

Submission to the Alcohol and Drugs enquiry

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About NWSA

The **National Women's Safety Alliance** brings together a diversity of voices, expertise, and experience to inform and guide national policy on women's safety. The NWSA, established in August 2021, connects the sector, experts, government, and victim-survivors with a shared vision to end violence against women. This will be achieved through consultation, research, and the collaborative development of expert policy advice to government.

More information about NWSA is available on our <u>website</u>.

Introduction

NWSA welcomes the opportunity to respond to the inquiry on health impacts of alcohol and other drugs (AOD) in Australia. addressing this crisis requires an integrated approach that recognises the complex interplay between genderbased violence, AOD misuse, and homelessness. Physical violence is not the only concerning health outcome from substance abuse, AOD plays a significant role in the housing crisis for women leaving domestic violence, both as a factor contributing to the violence they experience and as a barrier to securing safe, stable housing.

Gender based violence in Australia is a growing and major public health issue, AOD substance abuse and addiction plays a significant role in the outcomes for victim survivors and perpetrators. Over 1 in 5 (22%) hospitalisations due to assault by a spouse, domestic partner or family member in 2019–20 involved consumption of alcohol by the person who was hospitalised¹. In 2020 an estimated Between 24% and 54% of Family and Domestic violence incidents reported to police were classified as alcohol-related².

The severity of violence also notably escalates when one or both partners is consuming alcohol or other drugs³. An ANROWS study⁴, looked at 240 women murdered by a current or former male partner between 2010 and 2018, reports more than 60% of the male perpetrators were affected by alcohol or drugs during the homicide. The 2021–22 Personal Safety Survey (PSS) showed that almost half (47%, or an estimated 348,300) of the women who had experienced male perpetrated sexual assault in the past 10 years, reported that they believed alcohol, or another substance contributed to the most recent incident⁵. The 2022–2023 National Drug Strategy Household Survey showed that 21% of respondents aged 14 and over (an estimated 4.6 million people) had been verbally or physically abused or put in fear by someone under the influence of alcohol in the previous 12 months⁶. This leads to poor longitudinal health

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² Mayshak, R., Curtis, A., Coomber, K., Tonner, L., Walker, A., Hyder, S., Liknaitzky, P., & Miller, P. (2022). Alcohol-Involved Family and Domestic Violence Reported to Police in Australia. Journal of Interpersonal Violence, 37(3-4), NP1658-NP1685. <u>https://doi.org/10.1177/0886260520928633</u>

³ <u>Alcohol interventions, alcohol policy and intimate partner violence: a systematic review | BMC Public Health</u> | <u>Full Text (biomedcentral.com)</u>

⁴ <u>Australian Domestic and Family Violence Death Review Network Data Report: Intimate partner violence</u> <u>homicides 2010–2018 - ANROWS - Australia's National Research Organisation for Women's Safety</u>

 ⁵ Personal Safety, Australia, 2021-22 financial year | Australian Bureau of Statistics (abs.gov.au)
⁶ National Drug Strategy Household Survey 2022–2023, About - Australian Institute of Health and Welfare (aihw.gov.au)

outcomes from victims of AOD accelerated gender-based violence⁷. There has been an increase in reporting of Substance use coercion; this refers to coercive tactics that target a partner's use of substances as part of a broader pattern of abuse and control⁸. The evidence is clear; there are unavoidable intersections of the impacts of gender-based violence and substance abuse. We need to ensure that we have multi-disciplinary teams who can look at the complexities that face women and children leaving violence who have been exposed to addiction and the impacts of that addition be that coercive control including, financial abuse and homelessness alongside with physical and psychological violence.

⁷ <u>A life course approach to determining the prevalence and impact of sexual violence in Australia: The</u> <u>Australian Longitudinal Study on Women's Health - ANROWS - Australia's National Research Organisation for</u> <u>Women's Safety</u>

⁸ Mental Health and Substance Use Coercion Surveys 2014 Carole Warshaw, MD; Eleanor Lyon, PhD; Patricia J. Bland MA, CDP; Heather Phillips, MA; Mikisha Hooper, BA

Terms of Reference

a) Assess whether current services across the alcohol and other drugs sector is delivering equity for all Australians, value for money, and the best outcomes for individuals, their families, and society.

Equity for All Australians

- Access Barriers: Many AOD services are not equitably accessible to all populations. Priority populations: such as Indigenous Australians, those in rural areas, and individuals from culturally diverse backgrounds and LGBTQ+ often face significant barriers in accessing these services. This inequity is compounded for individuals experiencing domestic, family or sexual violence (DFSV), who may have limited options due to safety concerns.
- 2. **Tailored Approaches**: Effective AOD interventions need to recognise the complex interplay between addiction and experiences of violence. However, many programs lack the necessary cultural competency and trauma-informed care needed to serve diverse populations effectively. Tailored approaches that consider individual circumstances, including experiences of coercive control and violence, are often missing.

Value for Money

- Resource Allocation: The AOD sector often operates with limited funding, and or short-term funding arrangements that make continuity of care difficult and can lead to prioritisation of certain services over others making a tailored response difficult to each client's specific need. Programs that specifically integrate AOD treatment with DFSV are historically underfunded, despite evidence suggesting that addressing both issues concurrently leads to better longitudinal outcomes. Investing in these integrated services can provide better value for money by reducing long-term costs associated with healthcare, law enforcement, and social services.
- 2. Cost-Effectiveness of Integrated Services: Programs that offer a multidisciplinary response support—such as combining addiction treatment with domestic violence services—yield better long-term outcomes. While initial investments may be higher, the overall savings to the healthcare system and society from reduced recidivism of violence and improved health outcomes offer a clear social return on investment.

Best Outcomes for Individuals, Families, and Society

- 1. Holistic Support: Current AOD services often focus primarily on addiction without addressing underlying issues, such as trauma from violence, or being a victim or violence. A more integrated model that combines AOD treatment with DFSV services can lead to improved mental health, safety, and stability for individuals and families. This holistic approach that can help break the cycle of violence and addiction.
- 2. **Empowerment and Recovery**: Effective services should empower individuals to regain control over their lives. This includes providing skills training, employment support, and safe housing options, which are critical for those escaping violence and struggling with addiction. Programs that emphasise recovery within a supportive environment led to better long-term outcomes.
- 3. **Community Impact**: Addressing the intersections of addiction and DFSV not only benefits individuals but also strengthens communities. Reducing the prevalence of violence and substance abuse can lead to safer, healthier environments, ultimately benefiting broader society and community groups.

International Best Practice

- Scandinavian Model: Nordic countries Sweden and Norway have implemented integrated approaches that combine AOD treatment with social services, focusing on harm reduction and recovery. This model emphasizes community support and ensures that individuals have access to various resources that address both addiction and experiences of violence.
- New Zealand's Integrated Services: New Zealand has developed comprehensive frameworks that involve multiple sectors in addressing family violence, including AOD services. Their "Whānau Ora" approach emphasizes holistic family-centered care, promoting recovery and empowerment through community involvement.

We require a whole-of-government approach, recognising the role that all social services, education and community sectors can play in reducing the harms of alcohol and other drugs. A commitment to integrated, trauma-informed, and

culturally competent services is essential for addressing these complex issues effectively.

While there are promising practices within the AOD sector, significant funding improvements are required to ensure equitable access, maximising social investment, providing service for those experiencing the dual challenges of addiction and domestic violence. By investing in comprehensive support systems, we can ensure better outcomes for individuals and families.