



State and Territory Alcohol and Other Drug Peaks Network – Response to the National Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan 2018-2028

The State and Territory Alcohol and Other Drug Peaks Network (the Network) welcomed the release of the National FASD Strategic Action Plan 2018-2028 (the Plan), and its intention to guide government, service provider and communities by providing “a clear pathway of priorities and opportunities to improve the prevention, diagnosis, support and management of FASD in Australia.”¹

The Network supports the strategic, systemic approach of the Plan to address complex health and social issues associated with alcohol and other drug use. At the strategic level, the Network endorse the Plan in that it aligns with, and inform the implementation of, the National Drug Strategy; National Alcohol Strategy; and the National Aboriginal and Torres Strait Islander People’s Drug Strategy.

Role of the Specialist Alcohol and Other Drug Sector

The specialist alcohol and other drug sector is a critical component in a systemic response to reducing the prevalence and impact of FASD, and improving quality of life for individuals, families and communities. The specialist alcohol and other drug sector provides a range of services that contribute to the progression of the Plan, in particular:

- the design and implementation of prevention and community development initiatives, particularly amongst high risk population groups, that reduces alcohol consumption and builds community understanding and resilience;
- the provision of alcohol and other drug treatment and support services for high risk population groups including women of a child bearing age; and
- the provision of alcohol and other drug treatment and support services for people with FASD.

How the Sector can contribute to a National Approach

There are multiple opportunities to build upon and complement the existing actions of the specialist alcohol and other drug sector to progress the Plan’s priorities. These include:

Prevention of FASD

- Assisting high risk populations – All people have a role in preventing alcohol-exposed pregnancies. There is an opportunity to expand community led alcohol and other drug prevention initiatives such as education and support for community development. The

¹ Australian Department of Health (2018), *National Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan 2018-2028*. Commonwealth of Australia, p. 3.



alcohol and other drug specialist sector is well placed to deliver on these opportunities. At an individual and family level, the specialist alcohol and other drug sector would welcome acknowledgement and further invest in treatment approaches, which are in themselves FASD prevention initiatives.

- **Stigma** – The issue of stigma and discrimination of people experiencing harms associated with alcohol and other drug use is a significant and complex issue. To address the stigmatisation of FASD and the harms associated with alcohol use requires targeted initiatives. These initiatives must build on existing research that indicates a need for a unique approach to informing and addressing “cultural” norms, perceptions of, and complexities associated with, alcohol use. In this regard, adapting stigma campaigns from other sectors, such as mental health, are not appropriate.

Screening and diagnosis of FASD

- **Targeted screening** – Research indicates that disproportionate number of people with FASD will experience issues associated with substance use at some point of their lives.² There is an opportunity to improve the rates of screening at specialist alcohol and other drug services through the development of a tailored screening tool, to inform an adapted model of service to support improved outcomes for people with FASD. Improved screening will contribute to an improved understanding regarding national prevalence rates and sector planning needs.
- **Capacity building** – Noting the high prevalence of people with FASD accessing human services, there is an opportunity to support improved early and brief intervention and referral practices in cross-sector services through capacity building. The specialist alcohol and other drug sector is optimally placed to contribute to the development and delivery of cross-sector capacity building, referral and shared care.

Support and management of FASD

- **Non-custodial options** – The Network supports the expansion of non-custodial therapeutic options for people identified as having FASD within the justice system. These options must be adequately funded and designed to best support high risk population groups, including those diagnosed as having FASD, to ensure these initiatives contribute to improved health and wellbeing outcomes for individuals, families and the community.

RECOMMENDATIONS:

1. Expand community led alcohol and other drug prevention initiatives such as education and support for community development.
2. Acknowledge and further invest in alcohol and other drug treatment approaches, which are in themselves FASD prevention initiatives.
3. Invest in research informed stigma initiatives that deliver a unique and targeted approach to informing and addressing “cultural” norms, perceptions of, and complexities associated with, alcohol use.
4. Develop a tailored FASD screening tool for specialist alcohol and other drug services, to inform an adapted model of service to support improved outcomes for people with FASD.
5. Invest in the specialist alcohol and other drug sector to contribute to the capacity building of human services sectors, to enable improved early and brief intervention and referral practices.
6. Expand non-custodial therapeutic options within the justice system for high risk population groups, including people diagnosed with FASD.

² Streissguth AP, Barr HM, Kogan J, Bookstein FL. Understanding the occurrence of secondary disabilities in clients with fetal alcohol syndrome (FAS) and fetal alcohol effects (FAE) Seattle, Washington: University of Washington; 1996