



# Annual Review 2017

*Penington*

PENINGTON  
INSTITUTE



# About Penington Institute

# Message from the Chair & CEO

### Our Patrons

Emeritus Professor Sir Gustav Nossal AC CBE (Chief Patron)  
Professor The Hon Dame Marie Bashir AD CVO  
Professor Suzanne Cory AC  
Emeritus Professor David de Kretser AC  
Professor Peter Doherty AC  
Professor Margaret Hamilton AO  
Professor The Hon Barry Jones AC  
The Hon Michael Kirby AC CMG  
Emeritus Professor David Penington AC  
Professor Fiona Stanley AC



### Our vision

**Communities are safe, healthy and empowered to manage drug use.**

### Our mission

**Penington Institute actively supports the adoption of approaches to drug use which promote safety and human dignity.**

### We are building better responses to drug use...

- That include the voices of people with lived experience
- That put human dignity and health at the very centre and
- That are focused on community safety.

### Our understanding

- The drug control system should emphasise public safety and public health.
- Substantive and innovative change is required to better manage problematic drug use.
- Change should be driven by evidence, transparency and cost-effectiveness - not fear and prejudice.

### Our principles

#### Integrity

We support fair, transparent, evidence-based systems that improve the safety and wellbeing of individuals, families and communities.

#### Respect for human dignity

We focus on the health, safety and welfare of individuals, families and communities in a way that is consistent with human rights. All people, regardless of background, are entitled to feasible and accessible options that nurture their capacity for positive change.

#### Persistence

We believe that responding to drug use requires innovation and evaluation of a combination of approaches. There is no simple solution but by persisting, we will make a positive difference.

#### Empowerment

Tackling drug problems is a shared responsibility. Governments must empower communities to manage drug use. Positive change requires individual responsibility tempered with government and community support.

<  
International Overdose Awareness  
Day 2017 campaign posters.

### Board of Directors

**Ms Kathryn Greiner AO**  
(Chair)

Company director of corporate and non-corporate organisations in health, education and welfare

**Professor David Castle**

Chair of Psychiatry at St Vincent's Health and the University of Melbourne  
Board of the Royal Australian and New Zealand College of Psychiatrists

**Professor Ian Gust AO**

Professorial Fellow at the University of Melbourne  
Inaugural Director of the Macfarlane Burnet Centre for Medical Research (now Burnet Institute)

**The Hon Robert Knowles AO**

Former Victorian Minister for Health, Housing and Aged Care  
Chair of the Royal Children's Hospital

**Ms Lucinda Nolan PSM**

CEO of Ovarian Cancer Research Foundation  
Former Deputy Commissioner, Victoria Police  
Former CEO of the Country Fire Authority (Victoria)

**Adjunct Associate Professor Scott Wilson**

CEO of the Aboriginal Drug and Alcohol Council, South Australia (ADAC)  
Adjunct Associate Professor at the University of Sydney  
Co-Deputy Director of Indigenous Health and Substance Use in Addiction Medicine, the University of Sydney

### Finance, Audit and Risk Management Committee

**Professor Ian Gust AO** (Chair)

**Ms Shobhana Chetty BSc, MAcct**  
National Credit Risk Manager, Sigma Pharmaceuticals

**Mr Joe Flinn BAcc, CA**

General Manager, First Samuel Limited  
Chartered Accountant

**Mr Bruce Lanyon BBus, MBA, FCA, SF Fin**

First Vice President/Financial Adviser, Morgan Stanley Wealth Management Australia  
Chartered Accountant

Worldwide there is now a greater shift towards more sensible approaches to substance use rather than the combative policies of the past. Growing acknowledgement of the overdose crisis in the USA saw it declared a public health emergency. Norway moved to decriminalise drugs for personal use, inspired by the success of the Portuguese model. In the Philippines, the failed drug war approach and its disregard for human rights reached a new nadir as extra judicial killings took thousands of lives.

In Australia, the National Drug Strategy continues a theoretical balance between the pillars of supply, demand and harm reduction. However, harm reduction receives less than 3 per cent of the funding, a missed opportunity to address the needs of people affected by continued drug use.

In Victoria over many years, local community members and experts have been calling for the trial of a medically supervised injecting centre (MSIC) in Richmond, Melbourne's heroin overdose epicentre. In late 2017, the Victorian Government announced a trial would commence in Richmond. The MSIC trial is an opportunity for health professionals to better engage with people who use drugs at their most vulnerable. It should save lives. Sydney's MSIC has been evaluated many times since opening in 2001, with the most recent report (May 2015) stating they have supervised 965,000 injections and managed more than 6000 overdoses with no fatalities.

Penington Institute continues to push for a more enlightened approach to substance use. We had many highlights and we invite you to read about these in this Review.

We continued to increase recognition of the growing tragedy of drug overdose - in Australia and around the world. More than 100,000 people die of a drug-related accidental overdose each year around the world - this is a conservative estimate. Our leadership on this issue, though International Overdose Awareness Day (IOAD) and other activities included:

- The 2017 IOAD - a campaign with close to 500 registered (many more not registered) events around the world, significant growth in engagement online and local outcomes for event organisers including increased access to naloxone - the opioid overdose reversal medication.
- Releasing Penington Institute's seminal publication *Australia's Annual Overdose Report 2017*. The extent of overdose resulting from pharmaceutical medication misuse and the impact of the opioid fentanyl received considerable coverage in Australia.
- Publishing the *Not Just Naloxone* report which examined innovative local and international approaches to reducing the harm associated with drug use, highlighting that there are many effective and yet unrealised opportunities in Australia.
- Providing extensive workforce development to frontline professionals, linking the latest research with practical support.

Late in 2017 we welcomed the YEAH organisation as a new program of Penington Institute. YEAH - originally Youth Empowerment Against HIV/AIDS - focuses on youth led sexual health through face-to-face peer education and a major online community. YEAH is a great opportunity to expand the work of Penington Institute, to learn from and empower young people on alcohol and other drugs, as well as sexual health.

To conclude, we would like to thank our Patrons, Board, funders, supporters, volunteers and staff for their involvement in 2017. We would particularly like to recognise the work of our volunteers. As a not-for-profit organisation with only 12 full-time equivalent staff, Penington Institute relies heavily on the contribution of volunteers. From our hundreds of volunteer International Overdose Awareness Day organisers around the world to our interns and advisory group members, thank you.

**Ms Kathryn Greiner AO**  
Chair

**Mr John Ryan**  
Chief Executive Officer





# Encouraging and empowering people affected by drug use to make safer and healthier choices

## Penington Institute works to:

- increase individuals' health literacy and capacity
- promote public discussion and understanding – contributing to a community rethink on how to tackle drug use
- raise awareness about the harms associated with drug use and ways to reduce them.

Everything we do is focused on increasing awareness and educating those in diverse communities about the harms associated with drug use and, most importantly, the ways to reduce these harms.

## International Overdose Awareness Day (IOAD) 2017

IOAD is held on 31 August each year to raise awareness of overdose and reduce the stigma of drug-related deaths by supporting the family and friends of those who died or were injured due to drug overdose.

The 2017 IOAD campaign attracted media coverage and extensive grassroots activity around the world through shared events, tributes, social media and badge sales (see page 05–07).

## Understand Ice: digital campaign

In response to the growing problem of ice in Australia and the lack of accurate and non-judgemental information about the topic, Penington Institute created *Understand Ice* – [www.understandice.org.au](http://www.understandice.org.au).

Designed to target those in the 19-24 age bracket, *Understand Ice* uses easy-to-understand information to get the facts, figures and risks to those who are experimenting with the drug. The website was made possible thanks to the support of the Lord Mayor's Charitable Foundation and the William Buckland Foundation is funding the promotional campaign across Victoria.

As at year end, the number of visitors to the site resulting from digital and traditional media promotion in rural and regional Victoria achieved 95 per cent of the project's full target, with six months of the initiative still to run.

## Supporting Victoria's NSPs

Part of Penington Institute's role is to respond to current and emerging issues. In our 2016 Annual Review we reported on the negative consumer feedback regarding the introduction of Terumo's 1ml 27g and 1ml 29g syringes, which were being manufactured at a different production base.

2017 saw us continuing to communicate with Victoria's NSPs on this issue, providing them with advice on safer usage of the Terumo product.

One important element in the feedback from our injecting equipment trials in 2016 was that clients appreciated being given choice about injecting equipment products. On that basis in 2017, DHHS diversified supply of 1ml 27g syringes and currently NSPs can select syringes produced by four different manufacturers – Terumo, BD, Nipro and Multigate.

Penington Institute developed a range of fact sheets and posters for NSPs to use, which explained the injecting equipment supply changes for both NSP workers and service users, and provided posters for NSPs to display indicating which products they stocked.

## Bringing people together

In 2017 Penington Institute progressed plans to bring together volunteers with lived experience of drug use to tell their stories and help to put a human face to a complex issue. The idea is that volunteers educate their own communities at engagements and forums, as well as through digital and traditional media opportunities.

Two volunteers presented at a meeting of the Lions Club, Strathfieldsaye in Bendigo in August 2017 which was positively received by attendees.

## Media coverage

Much of Penington Institute's media relations activities in 2017 related to particular programs including our training initiatives and digital campaigns.

Examples of 2017's media coverage include:

- Our *Understand Ice* campaign, *Injecting Ice in the Country* and *Pharmaceutical Risk and Response* programs received extensive coverage across rural and regional news outlets including online, print, radio and TV.
- The launch of our paper *A community controlled response to problematic ice use* resulted in articles in the *Herald Sun* explaining and highlighting the benefits of our proposed intervention.
- In May 2017, the Australian Government announced a trial of drug testing for targeted welfare recipients. Penington Institute provided commentary, particularly on radio around Australia, about the potential consequences of the initiative.



**Youth empowerment and health**

In October 2017, YEAH became a program of Penington Institute. YEAH is an Australian innovator which has traditionally focused on youth sexual health. A community of more than 10,000 young people, having YEAH as part of Penington Institute brings the opportunity to expand YEAH to also empower young people in relation to alcohol and other drugs.



Top left: The Colorado Health Network wears grey/silver for IOAD (photo: Denver Colorado AIDS Project. Top right: At the soccer match hosted by the Karim Khan Afridi Foundation in Islamabad, Pakistan. (photo: Ahmer's Photography) Bottom left: Kirketon Road Centre and Langton Centre staff in Sydney, Australia spreading the naloxone message for IOAD (photo: Langton Centre/South Eastern Sydney Local Health District and Kirketon Road Centre/South Eastern Sydney Local Health District). Bottom middle: Wearing IOAD wristbands "For Uncle Will and Amber" in North Carolina, US (Photo: Suzanne Hudson Carter). Bottom right: IOAD event in Hamilton, Ontario, Canada (photo: Evonne Sullivan).



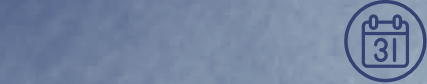
# International Overdose Awareness Day 2017

- Registered events increased from 340 events in 2016 to 483 in 2017 – a 42 percent increase.
- Events were held in many countries – from Afghanistan, Australia, Canada, Costa Rica, Denmark, France, Georgia, Ireland, Lebanon, Myanmar, Nepal, Norway, Pakistan, Scotland, Serbia, South Africa, Spain, UK, and to the US.
- In Australia the IOAD media campaign was successful in securing a prominent opinion piece from Penington Institute's CEO in the *Herald Sun* along with a related feature spread and other complementary news coverage.
- Significant audience gains were made on social media channels – particularly Facebook – with likes moving from below 20,000 to over 33,919+ this year.
- We sold 11,450 wristbands (new for 2017) and 33,250 silver badges.
- In the 12 months between September 2016 and September 2017 more than 1,356 moving tributes were written by people who had lost their loved ones and posted on [www.overdoseday.com](http://www.overdoseday.com). The previous year saw 1040 tributes posted.
- In 2017 more than 500 IOAD related media articles were identified internationally.
- Campaign materials were made available in the following additional languages: Bahasa, Chinese (Simplified), German, Hindi, Italian, Greek, Norwegian and Portuguese, bringing the total number of languages to 13.
- The overdoseday.com website continued to attract returning and new visitors – 283,855 active user sessions were recorded (up from 271,818) with 84.6 per cent of these being sessions by new visitors (1 Sept 2016 – 1 Sept 2017).



33,919+

facebook likes



483

registered events



500+

published media items



1,356

moving tributes  
posted online



33,250

badges sold



283,855

active user sessions on  
[www.overdoseday.com](http://www.overdoseday.com)



11,450

wristbands sold



13

languages used in  
campaign materials





# Supporting professionals to help address the harms associated with drug use

### Context

The challenges for frontline workers include not only providing services and care for people who use drugs, but also dealing with the stigma and secrecy of illegal drug use.

Penington Institute is funded by the Victorian Department of Health and Human Services to provide ongoing training and support to Victorian community NSPs. At the same time we work alongside health professionals, law enforcement, frontline workers and other professional groups to provide information and support and to progress particular projects and initiatives.

### Injecting ice in the Country

Two projects to increase the capacity of secondary NSPs and agencies providing services to Aboriginal people to respond to crystal methamphetamine (ice) were completed in 2017.

*Injecting ice in the Country: healthier approaches*, a workforce development campaign, included the production of 10 short videos, information campaign materials for people who use drugs as well as face-to-face training across regional Victoria. The videos outline the impact of ice on people who use drugs, their families and communities and provide practical advice for frontline workers seeking to minimise the harms from ice use. Developed in collaboration with the Victorian Aboriginal Community Controlled Health Organisation, *Injecting ice in the Country* shared many expert voices, including Aboriginal, health worker and people who use ice.

**Outcomes** In all, Penington Institute conducted 34 face-to-face training sessions in 19 locations with a total of 267 participants. Organisations hosting the sessions included Aboriginal Community Controlled Health Organisations, hospitals, community health centres, councils, and youth mental health support centres.

During the project period there were more than 1,000 views of the videos and more than 950 downloads of the accompanying factsheets.

The video and training package will remain useful and relevant as a professional development resource for workers for some years.

### Crystal methamphetamine (ice) training

This training is designed to increase confidence and capability of NSP and alcohol and other drugs service staff to better respond to and address the health and social needs of people who use methamphetamine. The session incorporates information on engagement, communication and challenging behaviours.

In 2017 Penington Institute delivered two types of ice training:

- Ice training sessions and capacity building workshops
- *Injecting ice in the Country: healthier approaches* training (see above).

**Output** This year we have provided ice training for 1,302 workers in 34 sessions at 21 agencies.

### Emerging issues in drug use

Assisted by a small grant from the Lord Mayor's Charitable Foundation, Penington Institute was able to develop and deliver two training sessions about emerging issues in drug use by young people to student counsellors and other staff at Victorian TAFEs. The sessions provided an opportunity for professional networking, knowledge transfer and peer learning for participants.

The first training session was at the TAFE Counsellors' In-service Training Workshop, which was held at the Victorian TAFE Association in East Melbourne in June. This workshop was attended by 20 counsellors drawn from a broad range of TAFE organisations around Victoria.

The second training session took place at the Apprenticeship Support Forum, hosted by Holmesglen Institute of TAFE at its Chadstone campus in July. There were 55 participants for this session, all of whom were student-facing counselling or instructing staff from a wide range of TAFE organisations.

Each of the presentations ran for three hours including time for questions and answers.

### Supporting the Needle and Syringe Program (NSP) workforce

Penington Institute provides tailored education and training to health and related services. Training topics in 2017 included:

- Working in the Needle and Syringe Program
- Engaging people who use drugs
- Hepatitis C: definitions, risks, prevention, testing and treatment
- Effective health promotion messaging
- Drug trends
- Injecting drug use
- Vein care
- Safe disposal.

**Output** This calendar year Penington Institute provided training to 361 workers at 26 services.

### Community Overdose Prevention and Education (COPE)

Penington Institute's COPE program works with a wide range of organisations whose clients include people who use opioids and/or people who may witness an overdose. We provide training and support to those services, allowing them to set up their own programs to train clients to prevent, recognise and respond to opioid overdose by using naloxone.

**Output** This year we trained 506 workers at 30 agencies in overdose prevention and response. Note that this excludes the *Pharmaceutical Risk and Response Seminar*.

### Pharmaceutical Risk and Response

Penington Institute developed the *Pharmaceutical Risk and Response Seminar* to equip frontline workers with the skills needed to identify and prevent harm including overdose. Topics covered include:

- Commonly used pharmaceutical drugs
- Problematic use of prescription and over-the-counter medicines
- Planning for the rescheduling of codeine
- Treatment options
- Opioid use including pharmaceutical drugs, heroin and illicit synthetic opioids
- Overdose risk factors
- Recognising overdose
- Opioid overdose prevention and response using naloxone.

The training was funded by the Victorian Department of Health and Human Services as part of the Naloxone Subsidy Initiative.

**Output** Penington Institute conducted seminars across metropolitan, regional and rural Victoria. 400 participants attended the training.

### Network meetings, conferences and support

**Injecting Drug Issues Network (IDIN)**  
Penington Institute co-hosts this network three times a year in partnership with Burnet Institute's Centre for Research Excellence into Injecting Drug Use. The network provides opportunities for agencies working with people who use drugs to discuss research and programs, support each other and work collaboratively on drug-related projects.

### Needle and Syringe Program / Primary Health Care Network

We facilitated this network which met six times in 2017. The network is a way Penington Institute can provide support and discuss ideas and programs with frontline NSP workers. The network offers the opportunity for workers to learn from each other's experiences, share knowledge, request information and provide feedback.

### COPE Network

This is a collaboration network for workers from more than 50 agencies that operate the COPE program. The network met three times at Penington Institute this year.

### NSP Forum

Penington Institute hosts and moderates the electronic discussion group NSP Forum with more than 850 subscribers. The NSP Forum is a popular vehicle for frontline workers to keep up-to-date with drug trends and research on drugs and blood-borne viruses and is also often used by to seek advice and solve problems on NSP-related matters.

### Secure Dispensing Unit (SDU) round table

Penington Institute held a round table for services wanting to increase NSP access through operating SDUs. We continue to support agencies as they plan for and operate SDUs. Currently there are 13 operating SDUs in Victoria with a further eight planned.



^ Training around Victoria. **Clockwise from top:** in Stawell and Bendigo (*Pharmaceutical Risk and Response Seminars*), and in Mildura with Mallee District Aboriginal Services staff (*Injecting ice in the Country*).



### The Anex Bulletin

The *Anex Bulletin* is a specialty publication for workers in Australia's NSPs funded by the Australian Government Department of Health. It connects frontline practitioners with the latest research in accessible formats, revealing undocumented challenges and reducing fear and stigma in relation to people who use drugs.

The *Anex Bulletin* has an expert Editorial Advisory Group which includes the manager of each state and territory's needle and syringe program.

**Output** Three editions of the *Anex Bulletin* were published in 2017. Each edition was distributed electronically to more than 3,000 NSPs around Australia as well as 3,000 other stakeholders. The online pdf version of the *Bulletin* has proved popular with readers. For each of the editions the most popular link on the *Bulletin's* website was the pdf version. For volume 14 the three pdfs were viewed 60,387 times in total. A number of readers share the email version with their networks. One reader sent on a particular edition to 345 additional readers.

### Ongoing information and support

Penington Institute provides regular telephone, email and face-to-face support to agencies operating an NSP. Penington Institute provided information, advice and support about:

- NSP policy and operations
- Local community engagement
- Logistical issues (new NSPs, locations, ordering equipment)
- Equipment disposal issues including syringe litter and/or external bin enclosures
- SDUs
- Planning for, and responding to, incidents.

**Output** In 2017 Penington Institute had face-to-face meetings with workers at 119 agencies across the state.



# Achieving the right policy and legal framework

## Penington Institute works to:

- review and build evidence for effective policy and interventions
- engage with policy makers to focus on public health and public safety
- partner with communities, both public and private, to effect change.

## Context

Medically supervised injection centre (MSIC) trial in North Richmond  
*Australia's Annual Overdose Report 2017* – a Penington Institute publication revealed that Australians are dying from overdose in increasing numbers with 1489 accidental drug-related deaths recorded in Australia. This year has seen intense debate about injecting centres and in October 2017 the Victorian Government announced they would legislate to enable a trial of an MSIC in North Richmond, the epicentre of fatal heroin overdoses in Victoria.

**Opioid overdose crisis**  
High rates of overdose have been recorded in the US as the country continues to battle an opioid overdose epidemic. The crisis has been declared a national public health emergency in the US. Canada and the UK have also seen steep increases in opioid overdose.

**Australians support policies that minimise harm**  
The Australian Institute of Health and Welfare's National Drug Strategy Household Survey 2016 was released and indicated a significant increase in support for the use of cannabis for medicinal purposes with 87 per cent of respondents supporting this use in 2016, up from 75 per cent in 2013.

**Real time prescription monitoring**  
The Australian Government committed funding to set up a system for the real-time monitoring of selected prescription drugs. There will be benefits of such a system, but there are also potential harms such as patients being pushed into substitution of dangerous and illegal alternative substances. There is also the potential for an increasing demand for drug treatment and/or pharmacotherapy.

**NSP National Minimum Data Collection**  
The Kirby Institute compiled its second annual report of national NSP statistics on behalf of the Australian Government's Department of Health. Across Australia, 49 million needles and syringes were distributed in 2016/17 while the figures also show that over the past 10 years the number of needles and syringes distributed in Australia increased by 47 per cent, with a 22 per cent increase over the past five years.

Australia's network of NSP services as at June 2017 comprised:

- 98 primaries where the NSP is the primary purpose of the service
- 784 secondaries which are based in community health centres, hospitals and other services
- 2,422 NSPs based in pharmacies.

These services were complemented by 323 secure dispensing units.

**Policy influence**  
Penington Institute is engaged with committees and advisory groups at local, state, national and international levels including:

- Department of Health and Human Service, Hepatitis C Elimination Working Group (Victorian Government)
- North Western Melbourne Primary Health Network's Hepatitis Advisory Group
- The Premier's Ice Action Taskforce (Victorian Government)
- The Ministerial Advisory Committee on Blood Borne Viruses and Sexually Transmissible Infections (Australian Government)
- Harm Reduction International (United Kingdom).

**Parliamentary inquiries in Victoria**  
Penington Institute continues to be significantly involved in policy and the reform process including two major Victorian parliamentary inquiries: the first into drug law reform, and the second into a bill to trial a medically supervised injecting centre in Richmond.

We made evidence-based contributions to these reform debates, promoting health and safety approaches to drug use in legislation, the community and service system context. Our involvement included an appearance before the parliamentary committee conducting the drug law reform inquiry.

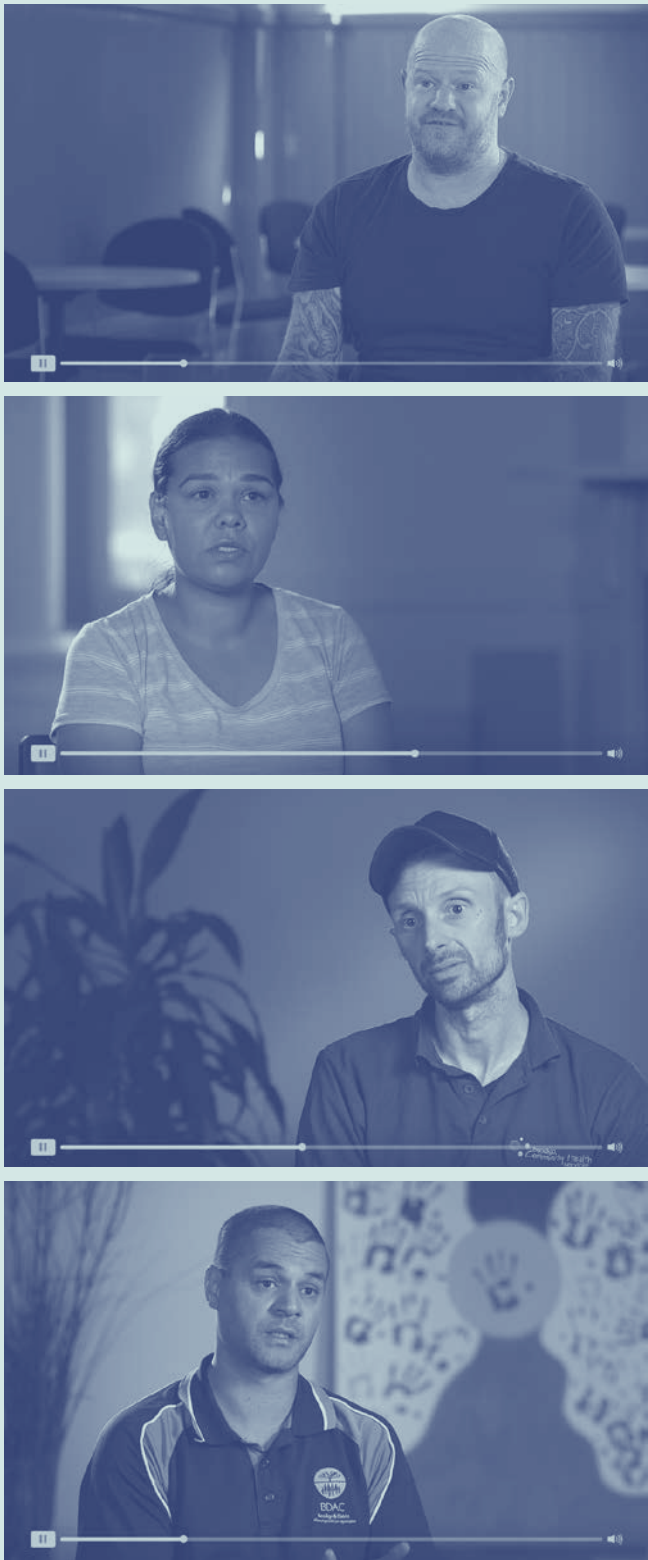
**A new approach to problematic ice use**  
At the 'The Ioeman Cometh' conference in February 2017, Penington Institute launched a new GP-enabled, local model to address problematic ice use in rural and regional Australia.

Working with partners in Mansfield, Victoria, we called for a shift toward earlier intervention across rural and regional communities. This community empowered approach provides those in need with quick access and support - whether from their GP or other available services. The trial received philanthropic funding in 2017 to commence in 2018. The project is being led by Mansfield District Hospital in partnership with local GPs, police and others.

**Next steps** Penington Institute, in partnership with the University of Melbourne, will evaluate the Mansfield program from 2018.

➤ Teesha Gardiner interviewed for *Injecting ice in the Country: healthier approaches*.

▼ Screen shots from the suite of videos *Injecting ice in the Country: healthier approaches*.



**Hepatitis C and NSPs**  
In 2016, direct acting antiviral treatments to cure hepatitis C became available in Australia. Hepatitis C infection, treatment and reinfection is one of the biggest challenges facing NSPs but with treatment now available eliminating this communicable disease has never been more achievable. However, uptake has been low for people with hepatitis C, particularly those people who inject drugs. The challenge now lies in how to initiate people who currently inject drugs into well designed community-based models of treatment and care.

Penington Institute continues to support and further develop the NSP workforce across primary and particularly secondary NSPs.

**The importance of NSPs in hepatitis C treatment**  
In an innovative project about NSPs, people who inject drugs and hepatitis C treatment, we have partnered with St Vincent's Hospital Melbourne and four NSPs in the North Western Melbourne Primary Health Network (NWMPHN) area.

We have been funded by NWMPHN to look at how best to educate secondary NSP workers about hepatitis C infection and transmission. Our research has led us to develop a training package to support secondary NSPs as they engage their clients in how to prevent, test and treat hepatitis C.

**Insights into emerging models to reduce drug harms**  
In July 2017, Penington Institute published the report *Not just naloxone* in which we examined local and international approaches to reducing the harm associated with drug use, including overdose.

Funded by the Victorian Department of Health and Human Services, the report presents a range of models, interventions and approaches designed to reduce harms resulting from drug use which we are yet to utilise in Australia.

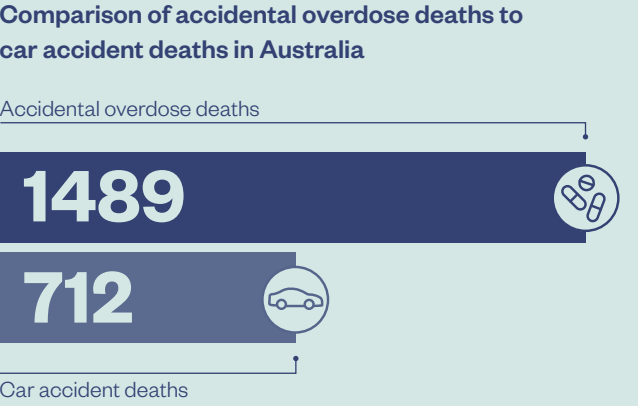
**Peer-led network trial**  
In March 2017 the Victorian Department of Health and Human Services funded local organisations in six overdose 'hotspots' to provide a two-year peer-led network trial. These six agencies have been funded to develop and implement locally designed initiatives to support peer workers.

Harm Reduction Victoria and Association of Participating Service Users commissioned Penington Institute to work with the six agencies to develop a monitoring and evaluation framework flexible enough to include the various localised service models.

**Australia's Annual Overdose Report 2017**  
Into its second year, Penington Institute's 2017 report described the overdose toll in Australia. The extent of overdose resulting from pharmaceutical medication misuse and the impact of the synthetic opioid fentanyl received considerable media coverage in Australia.

- Key findings from the 2017 report include:
- There were a total of 2,023 drug-related deaths in Australia in 2015, up from 1,313 deaths in 2001
  - A total of 1,489 Australians died of an accidental overdose in 2015 – 1,061 men and 428 women – this is more than double the number of deaths from car accidents in Australia in 2015 (712)
  - The majority of accidental overdose deaths in Australia are due to the use of legal and illegal opioids
  - Australia has experienced a significant increase in fatal overdose due to fentanyl, pethidine and tramadol
    - Between 2011 and 2015, 796 Australians died from overdose of these drugs
    - Fentanyl is the major factor driving this increase in deaths
  - Middle-aged Australians are far more likely to die from an accidental overdose – particularly those aged between 30 and 59
  - Queensland and Western Australia continue to be over-represented in accidental overdose deaths
  - Aboriginal and Torres Strait Islander people are significantly over-represented across overdoses from all drug types.

To read more or to request a copy of the report visit: [www.penington.org.au/australias-annual-overdose-report-2017](http://www.penington.org.au/australias-annual-overdose-report-2017)

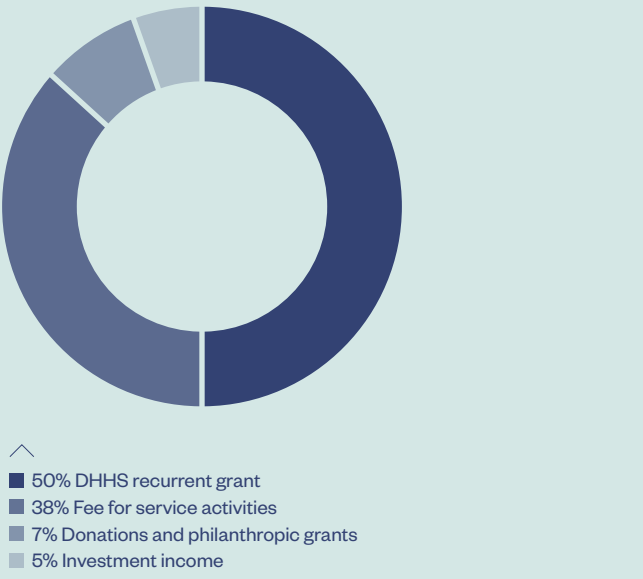


# Building a dynamic, engaged and sustainable organisation

- Penington Institute will:**
- ensure a high standard of corporate governance
  - generate financial resources to ensure effectiveness and sustainability.

**Finance and governance**  
Penington Institute's programs are conducted by a team of 12 equivalent full-time staff complemented by more than 80 volunteers and interns including our Board and advisory committees. We also have valued volunteers around the world who organised the close to 500 events shared on the IOAD website.

In 2017, Penington Institute generated an income of \$1.65 million from a variety of activities and a range of funders and donors, as summarised in the chart below.



Penington Institute has strong corporate governance leadership through our Board with the support of the Finance, Audit and Risk Management Committee.

Annual financial statements for Penington Institute are externally audited by Haines Muir Hill.

- Thank you to our supporters and funders**
- Government**  
Department of Health and Human Services, State Government of Victoria  
Department of Health, Australian Government  
North Western Melbourne Primary Health Network
- Trusts and foundations**  
Bell Charitable Fund  
Collier Charitable Fund  
The William Buckland Foundation  
Lord Mayor's Charitable Foundation
- Organisations**  
Leadership Victoria  
Merck Sharp and Dohme  
Piper Alderman
- Individuals**  
Emeritus Professor David Penington AC  
Mr Geoff Molnes  
Professor Tony Penington  
Timothy Daly  
(on behalf of the Silas F Kelly memorial soccer match)  
Lions Club, Strathfieldsaye  
Mr Jasper Coghlan





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