

Priority Action Area 3

Targeting Smoking, Alcohol and Substance Abuse

The consumption of tobacco and alcohol and the abuse of certain substances place a significant toll on people's health, the functioning of communities and demand on health and support services. DHF has an important role in lessening the effects of substance abuse through the provision of treatment and rehabilitation services, acute and primary health care and family support and children's protection services. The Department also has a key role in promoting prevention through the development and implementation of effective legislation, policy, health promotion, education and prevention services.

Smoking is the greatest risk factor for health: nearly 20% of adult deaths in the NT are directly attributed to tobacco use. Aboriginal people are at particular risk of smoking-related disease, including preventable chronic disease, because of their high rates of smoking. In the NT the non-Aboriginal smoking rate is 31.3% and the Aboriginal smoking rate is 55.9%. This is 2.6 times the national smoking rate and 1.8 times the NT non-Aboriginal adult smoking rate. In 2005, 31.1% of women smoked during pregnancy in the NT.

Territorians consume alcohol at levels judged as risky, or even high risk in the long term. The alcohol-related death rate of Aboriginal Territorians is more than three times the national average, and twice as high as non-Aboriginal people. Heavy drinkers and their families are more likely to experience alcohol-related violence, injury and illness.

NT Aboriginal people are less likely to drink alcohol than non-Aboriginal people: 51% of Aboriginal adults have reported that they abstain - Australia-wide, some 15% of non-Aboriginal adults are abstainers. However, those Aboriginal people who do drink experience higher rates of medical and social problems than non-Aboriginal people.

Key focus areas

- Developing and delivering targeted health promotion and educational strategies and messages
- Assisting in the development and implementation of effective legislation and policy, including having a legislative and clinical responsibility under the *Volatile Substance Abuse Prevention Act*, *Tobacco Control Act* and the *Poisons and Dangerous Drugs Act*
- Offering a range of treatment and rehabilitation services, acute and primary health care and family support and child protection services

Priorities 2009-2012	How to achieve them	Recognising the achievements
Develop and implement effective legislation and policy in the area of substance use and abuse 1	<ul style="list-style-type: none"> • Introduce a comprehensive Smoke Free Policy across all DHF facilities and grounds. 	<ul style="list-style-type: none"> • Reduction in smoking rates among DHF staff
	<ul style="list-style-type: none"> • Develop and report on NT specific tobacco indicators and harms 	<ul style="list-style-type: none"> • NT specific tobacco indicators are developed and published
	<ul style="list-style-type: none"> • Introduce amendments to the <i>Tobacco Control Act</i> 	<ul style="list-style-type: none"> • Policy and legislative amendments are introduced



Priorities 2009-2012	How to achieve them	Recognising the achievements
	<ul style="list-style-type: none"> • Amend the <i>Volatile Substance Abuse Prevention Act</i> to ensure a more streamlined approach to assessment and treatment • Develop <i>Medicines and Poisons</i> legislation that encapsulates new national drugs, poisons and scheduled substances policies 	
<p>Support community action and education to prevent and manage substance abuse</p> <p>2</p>	<ul style="list-style-type: none"> • Expand the Tobacco Incentive Grants Program • Work with Council of Aboriginal Alcohol Programs Services to deliver Certificate III level training to Aboriginal workers in the Alcohol and Other Drugs field • Develop and disseminate the Alcohol Resource DVD and Flipchart 	<ul style="list-style-type: none"> • Increased expenditure on grants programs • Increase in Aboriginal students enrolling and completing Certificate III • Alcohol Resource DVD and Flipchart produced, disseminated and in use
<p>Enhance access to alcohol and other drug interventions through primary and acute health care services</p> <p>3</p>	<ul style="list-style-type: none"> • Implement evidence-based harm minimisation strategies and key initiatives associated with the revised Chronic Conditions, Prevention and Management Strategy and maternal and child health programs • Implement systematic provision of primary level Alcohol and Other Drugs intervention activity across remote health service delivery • Implement the Hospital Based Interventions Project in Royal Darwin Hospital and Alice Springs Hospital • Deliver tobacco cessation training in all NT hospitals and health centres 	<ul style="list-style-type: none"> • Strategies implemented • Increase in number of Alcohol and Other Drugs workers in remote communities • Reported increase in brief interventions through DHF primary health care centres and hospitals • Number of staff attending training sessions • Number of training sessions provided
<p>Expand and improve treatment and rehabilitation options in the community</p> <p>4</p>	<ul style="list-style-type: none"> • Expand options for treatment to support the NT Alcohol Court in partnership with treatment agencies and the Department of Justice • Undertake a review of the treatment service system in Alice Springs • Assess alcohol and other drug service needs in Nhulunbuy and identify the service scope for the Nhulunbuy Special Care Centre 	<ul style="list-style-type: none"> • Increase in NT Alcohol Court referrals accepted into treatment • Increase in completed episodes of care in treatment services across the NT • Nhulunbuy service needs assessed



Priorities 2009-2012	How to achieve them	Recognising the achievements
<p>Improve care for people who are vulnerable and at risk as a result of substance abuse</p> <p>5</p>	<ul style="list-style-type: none"> • Establish a new and larger Sobering Up Shelter in Katherine • Work towards establishing a Tennant Creek Sobering Up Shelter • Develop referral links between the Drink Driver Education Program and treatment services • Undertake a trial project under the National Framework for Protecting Australia's Children to map needs, gaps and potential improvements in the referral processes to alcohol and other drug services for families involved in the child protection system 	<ul style="list-style-type: none"> • A completed facility in Katherine with at least 18 beds • Tennant Creek Sobering Up Shelter established • Number of treatment commencements where Drink Driver Education Program is the source of referral • Project completed



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