alaska on alcohol-related disease mortality has identified significant reductions in the numbers and rates of deaths caused by alcohol-related disease. A 29% reduction in the mortality rate % was identified beginning immediately after an alcohol tax increase in 1983, and a reduction of 11% after a tax increase in 2002. While it is too early to assess the long-term impacts of the 2002 increases, the dramatic mortality decline caused by the 1983 tax increase did not dissipate over time.

The researchers' concluded that 'Increases in alcohol excise tax rates were associated with immediate and sustained reductions in alcohol-related disease mortality in Alaska. Reductions in mortality occurred after 2 tax increases almost 20 years apart. Taxing alcoholic beverages is an effective public health strategy for reducing the burden of alcohol-related disease'.

Wagenaar, Alexander C; Maldonado-Molina, Mildred M; Wagenaar, Bradley H 2008, 'Effects of alcohol tax increases on alcohol-related disease mortality in Alaska: time-series analyses from 1976 to 2004', *American Journal of Public Health*, www.ajph.org/cgi/content/abstract/AJPH.2007.131326v1

Preventing Crime and Promoting Rights for Indigenous Young People with Cognitive Disabilities and Mental Health Issues

Aboriginal and Torres Strait Islander Social Justice Commissioner, Human Rights Commission

This report calls for the 'skilling up' of existing services that work with Indigenous young people with cognitive or mental health issues, in an effort to halt their slide into the juvenile justice system.

Releasing the report, *Preventing crime and promoting rights for Indigenous young people with cognitive disabilities and mental health issues*, Tom Calma, Aboriginal and Torres Strait Islander Social Justice Commissioner and Race Discrimination Commissioner outlined the disturbing fact that Indigenous young people in juvenile justice were at least four times more likely to have an intellectual disability than the general population. Rather than reinventing the wheel, Mr Calma said the report profiled successful holistic early intervention programs that were already making a difference in young people's lives.

The Commissioner said that promising practices such as Tirkandi Inaburra Early Intervention Program in South Western NSW should be replicated around the country.

The report was funded by the Indigenous Law and Justice Branch of the federal Attorney-General's Department. It can be sourced online at www.humanrights.gov.au/social_justice/publications/preventing_crime/

Media

National Binge Drinking Strategy

Minister for Health and Ageing - Hon Nicola Roxon MP and Parliamentary Secretary to the Minister for Health and Ageing - Senator Hon Jan McLucas

17 November 2008

Nineteen community projects across Australia will receive a total of \$3.6 million in the first round of grants for grassroots, community work targeted at combating the impact of excessive alcohol consumption on individuals, their families and the wider community. It is important to empower local communities to deliver local solutions to local problems. They know best the specific circumstances and details of what goes on in their own regions, towns and cities.

They have a solid understanding of what activities will and won't work. They also have the commitment and

energy to succeed. The grants will enable community groups and organisations to combine in strong, effective partnerships to combat binge-drinking alongside community members and organisations such as police, health and youth workers, cultural groups and local government authorities. The Rudd Government is determined to fight binge-drinking. These grants will enable the battle to be taken directly into local communities, by local communities for local communities.

The National Binge Drinking Strategy includes a range of measures to help tackle binge drinking among young Australians, including:

- \$19.1 million to intervene earlier to assist young people and ensure that they assume personal responsibility for their binge drinking;
- \$20 million to fund advertising that confronts young people with the costs and consequences of binge drinking;
- Closing the dangerous tax break for alcopops, used to hook young girls on binge-drinking.

Binge drinking among young people is a community-wide problem that demands a community-wide response. The Rudd Government is not prepared to stand by as the epidemic of youth binge-drinking spirals out of control, and these community grants are a solid step towards tackling alcohol abuse at the grassroots level. To view the media release and for a list of grant recipients visit

www.health.gov.au/internet/ministers/publishing.nsf/Content/mr-yr08-nr-nr156.htm

Building a Better City A Focus In New Cabinet

ACT Government

7 November 2008

Chief Minister Jon Stanhope has taken responsibility for the Transport and Territory and Municipal Services portfolios, in a ministerial reshuffle that puts municipal services to the community - including recycling, roads, public transport and public amenity - at the forefront of Labor's third-term agenda.

"Labor went to last month's election pledging to build a better city and a stronger community, and at the heart of both is the Government's determination to make Canberra the most liveable of cities, maintained by responsive and efficient government services," Mr Stanhope said...

The full list of portfolio responsibilities is as follows:

Mr Jon Stanhope MLA

Chief Minister

Minister for Transport

Minister for Territory and Municipal Services

Minister for Business and Economic Development

Minister for Indigenous Affairs

Minister for the Arts and Heritage

Ms Katy Gallagher MLA

Deputy Chief Minister

Treasurer

Minister for Health

Minister for Community Services

Minister for Women

Mr Simon Corbell MLA

Attorney General

Minister for the Environment, Climate Change and Water

Minister for Energy

Minister for Police and Emergency Services

Mr John Hargreaves MLA

Minister for Disability and Housing

Minister for Ageing
Minister for Multicultural Affairs
Minister for Industrial Relations
Minister for Corrections

Mr Andrew Barr

Minister for Education and Training
Minister for Children and Young People
Minister for Planning
Minister for Tourism, Sport and Recreation

To view the full media release visit www.chiefminister.act.gov.au/media.php?v=7518

Keeping People Well and Taking Pressure Off Our Hospitals

Prime Minister and Minister for Health, Australian Government

30 November 2008

The Rudd Government will invest \$872 million over six years in preventative health, to help keep people well and take pressure off hospitals. This is the single largest investment in preventative health ever made by an Australian Government and supports an historic new emphasis on early intervention and tackling disease sooner.

Preventable chronic diseases like cardiovascular disease, type 2 diabetes and cancer are major drivers of the growing burden of disease. With around 670,000 preventable hospital admissions every year, tackling chronic disease will help take pressure off our hospitals too. Importantly, a proportion of the funding will be reserved for reward payments, which will go to States and Territories which meet agreed targets.

Short-term targets include increasing the proportion of their population who meet guidelines for:

- Healthy weight
- Physical activity and nutrition
- Reduced smoking rates.

Long-term targets include:

- Reducing the hazardous consumption of alcohol
- Increasing the proportion of children and adults at a healthy body weight by 3 percentage points within 10 years
- Reducing the daily smoking rate from 16.6% to 10% within ten years.

The funding will deliver preventative health programs and drive reform, including:

- Healthy Children initiatives, to provide preventative health programs targeted at children in schools, pre-schools and child care centres – including healthy eating and physical activity programs
- Healthy Workers initiatives, to provide programs which reach into workplaces, including smoking cessation programs; information to workers about health risks caused by excessive alcohol consumption; and support for employers to provide programs which improve the healthy weight of their workforce
- The extension of the Australian Better Health Initiative 'Measure Up' campaign to promote healthy weight, and expanding the National Nutrition and Physical Activity Survey
- Establishing a National Preventative Health Agency.

This package will help keep people healthy, tackle the growing burden of chronic disease, take pressure off public hospitals, and help equip the health system to meet the challenges of the future.

Consumer Participation

Mental Health Community Coalition ACT: Consumer & Carer Caucus

Mental Health Community Coalition ACT (MHCC ACT)

The Consumer and Carer Caucus (the Caucus) is a unique group that sits within the structure of MHCC ACT. The Caucus works with the Board to ensure that the work of the organisation is informed by, and supportive of, the interests and views of Mental Health consumers and carers. The Caucus is made up of consumer and carer representatives, volunteers and people who work in the capacity as paid consultants for government and community services.

Two consumer and two carer members are elected from the Caucus to sit on the MHCC's Board. This ensures that the views of consumer and carer caucus members are heard in the decisions made about the MHCC ACT and material produced by the organisation.

For more information contact the Mental Health Community Coalition on 6249 7756

Youth, Mental Health and Allied Sectors

Annual Yogie Awards Presented by Andrew Barr MLA

Youth Coalition of the ACT

The annual Yogie Awards recognise, celebrate, promote and reward outstanding practice in working with young people in the ACT and surrounding area. The Yogie Awards Ceremony will serve as the Youth Coalition's end of year function and we look forward to welcoming our members, stakeholders, funding bodies and sponsors to celebrate the achievements of young people, the sector and the Youth Coalition in 2008. This year the awards will be presented by Minister for Children and Young People Andrew Barr MLA.

Date: Friday 12 December 2008

Time: 10am-11am (9.30am arrival)

Venue: 46 Clianthus Street, O'Connor (Youth Coalition office)

RSVP: For catering purposes, please RSVP by Wednesday 10 December to the Youth Coalition on (02) 6247 3540 or email info@youthcoalition.net

[Click here](#) for 2008 Yogie Awards Ceremony flyer.

Mental Health Community Coalition of the ACT - Annual General Meeting

Mental Health Community Coalition of the ACT

The Mental Health Community Coalition is holding its Annual General Meeting. All members are welcome to attend the AGM, light refreshments will be served and guest speakers will be announced shortly.

Date: 4 December 2008

Time: 2pm - 5pm

Venue: Room 6, Griffin Centre, 20 Genge Street, Canberra City

RSVP: To the Mental Health Community Coalition on 6249 7756 or admin@mhccact.org.au

Youth Coalition Budget Consultations

Youth Coalition of the ACT

Each year, the Youth Coalition of the ACT makes a submission to the ACT Government Budget outlining what they believe are the key issues facing young people and the youth sector. This year, they would like members and stakeholders to identify what the issues are and suggest what should be done about them. If you would like to contribute, please fill in the attached survey and email it to maiya@youthcoalition.net. Feedback will be collated for inclusion in the submission.

[Click here](#) to download the survey.

If you have any questions or if you would like more information, please contact Maiya Azize, Policy Officer at

the Youth Coalition on (02) 6247 3540 or at maiv@youthcoalition.net

Employment Opportunities

Case Workers: Alcohol and Drug Foundation ACT

Alcohol and Drug Foundation ACT (ADFACT)

Case workers will be involved in the day to day operation of the Karralika Therapeutic Community. This includes managing a client case load, the delivery of the education and training sessions and other program activities. There are current and expected vacancies for full time and part time positions with a three monthly probationary period. Some shift work is required for Karralika staff.

Salary will be based on the ADFACT Collective Agreement in the range of equivalent to a SACS level 3 - 4 depending on the position and qualifications. Salary packaging including PBI Fringe Benefits Free threshold is available. To fulfil the responsibilities the successful applicants will be required to work within the guidelines of ADFACT.

Applications close Friday 12 December 2008.

To download the selection criteria [click here.](#)

For more information contact Karralika Therapeutic Community on 6292 2733 or email kim.f@adfact.org

Health Worker: Alcohol and Drug Foundation ACT

Alcohol and Drug Foundation ACT (ADFACT)

The Health Worker would be responsible for the day to day medical needs of the clients of the Karralika Therapeutic Community, advocating with various agencies and maintaining client records. In addition, the position will involve organising an facilitating training for the clients on important health issues. The position will be full time with a three monthly probationary period.

Salary packaging including PBI Fringe Benefits Free threshold is available. To fulfil the responsibilities the successful applicants will be required to work within the guidelines of ADFACT.

Applications close Friday 12 December 2008.

To download the selection criteria [click here.](#)

For more information contact Karralika Therapeutic Community on 6292 2733 or email kim.f@adfact.org

Program Coordinator: Part Time: Arcadia House

DIRECTIONS ACT

This proactive and challenging position will facilitate and support the therapeutic program of Arcadia House through conducting groups and coordinating external providers of groups and services to the clients of Arcadia House Withdrawal and Detoxification Services.

All services operate within a framework of harm minimisation and aim to minimise drug related harm and to promote self respect and dignity to all.

Salary Range: \$48,500 - pro rata plus salary packaging up to \$16,000

Hours of Work: Tuesday - Thursday, 8.30am - 5pm (24 hours per week)

Applications close Monday 15 December 2008.

Please note that Interviews will be held later that week.

To download the position description and selection criteria [click here.](#)

Party Safe Coordinator

DIRECTIONS ACT

This position will provide outreach and health promotion for the Party Safe Project under the National Binge Drinking Initiative for young people aged 15 to 26 years of age. This position is for the tenure of the 20 month funding and will be concluded at the end of the funding period once the final report has been finalised. All services operate within a framework of harm minimisation and aim to minimise drug related harm and to promote self respect and dignity to all.

Salary Range: \$48,500 - full time plus salary packaging up to \$16,000

Applications close Monday 15 December 2008.

Please note that Interviews will be held later that week.

To download the position description and selection criteria [click here](#).

Deputy Director: ACT Council of Social Service

ACT Council of Social Service (ACTCOSS)

The Deputy Director will be expected to: assist the Director with organisational and human resource management; have a sound understanding of the community services sector; and provide strategic direction for the organisation's sector development and policy activities.

ACTCOSS is a party to the community sector Multiple Business Agreement and offers above-award pay and conditions. All enquires and applications for this position will be treated confidentially.

The closing date for applications is 5pm Monday 15 December.

[Click here](#) to download the position description or visit www.actcoss.org.au

Grants and Funding Opportunities

ACT Women's Grants 2008-09

ACT Government

The 2008-09 round of the ACT Women's Grants Program is now open. Community organisations and groups are invited to apply for funding under the following two categories:

- Special Projects: Up to \$15,000 per project for activities that boost one or more of the objectives of the ACT Women's Plan. These are: representation and recognition; good health and wellbeing; responsive housing; safe, inclusive communities; economic security and opportunities; and flexible education and training.
- Capacity Building: Up to \$3,000 per project to support activities that strengthen the capacity of community organisations and their contribution to women in the ACT community.

Visit www.women.act.gov.au/actwomensgrantspackage.html for more information.

Applications close at 5pm Monday 8 December 2008.

Conference Attendance Grants

Alcohol and Education Rehabilitation Foundation (AER)

Conference Attendance Grants are available for organisations that pursue best-practice goals by developing the knowledge and expertise of staff that work in the alcohol and other drug sector. The grants are capped at \$5000 per conference, with a maximum of 2 persons per organisation receiving assistance.

To apply for this grant visit www.aerf.com.au/community/about.aspx to download the application form.

Linking Research to Real Life

National Health and Medical Research Council (NHMRC)

Organisations and researchers now have access to over \$100m for research to improve health programs. The

new NHMRC Partnerships scheme aims to build direct relationships between health providers and researchers, to strengthen the evidence base that decision makers work from. The scheme is ongoing, with the initial funding of over \$100m available in the first two years. Health providers and researchers will be able to form partnerships to apply for a grant from the NHMRC for any research project that has the potential to improve the health of Australians. Partner organisations are expected to provide funding or in kind support to the value of the NHMRC grant, however a group of partners can get together to make this easier for smaller organisations.

The NHMRC is Australia's peak body for supporting health and medical research, developing health advice and health ethics. Grant applications will be subject to the NHMRC's rigorous peer evaluation process to ensure funded research produces applied science of the highest quality.

Interested organisations and researchers can find more information on the scheme at www.nhmrc.gov.au

Applications close on Friday December 19 2008.