

AODCCC Response to Parliamentary Inquiry into the Esther Foundation and unregulated private health facilities.

We appreciate the opportunity to provide a submission to the Parliamentary Inquiry into the Esther Foundation and unregulated private health facilities.

About AODCCC

The Alcohol and Other Drug Consumer & Community Coalition (AODCCC) is the emerging peak body for alcohol and other drug systemic advocacy in Western Australia. Our aim is to empower the voices of consumers, their families and significant others impacted by alcohol and other drug use. AODCCC is a membership-driven, not-for-profit association with over 360 members and counting.

It is our commitment to ensure these voices are heard and can stand side by side with community leaders, sector professions, policy makers and government to educate and inform. We seek to address the stigma associated with alcohol and other drug use that is common in our society. Our mission is to promote the interests, education and welfare of those affected by alcohol and other drug use through community understanding, shaped by the voice of people and families with a living or lived experience of alcohol and other drugs.

AODCCC's Position

AODCCC advocates for all alcohol and other drug treatment services to be regulated in accordance with the National Quality Framework for Drug and Alcohol Treatment Services (Department of Health 2018). It is imperative that the legislation provides clarity and consistency in identifying services providing alcohol and other drug treatment, regardless of their treatment model, religious affiliation or funding source. Unregulated services pose a risk to an already vulnerable cohort of people. While seeking treatment these individuals report having limited information and resources to make informed choices when accessing health services. This results in individuals being placed in services that do not align with their values, beliefs or have the appropriate level of supports required for the individual. Regulations provide a standard for services to meet and provide accountability to the consumer, their families, significant others and the community.

The Consumer Experience

In consultation with our members, we have heard direct accounts of their experiences when attending Esther Foundation. One member recall's "It was a bit like jail but better than the streets which is why I stayed for two years, the people there came from a loving place, but you can't run a rehab like that... you need psychs [sic]". This emphasises that services and their employees can have good intentions but without appropriate professional evidence-based training and expertise (including peers), they fail to meet the needs of the consumer and place individuals at significant risk. In addition, this experience highlights the lack of choices available for some, forcing them to remain in an under resourced service for lack of other options.

Those impacted by alcohol and other drugs are often put into scenarios where external pressures are applied on the individual to yield to the expectations of those around them. For example, one member describes that their substance use led to justice intervention, coupled with pressure from family members, they were given the ultimatum of losing their child unless they attended Esther Foundation. While residing at Esther Foundation, this member was not provided adequate health services in response to an emergency medical condition. After hours of pleading, they were transported and left at an emergency department without support. This was not an isolated incident for this individual. This member was not given the option to choose their treatment, thus exposing them to a service that was unregulated and did not provide appropriate supports, nor collaboration with external services. The end result of these experiences compounded trauma, resulting in a relapse to substance use and further criminal charges.

In addition to the unmet needs of individuals attending Esther Foundation, family members and significant others were also impacted. Communication issues and a lack of access to information has been reported, with one member stating that:

- There's not a lot of information, support and care for either parents, grandparents or people directly affected by you going into treatment.
- I think...the information and support for significant people in your life... is confusing.
- Educating them on the stages of what's going to happen next is important.
- "They (significant other) just seemed like that this miracle is gonna happen, everything was gonna be fine. And
 they didn't really understand the process. So, I think information for them (parents/loved ones) about what
 happens in there [sic]."

This highlights the need to engage the family members and significant others remaining in community. This will ensure they are aware of the process and program being provided, which will reduce distress and equip them with the tools required to support themselves and their loved one.

Treatment Options and Accessibility

AODCCC advocates for the continued diversity in regulated treatment options and all services adhering to the National Quality Framework for Drug and Alcohol Treatment Services (Department of Health 2018). Alcohol and other drug issues require a unique individualised approach that meet the needs of the individual. Faith based options like Esther Foundation that involve adherence to a religious practice may be a good fit for some, but that does not negate the need for appropriately trained staff including designated lived experience roles. Safeguards are required including accountable consumer feedback mechanisms, culturally secure practice, trauma informed care and collaboration between service providers as informed by the consumer. We also advocate for the need of a lived experience workforce present in all treatment services, ensuring the ability for consumers to engage a peer. Our members report peer workers add great value to the treatment experience, provide hope and expertise from direct lived experience. The preference is that consumers are provided a balance between a learned and lived experience in treatment services.

Our members report a lack of information from services regarding the programs they provide and the models in which they adhere to. This includes other treatment options that are available. This information is needed to empower the individual to make an informed choice and ensure they are in a service that aligns with their beliefs and values. In consultation with our members, lack of availability to treatment options played a big part in which services they accessed, with one quoted as saying "I was desperate, I take whatever is available at the time [sic]". This lack of accessible information about rehabilitation services (all of them) and the desperation of the individual meant that, even in regulated services, the fit for the individual was not always ideal.

AODCCC Recommendations

AODCCC advocates for the following points to be enacted:

- All Alcohol and Other Drug Treatment Services to be regulated in accordance to the National Quality Framework for Drug and Alcohol Treatment Services (Department of Health 2018).
- Alcohol and Other Drug Treatment Services to be articulated in the definition of a "Health Service" in the Health Services Act (2016)
- The above points to occur regardless of funding source and/or religious affiliation of the Alcohol and Other Drug Treatment Services.
- Improved access to information on treatment options available to the consumer, services need to clearly state the treatment model in which they adhere to, their accreditation status and composition of staff (including qualifications and access to designated lived experience workers).
- Improved access to a designated lived experience workforce in all treatment settings.
- Improved collaboration and communication between treatment providers as informed by the consumer.

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Sector, including governance and collaborative approaches to treatment.							