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## Comorbidity: Trauma, substance use and mental health

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consultation with volunteers, partnerships with multiple stakeholders, robust data collection and promoting of a supportive, safe environment for staff and volunteers.

**Key Findings:** DWNSW has operated through three festival seasons. We have attended up to 23 festivals per season, supported thousands of patrons and have over 200 volunteers. The social media following is ~10,000 with drug alert posts produced in a partnership with the Ministry of Health reaching hundreds of thousands of people. Peer based harm reduction has also been enshrined in key documents regulating music festivals.

**Discussion and Conclusions:** With appropriate planning and implementation, peer-based harm reduction can be an effective and valuable partner to mainstream services in highly visible settings.

**Disclosure of Interest Statement:** DanceWise NSW is funded by the NSW Ministry of Health Centre for Alcohol and Other Drugs. Some of the costs of festival interventions are covered by promoters. The program does not receive funds from pharmaceutical companies or businesses promoting the use of alcohol.

### Discussion Section.

The discussion will involve representatives from a peer-based user organisation, clinical toxicology and public health teams. They will share some of the challenges and benefits of collaborating across a necessarily diverse stakeholder group, that includes Liquor & Gaming NSW, music festival industry representatives, onsite private medical providers, NSW Ambulance and public health and other teams within NSW Health. The panel will discuss and answer questions from the audience relating to the NSW Government response model, and key harm reduction components that are implemented before, during and after music festival events. The impact of COVID-19 on music festivals events, patron behaviour and the challenges it poses regarding data collection and interpretation will be discussed. The panel will provide future directions in music festival harm reduction in the New South Wales setting, and lessons learnt for the benefit of other jurisdictions undertaking similar work.

Paper 239.

### Symposium: Comorbidity: Trauma, substance use and mental health

**Chair:** Katherine L. Mills.

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**Aim:** Substance use and mental health disorders commonly co-occur and they are frequently underpinned by a history of psychological trauma. This symposium presents new data on the clinical presentation and documentation of trauma exposure, trauma-related disorders, and their treatment among adults entering substance use treatment, the implementation of integrated trauma-focused therapy in substance use treatment, and presenting issues among adolescents seeking integrated treatment for substance use and traumatic stress.

**Disclosure of Interest Statement:** The work presented in this symposium has been supported by the National Health and Medical Research Council, Primary Health Network and Australian Rotary Health.

Presentation 1.

### Trauma and substance use comorbidity in Australia: The impact of complex post-traumatic stress disorder

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**Introduction and Aims:** Trauma-related comorbidities are extremely prevalent in substance use treatment settings. Advancements in the field have seen the establishment of complex post-traumatic stress disorder (CPTSD) as a new diagnosis in the International Classification of