Project ICE Riverland (PIR) met with visiting politicians Senator Fiona Nash, Senator David Fawcett and Tony Pasin MP on 3 September at Renmark Paringa Council.

PIR was allocated 30 minutes to discuss the recommendations which were in the National ICE Taskforce Interim Report and was given the opportunity to provide feedback from the Riverland.

The list of people who were in attendance is as follows:

1. Senator Fiona Nash
2. Senator David Fawcett
3. Tony Pasin MP
4. Neil Martinson – Mayor, Renmark Paringa Council
5. Tony Siviour – CEO, Renmark Paringa Council
6. Stephanie Coughlin – Community Services Officer, Renmark Paringa Council
7. Chrissy Eleftheriadis – Social Worker, Riverland Community Health Service (Project ICE Riverland Team Leader)
8. Tanya Lehmann - Acting Regional Director, Riverland Mallee Coorong
9. Paul Wood - Community Engagement, SAPOL
10. Allison Clark – Inspector, SAPOL
11. James Blandford – Superintendent, SAPOL
12. David Oates – Cadell Training Centre, General Manager

PIR presented findings from data which had been collected over the previous five months. Most notably, in the survey which was sent to all Services Providers within the Riverland Community Services Alliance the question ‘has demand for your service increased due to the ongoing issue with ICE?’ was of most importance. Out of the 47 agencies which completed the survey close to 60% said that it had been.

From the survey which was distributed to attendees of the ‘Knowing the Facts About ICE’ forum when asked ‘do you feel that there are adequate services in the Riverland?’ 85% said no.

Our recommendations overall was that the Riverland needs increased services but most importantly a coordinated approach. We often hear that there are not enough
services in the Riverland but our Region has a higher amount than others. What we lack is one central point of truth to coordinate information.

Following that discussion we made the following recommendations:

- **Increase SAPOL’s community engagement profile.** By this we meant that agencies like Health and Local Government for example will continue to work with SAPOL to raise their community engagement presence profile. To change the reputation that SAPOL only enforce law in the community and to educate the community on their community engagement programs. SAPOL do so much more and we want to raise their profile in that area. We are doing this already and we want it to continue.

- **Increase drug and alcohol education to younger youth** – look for ways to educate youth on the consequences of drug use and also domestic violence. Our feedback showed that youth that attended the forum felt drug education should start from a younger age.

- **Detox facility with a 4 beds** at one of the Riverland Hospitals for clients who wish to detox from drugs.

- **A local residential rehab facility** which would have a coordinator to manage the clients rehab program. The coordinator would ensure that the client is linked into the existing services in the Riverland. These clients would be given training in life skills to help them assimilate back into community life post treatment. Link them into community groups such as sporting clubs, church and volunteering programs etc; this would give them a sense of community. Be given counselling and manage their medical needs.

The client will need to be motivated and this will be a voluntary rehab program.

Of course if clients are from the Riverland and feel that by staying in the Riverland that they would be unable to achieve their goal, they would be advised to attend another facility outside of the Region.

This is a wrap around approach that would utilise all levels of Government and Non Government Agencies. This method has ben used by Riverland Community Health Services and has proved to be successful. Further investigation will be carried out and all feedback will be considered.
- **Drug and alcohol training for front line staff** who are working with users of ICE to equip them with the tools they need to stay safe and to understand the symptoms of the drug and others which are similar.

- **Increased support for families who are affected by drugs.**

- **Create a process for information sharing.** There is no one central point of truth in Australia where data can be sent from local communities who are researching the ICE epidemic in their own community. There are also differing reports as to the impact which the drug is having. We have recommended that the National ICE Taskforce request data from communities who are conducting research and collate it to present a true representation of the ICE epidemic in Australia.

These recommendations were welcomed by Senator Nash, Senator Fawcett and Tony Pasin MP who said that what PIR presented mirrored other what communities in Regional Australia observed and had recommended. Senator Nash also spoke of the need to identify strategies which work for Metro and Regional area as the approach differs.

**Going forward:**

We have been asked to submit a formal report with costings included directly to Senator Nash. She commended our work and proactive approach our community has taken with this issue. We also spoke of the importance of the Riverland Community Services Alliance as it provides a platform for information sharing within the community and how PIR was a product of it. We have proven how cross agency collaborations can work and that this issue cannot be tackled by one agency or area alone. We can only find a solution by working together. This is what we have been doing and will continue to do.

A further update will be provided once there are any developments.

**Written by:**

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