

DEAR WOMEN OF TOORA,

This report is dedicated to all of you for your hard work and persistence in the face of diversity. I have put as many of you as I can on the cover to show how amazingly fabulous you all are; for it is us collectively that makes Toora Women Inc. great. For those faces I have missed you have done well to avoid the camera this year. I guess there is always next time.

LOVE TO YOU ALL
Jacky



STAFF NEW YEAR 2008





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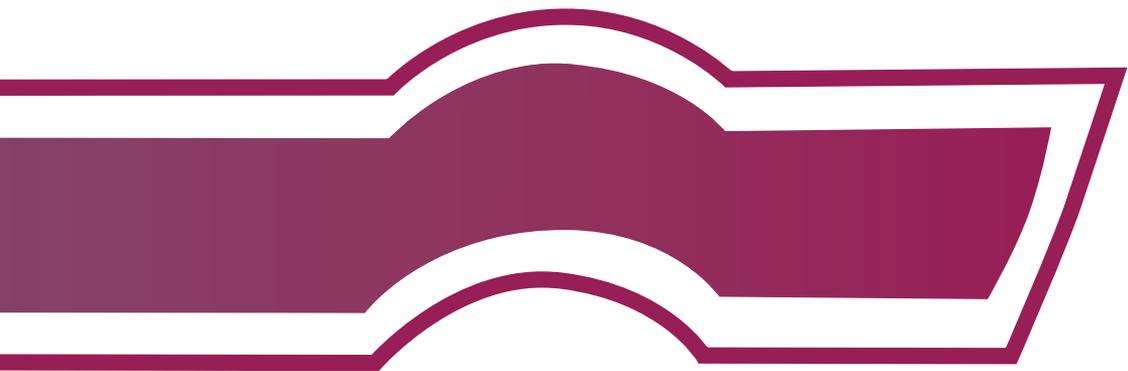


Chair's report

“The leadership team... demonstrated a courage and commitment, that frequently lies dormant or unrecognised in women, yet lies at the heart of feminism.”

The 2007 – 2008 year for Toora Women's Inc. has been one of consolidation and stabilization after a few years of challenge. Jacky Cook was recruited to the position of Executive Director in May 2008 rapidly followed by the recruitment of Branka Trajkovski to the Deputy Director's position. As a new management team, they have given a new energy and direction to the services of Toora Women's Inc.

Prior to Jacky's appointment over the time when there was no Executive Director or Deputy, the Leadership Team rallied and gave the Toora services the leadership and consistency that was needed. They demonstrated a courage and commitment, that frequently lies dormant or unrecognized in women yet lies at the heart of feminism.



Since then Jacky and Branka have built on this leadership over the last year. As a result Toora Women's Inc. is stronger, more stable and better prepared to take on the challenges that make the work at Toora both exhilarating and exhausting! Toora Women's Inc. is in a good position today, the business practices are well developed, the staff are happier and the services are focused on the women of the ACT. Just as importantly, I think we have a better vision for the way forward.

This year has seen a significant turnover in the Board of Toora Women's Inc. Maureen Cane and I were the only remaining members to re stand at the 2007 annual general meeting. I was appointed the chair and Vera van de Velde, Elizabeth Kentwell, Maureen Cane and Margaret Jones were welcomed on to the Board. The organisational representatives voted on to the Board for a two year appointment were Tai Sullivan Advisory Forum (AF) Chair, Yasmin Elferkh AF Vice Chair and Linda Hayden AF representative. This new Board has worked well together, and together with the strong leadership from Jacky and Branka, Toora Women Inc. is thriving.

I will be re nominating for the Board in November and look forward to another fantastic year with Toora Women Inc.

Karen Lenihan
TOORA CHAIR



Karen Lenihan MC at the Toora Women Inc. 25th Birthday



Executive Director report

DEAR WOMEN,

What an amazing Year! I arrived at Toora Women Inc. towards the end of August last year. I found that the organisation had been operating without an executive team for the five months prior to my arrival. The Leadership team had come together to oversee the running of the organisation with the support of the Board. I would like to acknowledge the courage and hard work of the Leadership team and the Board during this difficult time. The passion and dedication of all at Toora Women Inc. is most evident when the organisation is rising to the challenge of the hardest moments. Well done all of you.

On my arrival I meet with some pretty pressing tasks. Organisational budgets were still to be negotiated, with the added pressure of accommodating the final funding reductions. In 2005 the Support Accommodation Assisted Program (SAAP) funding cuts were announced by the Department of Disability Housing and Community Service (DHCS). The Toora Women Inc. SAAP budget was to be reduced by \$200,000. The first \$150,000 was reduced in 2006/2007. This financial year our budget was reduced by the final \$50,000. After the first reduction in 2006/2007 our organisational budget was left with a deficit of \$40,000.

The Toora Women Inc. service, Betty Searle Boarding House for older single women over the age of 55, was in the process of being closed down and the women relocated into DHCS Housing properties. This raised huge concerns for Toora Women Inc, other community members and programs. Our referral rate for women over 55, across our organisation, has increased by 80%.

A C H I E V E M E N T S

After lobbying with Katy Gallagher and meetings with DHCS staff and Executive, a negotiated plan/outcome has been reached. The Department has agreed to return \$30,000 for next financial year to our SAAP budget. An agreement was reached for the use of existing resources to be allocated for an older women's program. This will involve using three of Toora House's existing crisis beds for women over the age of 55 and eight outreach places will be dedicated to older women.

Part of the above negotiation has also seen new funding for the set up of a new Day Refuge at Toora House. The day refuge will commence in the new financial year. It will be a drop-in service for single women. The Day refuge will offer cheap food, education and support groups, and access to a shower and washing machine for homeless women.

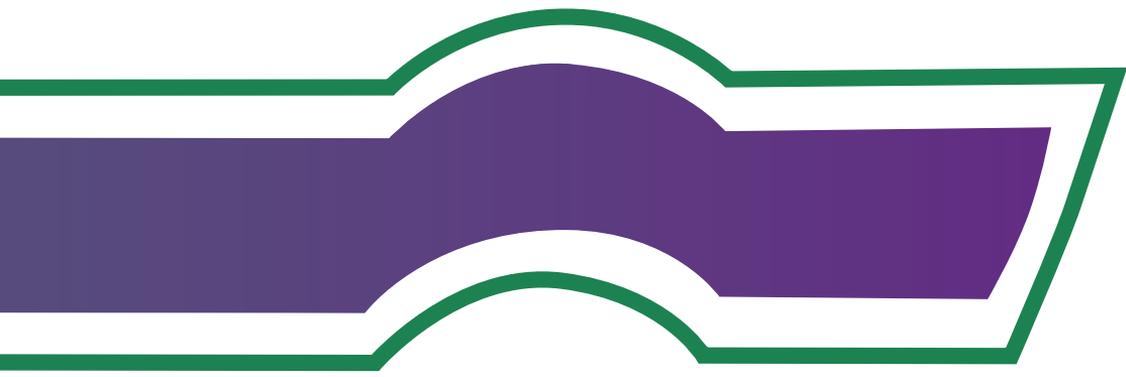


Toora Women Inc. has been successful in securing a further three years funding for our WIREDD program through the Department of Health and Ageing Non Government Organisation Treatment Grant Program (NGOTGP). I would like to take this opportunity to thank Peta Nelson and Charity Burnett for their ongoing support during this process.

Toora Women Inc. has also secured a new grant through the Department of Health and Ageing. An Amphetamine Type Stimulants (ATS) grant to provide sector training to community workers who work with women using ATS. This training will commence early 2009.

Through the ACT Women's Grants we were successful in securing a small grant to provide workers with opportunity to undertake an Explorations of Healing course run by Pia Negri. The course has been created as an elective unit for the University of Canberra. However, the facilitator was happy to create a Toora specific course. The course explores different healing practices from many cultures and the course is a self and professional journey of exploration. I have received overwhelming positive response from the participants and will be pursuing future funding to run the training again.

Heira was successful in securing a small DHCS Community Support Infrastructure Grant for their Involve Project. The project will run for 12 months, providing for women experiencing social exclusion by providing access to community service, orientation, self help groups and places of social interest.



FUTURE DIRECTION

Toora women Inc. receives funding for a number of our service through ACT Health. As part of our contractual agreement we need to engage in an accreditation process for our ACT Health Funded services. As this is a significant three year process Toora women Inc. has decided to have the entire organisation accredited. We have engaged Quality Management Services to deliver the accreditation package. All of our service will be measured across four national standards in relation to quality service delivery. The process will start in November of this year.

“The passion and dedication of all at Toora Women Inc. is most evident when the organisation is rising to the challenge of the hardest moments”

Executive Director
report continued

A W A R D S / T H A N K S

I would like to take this opportunity to thank DHCS, ACT Health and DoHA for their continued support of Toora Women Inc. over the past year.

It is generally accepted that in the community sector we have a staff turn over rate that sits around 30%. I was quite surprised to discover that Toora Women Inc. had, by our Birthday this year, 16 staff members that have been with us 5 to 17 years. It felt appropriate to acknowledge these long serving women. An award ceremony accompanied by a crystal award was given to each of these women at our 25th Birthday celebrations. I would like to take this opportunity to once again thank each of you for your dedication, passion and commitment to the organisation and the women we provide service for.

Dr Charlotte Palmer retired this year. Her dedication to the women of Toora over the years has been commendable. Dr Palmer's compassion and commitment to provide health care to often very unmanageable women has ensured better health outcomes for these women. Thank you Charlotte from us all at Toora women Inc.



Jacky Cook
TOORA EXECUTIVE DIRECTOR

Deputy Director report

2007/2008 has been very eventful and challenging period for Toora Women Inc. Towards the end of the first half of 2007 both the Executive Director and Deputy Director left the Organization. The Leadership Team took control and managed the organization until a new Executive Director Jacky Cook was appointed in August 2008.

Toora Women Inc. is a large Non-Government organisation, currently employing 45 women, of which 30 are effectively permanent full time workers. Maintaining such a workforce takes time and considerable skills and effort. In the past period there has been a large turnover of workers. 27 workers (17 relief and 9 full time staff) left the Organization. This created gaps in all of the Toora Women Inc. services. In a climate of restrictive and limited budgets, low numbers of job applicants and limited opportunity for training and development, the onus has been on existing committed staff and Coordinators, to carry on the work and continue supporting the women in need.

Toora Women Inc. workers have faced many challenges in the past and have overcome them all. The last twelve months was just like this. Toora Women Inc. faced the challenges and came out even stronger as a result. Potential new employees were encouraged to apply through creative and flexible means. For some this meant an “expression of interest” process without compromising the process of employment. Numerous job interviews took place. As a result we currently have 18 new workers working across all the Toora Teams. Many of these workers have attended a week of Induction Training that Toora Women Inc. traditionally offers to new employees. The Induction Training was delivered by Toora workers and workers from other community Sector Organizations such as Rape Crisis Centre, Mental Health Consumer Network, Dr Sandi Plummer



Deputy Director
report continued

*Let's remember our commitment
to providing a safe and secure
environment for women...*

and DVCS. There was also considerable internal movement of workers seeking longer term employment across the Toora services.

The role of Deputy Director is very busy and requires a diverse range of skills. Some of the tasks are to support the Executive Director, Coordinators, workers and service users. My observation of the past year was that, apart from employment, a large focus and effort was required for human resources; such as supervision, debriefing and support for regrouping and consolidation of teams, while insuring quality service delivery is maintained.

Teams are now fully staffed and in much better shape. Their primary focus is to deliver quality services. I am looking forward to all of us taking a more active role in the community. I am also hoping that the next period will see Toora Women Inc. provide training and professional development for all of the committed and dedicated Toora workers.

Let's remember our commitment to providing a safe and secure environment for women who use the services and for those women who work in them.

Branka Trajkovski
TOORA DEPUTY DIRECTOR

TOORA HOUSE

Toora house provides 24hr crisis and transitional accommodation for homeless single women, in the ACT community. Many of these women are experiencing a variety of high and complex needs. These complex needs range from chronic homelessness, drug and alcohol use, mental health, co morbidity, extreme poverty, health issue to family breakdown.

ACHIEVEMENTS

Toora House has had a year of exciting changes and growth. We have completely moved back into Toora House after all the renovations. The women love the new rooms and the new set up of the house. The enclosed court yard has brought many comments, in particular most women have stated it makes them feel safe. We have 3 transitional houses where the women in these houses experience a quieter and less hectic living environment.

The extensive time the renovation took had a significant impact on our ability to maintain working relationships with other community services. We have had

absolute pleasure in rebuilding these relationships now that

Toora is functioning at full capacity. These

services include: Police, Mental

Health CATT team, Detox's,

Emergency Departments,

DVCS and Remand Centres.

We are very happy to have

these and many other

services working closely

with us and the women

again. A MOU has

been successfully

written and signed

between DVCS



and Toora House. This was a great process to participate in and has assisted Toora and DVCS workers to work more closely and achieve better outcomes for the single women. Internal relationships are stronger than ever and we have built stronger collaborative relationships with Lesley's Place, Heira, Aleta and WIREDD.

At the beginning of this financial year Toora House was still in the process of accommodating the remainder of the SAAP funding cuts. This meant that we were not able to provide as much food as we had in previous years. This was having an impact on the women's ability to establish and maintain healthy eating habits. Poor eating was very quickly becoming a problem and many women's physical and mental wellbeing was being effected. As a creative response the service started to incorporate different options, these include: Woolworths food cards given to women on arrival and when they had no income, accepting Oz Harvest food donations, purchasing items from food bank and creating a very cheap food store.

Negotiations and discussions are currently happening with the Department of Disability Housing and Community Services in relation to a Day Refuge at Toora House. The proposed Day Refuge would provide a drop-in space for homeless women to shower, access our cheap food store and wash some clothes. The potential for groups and collaborative partnership would also be negotiated with other community services. We are expecting that the Day Refuge will open early in the new financial year.



Kim Cartwright: Key support worker, Priscilla Lawlor: Coordinator, Shireen Hussain: Support worker, Carol Cutmore: Support worker, Dara Luziac: Support worker.

TRENDS

In the last 12 months Toora has provided accommodation to 181 women, of these 146 specifically were accommodated in our emergency 24hr service with 9 ongoing at the end of this period. This has been a significant increase from the 79 women accommodated last year. The increase is directly related to the completed renovations and operating back at full capacity.

TABLE 1: NATIONALITY OF WOMEN WHO WERE ACCOMMODATED IN THE CRISIS SERVICE

NATIONALITY	#
Nigerian	1
Greek	4
Pakistan	2
Indigenous	22
Croatian	5
Asian	4
Indonesian	2
Scottish	1
Guinean	1
Lebanese	1
English	3
Sierra Leone	1
New Zealand	1
Chilean	1
Uganda	1
German	1
Papa New Guinea	2
African	1
Canadian	1
Irish	1
Indian	1
Caucasian	119

TABLE 2: AGE OF WOMEN WHO WERE ACCOMMODATED IN THE CRISIS SERVICE

AGE	#
16-20	19
21-25	38
26-30	29
31-35	26
36-40	20
41-49	30
50+	13
Unknown	6

TABLE 3: NUMBER OF VISITS BY WOMEN WHO WERE ACCOMMODATED IN THE CRISIS SERVICE

NO. OF VISITS	#
1	126
2	25
3	18
4-10	9
12	1
14	1
17	1



We have had 17 women accommodated in our transitional program with six on-going.

TABLE 4: NATIONALITY OF WOMEN WHO WERE ACCOMMODATED IN THE TRADITIONAL PROGRAM

NATIONALITY	#
English	1
Sierra Leone	1
Indigenous	2
Chilean	1
African	1
Caucasian	10
Chinese	1

TABLE 5: AGE OF WOMEN WHO WERE ACCOMMODATED IN THE TRADITIONAL PROGRAM

AGE	#
20-30	5
31-40	4
41-49	4
50+	2

Outreach has been at full capacity for the majority of this year with 23 women being supported, with three ongoing at the end of the period. This is the same as last year.

TABLE 6: NATIONALITY OF WOMEN WHO WERE SUPPORTED THROUGH OUTREACH

NATIONALITY	#
Caucasian	14
Indigenous	2
Fillipino	2

TABLE 7: AGE OF WOMEN WHO WERE SUPPORTED THROUGH OUTREACH

AGE	#
20-30	10
31-40	4
41-49	2
50+	1

Of all the women supported this year 58% presented with dual diagnosis and 75% with co morbidity. Other presenting issues as follows;

- Housing/homelessness
- Legal/criminal/family/child/ protection orders
- Medical – pregnancy/sexual health
- eating disorders
- discrimination
- trauma.
- sexual assault/violence
- drug and alcohol/recovery
- income/budgeting
- domestic violence
- disability
- mental health

The following are the main areas of support;

- Accommodation
- Incidental counselling
- Housing support
- Legal advocacy and support
- General Advocacy
- Referral
- Food/clothes.
- Transport/ bus tickets
- Drug and alcohol support and referral
- Recovery support
- Assistance with training and Employment

There have been some amazing networks set up this year. This is due to the ongoing difficulty with finding women appropriate exit points. These include (but are not limited to): DHCS Housing and Gateway services, CEAS, Inanna, ACT Shelter, Companion House, DVCS, CATT Team, St Vincent DePaul, Ainslie Village, Havelock House, Directions, WIREDD, Welfare Rights, Women's Centre for Health Matters, Women's Legal Services, Migrant Resource Centre, CRCC, ACT Mental Health, Heira, Centrelink, Centacare, Aleta, Barnardo's, PSU, CARE Financial, Care and Protection, Doris, Gosford Refuge, Homelinx, The Junction, Lesley's Place, Lowana, Marzenna, Relationships Australia, Respite Care, Winnunga Nimmityjah, Woden detox, Family Planning and Sexual Health Centre, Oz Harvest.

FUTURE DIRECTIONS

The service is excited with the new Day Refuge in negotiation. We have started to look into running groups such as; craft, cooking and mental health wellbeing groups. The ongoing development to provide alternative options for women is innovative and we hope will have a positive impact on women's health and wellbeing.

The games room in the back yard requires renovations and we would like this to include an outdoor area for plants that women can look after. We would like to create a vegetable garden for the women to maintain and use at their leisure. These however will require some funding.



T H A N K S

Toora has welcomed many new workers and relief staff. Toora would like to acknowledge all the hard working and lovely women in all positions at Toora House. Many have had to navigate their way through a very stressful time with staffing shortages and low resources. All workers have done an amazing job of maintaining Toora's high standard of service delivery. Every one of you have done a wonderful job and through your skills, kindness and commitment have continued to operate the services 24 hours a day, 7 days a week. We would also like to thank Branka Trajvovski for her ongoing support and kindness throughout the year; and Jacky Cook for her flexibility, vision and passion for the organisation; the Leadership team for their direction and support; Denise and Toni at DVCS for their patience and dedication to setting up a MOU with Toora House; Jason from Samaritan House for his support; Heira, Lesley's Place and Aleta for making working collaboratively for the women enjoyable, relaxed and focused, Susan for her hard work as Acting Coordinator during my absence; and especially to the women who accessed our support during this year, who have had to deal with the moves, work men, no phones and other ongoing hiccups. We look forward to a busy, productive and full year of great things to come.

Priscilla Lawlor

TOORA HOUSE COORDINATOR

HEIRA WOMEN'S REFUGE

Heira Women's Refuge is a residential and outreach crisis service that provides supported accommodation and transitional support to women aged 16 and over who are affected by domestic violence and are unaccompanied by children. All women who access Heira have case management options offered within 24 hours of their arrival. The Strengths-Based Case management framework is designed to mobilise all personal, services' and community opportunities in order to facilitate service users' independence and engagement with the general community.

Heira's Zora House provides short to medium term supported transitional housing to women, unaccompanied by children affected by domestic violence.

A range of support activities were provided during the last year, which included advocacy and referral, support with legal, housing, immigration and financial matters, attendance at appointments and linking women with support networks, government and community agencies.

ACHIEVEMENTS

The financial year 2007-2008 has brought a number of positive developments which have furthered Heira's capacity in providing high level services to women. Some of these include:



- The implementation of the recommendations of the Review of Heira Services conducted in May 2007, which has brought about improved outcomes in case management guidelines, service user access to services, development of new protocols, staff support activities and team development. The review overall was very positive and it was viewed as an affirmation of the work Heira Women's Refuge performs and an encouragement to continue the good practice model and further the development of service provision.
- The signing of a new Service Protocol with the Domestic Violence Crisis Service which enables DVCS after hours access to Heira's premises. This has increased Heira's capacity to respond to more crisis calls and allow women in crisis safe accommodation whenever needed.
- Heira's participation in the Christmas Domestic Violence Initiative. Heira team is committed to continue being a valuable contributor to this ACT initiative and to participate in its evaluation and improved policy development.

Heira Women's Refuge supported 102 women this year with 50 of them in the accommodation program and 52 in the outreach program.

*Heira Women's Refuge
would like to express their
heartfelt thanks to the women
for their courage
and resilience...*

The women's age range was from 18 to 64 and 50 % of them identified as being from Culturally and Linguistically Diverse backgrounds including: Brazilian, Chinese, Croatian, Greek, Italian, Iraqi, Japanese, Lebanese, New Zealander, Pakistani, Papua New Guinean, Serbian, Sudanese, Vietnamese and Ukrainian. Further to this 10% of women Identified as Indigenous Australian. High and complex needs were represented by 72% of women and beside domestic violence, this usually included combined mental health and alcohol and other drug issues, or disability, gambling addiction, eating disorders and immigration issues.

The bed occupancy rate was 98%. About 80 calls for accommodation were received while at full capacity. These figures exceed previous record numbers and are indicative of the higher turnover in both the accommodation and outreach programs of the service.

Work undertaken, systemic issues and directions for the future

- In supporting women with high and complex needs Heira utilised all of its services best practice strategies to put supports in place including an 8 week follow up support period as a part of the continuum of care model. Long waiting lists for Rehab Centres and barriers to accessing other support services, such as Detoxification Centres or Mental Health services, as well as service users' own reluctance or inability to access these due to the effects of long-term institutionalisation, often prevent women in these situations from maintaining independent living and as a result they return to crisis accommodation. Our organisation took part in the High and Complex Needs Census conducted by AIHW, which will be helpful in providing evidence on the level and complexity of needs experienced by SAAP service users and identifying barriers to accessing mainstream services. Heira will continue its collaboration with Toora Women Inc.'s AOD services and participate in similar projects in the future.



- Throughout the year Heira was accessed by a considerable number of women who do not have custody of their children, but have unsupervised access visits. The women are experiencing homelessness due to domestic violence and their options in accessing a safe place for a visit, particularly during winter months, are very limited. Heira will continue to advocate on behalf of these women to gain access to a service providing a safe house where these visits could take place.
- Heira worked with a number of women wanting to access Community Housing whose income was assessed as being over a certain limit. The women in this situation are homeless due to escaping domestic violence and cannot return to the marital home. Usually their only income is a Disability Support Pension or other Centrelink benefit and they are co-owners of the house they have left. The process for property settlement can take years and during that time they cannot afford private rental. Heira Women's Refuge and Toora Women Inc. would like to constructively address this issue in the next period by discussing eligibility criteria with relevant Community Housing organisations.
- Much work was undertaken with women with unresolved immigration status. Heira worked closely with the Migrant Resource Centre and its pro-bono Migration lawyers to secure successful outcomes for women who accessed the Domestic Violence Provisions of the Migration ACT. Heira has started developing a training package to be offered to other Toora Women Inc. services to share the knowledge gained while working in this complex legal area.
- Throughout the year Heira participated in a number of ACT Women's Network activities, annual events, local and national forums, conferences, meetings and training. In the near future we expect to undergo an accreditation process, have more workers receive Certificate 4 in Welfare Work and continue our contribution to territory and national networks.

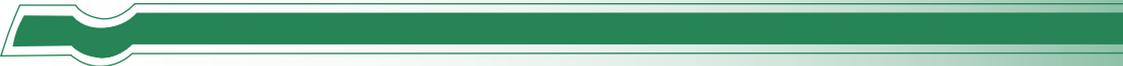
- Heira received a Community Support and Infrastructure Grant in June 2008 to run a project for 12 months which will provide opportunities, not just for Heira service users, but also those of Toora Inc. services who are experiencing social exclusion, through enabling access to community services, orientation, self help and other groups, places of social interaction and landmarks. Heira Women's Refuge would like to acknowledge the assistance of the ACT Government under the Community Support and Infrastructure Grants Program.

Heira Women's Refuge would like to express their heartfelt thanks to the women for their courage and resilience, to all the other Toora Women Inc. services as well as to our dedicated Management and Admin team for their continued support throughout the year.

Biljana Petrova-Draskovic
HEIRA COORDINATOR

Heira Coordinator: Biljana Petrova-Draskovic, Tanya Roberts-Goss: Key support worker, Mirsada Draskovic: Key support worker, Susan Babic: Key support worker





ALETA OUTREACH SERVICE FOR WOMEN

Aleta Outreach Service for Women provides outreach support within a flexible case management model consistent with SAAP National Case Management Principles and based on Toora Women Inc.'s mission statement of **safety, respect and choice** for women.

Women are supported to obtain and maintain safe, secure, affordable long-term housing options, to increase awareness of, and capacity to access, ongoing education, community resources and support networks.

Aleta Outreach Service for woman provides ongoing outreach support to women unaccompanied by children. The support offered is assessed on the individual circumstances of an individual woman. Presenting issues will vary, but in most cases women present with a variety of complex issues. Support may be for a short period of contact or over a longer period.

Aleta (and all Toora Women Inc. services) works within a framework based on a recovery and strength model. We believe that women are the experts in their own lives. These principles operate within a 'strong values' context and underpin how support is provided.

The need for an intensive outreach support service for single women greatly exceeds what is currently available. In this period, Aleta has had to turn away as many women as we supported. Outreach offers options to support women to gain and maintain secure, affordable, independent housing.

It offers a possibility to interrupt the homelessness cycle. It also gives women an

Outreach offers women an opportunity to rebuild their life while living in their own home...

opportunity to rebuild their life and build a community support network while living in their own home.

In the 2007/2008 financial year, Aleta supported 38 women with 39 support periods. Ages ranged from 20 years to over 65 years. In a recent survey around complexity of need, 77.5% of women supported by Aleta presented with high to very high and complex needs. Of these women, 47% were over 50 years old. Two part-time workers can not meet the demand of referrals for our service and it is essential that the service expand.

For women experiencing homelessness, the process of becoming eligible for priority housing can feel quite invasive and be very time consuming. As Aleta has supported numerous women through the housing process, we are now able to offer clear information to women, around what specific documentation is required, and support women to acquire such documentation.

For women who are homeless and often present with limited support networks, it can be very difficult to obtain this information. Many have limited contact with medical or counselling professions. This is often the documentation that is required to complete the housing process in order to gain priority.

Currently for these women it is very difficult to access a supportive and understanding medical professional to meet this need. The loss of Dr Charlotte Palmer from the Women's Health Service has created a substantial gap.

“ 47 per cent
were over 50 years old ”

Another issue that is very prevalent for women experiencing homelessness or issues with mental health, has been the difficulties in maintaining their Centrelink income. We have supported women and the workers from the Centrelink Community unit to sort through these problems.

During this period Aleta supported 12 women to be housed in safe, secure affordable independent housing. One bought privately after a lengthy property settlement process was completed and one moved interstate after regaining her life and belief in herself. Nine were newly housed with Housing ACT. One secured a priority transfer.

Aleta as an outreach service provides innovative service delivery that is very flexible, versatile, responsive, timely, and consistent. We aim to provide support that fosters skill building and resilience. Our support is wide and varied due to the issues women present with.

Homelessness rarely happens in isolation so the support required is often for a number of complex issues.

It has been a busy and productive year. Thanks to the Aleta team for the great work. Thanks to the amazing women who are open to share themselves, their stories and let us walk with them in their lives.

Linda Hayden
ALETA COORDINATOR

Linda Hayden: Aleta Coordinator,
Jane Mapiva: Outreach worker



LESLEY'S PLACE

Lesley's Place has overcome a number of significant challenges throughout this past year, proving that resilience is the key to providing consistent, professional and meaningful alcohol and other drug support to women and women with children. We have successfully adapted our service delivery in order to meet the changing needs of women, and effectively voiced the issues for women with dependencies at a systemic level within the sector and wider ACT community.

SERVICE DELIVERY STATISTICS / DEMOGRAPHICS / TRENDS

During the year, a total of 94 women were supported in both residential and outreach programmes. We had a further 25 admissions of children into the residential services.

This year we supported a growing number of older women (when compared against the previous years statistics). While most women were in their mid-to-late 30s, a significant proportion of women were 45 years and over, with younger women (25 years and below) were under-represented.

The following table summarises the percentage of women identifying with problematic use of particular substances.

TABLE 1: WOMEN WHO IDENTIFY WITH PROBLEMATIC USE OF SUBSTANCES

	Out-reach	Lesley's Place	Marzenna
Nicotine	72%	90%	67%
Alcohol	54%	77%	89%
Cannabinoid	35%	44%	33%
Methamphetamine (Ice)	24%	21%	-
Heroin	15%	21%	11%
Benzodiazepines	9%	26%	



When compiling the statistics from each programme, the total percentage of women identifying their consumption of alcohol as a concern is 67%. This figure is particularly significant for women falling into the older age brackets, with women over 45 years more likely to identify problematic alcohol use. Despite supporting a number of women concerned by their use of Ice, Cannabinoid's continue to be used more frequently and often in conjunction with alcohol and other drugs with 38% of all women supported identifying regular use of the substance.

The following table summarises the percentage of women identifying with particular issues around mental health and experiences of trauma.

TABLE 2: WOMEN WHO IDENTIFY WITH MENTAL HEALTH AND TRAUMA ISSUES

	Out-reach	Lesley's Place	Marzenna
Depression	30%	56%	78%
Anxiety	15%	13%	-
Self-Harm	37%	36%	56%
Suicide Attempt(s)	30%	26%	33%
Sexual Assault	59%	54%	56%
Domestic Violence	72%	77%	89%

It is important to acknowledge that the mental health statistics listed here are for women with diagnosed conditions only – many more women reported experiencing symptoms associated with mental health issues, however had no current diagnosis. Significantly, 46% of all women reported being diagnosed with depression. Further, 56% of all women supported disclosed having been sexually assaulted, and an overwhelming majority of women (76%) identified experiencing domestic violence. These distressing figures help to illustrate the underlying relationship between women's experiences of trauma and substance use.

These distressing figures help to illustrate the underlying relationship between women's experiences of trauma and substance abuse

INNOVATIONS – CHANGES AND IMPLEMENTATIONS

Lesley's Place continues to be under high demand from women in surrounding areas, particularly rural and coastal areas where women report having limited options for support. Having 33% of women who access Lesley's Place coming from New South Wales demonstrates our ability to provide a timely and responsive service. Modifications to the service to meet the needs of these women involve doing preliminary phone assessments and a more detailed, intensive exit plan aimed at gradually re-integrating women into their community.

During the year, Lesley's Place has looked at strategies to minimise the barriers to women from non-English speaking backgrounds accessing support with the service, thereby increasing equity of access. This has been achieved through arranging for an interpreter to be present at an assessment, seeking appropriate services to refer in order to decrease experiences of isolation and access to English courses, modifying the requirements of the service to ensure that goals can be met, and acquiring written recovery material in women's first language.



With recent changes to our working relationship with Arcadia House (which are outlined in a new draft MOU developed during the previous year) we have had to look at alternative ways to support women who lapse/relapse while staying in Lesley's Place. Fortunately, we have developed a strong relationship with Toora House (crisis accommodation service) who have supported the women who have been asked to exit our service due to intoxication on a number of occasions. This has given women the chance to have some much needed space from Lesley's Place (often the premises where they may have used/drank), enabling women to have some time to reflect on the events/feelings that may have led to their lapse/relapse.

Another need identified by the service during this period was for the Saturday shift to become part of the service's permanent roster. We have recently employed a worker to fill the fourth Key Support Worker position, and this worker will work Wednesday to Saturdays ensuring that there is cover over the weekend and that the program remains consistent.

SYSTEMIC ISSUES / SECTOR DEVELOPMENT

Lesley's Place has continued to work in an effective collaboration with WIREDD in order to address issues that arise within the sector and wider community. Nat and I spoke at the Inquiry into Vulnerable Infants, providing information around some of the barriers women face in terms of their parenting abilities. I have, alongside WIREDD, also provided feedback to the Siggins-Miller report, Murray-Macky study and the Smoke-Free policy review at The Canberra Hospital Withdrawal Unit. Lesley's Place worker Yasmin has also been very active in participating in the Alcohol and other Drug Worker's group. Lesley's Place and WIREDD also worked together, pooling resources to organise a Drug Action Week (DAW) event – Roarrrr: You don't have to drink to be a diva! This proved highly successful and fun.

FUTURE PLANS

A requirement for women accessing Lesley's Place Residential is that they attend a supervised withdrawal program before entry into the service. This policy has proved limiting during the previous period, with low numbers of women accessing the detoxification facilities and barriers concerning our relationship with The Canberra Hospital (TCH) Withdrawal Unit and Arcadia House reducing our ability to access suitable women in need of residential recovery support.

In response to this Lesley's Place has sought to increase the entry points for women wishing to access the residential service. A future direction for the service over the next year is to develop and look at implementing a 'community intake' procedure for women with or without children in the community who identify being clean and sober, but at risk of lapsing and therefore in need of support. It is also important to acknowledge that with the proposed changes to improve access to pharmacotherapy treatments Lesley's Place anticipates continuing to support a greater number of women on methadone and buprenorphine. As a result, we are also looking at more effective ways to support women accessing Lesley's Place while on a pharmacotherapy.

Anna Stewart

LESLEY'S PLACE COORDINATOR

Anna Stewart, Lesley's Place Coordinator, Tai Sullivan: Key support worker, Yasmin Elferkh: Key support worker, Roberta Wicks: Key support worker, Kylie Ainsworth: Lesley's Place Key support worker





WOMEN'S INFORMATION RESOURCES & EDUCATION ON DRUGS & DEPENDENCY (WIREDDD)

During this past year WIREDDD has continued to provide excellent drug and alcohol and other dependencies services to the women of the ACT. These services include drop-in, counselling, educational/support groups and outreach.

WIREDDD has also been successful in receiving a three-year tender from Non-Government Organisation Treatment Grants Program and a one-year grant for Amphetamine-Type Stimulants Program. The team is looking forward to implementing the new projects in the new year.

WIREDDD has operated with a skeleton staff for a large part of this reporting period. This has resolved in recent months, through a recruitment process for new workers that WIREDDD staff were actively involved with. Despite short staffing, the program has continued to deliver quality services.

WIREDDD is committed to maintaining an active role in keeping women's drug and alcohol issues on the agenda—both locally and nationally. We continue being vocal about women's issues in a way to avoid becoming completely lost in the generic orientated harm minimisation policy.

S E R V I C E D E L I V E R Y

This year has seen 1,620 women drop-in to WIREDDD. Approx 15 per cent of these were non-booked counselling sessions. Phone calls for information, referral and advocacy numbered 1,860. Of the 255 counselling session 131 were booked. Of the 124 session that were non-booked sessions, 29 were new women accessing the service for the first time.

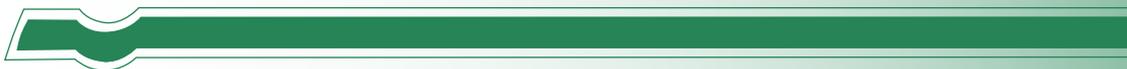
We ran 66 groups in the past year and in total 359 women attended. Twenty-six children attended the groups with their mothers and 12 children attended the childcare organised by WIREDD.

O U T R E A C H

The service attended 26 outreach visits to SRC and BRC in which 50 women were accessed. 17 visits to Woden Detoxification Centre in which 27 women were accessed, and seven visits to Arcadia House where 14 women were accessed.

N E T W O R K I N G A N D S E C T O R P A R - T I C I P A T I O N

- AOD workers group
- Co-morbidity Bus Tour
- AMC Community Reference Group
- Meeting with Directions about the Mums and Bubs project
- AOD forum- WIREDD workers attended the forum
- Meg Richens was employed to do research by Child and Welfare Institute and Anglicare Public Hearing- Early intervention and care of vulnerable infants in the ACT
- Workshop Drug Policy Modelling Program
- Sally Markham and Robyn-Brodie-Reed invited WIREDD to present at the workshop for workers who work with children in vulnerable families.



T R A I N I N G

- Two Day NDARC Conference-Symposium
- Senior First Aid Training
- Resilience training
- DBT intensive training in Melbourne
- Drug Action Week events- Drug/Alcohol conference
- NSP in Prison Forum
- Reporting Child Abuse and Neglect
- Drug and Driving Forum.

N E T W O R K I N G

- Corrections Coalition
- Women and Prisons meeting
- Reclaim the Night committee and event
- Meeting Directions Executive Director and other Directions ACT workers to share service information
- Meeting with Kim Sattler ASU
- Meeting with Case Manager workers from SRC
- Meeting with Mark Bartlett about data collection.

WIREDDD also visited women at PSU over 12 visits and had connected with 29 women. This included one nurse and one parent who attended our sessions.

Thanks to our Deputy Director Branka Trajkovski for her negotiation with Dr Fraser. WIREDDD women can access Dr Liz Fraser at the Interchange, on alternative weeks.

S E R V I C E S N A P S H O T

100 per cent of the women who answered our snapshot felt very welcomed at WIREDDD, 94 per cent stated their privacy was respected and their views and options were valued. This is a reflection of WIREDDD feminist philosophy and our ability to

WIREDD is committed to maintaining an active role in keeping women's drug and alcohol issues on the agenda

work with women where they are at. One of the woman wrote: "The staff were friendly and supportive. It helps me from getting isolated and feeling disconnected from the rest of the world. As I live alone and in poverty".

Over the past year Paulina and Natalie have taken their long service leave. The skills, experience and knowledge of these two workers were highly missed by the WIREDD team. New team arrangements were put in place in order to continue service delivery.

SECTOR

- WIREDD has been successful in its application as an official visitor into the new Prison
- WIREDD has been involved in the Drug and Alcohol review
- Co-coordinator attended the AOD ED's meeting during executive team absence.

FUTURE DIRECTIONS

WIREDDD is looking forward to having a full team in near future. Consolidating its outputs, and from there planning for the future vision of WIREDDD, while focusing on the needs of chemically dependent women in the ACT. The service will continue working with women in remand. And will work with women who will be incarcerated in the new Prison.

THANKS

Thanks to Natalie Liosatos for her commitment and relentless work with WIREDDD and the women who access the service. The WIREDDD team would like to thank and acknowledge all the workers that have made our service possible over the past year, especially to our relief workers. We thank Di Lucas, who over the past three years worked closely with us, while overseeing the evaluation of one of our projects. We also thank Sandi Plummer for her continuing support to the WIREDDD service. Thanks to all the women who access our services and continue to share their experiences with us.

Paulina Hellic

WIREDDD COORDINATOR

Natalie Liosatos: WIREDDD
Councillor, Paulina Hellic:
WIREDDD Coordinator

