

Symposium Title: Alcohol and other drugs use and treatment among culturally and linguistically diverse communities in NSW.

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Aim: This program of work sought to explore prevalence of risky substance use, barriers and enablers, treatment access, service experiences, and the role of CALD religious and community leaders in supporting treatment and recovery for CALD clients. The project builds on existing collaborations and shared interests between the National Drug and Alcohol Research Centre, Odyssey House NSW and the Network of Alcohol and other Drugs Agencies.

Disclosure of Interest Statement: None

PRESENTATION 1: Who is culturally and linguistically diverse and how are they represented in alcohol and other drug treatment.

Presenting Author: Winifred Asare-Doku

Authors: Winifred Asare-Doku, Catherine Foley, Nirekha De Silva, Teguh Syahbahar, David Kelly, Robert Stirling, Stella Settumba Stolk.

Background: Australia is one of the most multicultural nations in the world. Almost 50% of Australians are of culturally and linguistically diverse (CALD) backgrounds. People from certain CALD backgrounds may be more vulnerable to alcohol and other drug (AOD) use as a result of negative past experiences. Although being at high risk of developing AOD problems and being highlighted in the National Drug Strategy (2017-2026), CALD populations are under-represented in AOD services.

Methods: The 2019 National Drug Strategy Household Survey (NDSHS) survey was used to assess risky substance use and treatment access among CALD populations in Australia compared to the broader population. A systematic review was conducted to assess AOD treatment interventions, services, or initiatives in English-speaking countries.

Findings: Results from the NDSHS survey showed that the prevalence of risky substance use among CALD participants was considerably lower than the general population. CALD participants' access to AOD treatment was also slightly lower. The findings of the systematic review showed that there was no AOD treatment framework specific to people of CALD backgrounds in Australia; lessons can be learned from existing frameworks. Evidence from other countries highlighted the need to involve consumers in the development of such frameworks.

Discussion: Although the prevalence of AOD use is lower among CALD groups compared to the general population in Australia, multiple sources have suggested these data may be unreliable and are limited by the narrow definitions of CALD variables used. This could potentially lead to misclassification of people of CALD backgrounds in treatment.

Implications for Policy: The CALD population is highlighted as a key population across various government and funding bodies. This provides an opportunity to address identified gaps in how data is collected to accurately capture the CALD population in Australia and improve access to treatment. It is important to involve CALD communities as active partners in the research process from identifying research priorities to designing studies, collecting data, and disseminating findings.

PRESENTATION 2: Insights on Culturally Inclusive Alcohol and Drug Treatment from Odyssey Multicultural Program

Presenting Authors David Kelly and Teguh Syahbahar

Authors: Teguh Syahbahar, Nirekha De Silva, Winifred Asare-Doku, Catherine Foley, Robert Stirling, David Kelly, Stella Settumba.

Background: The Odyssey Multicultural Program (OMP) is driven by a heartfelt commitment to meeting the unique needs of Culturally and Linguistically Diverse (CALD) communities, refugees and newly arrived individuals. OMP offers both general and specialised services, engaging closely with communities to ensure comprehensive alcohol and other drug (AOD) support. This approach aligns seamlessly with the AOD Clinical Care Standards (CCS), grounding its strategies in logic and evidence.

Approach: This abstract presents insights from OMP's client centred approach, emphasising its focus on the individual, family and community. Utilising a mixed-methods approach, data were collected through RediCase client management system, client satisfaction questionnaires (CSQ-8), case studies, community engagements and document analysis, reflecting the program's alignment with CCS.

Acceptability: The OMP's commitment to cultural inclusivity is evident through its multilingual staff, culturally adapted interventions, strong community partnerships and projects implemented by OMP, including Transitions project, SMART Recovery Groups and AOD Counselling. These efforts foster deep engagement, satisfaction, and treatment outcomes, resonating profoundly with CALD individuals.

Discussion and Conclusion: By prioritising the person, family and community, OMP exemplifies a comprehensive approach rooted in the AOD CCS. The program's interventions align with the standards, ensuring holistic care for CALD individuals. This holistic approach not only demonstrates improved treatment outcomes but also fosters a sense of belonging and empowerment within CALD communities. OMP's culturally inclusive approach to AOD treatment demonstrates the importance of culturally competent services in addressing the needs of CALD individuals. Through heartfelt engagement and tailored interventions, OMP has yielded positive outcomes for CALD individuals, highlighting the significance of aligning with AOD CCS.

Implications for Practice or Policy: This study emphasises the importance of integrating cultural competence into AOD treatment practices. Policymakers and practitioners should prioritise investments in culturally tailored interventions, recognising their role in fostering engagement, retention, and positive outcomes. By starting with individuals, families and communities, programs can deliver equitable access to AOD treatment and effective care for all individuals seeking support for AOD issues.

PRESENTATION 3: Evaluation of the Transitions Project of Odyssey Multicultural Program - Addressing Needs of Culturally Diverse Clients Released from Prison with Alcohol and Drug Treatment Needs

Presenting Authors: Nirekha De Silva

Authors: Nirekha De Silva, Stella Settumba, Teguh Syahbahar, David Kelly, Catherine Foley, Prajwal Patnaik, Winifred Asare-Doku

Background: Alcohol and Drug (AOD) issues among prison population, particularly those from Culturally and Linguistically Diverse (CALD) background remains a pressing issue. Recognising the need for culturally appropriate and accessible AOD treatment strategies, the Odyssey Multicultural Program offers the Transitions program to support people of CALD background leaving prison,

Method: The study evaluated the Project's impact using focus groups (N=3 focus groups), and post surveys (2022-2023) after completion of the Transitions Project to assess its effectiveness, participant satisfaction and cultural appropriateness.

Key Findings: The projects contribution to housing and accommodation, family and community support, financial support services, drug and alcohol treatment, health and contact with the justice system were the themes generated from the focus groups. The evaluation revealed positive outcomes, including high participant satisfaction and improved substance use outcomes. However, areas for improvement were identified, such as monitoring recidivism post-release support and enhancing access to tailored services.

Discussions and Conclusions: The findings highlighted the importance of cultural relevance in treatment programs and the need for continued refinement to address evolving needs effectively. The Transitions Project represents a significant step in meeting the AOD treatment needs of CALD individuals transitioning from prison. It aligns with national objectives, contributes to reducing recidivism and portrays the importance of continuous evaluation and adaptation.

Implications for Practice or Policy: The study emphasizes the necessity for comprehensive post-release support, increased resources for culturally tailored programs, staff training in cultural competence, and integration of AOD services with other support systems. It also stresses the importance of fostering partnerships with community organizations and regularly evaluating program effectiveness to ensure relevance and impact.

PRESENTATION 4: Where to from here? Walking alongside people from a CALD background in New South Wales, Australia, to co-design an AOD treatment framework.

Presenting Author: Catherine Foley

Authors: Catherine Foley, Winifred Asare-Doku, Stella Settumba, Teguh Syahbahar, Nirekha De Silva, David Kelly, Robert Stirling.

Background. The Odyssey Multicultural Program (OMP) and Network of Alcohol and other Drugs Agencies (NADA) are undertaking a series of programs and evaluations aimed at better meeting the unique needs of Culturally and Linguistically Diverse (CALD) communities, refugees, and newly arrived individuals. Findings thus far have highlighted the importance of integrating cultural competence into AOD treatment programs and ensuring flexibility to address evolving needs effectively. Involving people from CALD backgrounds in developing and guiding AOD treatment was critical. The next research phase advances these findings through wider collaboration with people from CALD backgrounds, researchers, and mainstream AOD service providers to develop a framework for inclusive AOD treatment.

Method. A mixed-methods multi-phase approach is being undertaken to co-design a standardised framework that can be tailored to meet the needs of individual communities and settings. This practical approach was developed and tested by our team at NDARC¹² through extensive collaboration with community members, health providers, and researchers.

Key Findings. Interviews, workshops, and preference studies will be conducted across Southwest and Western Sydney and several locations in regional and rural NSW. Findings will then be combined with our previous results and incorporated into a program logic that defines the AOD framework and offers practical steps to guide services through tailoring and implementing the framework.

Discussion and conclusions. Findings to date have demonstrated the value of health providers coming together with members and leaders of CALD communities to understand and improve AOD treatment. Moreover, interest and urgency to do so were demonstrated amongst health providers and people from CALD backgrounds alike. This next research phase will assist the OMP and NADA in further operationalising their heartfelt commitment to CALD communities, refugees, and newly arrived individuals.

Implications for Practice or Policy. The framework could direct clinical-practice changes to improve access, engagement, and effectiveness of AOD treatment for people from CALD backgrounds. Once tested, there is potential for the framework to be scaled up nationally.

PRESENTATION 5: Engagement with CALD consumers, religious leaders, and community leaders in on AOD challenges and treatment needs.

Presenting Author: Winifred Asare-Doku and Teguh Syahbahar

Authors: Winifred Asare-Doku, Teguh Syahbahar, Catherine Foley, Nirekha De Silva, Rania Omar, Pacifique Ndayisaba, David Kelly, Robert Stirling, Stella Settumba.

Background: The Odyssey Multicultural Program (OMP) has been given the mandate of delivering Culturally and Linguistically Diverse (CALD) specialist Alcohol and Other Drug (AOD) programs and services. Engaging CALD consumers and leaders in identifying treatment barriers and enablers is necessary to develop culturally sensitive services that enable treatment uptake.

Method: Eight CALD religious and community leaders from Western and South-West Sydney were interviewed. Four focus groups (N=16) were held with people from African, Middle Eastern (Arabic speaking), Asian and Pacific Islander backgrounds. Community forums were also held for further deliberations with African religious and community leaders (N= 12) and people with lived experience of Arabic speaking background (N= 30). Thematic analysis was used to analyse the data.

Key Findings: Findings showed a deeper understanding of cultural dynamics and unique needs which highlight the need for culturally competent approaches in service provision. Community forums facilitated open dialogue, revealing multifaceted challenges and aspirations specific to different groups. Although some consumers in the focus groups reported connecting to their faith and that religious and community leaders have been instrumental in their treatment and recovery, others had divergent views. Consumers cited embarrassment, shame and mistrust as major reasons for non-involvement of religious and community leaders in their treatment and recovery. Findings from the interviews with the leaders showed their gatekeeping role in the community whiles providing pastoral care. Religious and community leaders emerged as critical influencers in destigmatising AOD issues and fostering community resilience.

Implications for Practice or Policy: There is potential to form partnerships with religious and community leaders in the provision of support services and prevention programs in communities. By prioritising culturally responsive practices, policymakers and practitioners can ensure equitable access to AOD support services and promote holistic well-being within CALD communities.

PRESENTATION 6: Client preferences for AoD treatment for people from a CALD background in New South Wales, Australia: Developing attributes and attribute-levels for a Discrete Choice Experiment.

Presenting Author: Stella Settumba Stolk

Authors: Stella Settumba, Catherine Foley, Nirekha De Silva, David Kelly, Robert Stirling, Teguh Syahbahar, Winifred Asare-Doku

Background: This study forms part of a wider study using a mixed-methods multi-phase approach to co-design a standardised AoD treatment framework for people from a CALD background that incorporates value-based healthcare principles. The aim of this current study is to assess the preferences, value, and trade-offs for characteristics of a CALD treatment program that will be incorporated in the co-design.

Method: Applied economic methods using a discrete choice experiment (DCE) to elicit client preferences, value, and trade-offs for AoD treatment. Attributes and levels for the DCE were generated through four focus group discussions with AoD CALD clients in Southwest and Western Sydney. Using an experimental design, the final list of attributes and levels will be used to generate a questionnaire for a DCE survey whose results will be incorporated into a co-designed AoD treatment framework.

Key Findings: Clients collectively agreed on principles of a treatment service that they would appreciate, and these included: a culturally sensitive welcoming environment, no racial profiling or discrimination, confidentiality, and being treated with respect and dignity. Six key attributes and their levels were generated with clients having different preferences over the attribute levels. Attributes (and their levels) included: Type of provider (with or without a CALD background), Support (Peers, someone with lived experience, CALD community and family), Treatment space (with or without CALD resources), Treatment type (education/Information, individual psychotherapy, group psychotherapy, pharmacotherapy), treatment outcome (reduced AoD use, improved relationships, reduced contact with the justice system, employment opportunities), Cost per appointment (None, \$25, \$50, \$100), Travel time to appointments (15 minutes, 30 minutes, 45 minutes, 60 minutes). The quantitative DCE will be used to test the strength of these attributes, the value clients place on them, and the differences in preference between CALD groups.

Implications for Practice or Policy: Involving CALD clients in the process of designing a value-based treatment framework will increase its feasibility and acceptability and therefore increase service uptake. Assessing their preferences and value for treatment characteristics will aid the design of the framework.

Discussion Section

The aim of the Symposium is to showcase the ongoing work being done to address alcohol and other drug use and treatment with the culturally and linguistically diverse communities in NSW. The desired outcome of the discussion will be to:

- **Enhance Understanding:** Gain a deeper understanding of the unique challenges and factors influencing AOD use within CALD communities.
- **Explore Best Practices:** Learn about evidence-based practices and innovative treatment models that have proven successful in addressing AOD issues among CALD populations.
- **Network and Collaborate:** Establish connections with professionals, researchers, and community leaders to foster collaboration and share knowledge and resources.
- **Advocate for Change:** Identify policy implications and advocacy strategies to improve access to and the effectiveness of AOD treatment services for CALD communities.

To maximize engagement and learning, the symposium will include the following interactive components:

- Attendees will engage in discussions on how to effectively collaborate with CALD leaders to enhance treatment outcomes and community support
- Attendees will have the opportunity to ask questions, share insights, and discuss challenges and solutions with the presenters.

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