

Reintegration & Aftercare

- Challenges & Future Direction

26th IFNGO WORLD CONFERENCE

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SCOPE



SANA – An Overview

Drug Situation Report

Philosophy & Approach in
Rehabilitation of Drug Abusers

Aftercare Through Case Management
& Challenges

Critical Success Factors &
Strengthening the Continuum of Care

Singapore Anti-Narcotics Association was established
on 19 August 1972

VISION

To deliver, with our volunteers and community partners, sustainable preventive, rehabilitation and aftercare programmes, towards a drug-free Singapore.

MISSION

To mobilise our community against drug abuse and strive towards a drug-free Singapore.

27 Staff

Para Counsellors
Incare Counselling

300 Volunteers

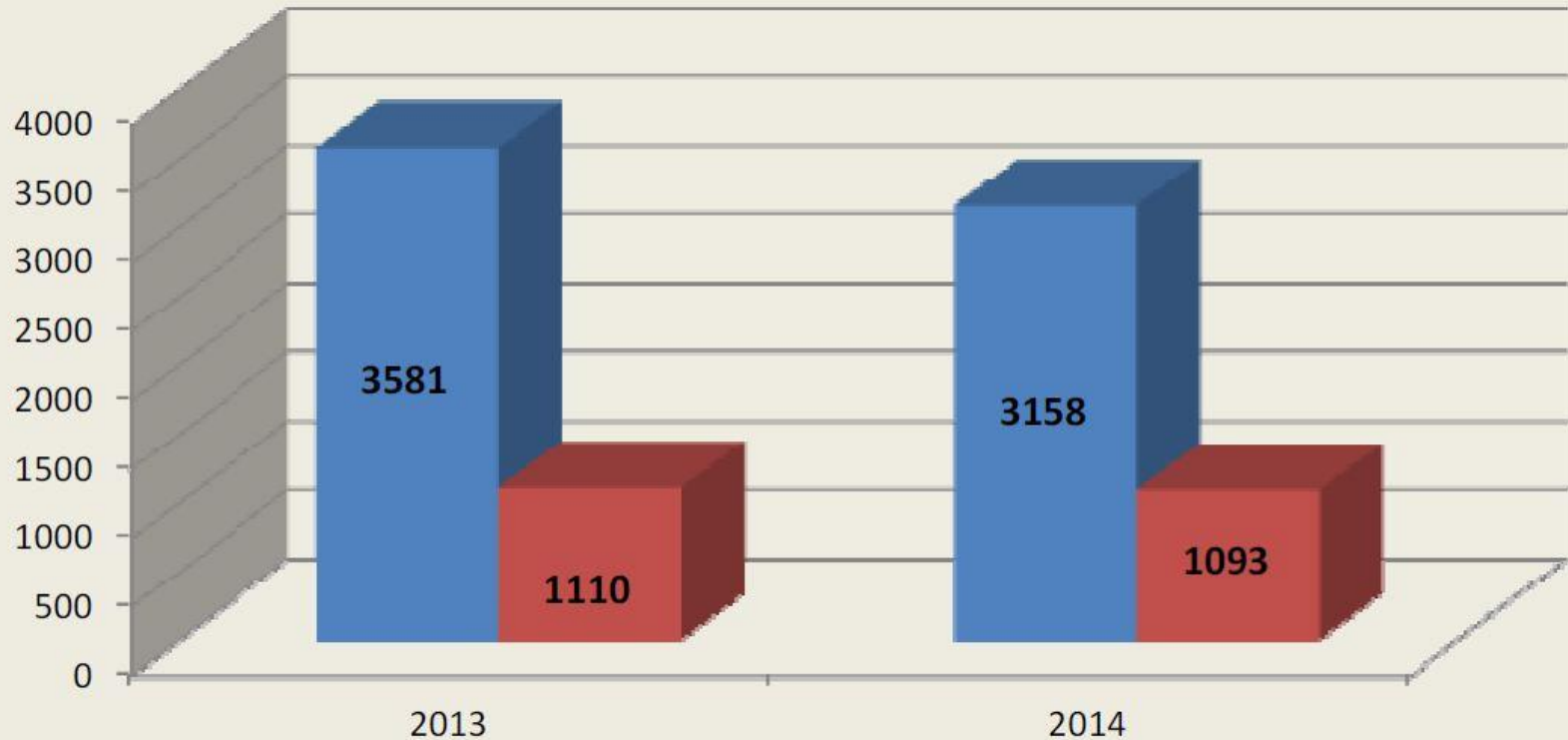




Drug Situation Report

LOCAL DRUG ABUSERS - OVERALL

Chart 1: Total and new drug abusers

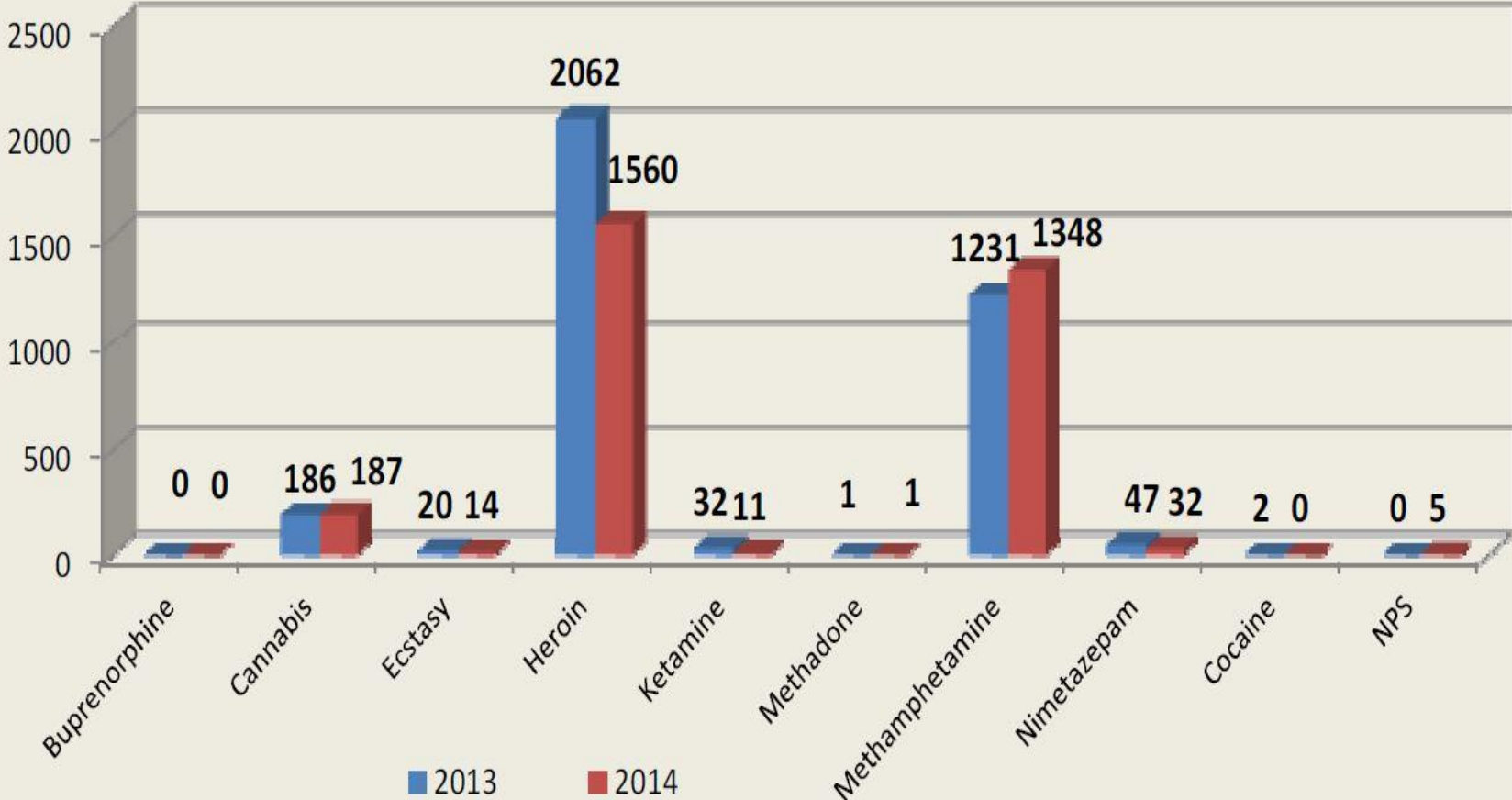


■ Total drug abusers (New & Repeat)

■ New abusers only

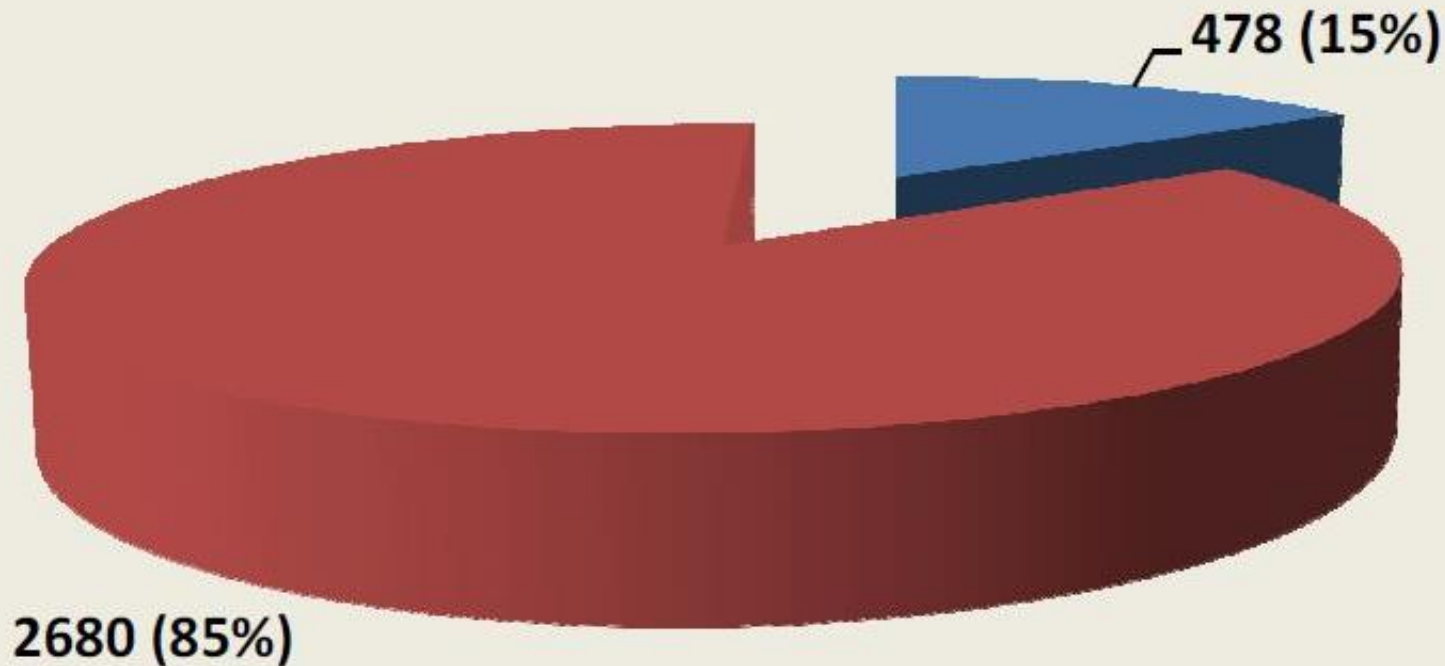
DRUG ABUSERS – BY DRUGS ABUSED

Chart 2: Total abusers by drug type



DRUG ABUSERS – BY DRUGS ABUSED

Chart 2a: Breakdown of Single/ Poly-drug abusers in 2014

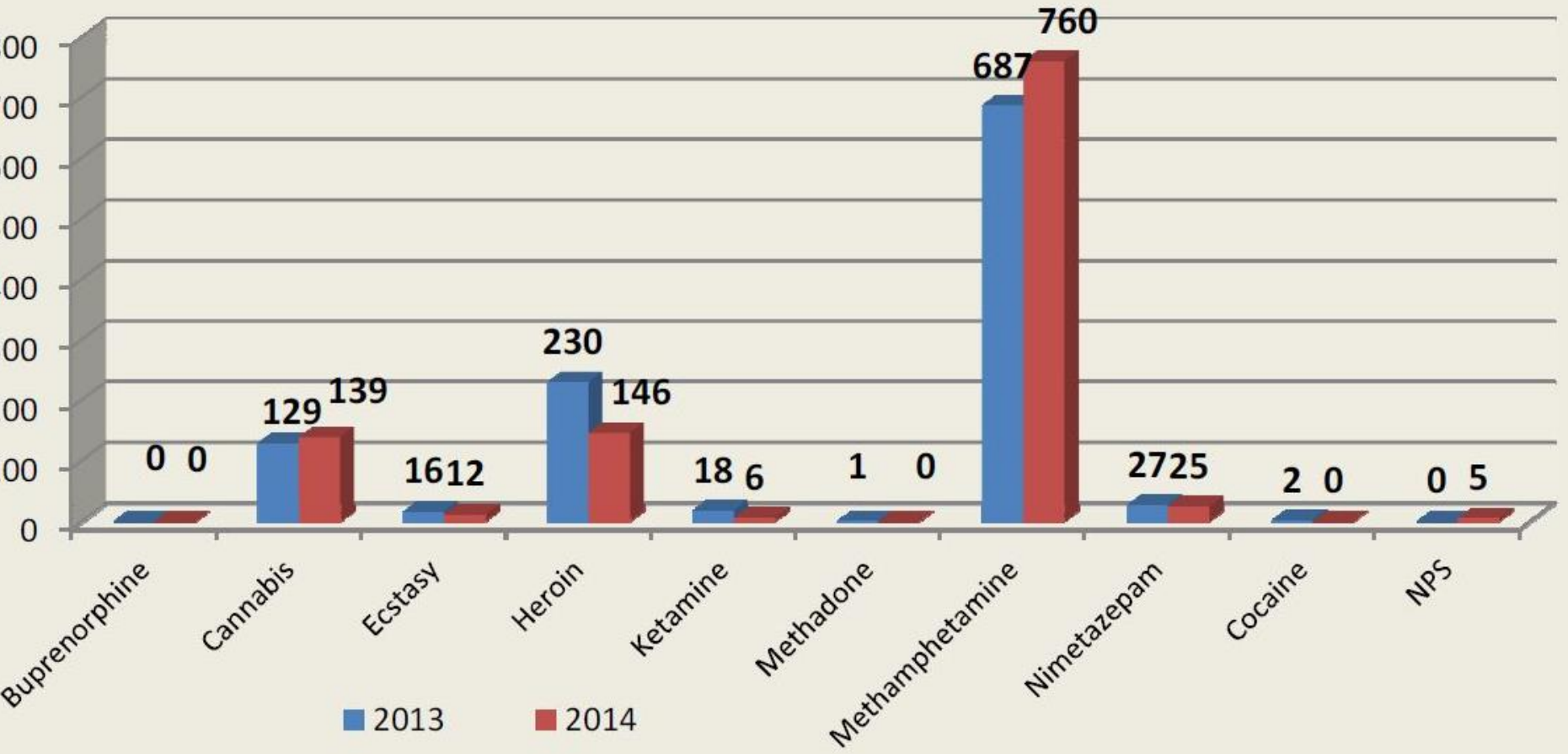


■ Poly-drug abusers

■ Single-drug abusers

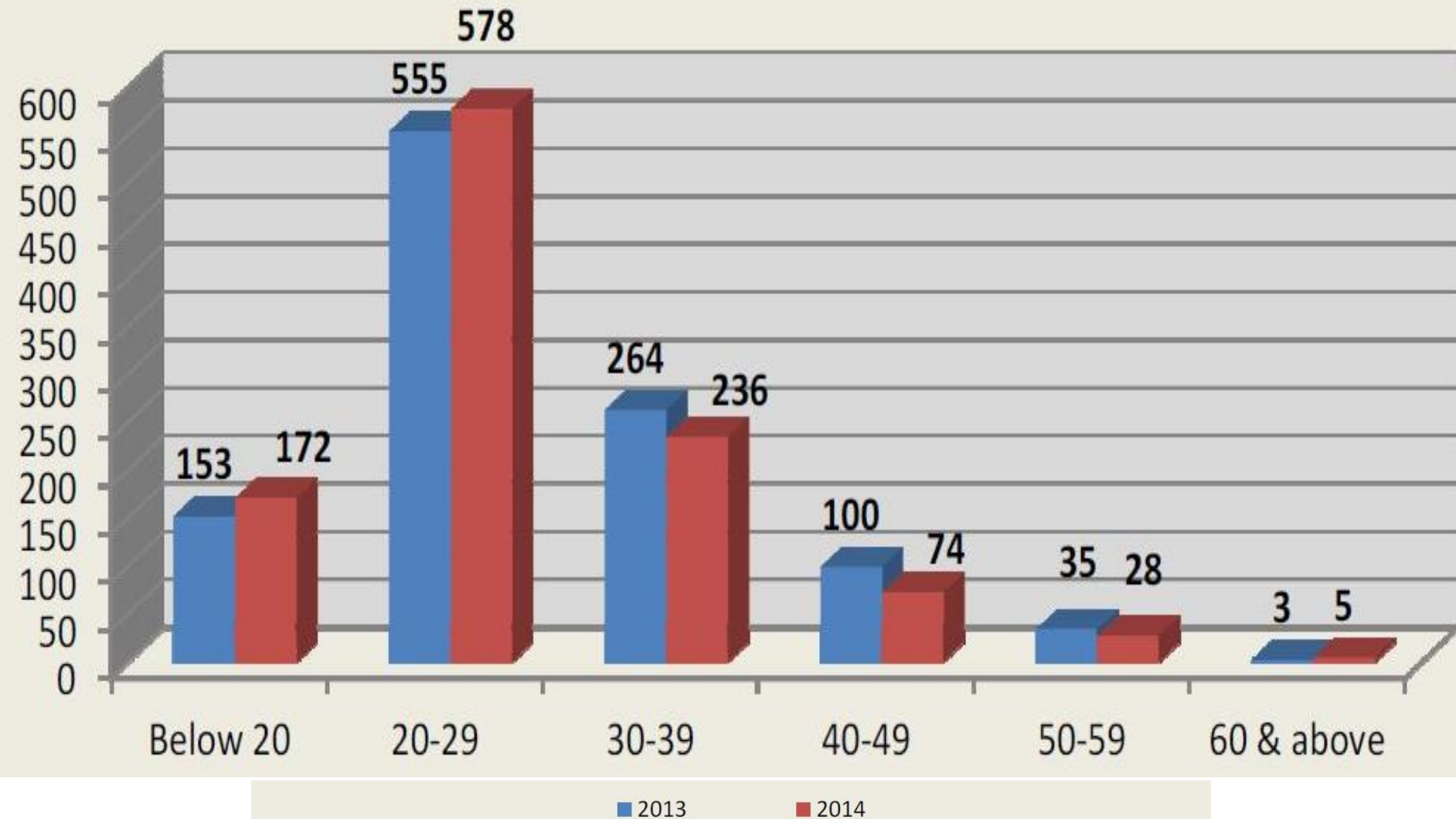
DRUG ABUSERS – BY DRUGS ABUSED

Chart 2b: Total new abusers by drug type



DRUG ABUSERS ARRESTED – BY AGE

Chart 4a: New Abusers by Age



SANA'S Programmes & Services

- ❖ Recovery & Rehabilitation through Family Support
- ❖ Reintegration through Community Support



Recovery & Rehabilitation Through Family Support

Case Management

Structured aftercare programme

Case Management & Counselling for a selected group of ex-offenders and their families at risk of re-offending; and those who seek assistance in reintegration into society prior to their release.

CASE MANAGEMENT

Journey of Helping a Client Under Case Management Service

2 months Incare phase

6 - 12 months Aftercare Phase

POST AFTERCARE - 2 years

Family Enrichment Programme

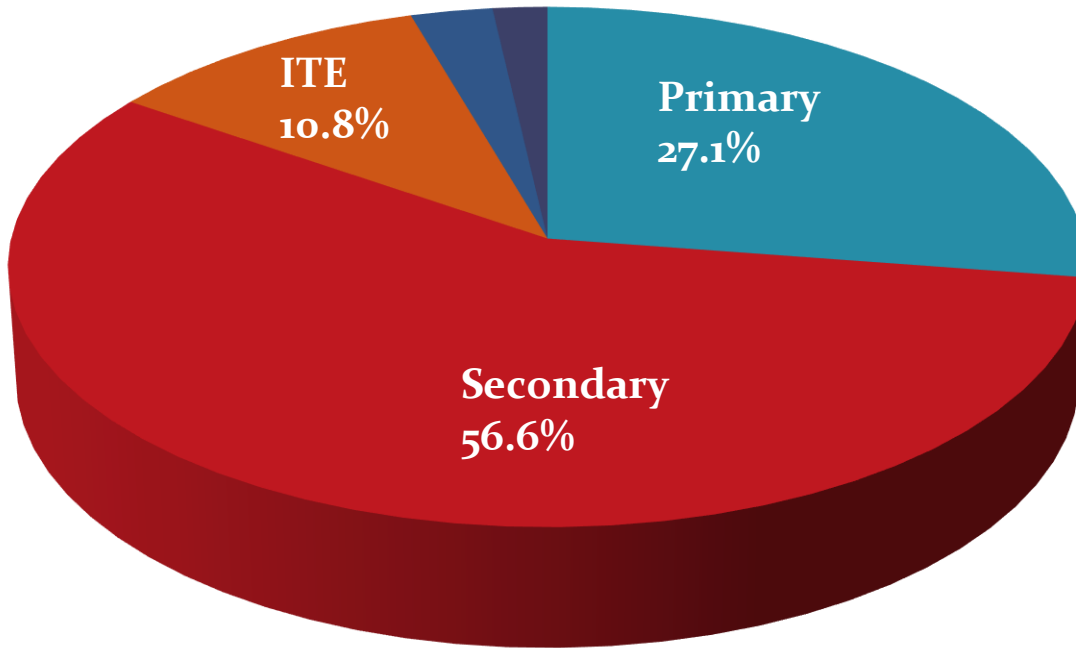
Peer Leaders Development Programme

OBJECTIVES

- To provide aftercare assistance, support and guidance through individual case management to the Target Group and their families (where possible) to help them cope during the initial period of the clients' reintegration.
- To assist drug abuser in attaining employment, securing accommodation, developing social support and coping skills & attaining a positive lifestyle
- To address the specific criminogenic needs of the clients to prevent of relapse.

Profile

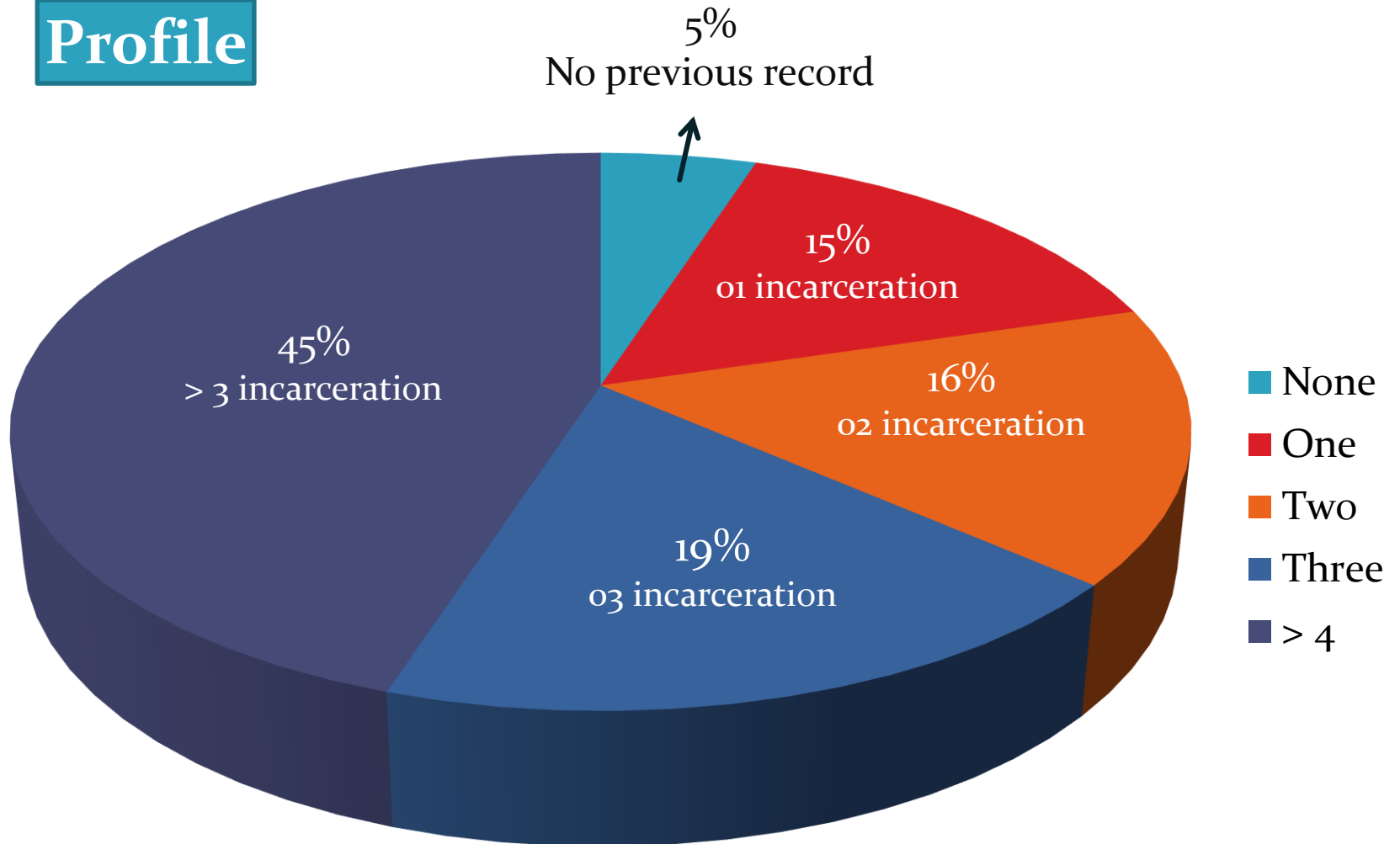
Educational Level



- Primary (1 - 6) 27.1%
- Secondary (1 - 4) 56.6%
- ITE/Higher Nitec (Yr 1 & 2) 10.8%
- Poly - Diploma (Yr 1 - 3) 2.7%
- A Level / Pre-U cert (Yr 1 - 2) 1.8%
- Bachelor's Degree (Yr 1 - 3) 0%
- Post-graduate Degree 0%

Number of Previous Incarceration

Profile



Profile

Type of Drug consumed

- Majority of them consumed heroin (40%)
- Consumption of Ice on the increase (35%)

CHALLENGES IN REINTEGRATION

- Clients have very high levels of need;
- Often have to deal with problems relating to many areas:
 - poor parenting, abuse, damaged relationships, criminal and anti-social peers;
 - Low educational attainment;
 - Substance abuse or dependency;
 - Low income, Housing issues

CHALLENGES IN REINTEGRATION

- Less than 50% Programme Completion Rate prior to 2011.
- High drop out rate midway
- Inability to engage clients upon their release
- Failure to connect with clients prior to their release
- Lack of understanding of how Aftercare Case Managers are able to help

Review of the Case Management Programme undertaken in 2011

Much improvement in programme completion rate

Completion Rate

Year	No of Cases	Completed	%
2011/12	600	469	78
2012/2013	474	396	84
2013/2014	331	284	86
2014/ 2015	170	145	85

CRITICAL SUCCESS FACTORS

❑ Literature on Effective Interventions

Ability of practitioners to convey accurate empathy, respect & warmth & a “***therapeutic genuineness***” – Engagement of client prior to release/Quality of interpersonal relationship;

- ❑ Meeting client at the Gate
- ❑ Orientation to assimilate them (those more than 3 years of incarceration)
- ❑ Intensive counselling for clients with higher needs

❑ Reaching out and being in contact with client constantly

❑ Engaging the Family and providing avenues for family bonding

(Studies show presence and availability of strong and positive family support play a crucial role in relapse prevention).

CRITICAL SUCCESS FACTORS

- ❑ Mobilising Community Resources
 - Collaboration with “**The Shop City Project**”
 - Tattoo Removal Project

 - **Project Relief** (Assistance to needy/vulnerable women)

 - Comm **Cut** (skills training in haircut; hairstyling)

- ✓ Emergency Fund
- ✓ Funding support for training of Case Managers
- ✓ Education Skills Training Subsidies for Clients

Collaboration with LUXASIA

- ❑ Female clients given skills training & Certification
- ❑ Cosmetics, Beauty and Nails
- ❑ 20 clients have Graduated



Continuum of Care

Completion of 6 months is just the beginning, allowing Aftercare Case Manager to address the basic needs and getting the client to stabilise in the community

2 years of continued support offered to Client upon completion of 6 months programme

Family Enrichment Programme (FEP) and Peer Leaders Development Programme

POST - AFTERCARE

- FAMILY ENRICHMENT PROGRAMME
- PEER LEADERS DEVELOPMENT PROGRAMME

Family Enrichment Programme



Provides experiential learning for ex-offenders and their families in building confidence, social skills, problem-solving skills and encouraging willingness to attempt new challenges as a family.

It also helps to strengthen family bonding

Peer Leaders Development

- Introduced in 2013. Those completed the Case Management programme encourage to join as Peer Leaders
- Our clients can go on to become contributing members of society. Some even take on leadership roles to pass on their experiences to others who are still struggling to recover
- Possess leadership and exemplary qualities as shown in their rehabilitation journey and possess a strong desire to help others.

Peer Leaders Development

- In 2014, 12 Peer Leaders and potential leaders participated in 4 training activities and workshops to maximize their potential and equip them with relevant enabling skills
- Some Peer Leaders support the Family Enrichment Programmes (FEP)
Others have initiated and participated actively in community projects
- In 2014, Peer Leaders initiated two community projects that involved Melrose Children's Home and Bishan Home for the Intellectually Disabled.
- Plan to identify / train at least 10 Peer Leaders each year.



*Strengthening The Continuum of
Care*

DROP-IN CENTRE

Drop-In Centre

Objectives

- To serve as a one-stop centre for ex-offenders and their families seeking help or advice or wish to see a counsellor
- To provide crisis intervention in cases where ex-offenders face triggers to re-offend
- To offer support services to assist ex-offenders in areas such as starter kits, free legal advice, counselling, support group sessions and financial assistance



Services

Counselling	To provide counselling to avert an impending crisis, for e g when the living situation is threatened, disrupted or when ex-offender is under stress and tempted to resort to drugs.
Starter Kit	Assistance for immediate food and travel needs - Kopitiam Card (for food) and EZ-Link Travel Card
Emergency Fund	Financial assistance to tide over a period of difficulty or distress.
Women Support Group	Support Group for women ex-drug offenders
Family Support Group	Support Group for families of recovering drug offenders
Tattoo Removal	Highly subsidised tattoo removal for ex-offenders who face discrimination due to their 'regrettable' tattoos.
Legal Aid consultation	Free legal advice to ex-offenders and their families
Mediation	Family mediation for ex-offenders who are not able to relate with their family members
Accommodation	Finding suitable accommodation for ex-offenders
Referral	Referral and follow-up with other agencies



THANK YOU