



ATOD Sector COVID-19 Recovery Priorities.

July 2020

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Alcohol, Tobacco and other
Drugs Council Tasmania



Alcohol, Tobacco and other Drugs Sector COVID-19 Recovery Priorities

Introduction

This Report outlines the COVID-19 recovery priorities for the Tasmanian alcohol, tobacco and other drugs (ATOD) sector.

The concerns and priority actions outlined have been identified through consultation with community service organisations delivering specialist ATOD programs and services across Tasmania. It also builds on the information presented in the ATDC's report '*Determining the impact of the COVID-19 pandemic on the community organisations that provide alcohol and other drug services in Tasmania*' developed in June 2020.

The journey so far

The COVID-19 pandemic had a large impact on community organisations providing ATOD services in Tasmania. Despite these challenges, organisations proved themselves to be agile, client focused and able to enact changes to service delivery and business practices quickly and effectively. This included quickly transitioning their services to telehealth and online platforms, and implementing physical distancing to ensure treatment continued.

While this agility and the expertise of the sector was a key strength, the absence of reporting systems and processes meant they operated, and continue to operate with, limited data or information informing current or emerging areas of need. A lack of data and information, particularly in relation to illicit drugs, is a long-standing issue for the Tasmanian ATOD sector, which was further exacerbated by COVID-19. Similarly, the prevailing absence of the lived experience viewpoint in the Tasmanian ATOD sector was also highlighted during this time.

To assist, the Federal and State Governments invested approximately \$740,000 to support Tasmanian ATOD sector organisations. Approximately \$590,000 of these funds were provided by the Tasmanian Government for pharmacotherapy treatment, technology and sector capacity building initiatives¹. Additionally, through the Tasmanian Government's \$4 million response package for the mental health sector, additional support was provided to Tasmanians presenting with ATOD concerns to these services. This included the expansion of the Tasmanian Lifeline Service and additional support to Rural Alive and Well.

As Tasmanian specialist ATOD community organisations transition to a post COVID-19 service environment, most have returned to delivering services and programs face-to-face, while retaining telehealth and online services as complementary service options. Focusing on what lays ahead, their four key concerns are:

- Increased drug use during COVID-19
- Investment to boost treatment programs and services to respond to COVID-19
- A lack of data / information to inform COVID-19 responses
- Inclusion of the ATOD sector in broader COVID-19 responses and consultations

Given the wide-ranging impact substance use has in Tasmania, ensuring we are well-placed to respond to these concerns will be critical to address well-being as a key measure of our COVID-19 recovery success.

To strengthen the sector's ability to respond to these concerns and the anticipated 'service-bubble' that will occur in the coming months, a range of priority actions have been identified.

These priority actions are summarised in Table One (over-page).

¹ Includes approx. \$191,000 awarded to ATOD organisations through the Community Managed Mental Health and Alcohol and Drug Sector COVID-19 Technology Fund

Table One: Alcohol, Tobacco and other Drugs Sector COVID-19 Priority Concerns

<p>Priority Concern #1 – Increased drug usage during COVID-19. Tasmanian ATOD service providers are concerned about the increased use of drugs during COVID-19 (drinking, smoking and the use of illicit substances). Alongside reports of increased referrals for support from new cohorts (e.g. employed 'middle-class' Tasmanians), there are reports of drug substitution (e.g. alcohol in the absence of illicit substances) and serious concerns regarding an anticipated spike in substance use following the cessation of existing COVID-19 financial initiatives (e.g. JobKeeper, JobSeeker and anti-eviction legislation).</p>	
Priority Action 1.1	Immediate investment into the transition of existing face-to-face drug education and awareness programs to a digital service delivery model
Priority Action 1.2	Continued investment into a COVID-19 community public health campaign for the next 12 months
Priority Action 1.3	Immediate initiation of protocols requiring all Tasmanian Government health care professionals to ask patients if they smoke, and if they do, provide an opt-out referral to the Quitline
<p>Priority Concern #2 - Investment to boost treatment and programs to respond to COVID-19. The Tasmanian ATOD sector has required additional investment for a number of years and COVID-19 has exacerbated existing treatment gaps. Alongside concern regarding increased drug usage, there is a critical need to bolster treatment services at this time to ensure continuity of services (including the retention of targeted treatment initiatives introduced during COVID-19).</p>	
Priority Action 2.1	Confirmation of continuity of funding for existing AOD treatment services with funding agreements expiring at 31 December 2020
Priority Action 2.2	Allocation of funding to an <i>AOD Treatment COVID-19 Recovery Fund</i> specifically to implement initiatives to address emerging treatment needs & existing treatment gaps being exacerbated by COVID-19
Priority Action 2.3	Active leadership from the Tasmanian Government, collaborating with all Tasmanian elected representatives to lobby the Australian Government to ensure the continuation of Equal Remuneration Order payments for impacted community sector organisations
Priority Action 2.4	Prioritisation of the necessary feasibility work to identify alternative and / or additional approaches to withdrawal treatment to address the reduced capacity of the Inpatient Withdrawal Unit in Hobart
Priority Action 2.5	Continued access to free Naloxone across Tasmania's needle and syringe program outlets, and the expansion of this program to Tasmanians on the waiting list to access the Tasmanian Government's pharmacotherapy treatment program, and those exiting the Tasmanian Prison Service over the next 12 months
Priority Action 2.6	Immediate review of the waiting lists for Tasmanians seeking to access the Tasmanian Government's pharmacotherapy treatment program & continuation of the depot buprenorphine trial currently underway
<p>Priority Concern #3 – A lack of data / information to inform COVID-19 responses. Tasmanian ATOD service providers have stressed the importance of improving access to information and data. This is a long-standing issue that has been exacerbated during the COVID-19 response and recovery processes. It's a critical issue that needs urgent attention to ensure that the ATOD sector can strengthen how it monitors drug usage and treatment trends.</p>	
Priority Action 3.1	Confirm commitment to investment in a consumer representative service for the Tasmanian ATOD Sector to ensure the lived experience is included in existing and future responses
Priority Action 3.2	Convening of an illicit drug working group to share intelligence and information on the supply and use of illicit drugs to inform treatment, prevention and harm reduction strategies
Priority Action 3.3	Provide access to existing ATOD data-sets to monitor treatment episodes and population trends
<p>Priority Concern #4 - Inclusion of ATODs sector into broader COVID-19 responses and consultations. There are a range of existing Tasmanian Government COVID-19 recovery initiatives underway to assist the community sector and other industries. The inclusion of the ATOD sector into these initiatives will assist to broaden the impact of these programs and assist the Tasmanian ATOD sector's recovery efforts.</p>	
Priority Action 4.1	Targeted inclusion of ATOD feedback into the development and implementation of community economic and social COVID-19 recovery initiatives

Priority Concern #1: Increased drug usage during COVID-19

Tasmanian ATOD service providers have reported increased concern regarding the increased use of drugs during COVID-19.

This concern relates to drinking, smoking and the use of illicit substances. Alongside reports of increased referrals for support from new cohorts (e.g. employed 'middle-class' Tasmanians), there are reports of drug substitution (e.g. alcohol in the absence of illicit substances) and serious concerns about a spike in substance use following the impending cessation of existing COVID-19 financial initiatives (e.g. JobKeeper, JobSeeker and anti-eviction laws).

It was acknowledged in the Tasmanian Government's PESRAC Interim Report, that mental health issues will continue to increase due to the compounding effects associated with COVID-19. The same is anticipated with respect to alcohol consumption, which this report acknowledges is associated with increased mental ill health. While it is highly recognised that alcohol consumption has increased, the Tasmanian ATOD sector also urges the Tasmanian Government not to overlook the harm caused from an increased use of illicit drugs, prescription medication and smoking during this time.

Strong preventative messaging and responses will be critical to address these concerns, with three priority actions outlined in Table 2 below.

Table 2: Priority Concern #1: Increased drug usage during COVID-19			
Priority Action	Rationale	Lead Agency	Investment
<p>Priority Action 1.1</p> <p>Immediate investment into the transition of existing face-to-face drug education and awareness programs</p>	<p>There is currently an absence of program delivery across the State. Priority to ensure existing programs can be delivered, and to ensure continuity of education programs</p>	<p>Drug Education Network</p>	<p>\$80,000</p>
<p>Priority Action 1.2</p> <p>Continued investment into a COVID-19 community public health campaign for the next 12 months</p>	<p>A priority to ensure action is undertaken to raise awareness of substance use, and where to find support</p>	<p>Drug Education Network & Alcohol and Drug Foundation</p>	<p>\$100,000</p>
<p>Priority Action 1.3</p> <p>Immediate initiation of protocols requiring all Tasmanian Government health care professionals to ask patients if they smoke, and if they do provide an opt-out referral to the Quitline</p>	<p>Tasmanians who smoke are high-risk for COVID-19 complications and an opt-out referral process should be mandated</p>	<p>Department of Health & Cancer Council Tasmania</p>	<p>Nil</p>

Priority Concern #2: Investment to boost treatment and programs

The Tasmanian ATOD sector has required additional investment for a number of years and COVID-19 has exacerbated existing treatment gaps.

Alongside concern regarding increased drug usage, there is a critical need to bolster treatment services at this time to ensure continuity of services (including the retention of targeted treatment initiatives introduced during COVID-19).

The Tasmanian Government's PESRAC Interim Report's recommendation to modify contracts with community sector providers to ensure longer-term funding certainty, and employment tenure for staff (Recommendation #12 and #13) is welcomed by the ATOD sector.

Providing this funding certainty and flexibility is crucial, and it must be accompanied by an additional boost in funding. There is currently a minimum of \$1 million in additional treatment and service funds required by the sector to respond to the impact of COVID-19 across all treatment types, and in all regions of the island. A list of these funding requirements is outlined in Attachment A, and the ATDC recommends that the Tasmanian Government establish a Recovery Fund specifically for the Tasmanian ATOD sector, to be administered by the ATDC in the same manner as the *COVID-19 Sector Capacity Building Funds*.

The priority actions are summarised in Table 4 below.

Table 4: Priority Concern #2: Investment to boost treatment and programs			
Priority Action	Rationale	Lead Agency	Investment
<p>Priority Action 2.1</p> <p>Confirmation of continuity of funding for existing AOD treatment services with funding agreements expiring at 31 December 2020</p>	<p>These organisations include, but may not be limited to Pathways Tasmania, Holyoake, the ADF and the ATDC. Ensuring the continuity of these funding agreements will ensure that there is no impact to the community.</p>	<p>Department of Health</p>	<p>Various</p>
<p>Priority Action 2.2</p> <p>Allocation of funding to an <i>AOD Treatment COVID-19 Recovery Fund</i> specifically to implement initiatives to address emerging treatment needs & existing treatment gaps being exacerbated by COVID-19</p>	<p>During consultation with Members, the ATDC identified a minimum of \$1 million dollars in treatment and service requests to respond to the impact of COVID-19. The ATDC recommends that the Tasmanian Government establish a Recovery Fund specifically to assist Tasmanian ATOD organisations to develop place-based COVID-19 program responses.</p>	<p>Department of Health (administered by the ATDC)</p>	<p>\$1 million</p>
<p>Priority Action 2.3</p> <p>Active leadership from the Tasmanian Government, collaborating with all Tasmanian elected representatives to lobby the Australian Government to ensure the continuation of Equal Remuneration Order payments for impacted community sector organisations</p>	<p>The impending cessation of the Australian Government's Equal Remuneration Order will impact Tasmanian ATOD community sector organisations. The cessation of this funding will result in reduced services, and loss of employment. Actions to avoid this outcome will be critical.</p>	<p>Department of Health & Department of Premier and Cabinet</p>	<p>Nil</p>

<p>Priority Action 2.4</p> <p>Prioritisation of the necessary feasibility work to identify alternative and / or additional approaches to withdrawal treatment to address the reduced capacity of the Inpatient Withdrawal Unit in Hobart</p>	<p>Prior to COVID-19 there were existing concerns that Tasmania's reliance on a 9 bed inpatient withdrawal unit located in Hobart was insufficient to address the demand for the number of residential rehabilitation beds across the island. Given that COVID-19 has seen the number of these beds reduce to 6, these concerns are now critical. Inaccessibility to withdrawal services leads to blockages in treatment pathways, stopping patients from progressing through to residential rehabilitation services. The Launceston City Mission is currently considering how to establish an onsite medically supervised withdrawal service, and a feasibility study to review this option and others should be prioritized urgently.</p>	<p>Department of Health, Alcohol and Drug Service & community residential rehabilitation treatment providers</p>	<p>Nil</p>
<p>Priority Action 2.5</p> <p>Continued access to free Naloxone across Tasmania's needle and syringe program outlets, and the expansion of this program to Tasmanians on the waiting list to access the Tasmanian Government's pharmacotherapy treatment program, and those exiting the Tasmanian Prison Service over the next 12 months</p>	<p>Ensuring ongoing access to the anti-overdose medication naloxone will save lives. Due to the extensive waiting lists to access the Tasmanian Government's pharmacotherapy program, Tasmanians who are turned away from this treatment must also be included, as should any individuals exiting the Tasmanian Prison Service – particularly in the knowledge of reported illicit drug shortages.</p>	<p>Department of Health</p>	<p>\$30,000</p>
<p>Priority Action 2.6</p> <p>Immediate review of the waiting lists for Tasmanians seeking to access the Tasmanian Government's pharmacotherapy treatment program & continuation of the depot buprenorphine trial currently underway</p>	<p>Prior to COVID-19, there was a waiting list of approximately 75 Tasmanians waiting to access the pharmacotherapy program administered by the Alcohol and Drug Services. This needs to be addressed as a priority to limit the risk of harm from illicit drug use or substitution.</p>	<p>Department of Health</p>	<p>Unknown</p>

Priority Concern #3: A lack of data / information to inform COVID-19 responses

Tasmanian ATOD service providers have stressed the importance of improving access to information and data.

The importance of prioritising work, including shared data capability was a priority action identified in the Tasmanian Government’s PESRAC Interim Report (Recommendation #50).

The lack of shared data and information in the Tasmanian ATOD sector is a long-standing issue that has been exacerbated during the COVID-19 response and recovery processes for both data and information, and the absence of a consumer perspective into service design and delivery. This is a critical issue that needs urgent attention to ensure that the ATOD sector can strengthen how it monitors drug usage and treatment trends emerging due to COVID-19. The sector, through the work already undertaken by the ATDC and key partners, is well-placed to implement a range of initiatives quickly. These priority actions are outlined in Table 3 below.

Table 3: Priority Concern #3: A lack of data / information to inform COVID-19 responses			
Priority Action	Rationale	Lead Agency	Investment
<p>Priority Action 3.1</p> <p>Confirm commitment to investment in a consumer representative service for the Tasmanian ATOD Sector to ensure the lived experience is included in existing and future responses</p>	<p>Ensuring the inclusion of the lived experience into COVID-19 response and recovery initiatives remains a priority. While the ATDC worked hard to ensure it was included where possible, it was significantly absent during this time.</p> <p><i>*The minimum funding requested from the 2020-21 State Budget.</i></p>	ATDC	\$250,000 minimum*
<p>Priority Action 3.2</p> <p>Convening of an illicit drug working group to share intelligence and information on the supply and use of illicit drugs to inform treatment, prevention and harm reduction strategies</p>	<p>A key area of concern has been the lack of a coordinated approach attempting to understand the impact COVID-19 has had on those Tasmanians who use illicit substances. In the absence of this information, any responses will be hampered by a reliance on anecdotal information.</p> <p>** Alongside partner organisations e.g. UTAS & relevant government agencies.</p>	Department of Health & ATDC **	Nil
<p>Priority Action 3.3</p> <p>Provide access to existing ATOD data-sets to monitor treatment episodes and population trends</p>	<p>The ATDC is seeking access to the Department of Health’s AOD National Minimum Data Set information. This is a pre-existing request to enable the ATDC to monitor trends in treatment episodes. They are also calling on the government to urgently fast-track access to Tasmanian Government ATOD data sets (e.g. ambulance, hospital, police and public treatment). This work has already been identified as necessary to support the Tasmanian Drug Strategy and the Tasmanian AOD Reform Agenda – and should be expedited.</p> <p><i>***The funding requested from the 2020-21 State Budget. Primary Health Tasmania has also committed funding towards a joint data-sharing project.</i></p> <p>The DEN and the ADF are both seeking access to the Student Health and Wellbeing Survey results at a local municipality level.</p>	Department of Health, ATDC & UTAS	\$50,000***

Priority Concern #4: Inclusion of ATOD sector into broader COVID-19 responses and consultations

There are a range of existing Tasmanian Government COVID-19 recovery initiatives underway to assist the community sector and other industries. The inclusion of the ATOD sector into these initiatives, and discussions of future initiatives is critical.

It's important to note that while the recent PESRAC Interim Report was developed in consultation with government agencies, and peak bodies, the ATDC was not approached to provide comment. The ATDC were able to provide comment via the Alcohol and Drug Services, and TasCOSS submissions but was concerned at the omission of the ATOD sector as a key consultation partner, particularly given the significant social impact of substance use during COVID-19, particularly alcohol consumption.

During the COVID-19 response, the ATDC experienced challenges engaging with the Tasmanian Department of Health resulting in delayed communications and missed opportunities to share information and work collaboratively. The ATDC is seeking, and is ready to work with the Department of Health to avoid a repeat of this situation if a second-wave of COVID-19 was to occur.

In the meantime, there is a range of additional recommendations within the PESRAC Interim Report, not already noted in this Report that can also provide benefit to ATOD community sector organisations and broaden the impact of these recovery efforts.

These recommendations are outlined in Table 5 below.

Table 5: Priority Concern #4: Inclusion of ATOD sector into broader COVID-19 responses and consultations			
Priority Action	Rationale	Lead Agency	Investment
<p>Priority Action 4.1</p> <p>Targeted inclusion of ATOD feedback into the development and implementation of community economic and social COVID-19 recovery initiatives, including future PESRAC consultations</p>	<p>Ongoing prioritisation of AOD services into Tasmanian Government mental health and homelessness recovery initiatives, and the following PESRAC Interim Report recommendations:</p> <p># 16 – The ATOD sector seeks the inclusion of the AOD Certificate IV and the AOD Peer Worker Certificate IV</p> <p># 52 – The ATOD sector has shovel ready capital projects in Circular Head (CHAC) and Northern Tasmania (Launceston City Mission)</p> <p># 54 – Refer Priority Action 3.3.</p> <p># 57 – The ATOD sector welcomes the opportunity to be included in this review</p> <p># 58 – the ATOD sector seeks the opportunity to be included in this work. Refer Priority Action 3.2</p> <p># 61 – the ATOD sector welcomes the opportunity for this screening tool to be expanded to include alcohol and other drugs</p>	<p>Varied.</p> <p>The ATDC is available to provide input and feedback into any recovery initiatives</p>	<p>Nil</p>



Attachment A – Summary of Member Responses

ATDC members delivering specialist ATOD services were asked to comment on:

- If they had any capital infrastructure projects that may increase service capacity
- If they were going to need additional funding assistance to cover ongoing telehealth or cleaning/PPE costs
- Main concerns for their COVID-19 response and recovery efforts
- What assistance they would be seeking from the Tasmanian Government to assist with their COVID-19 recovery

	Capital Projects	Telehealth costs	Cleaning / PPE costs	Main Concerns	Assistance Sought
1. Advocacy Tasmania	No support required at this time				
2. ADF	No	No	No	<ul style="list-style-type: none"> - Lack of focus or funding on prevention and early intervention - Sporting clubs will seek to focus on alcohol sales to boost lost revenue 	<ol style="list-style-type: none"> 1. Commitment to ongoing funding of Good Sports Program (\$430Kpa) 2. Access to the DoE student wellbeing survey 3. Ongoing investment into public health campaigns
3. Anglicare Tasmania	No	No	No	<ul style="list-style-type: none"> - Increased substance use - Lack of data to aid responses - Staff wellbeing - Staff safety 	<ol style="list-style-type: none"> 1. \$150K for 1.5 FTE (0.5 FTE in each region) to respond flexibly to managing assessments, referrals and support
4. Bethlehem House	No*	Uncertain*	Uncertain*	<ul style="list-style-type: none"> - Lack of AOD services for residents 	<ol style="list-style-type: none"> 1. \$100K to immediately support the AOD service provision to existing BH residents. Despite increase in residents, there has been no increase in funding for services. <p>*Major infrastructure development already well-progressed and currently determining impact of COVID-19 on costs. Currently negotiating new funding agreement with Communities Tasmania where any increase would be incorporated.</p>
5. CHAC	Yes	No	No	<ul style="list-style-type: none"> - Increased substance use - Anticipated increase in service demand and not enough staff to assist - Comorbidity increase and lack of emergency crisis support and accommodation in region 	<ol style="list-style-type: none"> 1. \$300K approx. to extend their existing health centre to increase their consulting room space to respond to the physical distancing requirements of COVID19 and also upgrade their facility for the future. 2. \$100K approx. for a resource to provide crisis support to those in the region in need



6. DEN	No	No	No	<ul style="list-style-type: none"> - Ensuring that people/staff are not missing out on receiving information, resources or support - The ongoing siloed approach to addressing MH and AOD, particularly in the prevention space - Rhetoric that the existing COVID-19 stimulus payments should be reduced, due to people using the extra funds to pay for more drugs 	<ol style="list-style-type: none"> 1. Seed funding to help them expedite the development of online resources (\$80,000) 2. Tasmania Police to provide information to the ATOD sector regarding their knowledge of illicit drug matters to help inform preparation and response planning
7. LCM (Serenity House & Missiondale)	Yes	No	No	<ul style="list-style-type: none"> - Poor communication with ADS - Reduced capacity at IPWU slowing admissions and increasing waiting lists - Pace of ADS/IPWU protocol implementation 	<ol style="list-style-type: none"> 1. \$150K for on-site development of Missiondale (consulting rooms) 2. Clarification / authorization to deliver on-site medically supervised detox. 3. TasTAFE to provide Certificate IV in AOD at no cost
8. The Hobart Clinic	No*	No	No	<ul style="list-style-type: none"> - Working with medical staff to find balance between telehealth and hospital admissions 	*No requests. THC has a major infrastructure project currently planned
9. Holyoake	No	Yes	Yes	<ul style="list-style-type: none"> - Impact of COVID19 on young Tasmanians - Reported demand in schools for counselling sessions 	<ol style="list-style-type: none"> 1. \$100K to fund a full-time counsellor for 12 months to respond to the demand from schools. Anticipate that this resource would provide services to at least 500 students in southern Tasmania. This would be a modest ask for the benefits that would be delivered. 2. \$150K (ongoing) to increase their services in the prison and community corrections. This is an existing budget request because their services are unable to fulfil the existing demand.
10. The Link	No	No	No	<ul style="list-style-type: none"> - How to re-engage young people who have been negatively impacted - Increase in comorbidity presentations 	<ol style="list-style-type: none"> 1. \$100K for a 6-12 month resource to focus on re-engaging young people and to co-design the 'new normal' service for the future
11. Pathways Tasmania	No	No	No	<ul style="list-style-type: none"> - Ensuring appropriate activities for residents if a second wave occurs 	<ol style="list-style-type: none"> 1. \$460K to fund the employment of house supervisors for both their male and female programs (\$230K per program). Currently a role that is undertaken by volunteers. This is an existing request that government is already aware of.



12. Salvation Army	No*	No	No	<ul style="list-style-type: none"> - Anticipated increase in demand - Returning past residents who have relapsed due to lack of secure accommodation during COVID19 - IPWU and reduction in bed numbers slowing down admission 	<ol style="list-style-type: none"> 1. \$100K per annum for a counsellor/ psychologist to review and maintain the online service model (see points above) 2. \$100K per annum to continue the Matrix Program, and to transition it to a portable model that could be delivered offsite. An internal evaluation has been undertaken, demonstrating that it is a cost effective treatment model (60 people over 12 months through this program versus approx. \$80K per residential bed). <p>*Multiple infrastructure projects underway through TSA's community programs</p>
SETAC – feedback pending					
13. TAC	No	N/A*	N/A*	<ul style="list-style-type: none"> - Not having a 'line of sight' about what is happening behind doors for their community members - An increase in drug usage (linked to govt payments) - Lack of illicit drug supply, and that people are substituting and the quality of what is out there at the moment is not very good 	<ul style="list-style-type: none"> - No particular key request but concerned about what will happen later this year when the JobKeeper and other financial assistance packages cease and how best to respond / plan for the impact of this. <p>*They will be monitoring this. Unclear what the ongoing costs / admin impact might be.</p>
14. QUIT Tasmania	No	No	No	<ul style="list-style-type: none"> - The continuing high smoking rates, and the reality that people are continuing to smoke despite the risks of COVID-19 	<ol style="list-style-type: none"> 1. A COVID-19 directive from the Tasmanian Government instructing all Tasmanian Government health workers to refer current smokers to the Quitline using an opt-out approach.
15. YFCC	No	No	No	<ul style="list-style-type: none"> - Increased substance use aggravated by COVID19 - Increased comorbidity presentations - Maintaining physical distancing requirements in existing buildings 	<ol style="list-style-type: none"> 1. \$30K for a six month trial to bring a psychiatrist to the region. There is an existing business case in place for a six month trial to address issues with prescribing medicines, with getting into a GP at the moment 'almost impossible'. 2. \$152K (for two years) for an early intervention/prevention initiative that has benefits for AOD/MH/FDV and homelessness.



Who are we?

The Alcohol, Tobacco and other Drugs Council is the peak body representing and supporting community organisations, and the people they assist, to reduce alcohol, tobacco and other drug related harm for all Tasmanians. Our vision is a Tasmania without alcohol, tobacco or other drug related harm or discrimination.

Problematic use of alcohol, tobacco and other drugs continues to be a major cause of harm in Tasmania, and is a significant driver of preventable death, disease and illness, psychological distress, unemployment, homelessness, police arrests and prison sentences.

As an independent not-for-profit organisation, the ATDC represents a broad range of alcohol, tobacco and other drug organisations. These organisations provide information and awareness, prevention and early intervention, harm-reduction and specialised treatment and recovery services and programs.

Working with all levels of government and the community, the ATDC plays a vital role in leading, collaborating and advocating for increased investment into treatment services, and population based initiatives that reduce the harms associated with problematic substance use across Tasmania.

The ATDC supports the sector by delivering training, networking and information sharing opportunities, as well as undertaking policy and advocacy projects with, and on behalf of our members. At all times our work is underpinned by a commitment to evidence-based practices and policies, consumer participation, harm reduction, and partnerships and collaboration.