



20**22 SNAPSHOT**



Trained over 2,500 students



and more than

1,800

community and
family members across

Australia



More than

4,000

joined our
webinars
and online
presentations



92%
high or very high student satisfaction rate



Conducted

more than **60** research projects



Provided care for more than **2,200** people face-to-face



Provided care for more than **9,600** via telehealth



Over **107,000**

contacts to our telephone and online support services



Our websites recorded

1,425,222

page views



Social media content views (impression/reach)

3,237,790



Turning Point Outcome Monitoring Client Feedback



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Adj Prof David Plunkett

Chief Executive.

Fastern Health

WELCOME

EASTERN HEALTH

Welcome to Turning Point 2022, our annual publication recognising the many achievements and progress in the specialty field of alcohol, drug and gambling addiction. We reflect on the past 12 months, working through the continuing challenges of COVID-19, and sharing many significant achievements for Turning Point.

As a highly-valued part of Eastern Health, Turning Point has shone brighter than ever and continues to deliver outstanding and innovative research, education and treatment services; further proving why Turning Point is recognised as a state and national leader in the addiction field.

Turning Point was the talk of the town throughout the year in the media, as various representatives of the organisation advocated and educated Australians on why addiction is a health issue, the need for ongoing research, compassion and the change that can be made when we support those with addiction

The Rethink Addiction campaign has continued to be a huge catalyst for change, launching the inaugural Rethink Addiction National Convention, which took place over three days in September.

Turning Point presented the case for change to the Federal Government, calling for a national coordinated response to alcohol, other drugs and gambling harm, and the urgent need to end the stigma that prevents people across Australia from accessing the help they rightfully deserve.

The ground-breaking work continued, as Rethink Addiction in a joint effort with KPMG, released the report titled *Understanding the cost of addiction in Australia* in November, highlighting the significant costs associated with alcohol, tobacco, other drugs and gambling, including on workplace and household productivity, harmful consumption and healthcare.

Turning Point secured \$5 million in research funding, which has provided the opportunity both nationally and internationally, to challenge practice and inform policy direction.

Education is paramount to ensuring the continuation and development of the addiction medicine workforce and clinical services. The Graduate Program of Addictive Behaviours, delivered in Paul Leyden
Acting Executive Director,
Clinical Operations
(Surgery, Women and
Children and Acute
Specialist Clinics,
Mental Health,

Medical Imaging and Statewide Services)

partnership with Monash University continues to provide incredible skills to participants, delivered by local and international experts.

Another point of pride from the year also includes Turning Point being appointed as Victoria's new Statewide Specialist Service for Mental Health and Addiction. This appointment is testament to the incredible work conducted by all teams and our excellence in clinical care. This has provided an exciting opportunity to play an important leadership role in guiding best practice and supporting integrated care.

Eastern Health and the community acknowledges the tireless work of all Turning Point staff, partners and collaborators, and we wish to congratulate everyone on their exceptional work and accomplishments.

Thank you, and we look forward to seeing the ongoing advancements in clinical care, research and education for which Turning Point is renowned for.



MONASH UNIVERSITY

One in four Australians will struggle with alcohol, other drugs or gambling at some point in their lives, yet addiction is not seen as a genuine health condition. In order to change how we perceive, and respond to addiction in this country, we must work together to address these complex challenges.

The strong partnership between Turning Point, Eastern Health and Monash University is realised through our collective purpose to deliver excellence in addiction clinical care, education and research for the benefit of the community.

Monash University is proud of its ongoing affiliation with Turning Point and the exceptional work carried out by its dedicated team throughout 2022.

As Australia's leading national addiction centre, Turning Point continues to cement its national and international reputation for innovation and excellence in treatment, research, education, public policy and advocacy to help transform the lives of people living with addiction.

Turning Point offers a suite of graduate courses in Addictive Behaviours through Monash University, to meet the professional development and higher education needs of individuals, together with the growing demands of the healthcare sector.

Turning Point maintains its strong links with the Monash Addiction Research Centre (MARC), continuing to conduct innovative research and working together on policy submissions to government to improve treatment outcomes for people experiencing alcohol, other drug or gambling harms.

Prof Ian Davis
Professor of Medicine,
Monash University
and Eastern Health,
Head, Eastern Health

Mitchell AO
Dean of Medicine,
Nursing and
Health Sciences,

Monash University

Monash University is proud to be associated with the Rethink Addiction campaign to advocate for the need to change Australia's attitude and approach to addiction, and support the call for a national coordinated response to alcohol, other drugs and gambling harm in Australia.

Only through these collective efforts can we address the challenges and deliver the solutions to improve outcomes for all Australians impacted by addiction.

Monash University wishes to commend Turning Point on its outstanding achievements in 2022 and looks forward to supporting its continued growth and success.

Only through these collective efforts can we address the challenges and deliver the solutions to improve outcomes for all Australians impacted by addiction."







INTRODUCTION

2022 was another remarkable year in terms of the extraordinary achievements that our passionate Turning Point team have accomplished across an incredibly broad range of activities. We have continued to provide high quality care for our clients, as well as highly valued research and education programs. And sustained a significant leadership role in raising national awareness of the reality of addiction and reducing the stigma that often surrounds it.

The Rethink Addiction campaign continues to build momentum and reach. In 2022, after some COVID-related postponements, the Rethink Addiction National Convention was held in Canberra in September with the theme 'It's time to change the conversation'.

As the campaign continues to grow we know that real change for the one in four Australians who experience alcohol, other drugs and gambling harm is not just a possibility but a realistic goal.

As part of the campaign, Turning Point partnered with KPMG to develop a ground breaking report measuring the cost of addiction in Australia.

It estimates the cost of tobacco, alcohol, other drug and gambling-related harms in 2021 was \$80.3 billion.

Alongside this, Turning Point continued to influence policy in areas including decriminalisation of personal possession of small quantities of illicit drugs, preventing addiction-related suicide, and the harms of online gambling.

A key highlight for 2022 was the announcement of Turning Point's appointment to establish the new Statewide Specialist Service for people living with mental illness and substance use or addiction.

This initiative is part of the implementation of the Victorian Mental Health Royal Commission recommendations.

With a core aim of supporting the reformed Mental Health and Wellbeing System to deliver a best practice model of integrated care, there is much exciting work to be done over the coming years.

In 2022, Turning Point also continued to enhance the integration of peer work across its service models, with the aim of consolidating best practice wraparound support for our clients.

Our team of peer workers also played an important role at the Rethink Addiction Convention and we thank them for their courage in telling their stories at this forum and many other events and media throughout the year,

"As the campaign continues to grow we know that real change for the one in four Australians who experience alcohol, other drugs and gambling harm is not just a possibility but a realistic goal."



Eastern Health

Research activity continued at a rapid pace again this year with significant work across a broad range of areas, including cultures of high-risk drinking among male hospitality students and workers, exploring low-cost, low-resource ways to increase attendance in addiction treatment, barriers to accessing addiction treatment for women at risk of homelessness, and investigating the impact of the pandemic on alcohol-related harms.

Chair of Addiction Studies

Monash University

An example of the strong links between our research and education functions was demonstrated this year in a project aimed to generate evidence of the role of group-based education and support for affected family members, including linkage to an online peer support group.

This work focused on the highly successful BreakThrough family education program that is delivered in partnership with SHARC.

Turning Point also continued to deliver an impressive range of webinars throughout the year, with attendance in many cases in excess of 600 people.

"Following extensive redevelopment, Turning Point" delivered an updated Addictive Behaviours course (Graduate Certificate, Graduate Diploma and Masters) in partnership with Monash University, receiving incredible student feedback."

Following extensive redevelopment, Turning Point delivered an updated Addictive Behaviours course (Graduate Certificate, Graduate Diploma and Masters) through Monash University, receiving incredible student feedback.

The work that we do would not be possible without the support we receive from a broad range of partners and collaborators and our incredibly dedicated staff who continually go above and beyond to deliver the breadth and quality of our work.

Thank you for all that has been achieved in 2022.

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FEEDBACK

"I really liked the counsellor and felt she cared about my opinion and my safety." "I recommend Wellington
House to everyone.
It's a wonderful facility
and I was very well looked
after. The staff are
exceptional and they
showed kindness and
professionalism."

"My counsellors were absolutely fantastic.
They helped me navigate things that came up.
I would still be drinking today if it wasn't for them.
They related to me and their advice was great."

"The peer support
workers at Wellington
House really
understood us because
they went through
the same things."

"Thank you to the female counsellor that I spoke with a few days ago.
She provided empathic support and was very helpful with withdrawal management strategies. Her support has really helped me move forward."

"The whole reception team at Richmond are a great blend of efficiency and empathy... so helpful."

"I really appreciate
Gambling Help Online
and the support I've
received over time.
I want to thank each
and every one of you for
your care and empathy."

SENIOR STAFF



Prof Dan Lubman AM
Executive Clinical
Director

Anthony Denham
Program Director
Statewide Services

RESEARCH AND EDUCATION



A/Prof Victoria Manning Head of Research and Workforce Development

Fay Staios Strategic Lead Workforce Development

Dr Kieran Connolly Associate Program Director

Dr Michael Savic Strategic Lead Clinical and Social Research

Megan Berry Head of Policy and Strategic Communication

A/Prof Debbie Scott Strategic Lead National Addiction and Mental Health Surveillance Unit

TREATMENT SERVICES



Karyn Cook Associate Program Director



Dr Matthew Frei Clinical Director



A/Prof Dr Shalini Arunogiri Deputy Clinical Director

Rick Loos Manager

Turning Point Telephone and Online Services

Jonathan Tyler

Manager Specialist Clinical Services

Rosie Kalogeropoulos

Clinical Lead Manager Specialist Clinical Services

Orson Rapose

Systems Manager

Teddy Sikhali

Service Manager Eastern Treatment Services

Alex Lebani

Nurse Unit Manager Wellington House

Melvyn Anthony

Associate Director Service Development



RETHINK ADDICTION

RETHINK ADDICTION NATIONAL CONVENTION

On September 12 and 13, the Rethink Addiction campaign hosted the inaugural Rethink Addiction National Convention in Canberra, reigniting the conversation our country needs to have about addiction.

With a sell-out crowd of 300 and countless virtual attendees, the convention brought together people with lived and living experience from across the country, centring truth-telling over formality in an effort to rethink how addiction is perceived and treated in Australia.

When the Rethink Addiction campaign launched in 2020, its vision was to establish addiction as a national political priority and present a case for change to the decision makers of this country. The convention demonstrated just how far the campaign has come in advancing that goal.

The convention theme 'It's time to change the conversation' was befitting of the many voices heard over the two days – clinicians, service providers, law and justice practitioners, policymakers, and most importantly people with lived and living experience.

Facilitated by the formidable Jon Faine, the event was described by one participant as 'being like few others', particularly in its centring of lived experience and expertise. Those in the room or watching online witnessed incredibly powerful stories from panellists and speakers, including Australia's 2022 Local Hero, Shanna Whan, Founder of The Hope Project, Kate Seselja, Mustafa Elkhishin from Lives Lived Well, and television host and entertainer, David Campbell.

They were stories of strength, of courage and of pain. But with each word spoken it was evident that positive change was on the horizon.

As the campaign continues to grow and garners support from across civil society, and the Rethink Addiction movement becomes louder, we know that real change for the one in four Australians who experience alcohol, other drugs and gambling harm is not just a possibility but a realistic goal.











REAL STORIES OF ADDICTION LAUNCH

This year, Rethink Addiction launched the 'Real Stories of Addiction', a digital campaign aimed at transforming how we perceive people with lived experience of addiction in Australia.

Too often, the reality of addiction is obscured by deep-seated stigma. This means many Australians living with addiction can't access the help they need due to a fear of judgement or a lack of available resources. Working with behaviour change specialists, The Shannon Company, Rethink Addiction sought to capture the essence of lived experience voices through beautifully crafted storytelling. 'Real Stories of Addiction' tell the stories of Anna, Baden, Jacky, Jess, Nikki and Paul. They are stories that remind us that addiction is just one part of a person's life - it is not what defines them.

Through a series of short videos and posters, the campaign challenges us to look beyond what we see and break down the stigma so that people can access the help they need without fear of judgement.

In August, Rethink Addiction hosted a webinar to launch the videos and posters in the lead up to the Rethink Addiction National Convention. Moderated by Kate Seselja, Founder of The Hope Project, panellists included the four lived experience voices featured in the videos, along with James Shannon, Head of Film and Content at The Shannon Company, and Rethink Addiction Spokesperson, Professor Dan Lubman AM.





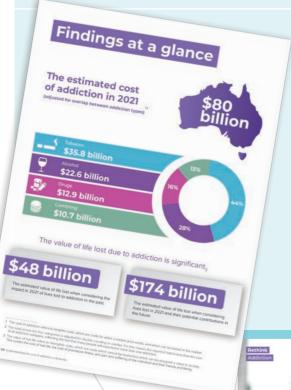


To view the 'Real Stories of Addiction' or the webinar launch please visit www.rethinkaddiction.org.au/realstories



THE \$80 BILLION COST OF ADDICTION

One in four Australians will struggle with alcohol, other drugs or gambling in their lifetime, and due to stigma many people wait years, or even decades, before they seek help. This delay in help-seeking contributes to the enormous cost of addiction, and now we know what that cost is.



As part of the Rethink Addiction campaign, Turning Point partnered with KPMG to develop a groundbreaking report measuring the cost of addiction in Australia. It estimates the cost of tobacco, alcohol, other drug and gambling-related harms in 2021 was \$80.3 billion. As big as this number is, we know it's an underestimate due to gaps in the evidence base.

Breaking down this \$80.3 billion economic burden, the report found that in 2021 tobacco-related harms cost \$35.8 billion, alcohol-related harms \$22.6 billion, other-drug related harms \$12.9 billion, and gambling-related harms \$10.7 billion.

It also measured intangible costs such as pain and suffering, and loss of health and life to estimate the total value of lost life due to addiction, which was estimated as \$48 or \$174 billion depending on the methodology applied.

Understanding the cost of addiction in Australia was launched on November 22nd at Parliament House in Canberra by the Assistant Minister for Mental Health and Suicide Prevention and Assistant Minister for Rural and Regional Health, the Hon Emma McBride MP, who was joined by Rethink Addiction Spokesperson, Professor Dan Lubman AM, and KPMG Principal Director, Mental Health Advisory Lead, Mr Andrew Dempster.



The report can be read at www.rethinkaddiction.org.au





INFLUENCING POLICY

In 2022, Turning Point made submissions and representations to help inform and influence policy. This included a position statement supporting the decriminalisation of the personal possession and use of small quantities of all prohibited drugs, a submission on Victoria's Suicide Prevention and Response Strategy and a submission to the Commonwealth Inquiry into online gambling and its impact on those experiencing gambling harm.

IT'S TIME TO DECRIMINALISE

Criminalisation of personal possession and use of drugs is one of the single greatest public policy failures in history. Not only has prohibition failed to eliminate the use of drugs – it has expanded drug markets and resulted in a more dangerous drug supply.

Scarce police time and resources are wasted, increasing numbers of people are imprisoned at great expense, and diverse and marginalised communities including First Nations people are disproportionately impacted by laws that are historically rooted in racism and remain a structural enabler of it.

This year, Turning Point published a position statement supporting the decriminalisation of the personal possession and use of small quantities of all prohibited drugs.

It recommends removing criminal penalties and replacing them with education and treatment or administrative sanctions when needed, as Portugal has done.

It also recommends expunging all historical convictions for non-violent offences relating to the personal possession and use of drugs, releasing all people currently incarcerated for these offences, and improving diversion programs to keep people out of the criminal justice system.

PREVENTING ADDICTION-RELATED SUICIDE

People experiencing substance use and gambling disorders are at an increased risk of suicide. In August, Turning Point made a submission on Victoria's Suicide Prevention and Response Strategy.

It recommends greater investment in alcohol, other drug and gambling treatment services to reduce unmet treatment demand and place downward pressure on suicide rates.

It also calls for training of healthcare providers to effectively respond to suicidality among people experiencing addiction, a best practice suicide prevention model of care for alcohol and other drug and gambling helplines, and a scale up of successful anti-stigma campaigns to promote help-seeking among people struggling with addiction.

ADDRESSING THE HARMS OF ONLINE GAMBLING

Australians have the highest per capita losses on legal forms of gambling in the world – \$25 billion in 2018–19. People who gamble online are more likely to struggle with gambling than those who gamble only at physical venues, and as the online gambling industry has grown, rates of participation have also increased.

"For our organisation to be offered a chance to lead this change, and to work towards a solution, is such a tremendous privilege and I am delighted to be offered this opportunity."

A/PROF SHALINI ARUNOGIRI
Clinical Director for the Hamilton Centre



"Shalini's leadership and experience will be crucial in ensuring Victorians living with mental illness and substance use or addiction receive the care they deserve."

PROF DAN LUBMAN AM

Executive Clinical Director, Turning Point



In November, Turning Point made a submission to the Commonwealth Inquiry into online gambling and its impact on those experiencing gambling harm.

It recommends a National Strategy to Prevent and Reduce Gambling Harms be developed, the National Consumer Protection Framework for Online Wagering in Australia strengthened, in-play betting prohibited, simulated gambling and gambling-like activities regulated, and gambling advertising rules tightened to protect children and vulnerable Australians from gambling harms.

TURNING POINT APPOINTED VICTORIA'S NEW STATEWIDE SPECIALIST SERVICE

In March, the Minister for Mental Health, the Hon James Merlino MP, and Minister for Health, the Hon Martin Foley MP appointed Turning Point as Victoria's new Statewide Specialist Service for people living with mental illness and substance use or addiction.

The newly created Statewide Specialist Service is the result of the Royal Commission into Victoria's Mental Health System, which identified the lack of integrated care as an area needing urgent attention.

Named in honour of Professor Margaret Hamilton, Hamilton Centre will work towards a best practice model of integrated care for people with co-occurring substance use or addiction and mental illness, and help build the capability of clinicians within the new Mental Health and Wellbeing Services.

Working together with a range of key stakeholders including people with lived and living experience, The Hamilton Centre will help build the capability of clinicians within Area and Local Mental Health and Wellbeing Services, as well as Alcohol and Other Drug Services in delivering integrated care.

In June, Turning Point announced the appointment of Associate Professor Shalini Arunogiri as Clinical Director for The Hamilton Centre.

A/Prof Arunogiri said integrated care is often referred to as a wicked problem with many Victorians and their families living with addiction and mental illness falling through the cracks in the system.

"For our organisation to be offered a chance to lead this change, and to work towards a solution, is such a tremendous privilege and I am delighted to be offered this opportunity," said Associate Professor Arunogiri.

Turning Point Executive Clinical Director, Prof Dan Lubman AM, said supporting the delivery of integrated care is a key focus for The Hamilton Centre and Turning Point is thrilled to appoint A/Prof Arunogiri to the role.

"Shalini's leadership and experience will be crucial in ensuring Victorians living with mental illness and substance use or addiction receive the care they deserve."



IMPROVING THE CLIENT EXPERIENCE

PEER SUPPORT WORKERS: A GUIDING HAND IN THE RECOVERY JOURNEY

Turning Point is fortunate to have a peer support workforce with expert lived experience who are skilled in walking alongside clients on their journey towards recovery and harm minimisation. Our peer support workers instil hope and have a welcoming presence alongside our skilled clinical team.

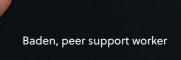
Peer support workers partner with a number of clients providing support, encouragement and a guiding hand to assist and contribute to improved outcomes in their recovery journey.

They are an integral part of a multidisciplinary clinical team that supports clients on initial entry to the clinical program and between appointments, whilst also contributing to team meetings and clinical reviews to help the team stay updated on a client's progress.

Through these interactions our peer support workers, like Baden, assist in supporting clients to follow up on referrals to residential rehabilitation programs, encourage clients to attend to legal matters and help reduce the stigma of help-seeking.

Our peer workers also support clients who are accessing other clinical programs within Turning Point's specialist clinical services programs, such as AOD Pathways, demonstrating the collaborative work of our clinical team and peer support workforce to ensure that clients remain at the centre of care delivery.

Turning Point benefits significantly from our peer support workers through their stories and lived experience of accessing alcohol and other drug treatment (AOD) services. By working together, we can improve the accessibility, and quality and safety of Turning Point programs across all treatment services.





VISITORS

In May, we welcomed Leader of the Reason Party Fiona Patten MLC to Turning Point. Fiona has been a strong supporter of Turning Point for many years and it was great to sit down with her and talk about our work and the opportunities we have to rethink how we respond to addiction in Australia.

During her time as a Member of the Legislative Council, Fiona has been a strong advocate for drug law reform, having seen the establishment of Richmond's Medically Supervised Injecting Room and the Inquiry into the use of cannabis in Victoria.

Earlier this year, Fiona also put forward a bill to the Victorian parliament seeking to decriminalise the use and personal possession of all illicit substances. Turning Point is grateful for Fiona's work in drug law reform, which is aimed at minimising harm and improving the lives of those living with addiction.

Turning Point's Eastern Treatment Services (TPETS) service also enjoyed a visit from prominent domestic violence campaigner and former Australian of the Year, Rosie Batty, as part of an event held in recognition of the 16 Days of Rosie Batty and **Tiffany Alston**

Activism against Gender-Based Violence campaign.

TPETS Alcohol and Drug Clinician, Tiffany Alston, presented a Family Violence (FV) Case Study for discussion to highlight how the FV Intervention tools [MARAM, FVISS, Safety Planning] were successfully used to support a client and her two young children to flee family violence and find safety.

Fiona Patten



CHALLENGING CULTURES OF HIGH-RISK DRINKING AMONG MALE HOSPITALITY STUDENTS AND WORKERS

The 'Hospo Drinking Cultures' campaign, a partnership between Turning Point, Monash University and Chisholm Institute, is one of several projects funded by VicHealth's Men's Risky Drinking Initiative to raise awareness of and shift the elements of practice that influence men's high-risk drinking.

Through a series of short animated documentaries, the campaign features personal stories of how men are navigating and changing hospitality drinking cultures to facilitate low risk drinking, alternative ways of winding down after a shift, and care between hospitality workers.

The animations were informed by previous research which was undertaken to better understand the social worlds where men are drinking alcohol at high-risk levels.

The research found that of the four male social worlds examined, metropolitan-based hospitality workers reported themselves to have the highest

proportion of high-risk drinkers and indicated high-risk drinking activity on a more regular basis.

Many hospitality students and staff agreed workers drinking within hospitality workplaces was more common compared to the "average" Australian workplace.

"As part of the current project, we surveyed almost 300 hospitality workers and students and conducted 40 in-depth interviews to gain an understanding of the experiences, settings, shared meanings, skills and practices of alcohol consumption in hospitality," said Dr Michael Savic.

"Hospitality work can be really rewarding, but it can also be demanding, stressful, undervalued and precarious and the COVID-19 situation has amplified this uncertainty.

Challenging hospitality work rhythms, conditions and environments can place a toll on physical and mental health which can contribute to drinking."

"Hospitality work can be really rewarding, but it can also be demanding, stressful, undervalued and precarious and the COVID-19 situation has amplified this uncertainty."

DR MICHAEL SAVIC

Senior Research Fellow (Addiction Studies) and Strategic Lead of the Clinical and Social Research Team, Turning Point and Monash University





"These animations highlight ways to reduce harms from alcohol products by encouraging alternative methods of staying connected with colleagues."

DR SANDRO DEMAIOChief Executive Officer, VicHealth

"These animations describe workplacedriven stressors and tell the stories of how real people have found other ways for colleagues to debrief, bond and relax after a demanding shift.

The experiences highlight the role that workplaces can play in cultivating healthy work environments, and reduce high risk drinking which can lead to an improvement in the health and wellbeing of staff."

The campaign website www.hospodrinkingcultures.org.au features five animations as well as ways to support culture change and wellbeing in the hospitality industry.

VicHealth CEO Dr Sandro Demaio said, "It's concerning that some hospitality workers feel pressure to be part of a drinking culture, a culture that has been perpetuated by the alcohol industry."

"These animations highlight ways to reduce harms from alcohol products by encouraging alternative methods of staying connected with colleagues."

Chisholm CEO, Stephen Varty added, "At Chisholm Institute, we take pride in our efforts to continuously provide our students with the most up to date and researched educational offering possible.

Our partnership with Monash University and Turning Point will help to arm our students with an understanding of safe and sensible alcohol consumption in hospitality.

From this, they will be able to make informed decisions as they transition from education into the hospitality industry."

The campaign aims to get people talking with their colleagues, fellow students and teachers about how to support alcohol culture change in hospitality workplaces.



EXPLORING LOW-COST, LOW-RESOURCE WAYS TO INCREASE ATTENDANCE IN ADDICTION TREATMENT

Helping clients attend appointments leads to improved outcomes, however there is limited information on low-cost, low resource ways services can support increased attendance.

Completion rates for addiction treatment vary between substances and care settings. In 2019–2020, planned completion of treatment was 57 per cent for outpatient counselling, and 47 per cent for inpatient/rehabilitation settings.

Having low attendance and retention rates compromise the effectiveness of treatment in clinical settings.

Research led by Turning Point clinical psychologist, Dr Adam Rubenis, explored low-cost and low-resource ways to increase client attendance in counselling

for addiction treatment and found practical strategies clinicians can use in their current practice.

Such strategies include role induction; pre-treatment written or verbal contact; short message service and telephone reminders; and contracting, prompting and reinforcement.

One useful method, role induction, requires clinicians to talk to clients about what to expect from treatment before starting, the trajectory of their treatment and success rates.

Dr Rubenis said there were good benefits from text and phone reminders, as well as social reinforcement.

"The review showed text and phone reminders had a consistent positive impact on early attendance, although that did tend to weaken over time and for individuals with more complex needs."

Contracting, prompting and reinforcement, which involves getting the client to sign a contract stating they will attend sessions; sending reminders throughout treatment (prompting) and providing social reinforcement through things such as certificates, also proved effective.

"We found that although this was a protracted method for increasing attendance, it was found to be low-cost and effective," said Dr Rubenis.

"We found that although this was a protracted method for increasing attendance, it was found to be low-cost and effective."

DR ADAM RUBENIS
Psychologist, Specialist Clinical Services, Turning Point





BARRIERS TO ACCESSING ADDICTION TREATMENT FOR WOMEN AT RISK OF HOMELESSNESS

When it comes to addiction treatment services, women face significant barriers in accessing care.

Women comprise less than a third of clients in Australian addiction treatment services. Shame, stigma and fear of legal and social repercussions have all been identified as major barriers for women seeking treatment. For women at risk of homelessness these barriers are only compounded.

Research conducted by Turning Point and published in *Frontiers in Global Women's Health* found that system-related, socio-cultural, and emotional barriers contribute to women at risk of homelessness accessing AOD treatment.

Turning Point Clinical Director, Shalini Arunogiri who led the study says accommodation stability was an immediate system-related barrier for women.

"Women told us that having no fixed address meant that women could not be waitlisted for a specific service and where someone had frequent changes of address, particularly if these were across catchments, eligibility for services was often jeopardised."

"Chronic homelessness also impacted on women's ability to attend different addiction treatment services, such as long-term residential rehabilitation. "Chronic homelessness also impacted on women's ability to attend different addiction treatment services, such as long-term residential rehabilitation."

A/PROF SHALINI ARUNOGIRI Clinical Director, Turning Point

Of the socio-cultural barriers, literacy levels, gender roles and participants' lifestyles all presented as obstacles for women seeking treatment.

"Some women reported that the language used by clinicians or service providers was sometimes difficult for them to understand, while others noted accessing information via digital platforms was limited due to the insecurity of homelessness and the costs associated with owning a smartphone," said A/Prof Arunogiri.

For women that had children or who were acting as carers for others there was limited suitability of specific programs, such as outpatient services which typically only operate during business hours, making access to treatment difficult.

Women also reported that they would often prioritise the care of family over their own health and wellbeing.

"We found that many women felt that services disregarded their roles as mothers and carers and that they failed to understand the impact that this has on them accessing and maintaining engagement in treatment."

Despite the identification of these barriers, the number of women accessing AOD treatment remains low, and overall, women are underrepresented in treatment.

A/Prof Arunogiri says that to improve outcomes for women at risk of homelessness accessing addiction treatment a person-centred approach to care is critical.

"We need to be engaging women in treatment services at every level, and seeking feedback on their interaction with services, so we can work better together to design programs that meet women's needs."



GHB-HARMS PRIOR TO AND DURING THE COVID-19 PANDEMIC IN VICTORIA

Gamma-hydroxybutyrate (GHB) use and attributable harms have been increasing in Australia over the past few years, however, knowledge about how severe those harms are, and how many require an ambulance to attend, remain relatively unknown. The impact of COVID-19 restrictions has also raised challenges as to how GHB use and harms changed during lockdowns, particularly in metropolitan Melbourne.

However, Dr Rowan Ogeil, A/Prof Debbie Scott and the team at Turning Point have been able to answer some of these questions utilising a novel population-based surveillance system to identify the types of GHB-related harms between January 2018 and 31 December 2021 in Victoria.

"Even before COVID and the lockdowns we noticed that GHB harms have been increasing in our ambulance data for a number of years," said Dr Ogeil.

The value of this dataset is that there are not many public health databases that can track drug and alcohol harms.

"It gives us a larger population to work with compared to looking at individual

case studies or surveys. With the National Ambulance Surveillance System (NASS) we are able to track alcohol and drug harms across the population over time."

Using data from the Victorian arm of NASS, the study used a cross-sectional, retrospective analysis of all GHB-related ambulance attendances during this time period and used paramedic clinical notes and Glasgow Coma Scale scores, which is a measure that assesses a person's conscious state.

The study also considered certain demographics such as age and gender, and whether the patient lived in metropolitan or regional Victoria.

There were 6,836 ambulance attendances for GHB recorded during the study period. A statistically significant increase in GHB-related attendance numbers was observed since 2019.

"The most important finding was the significant number of severe harms that were being encountered by paramedics."

"We also found that the poorest outcomes occurred in people who were combining GHB with other depressant drugs such as alcohol. These people were more likely to be considered a severe case."

The study found that overdose accounted for 56 percent of GHB-attendance harms and a loss of, or altered state of consciousness accounted for 45 percent.

Approximately 84 percent of GHB-related attendances required transportation to hospital and the highest rates of GHB-related attendances occurred in metropolitan Melbourne.

"This study has shown the value in using ambulance surveillance data to track harms across a population. We are proud of our partnership with ambulance services in being able to deliver key clinical information that informs both State and Federal government policy," said A/Prof Scott.





INVESTIGATING POST COVID ALCOHOL RELATED HARMS

Turning Point's National Addiction and Mental Health Surveillance Unit (NAMHSU) secured funding from VicHealth to research alcohol-related harms in the post COVID era.

The NAMHSU team received the grant to fund a innovative research project which seeks to understand alcohol-related harms in the post COVID era.

Using surveillance data provided by ambulance services, NAMHSU aims to identify geographic 'hotspot' areas of alcohol availability and harm, and create appropriate localised policies to reduce these issues.

Deputy Strategic Lead of the National Addiction and Mental Health Surveillance Unit, Dr Rowan Ogeil, said that there have been a lot of changes to alcohol availability and use across the community due to COVID, which need to be addressed.

"Previous research has reported elevated alcohol-harms in relation to major events, but has often focused on metropolitan areas only. We want to expand our understanding of harms into regional areas as well as cities, and understand how things have changed compared to pre COVID times."

During the COVID-19 pandemic, the Victorian Government relaxed licensing regulation laws to allow more businesses to sell and deliver alcohol.

Between 2019 and 2020, the sale of alcohol in Victoria increased by an extra \$15 million each week. This increasing trend continued in 2021, with first quarter sales of alcohol

"Our mixed-methods approach, which will enable key stakeholders, treatment services, government, and those who have lived experience of alcohol-related harms to be directly involved in our research."

DR ROWAN OGEIL
Deputy Strategic Lead of the National Addiction
and Mental Health Surveillance Unit

into homes being \$187 million higher than the same period pre-pandemic in 2019.

With a lack of evidence about where and when alcohol-related harms occur and who is most at risk post COVID, NAMHSU's study will be essential in filling these gaps.

"Assessing changes in alcohol-related harms in the post COVID-19 recovery is timely, as changes to liquor licensing and harms associated with new norms post COVID may differ significantly from pre COVID," Dr Ogeil said.

"This information can directly inform policy and interventions to reduce these harms in the future."

The NAMHSU team will soon commence this two year research project and will use both a unique surveillance system and co-design method to conduct their research.

"Our mixed-methods approach, which will enable key stakeholders, treatment services, government and those who have lived experience of alcohol-related harms to be directly involved in our research."

Turning Point will partner with Ambulance Victoria (AV), the Victoria Department of Health, and the Australian Institute of Health and Welfare (AIHW) on the research project.

All three organisations have a long-standing partnership with Turning Point and working together on this project to understand alcohol-related harms post COVID will ensure these partnerships continue well into the future.

"This research builds on a long and productive history of collaboration between Ambulance Victoria and Turning Point and further highlights the value of using ambulance data to examine population health trends and policy impacts," Director, Centre for Research and Evaluation, Ambulance Victoria Professor Karen Smith said.

"Of particular interest is the co-design approach of this research which will further strengthen the relationship between Turning Point and collaborating partners such as AV and the Victorian Department of Health."



TELEPHONE-DELIVERED INTERVENTION **EFFECTIVE IN REDUCING ALCOHOL USE**

Ready2Change is a counselling intervention program delivered by phone to support individuals looking to reduce their drug and alcohol use. The program includes six telephone counselling sessions with a psychologist or social worker, and clients also receive information outlining practical solutions to decrease their drug use.

While Ready2Change has received positive feedback from clients, recently conducted research by our research team looked to examine the effectiveness of the program.

"Telephone services can offer really convenient support outside of those 9 to 5 working hours and can help overcome challenges, such as distance, work and family commitments, by providing access to safe space treatments. It also helps with systemic issues and stigma," Trial Co-ordinator Dr Jasmin Grigg said.

Currently, alcohol consumption is a leading cause of preventable morbidity and mortality globally and alcohol use disorders are estimated to affect 5.1 percent of the adult population worldwide.

"If we could prove that a telephonedelivered model could be beneficial, it would be a great addition to the current services already provided in Australia," Dr Grigg said.

The research examining Ready2Change was published in world leading journal JAMA Psychiatry, and focused on telephone interventions for alcohol usage. The double-blind, randomised clinical trial recruited participants from across Australia with an Alcohol Use Disorders Identification Test (AUDIT) score of greater than six for female participants and seven for male participants during the period of May 2018 and October 2019.

Of the 344 participants, less than one-third had sought alcohol treatment.

"We wanted to use a more scientifically rigorous design to examine the effectiveness of the program and build evidence for telephone intervention," Dr Grigg said.

Since 2020, access to treatment has been severely disrupted by COVID-19, which has further driven alcohol consumption and related harms among vulnerable groups.

However, the findings from this research found the intervention was effective in reducing alcohol use and reduced alcohol problem severity when two or more sessions were delivered.

Although telephone and online services are typically an initial point of contact within the alcohol treatment system, the results of the study highlight the potential for telephone-delivered interventions to benefit individuals across the spectrum of alcohol use disorder.





MDMA-ASSISTED THERAPY TO TREAT AUD AND PTSD

Prof Dan Lubman AM and A/Prof Shalini Arunogiri are part of an interdisciplinary team of researchers awarded over \$1.9 million to investigate the efficacy of MDMA-assisted psychological treatment to treat people with alcohol use disorder (AUD) and post-traumatic stress disorder (PTSD).

The project is one of seven clinical trials announced by the Federal government under the Medical Research Future Fund (MRFF) to test the use of potential breakthrough combination therapies to treat debilitating mental illnesses.

The team, led by A/Prof Kirsten Morley from the University of Sydney, will conduct a world-first clinical trial to determine the feasibility of embedding integrated, exposure-based treatment for PTSD and AUD and MDMA in health practice, including within alcohol treatment services.

"We're incredibly excited to be part of this extraordinary interdisciplinary team and to be involved in this first ever clinical trial of MDMA-assisted therapy for PTSD and addiction," said Prof Lubman.

"We're incredibly excited to be part of this extraordinary interdisciplinary team and to be involved in this first ever clinical trial of MDMA-assisted therapy for PTSD and addiction."

PROF DAN LUBMAN Executive Clinical Director, Turning Point AUD and PTSD is a common comorbidity causing significant harm to patients and has profound social, health and economic consequences. One in four Australians will develop an AUD in their lifetime, with 30-40 percent of those seeking treatment also experiencing PTSD.

A/Prof Arunogiri says that many people seek treatment for AUD and PTSD separately and for those that do seek treatment for these comorbidities at the same time, existing interventions are ineffective in half of all patients.

"We have seen promising studies showing the effectiveness of MDMAassisted therapy in the treatment of PTSD, but there have been no trials investigating MDMA-assisted therapy for both AUD and PTSD."

"This funding recognises the prevalence and impact of AUD and comorbid PTSD on the community and the need to develop novel interventions to deliver better outcomes for patients."





APP TRIAL TO HELP REDUCE DRINKING

A/Prof Victoria Manning received an NHMRC Clinical Trials and Cohort Studies Grant to investigate whether an app can help people with alcohol use disorder (AUD) reduce their drinking.

A/Prof Manning is leading a team of researchers to conduct a randomised controlled trial of an Alcohol Avoidance Training App (AAT-App), which uses a form of computerised "brain-training" called Cognitive Bias Modification (CBM), to determine whether people with AUD that are not currently accessing treatment can reduce their alcohol consumption.

Regular drinking can sensitise the brain's reward system to alcohol cues, like sights, sounds, people or places that have become associated with drinking, and this can lead to the development of a cognitive bias to alcohol cues.

These cues then subconsciously capture our attention and drive automatic impulses to seek out and consume alcohol as if on 'autopilot'. AAT-App aims to weaken cognitive bias to alcohol cues so that we can make more conscious choices when it comes to drinking alcohol.

A/Prof Manning said the team were delighted to receive a CTCS Grant for their trial.

"This grant will enable us to conduct the first ever fully-powered double-blind RCT of smartphone-delivered cognitive bias modification with people in the community."

The trial is recruiting 1600 participants across Australia with an alcohol use disorder that are not currently in treatment and is asking them to complete weekly training sessions taking just a few minutes each time for four weeks.

With around one in five Australian adults meeting the criteria for an alcohol use disorder (AUD) during their lifetime, and approximately 90% of Australians now owning a smartphone, the development of smartphone app interventions may address many barriers to help-seeking.

"Given current trends in alcohol consumption, we are in urgent need of low cost, scalable and convenient tools that can help support people wanting to reduce or quit their drinking," A/Prof Manning said.



How does it work?

SWPE uses evidence-based brain training to help users avo alcohol cues and strengthen conscious control over their drinking.



The Science



"Given current trends in alcohol consumption, we are in urgent need of low cost, scalable and convenient tools that can help support people wanting to reduce or quit their drinking."

A/PROF VICTORIA MANNING Head of Research and Workforce Development





Turning Point teamed up with SHARC to deliver a program of research funded by the Alcohol and Drug Foundation Information and Support for Family and Friends research grant.

The project aimed to generate evidence of the role of group-based education and support for affected family members, including an online peer support group.

SHARC assisted with the recruitment of participants through BreakThrough, a unique program co-faciltated by Turning Point and SHARC that focuses on helping family members across Victoria to better understand addiction, improve communication and wellbeing, and access appropriate support networks, with participants interviewed about their experiences of the program.

The project team, led by Dr Annette Peart, interviewed BreakThrough participants who found the program to be validating and de-stigmatizing, thereby helping shift their approach to coping with and consolidating their understanding of addiction.

Participants reported being able to harness the collective insights of peers and make sense of their experiences through education and support.

Turning Point and SHARC co-designed the online peer support group, which was delivered to 78 participants over six months.

There was a significant improvement in self-efficacy among the group and exit surveys following group attendance found that most were satisfied with the intervention and reported it to be beneficial.

Three themes were identified through a reflexive thematic analysis of interviews: connection with others who share experiences, expertise of facilitators, and accessing support when in crisis.

The collaboration between Turning Point and SHARC highlighted the strength in designing interventions focused on lived experience, and cemented ongoing research project work with both organisations.

"The resources and the information delivered in the session really helped me understand and step back from feeling responsible for the situation my loved one is in."

"You tend to not discuss things with family or friends because of stigma, you tend to try and keep it on the down low and to yourself. But when you do go in a group like that, it's very helpful because you realise it's not just you in that situation, there's a whole lot of other people going through the same thing."

"It's been a really helpful tool for me and I think for so many people it gives them some sense of hope and - I don't know, maybe control or understanding that wasn't there previously [...] they've given me a lot of confidence. A lot of understanding about the kind of decisions that maybe I should be making and the way that I can approach this - a complex issue that's now a part of my world."

Feedback received from participants







WEBINAR HIGHLIGHTS

Turning Point offers an extensive range of webinars to support best practice for health professionals and educators.

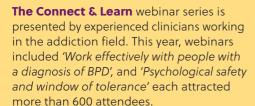
Talking Point is a series of webinars that aims to inspire, inform and challenge our notions of what we know about addiction and its impact across society.

This year included our first hybrid webinar 'Better collaboration and outcomes: case formulation and measurement-based care for substance use disorders' with 259 attendees online and 30 attendees onsite at Turning Point.











Our webinars attracted strong attendance throughout the year with an average of over 220 people tuning in. Health and social sector professionals interested in presenting a webinar can email **TPTraining@turningpoint.org.au**

FEEDBACK:

"Thank you for the amazing opportunity to attend this webinar. I really did learn a lot and as a nurse it has changed my perspective."

"I really enjoyed hearing about this research. Samuel was a great presenter and I found the patient/consumer journey information very informative."

"A big thank you for providing the resources following the 'Psychological safety and window of tolerance' webinar. Turning Point offers such a fantastic series of webinars."

"Having access to such helpful content and resources so frequently from Turning Point is greatly appreciated."



UPSKILLING THE AOD WORKFORCE

Turning Point partnered with the Self Help Addiction Resource Centre (SHARC) and Youth Support Advocacy Service (YSAS) to create a training program and delivery model to upskill the alcohol and other drug (AOD) workforce and improve the wellbeing of individuals, families and communities adversely affected by alcohol, other drugs and gambling.

The training program was created in response to the Victorian Government funding a workforce development program for 100 additional AOD workers due to the increased demand on AOD services following the COVID-19 pandemic.

Turning Point was selected as the Registered Training Organisation (RTO) to deliver the training. Working alongside SHARC and YSAS, we established a co-design and co-delivery model which enables trainers to co-construct the youth AOD client service experience to suit the context of learning.

"By utilising our collective perspectives, we have created an authentic AOD learning environment with enhanced resources," said Strategic Lead, Workforce Development at Turning Point Fay Staios.

The collaborative training program aims to increase awareness of issues that directly affect youth accessing AOD treatment, better engage with clients, and increase compassion and understanding which decreases stigma and shame.

"Certain aspects of the YSAS delivery were designed to expose trainees to AOD interventions and treatments that were relevant to young people rather than providing services in the same way as adults. SHARC was able to provide trainees with models of practice, including the perspectives of people living with addiction," Fay said.

"This heightened awareness of, and sensitivity to, the issues for young people accessing treatment led to more compassionate and effective engagement, which decreased the shame and stigma associated with AOD use."

"We are very proud of the work we have done with SHARC and YSAS as we all share a common vision to improve the wellbeing of individuals, families and communities adversely affected by alcohol, other drugs and gambling through the training of a high functioning AOD workforce."

This training program was selected as an oral presentation at the 2022 National Centre for Vocational Education Research (NCVER) conference, and a poster presentation at the 2022 Australasian Professional Society on Alcohol and Other Drugs (APSAD) conference.

Turning Point's Workforce Development team was also nominated as a finalist for the 'Industry Collaboration Award' at the Victorian Training Awards for the development and delivery of the program.

"SHARC was able to provide trainees with models of practice, including the perspectives of people living with addiction."

FAY STAIOS Strategic Lead, Workforce Development, Turning Point





Through Monash University, Turning Point offers three courses in Addictive Behaviours (Graduate Certificate, Graduate Diploma and Expert Master Degree). Our courses are delivered online and part-time to meet professional development and higher education needs, with flexibility to manage competing work-life demands from anywhere in the world!

In 2022 the Victorian Department of Health provided scholarships to workers within the Victorian Alcohol and Other Drug sector to undertake the Graduate Certificate of Addictive Behaviours. The scholarships are an opportunity for workers within the Victorian AOD sector to gain access to a specialised AOD qualification at a postgraduate level.

Elvira Earthstar was a recipient of a scholarship and completed the Graduate Certificate of Addictive Behaviours in 2022. Here, she describes her experience.

"I chose the graduate certificate of Addictive Behaviours, having spent three years working for women with addictions. I wanted to obtain a qualification in the field. As a registered nurse and midwife, I had a good general understanding of addiction but knew there was so much more to discover. The graduate certificate appealed to me because of the high quality of Turning Point's community education, Monash University's

exceptional tertiary education standards, and the course's unique multidisciplinary approach. I learned from professionals in nursing, psychiatry, social sciences, medicine, social work, psychology and more. Attending online lectures at times that suited me was terrific - as a busy clinician and parent, having flexible study schedules made the course accessible.

I received a scholarship from the Department of Health, which meant the course was affordable, I don't think I would have embarked on it otherwise. Providing this support for upskilling people working in health and social support makes for a more professional workforce, and I am pleased the government is providing this support for our sector.

Since completing the course my work with women with addictions has continued to be rewarding. The course gave me space to learn the broader social policy context and legislative history of substance use in Australia.

I have used the knowledge I gained to engage in advocacy for urgently needed change in the sector. I have contributed to the review of the Medically Supervised Injecting Room at North Richmond Community Health and met with politicians

to tell the stories they need to hear.

I would recommend this course to anyone who works with people living with addiction. The course has a foundation of respect for the individual, collaboration, hope for the future and a view to achieving structural change. The lecturers and tutors are friendly, approachable and so knowledgeable. Zoom sessions and message boards help create a sense of community with other students. Learning from others working in the field was a definite highlight."



Elvira Earthstar

"I enjoyed the interactive activities, such as watching an expert complete an AOD assessment, then having a go myself and assessing it against the expert's results."

Feedback received from our 2022 cohort



INCREASING OUR REACH

3,237,790 27,220 7,340 123,342 2,413 total social media social media total total follower total followers posts/tweets content views increase engagements (impression/ reach) 203,128 186,946 702,823 1,425,222 4,034 website total social forum users new forum users forum posts sessions media followers and comments

	₩ Website	f Facebook	Twitter	in LinkedIn	<u>ර</u> Instagram
Turning Point TREATMENT-RESEARCH-EDUCATION	turningpoint. org.au	Turning Point	@TurningPointAU	Turning Point Addiction Treatment, Research and Education	
COUNSElling ONLINE a TURNING POINT Service	counselling online.org.au	Counselling Online	@CounsellingOnAU		
gambling help 🎎 Online	gamblinghelp online.org.au	Gambling Help Online	@GamblingHelpAU		
Nurse & Midwife Support	nmsupport. org.au	Nurse & Midwife Support	@NMSupportAU	Nurse & Midwife Support	@NMSupportAU
Dental Practitioner Support	dpsupport. org.au	Dental Practitioner Support	@DPSupportAU	Dental Practitioner Support	
Rethink Addiction	rethinkaddiction. org.au	Rethink Addiction	@rethinkadd		@rethinkadd



MEDIA HIGHLIGHTS



60 pieces of coverage

(total number of online, offline and social clips)



1.63M

(prediction of lifetime views of coverage, based on audience reach and engagement rate on social media)



1.45B

audience

(combined total of publication-wide audience figures for all outlets featuring coverage)

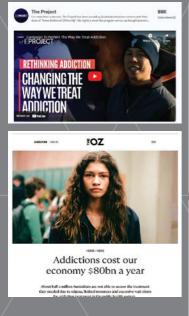


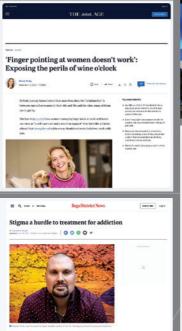
65.3K

engagements

(combined total of likes, comments and shares on social media platforms)

EXAMPLES OF PRINT AND TV MEDIA THAT TURNING POINT STAFF PARTICIPTATED IN:











HELPLINE SERVICES

Alcohol and Drug Helpline Services

DirectLine Victoria

% 1800 888 236

Ice Advice Line

\(\) 1800 423 238

Northern Territory Alcohol and Drug Information Service

% 1800 131 350

Tasmanian Alcohol and Drug Information Service

% 1800 811 994

Victorian Drug Diversion Appointment Line (Police Only)

Victoria Police e-Referral Program

Family Drug Helpline

& 1300 660 068 (after hours)

Online Counselling and Support Services

Counselling Online (AOD - national)

www.counsellingonline.org.au

Gambling Help Online (national)

www.gamblinghelponline.org.au

SANE Forums

www.saneforums.org (after hours forum moderation)

DirectLine Online Counselling (Victoria)

www.directline.org.au

Consultation Services Victorian Drug and Alcohol Clinical

Advisory Service

% 1800 812 804

Tasmanian Drug and Alcohol Clinical Advisory Service

% 1800 630 093

Northern Territory Drug and Alcohol Clinical Advisory Service

% 1800 111 092

ACT Drug and Alcohol Clinical Advisory Service

03 9418 1082

Gambling Helpline Services

Gambler's Helpline Victoria

% 1800 858 858

Gambling Helpline NSW

% 1800 858 858

Gambling Helpline Tasmania

% 1800 858 858

Gambling Helpline Northern Territory

1800 858 858 (after hours)

Gambling Helpline South Australia

1800 858 858

Gambler's Help Youth Line Victoria

% 1800 262 376

Warruwi Gambling Help

\(\) 1800 752 948

Support Services for Health Professionals

Nurse and Midwife Support

% 1800 667 877

www.nmsupport.org.au

Dental Practitioner Support

% 1800 377 700

www.dpsupport.org.au

Information websites

AODstats

www.aodstats.org.au

DirectLine (AOD)

www.directline.org.au

Drug and Alcohol Clinical Advisory Service (DACAS)

www.dacas.org.au

Counselling Online (AOD)

www.counsellingonline.org.au

Gambling Help Online

www.gamblinghelponline.org.au

⟨



PARTNERSHIPS

Each year, Turning Point works with a range of organisations across the alcohol and other drug sector, gambling help sector, broader healthcare community, government and academia.

The collaborative relationships we share with our partners are invaluable and we are extremely grateful to them for their assistance, whether it is through funding, project participation, advice or support.

Below is a list of organisations that Turning Point has been fortunate to work with in 2022.

- ACSO-COATS
- ▲ Access Health & Community
- ▲ ACT Ambulance Service
- ▲ ACT Health
- ▲ Albert Road Clinic
- Alcohol and Drug Foundation
- ▲ Alcohol Office
- NSW Health Alcohol Research Group Emeryville, California, USA
- ▲ Alfred Health
- Ambulance Victoria
- ▲ Amity Services Northern Territory
- Area 4 Pharmacotherapy Network
- Association of Participating Service Users
- Auckland University
- Aurelius Australian Catholic University
- Australasian Chapter of Addiction Medicine
- ▲ Australian Community Support Organisation
- Australian Health Practitioner Regulation Authority
- Australasian Injury Prevention Network

- Australian Institute of Family Studies
- Australian Institute of Health and Welfare
- Australian National University
- Australian Rechabite Foundation
- Australian Research Council
- Australasian Vital Statistics Interest Group
- Ballarat Community Health Centre
- ▲ Banyule Community Health Service
- ▲ Barwon Health
- ▲ Barwon Youth
- Bendigo Community Health
- ▲ beyondblue
- ▲ Bouverie Centre
- ▲ Breast Screen Victoria
- ▲ Burnet Institute
- ▲ Camurus
- ▲ Cancer Council Victoria
- ▲ Caraniche
- ▲ Catholic Care
- Centre for Addiction and Mental Health, Toronto, Canada
- Centre for Health Initiative, University of Wollongong

- Centre for Youth Substance Abuse Research, University of Queensland
- Commonwealth Department of Health
- ▲ Chisholm TAFE
- ▲ City of Melbourne
- ▲ City of Port Phillip
- lacktriangle City of Stonnington
- ▲ City of Whittlesea
- ▲ City of Yarra
- Curtin University
- ▲ Dandenong Drug Court
- Dandenong Magistrates Court
- Deakin University
- ▲ Defence Health
- ▲ Dental Board of Australia
- ▲ Department of Communities, Queensland
- Department of Health and Human Services, Tasmania
- Department of Health and Human Services, Victoria
- Department of Health, Commonwealth
- ▲ Department of Health, Northern Territory
- Department of Justice, Victoria
- Drummond Street Services

- ▲ EACH
- ▲ Eastern Health Foundation
- ▲ Eastern Melbourne PHN
- ▲ Eastern Domestic Violence Service (EDVOS)
- ▲ Families Australia
- ▲ Flinders University
- ▲ Florey Institute of Neuroscience and Mental Health
- ▲ Gateway Community Health
- ▲ Gay and Lesbian Health Victoria
- ▲ George Institute
- ▲ Google
- Harvard University Medical School
- ▲ Inspiro Community
- Health Service

 ▲ Institute for Culture
- and Society, University of Western Sydney
- ▲ Institute for Social Science Research, University of Queensland
- ▲ Institute of Child Protection Studies (ACU)
- ▲ IPC Health
- ▲ Jamison Trauma Institute
- ▲ Jesuit Social Services
- ▲ Knox Community Health Service
- ▲ Latrobe Community Health

- ▲ La Trobe University
- ▲ Latrobe Valley
 Community Health
 Service
- ▲ Leadership Victoria
- ▲ Logan House (Queensland)
- ▲ Malvern Private Hospital
- Melbourne School of Population and Global Health, University of Melbourne
- Mental Health Professionals Network
- ▲ Menzies Institute
- Monash Alfred Injury Network
- Monash Health
- ▲ Monash University
- Movember
- ▲ National Centre for Clinical Research on Emerging Drugs (NCCRED)
- National Drug and Alcohol Research Centre, University of New South Wales
- National Drug Research Institute, Curtin University
- National Health and Medical Research Council
- National Research Centre for Environmental Toxicology, University of Queensland



- ▲ Networking Health Victoria
- New York State Psychiatric Institute
- North Richmond Community Health
- ▲ NSW Ambulance Service
- ▲ NSW Department of Justice
- NSW Health
- Ngwala Willumbong **Aboriginal Corporation**
- ▲ Nursing & Midwifery Health Program Victoria
- Nursing and Midwifery Board of Australia
- ▲ Odyssey House
- Orygen Youth Health
- ▲ Penington Institute
- A Peninsula Drug and Alcohol Program
- Peninsula Health
- ▲ Pharmaceutical Society of Australia
- Prevent Child Abuse America
- Queensland Ambulance Service
- Queensland University of Technology
- Radboud University, Netherlands
- ▲ RMIT University
- Royal Australasian College of Physicians
- ▲ Royal Australasian College of General Practitioners
- Royal Australian and New Zealand College of Psychiatrists
- ▲ SalvoCare Eastern
- ▲ SANE
- ▲ San Francisco VA Health Care System
- ▲ Self Help Addiction Resource Centre
- ▲ SMART Recovery International

- ▲ SMART Recovery Australia
- ▲ South Australian Ambulance Service
- South Australian Office of Problem Gambling
- ▲ South City Clinic
- South East Alcohol and Drug Service
- ▲ St John's Ambulance, Northern Territory
- St John's Ambulance, Tasmania
- ▲ St Vincent's Hospital, Melbourne
- ▲ Star Health (formerly Inner South CHS)
- ▲ Stepping Up
- ▲ Taskforce
- ▲ The Salvation Army
- ▲ The Shannon Company
- ▲ Unity Care ReGen
- ▲ University of Amsterdam, Netherlands
- ▲ University of California, San Francisco
- ▲ University of Calgary, Canada
- ▲ University of Melbourne
- ▲ University of Michigan
- ▲ University of Newcastle
- University of New England
- ▲ University of New South Wales
- ▲ University of Oregon. USA
- ▲ University of Queensland
- University of Sydney
- ▲ University of Tasmania
- ▲ University of Waikato, New Zealand
- ▲ University of Washington
- ▲ University of Western Sydney
- ▲ University of Wollongong
- University of Sydney
- ▲ University of Tasmania

- ▲ VicHealth
- ▲ Victoria Police
- Victoria University
- Victorian Aboriginal Community Controlled Health Organisation
- Victorian Alcohol and Drug Association
- Victorian Auditor General's Office
- ▲ Victorian Coroner's Court
- Victorian Institute of Forensic Medicine (VIFM)
- ▲ Victorian Responsible Gambling Foundation
- Victorian Serious Trauma Registry (VSTR)
- ▲ Western Health
- ▲ Western Sydney University
- Windana
- ▲ Women's Alcohol and Drug Services World Health Organisation
- Youth Support and Advocacy Service

Rethink

Addiction

Rethink Addiction is a coalition of organisations advocating for a change to Australia's attitude and response to addiction. Our campaign partners are listed below.

You can also find out more on our website www.rethinkaddiction.org.au

- ▲ Association of Alcohol and other Drug Agencies Northern Territory (AADANT)
- ▲ Alcohol and Drug Foundation (ADF)
- Alcohol, Tobacco and other Drugs Council Tasmania
- ▲ Alliance for Gambling Reform
- Ambulance Victoria

- ACOSS
- ▲ The Australasian College for Emergency Medicine (ACEM)
- ▲ The Australasian Injury Prevention Network
- ▲ The Australasian Professional Society on Alcohol & other Drugs (APSAD)
- Australian Alcohol and Other Drug Council
- Australian Medical Association (AMA)
- Australians for Mental Health
- ▲ Australian Nurses and Midwifery Federation, Victoria Branch (ANMF)
- ▲ Ballarat Community Health
- Barwon Health
- ▲ The Buttery
- ▲ Clean Slate Clinic
- Deakin University
- ▲ Directions Health Services
- ▲ Drug Policy Australia
- ▲ The Drug and Alcohol Nurses of Australasia (DANA)
- ▲ Eastern Health
- ▲ Families Australia
- ▲ FARE
- ▲ First Step
- ▲ The Florey Institute of Neuroscience and Health
- ▲ Goulburn Valley Health and Community Services Union
- ▲ Health and Community Services Union (HACSU)
- ▲ Hello Sunday Morning
- Lived
- Lives Lived Well
- Matilda Centre
- ▲ Mental Health Australia Mental Health Victoria
- Monash University

- ▲ NCFTA
- National Drug and Alcohol Research Centre (NDARC)
- ▲ The NSW Users and AIDS Association (NUAA)
- ▲ Ted Noffs Foundation
- Odyssey House Victoria
- Orvgen
- ▲ Penington Institute
- The Pharmaceutical Society of Australia
- ▲ The Royal Australasian College of Physicians (RACP)
- ▲ The Royal Australian and New Zealand College of Psychiatrists (RANZCP)
- ▲ The Royal Australian College of General Practitioners (RACGP)
- ▲ The Salvation Army
- Real Drug Talk
- SANE
- ▲ Self Help Addiction Resource Centre (SHARC)
- Sir David Martin Foundation
- ▲ SMART (Self Management and Recovery Training)
- ▲ The Sober Awkward **Podcast**
- ▲ Sober in the Country
- ▲ Star Health
- ▲ TaskForce Community Agency
- ▲ The Pharmacy Guild of Australia
- ▲ Turning Point
- Uniting
- ▲ Untoxicated
- Victorian Alcohol and Drug Association (VAADA)
- Windana
- YSAS





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