



Youth Worker Practice Network Members Session “Harm Minimisation”

Guest Presenters:

Clare Purcell & Sarah Walker (*Alcohol and Drug Service, ACT Health*)

What is Harm minimisation?

Harm minimisation aims to address alcohol and other drug issues by reducing the harmful effects of alcohol and other drugs on individuals and society. Harm minimisation considers the health, social and economic consequences of AOD use on both the individual and the community as a whole.

The harm minimisation approach does not condone or encourage drug use, but rather it seeks to reduce the risk by working with people to assist them in achieving their stated goals. As drug use tends to be chronically relapsing, harm minimisation aims to extend the periods of abstinence and reduce harm during relapse. Harm minimisation has been a key policy of Australian state and federal governments since the 1985 launch of the National Campaign against Drug Abuse and the subsequent National Drug Strategy.

Harm minimisation comprises three major strategies:

Supply Reduction

Controlling the amount of the drug available, mainly through legislation and regulation.

Demand Reduction

Encouraging people not to use, to delay use, or to use less of a drug through information and education strategies, treatment programs and regulatory controls.

Harm Reduction

Helping those who continue to use drugs to do so in ways that are less harmful.

How does Harm Minimisation work?

Harm minimisation programs can:

- Educate people of the harms they are exposing themselves to, and how they can reduce risk
- Provide information on health and safety and provide support and referrals as required.
- Educate people in relation to low risk levels of drinking in accordance with the NHMRC guidelines, the importance of not mixing substances, and the importance of never using any substance alone.

- Provide clean needles, or safe injecting spaces (safe injecting rooms are not yet available in Canberra), while opening an opportunity to connect and engage with the person
- Save lives, while also making the community a healthier, safer place for everyone

Example of a Harm Minimisation program:

The Sydney Medically Supervised Injecting Centre opened in Kings Cross, Sydney, in 2001, on a trial basis, in response to a number of deaths from opiate overdose. In 2010, after a number of evaluations, the New South Wales (NSW) government introduced legislation to lift the trial status of the Sydney MSIC to allow it to become a permanent health service.

Since opening in 2001, there have been over one million injections and 6 000+ overdoses, with no deaths occurring. Amount of discarded syringes in the area is also down by 50% since the opening of a safe injecting centre. Source: <http://www.smh.com.au/comment/why-australia-needs-more-supervised-injecting-centres-20170210-gua5ch.html>

Q & A Session:

Clare led a Q&A session with the youth workers who attended the session. Key messages that came from this discussion include:

- A major key to the success of Harm Minimisation is a worker's ability to initiate contact with a person with drug and alcohol problems, and maintain that supportive connection. Clare indicated that a person's goals can change, sometimes on a daily basis. Therefore, the youth worker will need to be adaptable and able to meet the young person where they are at.
- A person does not have to be dependent on drugs to suffer harm.
- Alcohol is the most dangerous drug/substance to go through withdrawals.
- If conversing with a young person about their drug and/or alcohol use, it can be helpful to ask "what effect are they looking for" rather than "why are they using"?
- The key message regarding harm minimisation is in acknowledging that some people will use regardless of laws, so the harm minimisation approach works to make their use safer and reduce the risk of disease.

Key harm minimisation messages to share with young people:

- Never use drugs alone, even if you think they are safe.
- Don't be afraid to call an ambulance if you are worried about yourself or a friend.
- If you are going to use drugs, give your friends permission to call an ambulance if they are ever worried about you.
- Synthetic drugs are not a safe option - you still don't know what is in them.
- If you want to change your habits, talk to someone about it. Free help is available, and you aren't going to get in trouble or get told you have to quit cold turkey.

Information about the Youth Drug and Alcohol Program (YDAP), Act Health

The Youth Drug and Alcohol Program is a tertiary service for young people with complex alcohol and other drug issues. This includes substance dependence, intravenous drug use, poly-drug use or the co-occurrence of the substance use with one or more of the following:

- Mental Health issues
- Care and Protection involvement and/or history of childhood abuse/neglect
- Youth Justice involvement
- Family of origin disruptions

- Homelessness
- Disengagement with education/employment or meaningful activities
- Chronic organic health issues

The Youth Drug and Alcohol Program is predominantly a counselling service. The counselling service offers support to young people ranging from short-term counselling focused on specific problems or immediate crises through to long-term, in-depth psychotherapy. The longer term work aims to address significant psychosocial issues, struggles of personal meaning, self-esteem, and the impact of past events, including trauma, that are typically associated with the chronic relapsing substance misuse. Through the process of psychotherapy clients are assisted to gain insight, become aware of choices they didn't initially recognise, find more effective ways of relating to others and develop personal resilience. The long term approach incorporates a through care model and works with other services as required.

Referrals:

Youth workers are able to refer a young person by using the attached form, or contacting YDAP using the ACT Health 24 hour helpline on 02 6207 9977.

Young people are able to self refer.

Key information for youth workers:

- If a young person is found by police with a small amount of drugs on their person, for personal use, or underage possession of alcohol, they may be referred to the ACT Health Police and Court Drug Diversion Program. An assessment is completed and needs and goals are discussed, The young person may then be linked in with community support and counselling. If they are compliant they will not be required to attend Court.. They will also receive comprehensive education on alcohol, tobacco and other drugs so that they can make informed decisions about future ATOD use. This is a pre Court strategy.
- The Needle & Syringe Program in the ACT is run by Directions ACT. See <http://www.directionsact.com/needle-syringe-program/> for more information.
- The Naloxone Program is a harm minimisation program which is run in the the ACT. Naloxone is a drug which reverses the effects of a opiate (heroin, morphine etc). See <http://www.cahma.org.au/Naloxone.html> for more information.
- Drug testing kits for music festivals are not currently available in the ACT, however, work is being done in this area to advocate for their availability. Evidence shows that people are less likely to use drugs if they know what is in them and that they are particularly unsafe
- The following resources are available online for youth workers and young people wanting to learn more about alcohol and young people:
<https://ndarc.med.unsw.edu.au/resource/alcohol-and-developing-brain>
<https://ndarc.med.unsw.edu.au/resource/alcohol-facts>