

Building capacity to drive positive change

WANADA's Recommended Investment Opportunities

Western Australia Pre-Budget Submission

2019-20



About WANADA

The Western Australian Network of Alcohol and other Drug Agencies (WANADA) is the peak body for the alcohol and other drug education, prevention, treatment and support sector in Western Australia. WANADA is an independent, membership-driven not-for-profit association.

WANADA's vision is for a human services sector that significantly improves the health and wellbeing of individuals, families and communities by addressing issues associated with alcohol and other drug use. WANADA leads a shared voice within the specialist alcohol and other drug sector that drives positive change.

WANADA is driven by the passion and hard work of its member agencies, which include community alcohol and other drug counselling, therapeutic communities, residential rehabilitation, intoxication management, harm reduction, peer based, prevention and community development services.

This 2019 – 2020 Pre-Budget Submission is informed by a range of WANADA activities, including: the recent 2017 State of the Sector Report; targeted sector consultation; and WANADA's ongoing involvement in a range of cross-government policy reform processes.

Forward

Alcohol and other drug use is a health issue of significant concern in Western Australia.

The harms associated with alcohol and other drug use impact the whole West Australian community, our health and our economy. Consequently everyone has a role in supporting connected, evidence-based and effective solutions.

Over recent years, there has been substantial planning and investment in the Western Australian alcohol and other drug service sector. In 2017 the WA Labor Government committed to a number of alcohol and other drug initiatives through its Methamphetamine Action Plan. These have largely been implemented, an achievement that WANADA applauds.

Western Australia continues to experience harms associated with alcohol and other drug use. To meet projected demand, alcohol and other drug treatment services will have to approximately triple in capacity.¹ Recent investment in the sector has been welcomed, and will contribute to progress towards the crucial goals of preventing and reducing alcohol and other drug related harm and ensuring access to treatment when needed.

There remains the need to ensure that the system of services is configured to best meet the diverse needs of a changing population and provide timely, effective treatment and support. Realising this requires more than just service growth - it requires a coordinated approach to planning, development and capacity building.

There is substantial opportunity to apply smart, cost effective solutions to address the harms associated with alcohol and other drugs. In many circumstances appropriate policy and program mechanisms already exist – however these need to work in a more coordinated manner. In some select situations, there are clear system gaps that, if resolved, will deliver substantial quality improvements and cost savings across the whole community and economy.

The investments proposed in WANADA's 2019 – 2020 Pre-Budget Submission are designed to support a robust, holistic response to alcohol and other drug concerns across the State. These targeted investments will assist the State Government to deliver a system that makes a difference, provide strong services in a strong sector and create synergies for consumer and community engagement. Our collective aim is to maximise current initiatives to reduce drug use and improve service access, and achieve broader health and wellbeing outcomes. These budget proposals advances this aim.

¹ Mental Health Commission (2015) *Mental Health, Alcohol and Other Drug Services Plan 2015-2025*, p.20.

BUILDING CAPACITY

RECOMMENDATIONS

PRIORITY AREA ONE: A SYSTEM THAT MAKES A DIFFERENCE

1. Develop a State-wide centre of **sector capacity building and coordination**. p.6
2. Resource the WA Alcohol and Other Drug **Interagency Strategy**. p.7
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Priority Area One
A SYSTEM THAT MAKES A DIFFERENCE

SECTOR CAPACITY BUILDING AND COORDINATION

Environment: The Western Australian alcohol and other drug service sector comprises a variety of services of varying capacity that provide a wide range of specialist services to communities throughout the State. The environment in which these services operate is complex, and requires across-sector inter-connectedness and continual adaptation.

Opportunity: There is an opportunity to develop a centre that would contribute to the alcohol and other drug service sector's quality and capacity, as well as systematically support the capacity of all relevant human services to address alcohol and other drug related issues.

Solution: A Centre of Sector Capacity Building and Coordination would facilitate:

- equitable access to quality services, regardless of service type and location;
- improved workforce capabilities and confidence – including cultural competencies;
- increased referral within the alcohol and other drug sector and across other health and human service systems;
- translation and therefore application of research and evidence in practice;
- participation in practice informed research;
- change management responses to trends as well as reform and policy shifts; and
- sector driven planning and co-production.

Achievable: Minimal investment is required to establish this initiative. It would be achieved through leveraging existing sector representation and support funding to enhance collaboration and capacity building, together with additional targeted seed funding that strengthens specialist research and clinical input.

Added Value: Supporting the development of this Centre will ensure increased effectiveness and efficiency of any investment in the alcohol and other drug sector – including the following recommended initiatives.

Recommendation:

1. Develop a State-wide centre of **sector capacity building and coordination**.

Costing:

\$750,000 over three years for 2x FTE.

INTERAGENCY STRATEGY

Environment: The Western Australian Alcohol and Other Drug Interagency Strategy is a prominent demonstration of the State Government's commitment to delivering connected, evidenced, cost efficient initiatives in an environment of cross-sector reform.

Opportunity: Western Australia is one of the few jurisdictions to have an established interagency mechanism focused specifically on alcohol and other drug issues. The State Government's intent to continue this systemic approach is to be commended. Effective utilisation of an interagency approach to alcohol and other drug issues has the potential to realise significant cost savings. Inadvertent consequences of cross-sector policy decisions can also be avoided by effective coordination across multiple government agencies.

Solution: WANADA recommends that the Interagency Strategy's resources are increased, to support the ongoing reform-driven vision of the State Government. This investment should support an expansion of the Drug and Alcohol Senior Officers Group's (DASOG) activities, support the engagement of additional relevant government agencies in DASOG, and facilitate increased sector involvement.

Achievable: This targeted investment will clearly demonstrate a partnership approach across all government agencies and the non-government service sector to address alcohol and other drug related harms.

Recommendation:

2. Resource the WA Alcohol and Other Drug **Interagency Strategy**.

Costing:

Targeted funding to support increased State Government coordination and sector engagement.

ERADICATING HEPATITIS C

Environment: The listing of new, effective treatments on the Pharmaceutical Benefits Scheme provides a time-limited opportunity to contribute to international goal to eradicate the hepatitis C by 2030. Treatment initiation rates in Western Australia, however, are low and continue to drop.²

Opportunity: There are clear barriers to accessing treatment, particularly for injecting drug users, who account for approximately 90 percent of hepatitis C transmissions. Providing targeted investment to alcohol and other drug treatment services has the potential to: reverse this downward trend; deliver significant cost savings to the health budget; and support a systemic, cross-sector response to this critical population health issue.

Solution: Modest State Government investment will ensure this straight forward intervention will save lives, and significant health costs, and will assist WA to meet the international target.

Achievable: This investment will ensure all injecting drug users who have been in contact with alcohol and other drug services are educated (included through peer led education) about the availability of improved hepatitis C treatment options. It will also support treatment access and tailored support.

This investment will result in a positive impact on the health outcomes, thereby reducing costs as a result of the investment.

Recommendation:

3. Deliver targeted alcohol and other drug sector funding to contribute to the **eradication of hepatitis C.**

Costing:

\$5.4 million over three years for 15 x FTE state-wide to enable service training and professional development; primary health partnership development; resource development; and evaluation.

² The Kirby Institute (2018), Monitoring hepatitis C treatment uptake in Australia (Issue 9). The Kirby Institute, UNSW Sydney, p.2.

JUSTICE DIVERSION INITIATIVES

- Environment:** Imprisonments of adults on illicit drug offences increased almost 70 percent between 2012 and 2017.³ Further, recidivism rates in Western Australia have averaged 40 to 45 % in the past decade, with problematic substance use identified as one of three factors most strongly linked to recidivism.⁴ This presents a complex, costly, and ongoing problem for the justice and corrections system, and the broad community.
- Opportunity:** It is important that the justice system is configured in such a manner that costs are minimised, and outcomes are sustained. Central to this is ensuring that there are sufficient pre-and post-sentencing options to reduce alcohol and other drug harms.
- Solution:** A range of government reform activities are currently underway to reduce incarcerations and recidivism. These include the Justice Pipeline Model, and the Department of Justice's investigations to implement Conditional Release Orders. It is important that these initiatives are complemented by a review of all alcohol and other drug related justice diversion initiatives.
- Achievable:** It is important to review current initiatives to ensure: maximise utilisation; appropriate access by at-risk population groups; improved outcomes; and to identify and address any gaps in any diversion streams.

Recommendation:

4. Conduct a comprehensive review of all **justice diversion initiatives**.

Costing:

Targeted funding to support an independent review.

³ Western Australian Department of Justice (2017), *Adult Prisoners in Custody Quarterly Statistics: March Quarter 2017*, p.12.

⁴ Officer of the Inspector of Custodial Services (2014), *Recidivism Rates and the Impact of Treatment Programs*, p.i.

FETAL ALCOHOL SPECTRUM DISORDER

Environment: Fetal Alcohol Spectrum Disorder (FASD) significantly impacts communities in Western Australia:

- a population study in Fitzroy Crossing reported a FASD prevalence of 12 per cent⁵;
- a recent Telethon Institute study identified that 36 per cent of children in WA detention have FASD⁶

Opportunity: It is anticipated that a national FASD strategy will be released by the end of 2018. In November 2018 there will be a national FASD conference in Perth. The upcoming release of the strategy is an opportunity to establish a range of targeted initiatives to holistically and sustainably address FASD ranging from prevention to ongoing support.

Solution: With national direction imminent, Western Australia must show leadership on the issue, by supporting across-sector services to identify and support people impacted by FASD, so as to optimise their health and wellbeing outcomes for current and future generations.

Achievable: Western Australian leadership will demonstrate the State's commitment to addressing FASD and reduce long term costs to health, justice and community service sectors.

Recommendation:

5. Resource across-sector capacity building to address **Fetal Alcohol Spectrum Disorder**.

Costing:

Targeted funding to the MHC Workforce Development Program to support services to identify and provide ongoing effective strategies to prevent and assist people impacted by Fetal Alcohol Spectrum Disorder.

⁵ *Prevalence of fetal alcohol syndrome in a population-based sample of children living in remote Australia: the Liliwan Project.* Fitzpatrick JP, Latimer J, Carteer M, Oscar J, Ferreira ML, Carmichael OH, Lucas BR, Doney R, Salter C, Try J, Hawkes G, Fitzpatrick E, Hand M, Watkins RE, Martiniuk AL, Bower C, Boulton J, Elliott EJ. 2015, Journal of Paediatrics and Child Health, pp. 450-457.

⁶ <https://www.theguardian.com/australia-news/2018/feb/14/wa-study-finds-89-of-children-in-detention-have-severe-cognitive-impairment> Accessed 26 September 2018.

MINIMUM FLOOR PRICE

Environment: In Western Australia, cheap alcohol is readily available, with some products sold for as little as 24 cents a standard drink.⁷ National and international evidence consistently indicates price is one of the key influences on alcohol consumption and related harm. Even small changes in price have a significant health and economic impact across the whole community.

Opportunity: An alcohol minimum floor price is being introduced in a number of jurisdictions world-wide. This important initiative contributes to reducing alcohol-related harms, targeted at reducing drinking among the heaviest drinkers while having minimal effect of moderate drinkers across all income levels.⁸

Solution: The Western Australian Government has previously indicated its interest in introducing an alcohol minimum floor price. WANADA strongly supports this initiative and considers it a fundamental component of a balanced, holistic approach to addressing alcohol-associated harms.

Achievable: A minimum floor price will contribute to improved community health and wellbeing, and deliver significant cost savings in the long term.

Recommendations:

6. Introduce a **minimum floor price** for alcohol.

Costings:

Targeted funding to support a comprehensive community awareness campaign to educate the population on the reasoning behind, and benefit of, introducing a minimum floor price.

⁷ WA Alcohol and Youth Action Coalition (2018), *The Case for a Minimum (Floor) Price for Alcohol in Western Australia*, p. 4.

⁸ Ibid.

Priority Area Two
STRONG SERVICES, STRONG SECTOR

DATA AND OUTCOMES

Environment: Data and outcomes are essential elements of contemporary service delivery, and are key drivers for improving individual, service, organisation and systems outcomes. Alcohol and other drug treatment services are required to report to the National Minimum Data Set. The current data and outcomes collected, beyond meeting the national requirements, are inadequate to demonstrate effectiveness or support sector planning or service continuous improvement.

Opportunity: There are a range of validated measures available that can support alcohol and other drug services to capture and evaluate outcomes. To support an effective and systemic approach, it is important that a data and outcomes framework is developed specifically for the alcohol and other drug sector. This will ensure services have access to validated measures that meet their specific needs, and will support the integrity of the collective sector data system.

Solution: An effective data and outcomes framework will enable the alcohol and other drug service sector to demonstrate its collective impact, build community confidence, further contribute to cross-sector solutions, and attract investment.

Achievable: In this environment, it is imperative that the development of a sector-specific outcomes framework is complemented by an update of the collective data warehouse.

Recommendations:

7. Develop an alcohol and other drug **data and outcomes** framework.

Costings:

\$200,000 for a framework that provides a range of validated instruments to support the collection and analysis of individual service and sector outcomes.

DATA MANAGEMENT

- Environment:** There are significant challenges in the capacity of the current data collection and analysis system, warehoused through the Service Information Management System. The current data management system ensures a collective approach, however is outdated and inflexible. Consequently it is inadequate to support current government, service provider or community requirements. Addressing these challenges is critical to effective service planning and delivery.
- Opportunity:** Over the past two years a number of organisations have progressed independent data management solutions to better monitor program quality and support service accountability. Not all organisations, however, are in a position to resource independent data management systems, creating inequity and jeopardising diversity in the service system. Independent data management systems also potentially complicate measures that ensure the integrity of collective data systems, such as the National Minimum Data Set.
- Solution:** An updated and flexible data management system will enable the sector to capture and manage individual, service and organisation data that meets their needs, as well as contribute to sector policy and planning.
- Achievable:** In this environment, it is imperative that a collective data warehouse arrangement is retained and designed to support a sector-specific outcomes framework.

Recommendations:

8. Replace the Service Information Management System collective **data management** infrastructure.

Costings:

\$750,000 for contemporary and flexible data management infrastructure.

ABORIGINAL TRAINING AND POLICY

Environment: The Aboriginal alcohol and other drug education training provided by the MHC Strong Spirit Strong Mind Aboriginal Program area is widely welcomed and acknowledged for its contribution to increasing and supporting the Aboriginal workforce within the alcohol and other drug sector. It has been demonstrated as a leading response, not just in WA, but across Australia.

Opportunity: The Strong Spirit Strong Mind Aboriginal Program is a key contributor to supporting the current and future workforce to deliver high quality, evidence-based and effective, culturally appropriate and secure, services and programs – a key priority area of the draft *Mental Health, Alcohol and other Drug Workforce Strategic Framework 2018-2025*.

Solution: It is important that programs such as this are sustained and enhanced, so as to continue to deliver comprehensive culturally secure workforce development into the future.

Achievable: Further investment in the program will support the development of knowledge and skills within the alcohol and other drug, mental health and broader human services sector to work in culturally secure ways. It will also support the continuation of the programs comprehensive culturally secure workforce development approach that supports organisation and systems development, in addition to meeting individual workforce development needs.⁹

Recommendation:

9. Guarantee the continuation of the Mental Health Commission **Aboriginal training and policy** program, and explore opportunities to expand the program.

Costing:

\$750,000 over 3 years for 2 x FTE Aboriginal workforce development and policy staff to support increased Aboriginal engagement in the workforce and culturally secure practice.

⁹ WANADA (2017), *Comprehensive Alcohol and Other Drug Workforce Development in Western Australia*, p.15.

HARM REDUCTION

Environment: Addressing the harms associated with the use of alcohol and other drugs requires a balanced approach to funding across the established three pillars of Harm Reduction, Demand Reduction, and Supply Reduction. Historically, nationally the funding distribution has been heavily weighted towards Supply Reduction activities, despite the National Drug Strategy stating that “strategies to prevent and minimise alcohol, tobacco, and other drug problems should be balanced across the three pillars.”¹⁰ In WA, alcohol and other drug harm reduction and personal support service hours need to increase from 5,000 in 2017, to 258,000 hours in 2025.¹¹

Opportunity: Harm reduction is an essential, well-evidenced pillar of drug policy. Its focus is to reduce harms for consumers, their friends and family, and the whole community. Its importance has been recognised by multiple government inquiries, most recently the Parliamentary Joint Committee on Law Enforcement Inquiry into Crystal Methamphetamine, which in its final report recognised the substantial evidence base that demonstrated the benefits of harm reduction initiatives.¹²

The cost benefit of harm reduction initiatives is well-established. Effective pregnancy health warning labels on alcohol products, as a suite of initiatives to reduce fetal alcohol spectrum disorder, has recently been acknowledged by Australian and New Zealand governments¹³. In addition it is well established that for every \$1 spent on needle and syringe exchange programs, the community saves \$27 in future cost.¹⁴

Solution: There must be an increased focus on harm reduction initiatives, such as peer based education and the expansion of needle and syringe exchange programs. In the current fiscal environment, it is important that there is targeted investment in harm reduction initiatives, such as peer-based education.

Achievable: Investment in harm reduction will deliver substantial improvements to health and wellbeing outcomes, as well as substantial cost savings across multiple sectors and the community.

Recommendation:

10. Further invest in harm reduction to address the imbalance in funding.

Costing:

\$2 million per year increase for harm reduction services, and a plan for further continued service expansion to meet identified requirements.

¹⁰ Commonwealth of Australia (2017), *National Drug Strategy 2017-2026*, p.6.

¹¹ Government of Western Australia (2015), *Mental Health, Alcohol and Other Drug Services Plan 2015-2025*, p.43.

¹² Parliamentary Joint Committee on Law Enforcement (2018), *Inquiry into Crystal Methamphetamine (Ice) Final Report*, p.73

¹³ Hon Roger Cook, Minister for Health, Media Statement 11 October 2018: *Pregnancy warning for all packaged alcohol drinks*.

¹⁴ National Centre in HIV Epidemiology and Clinical Research (2009), *Return on Investment 2: Evaluating the Cost-Effectiveness of Needle and Syringe Programs in Australia 2009*, <http://www.health.gov.au/internet/main/publishing.nsf/Content/needle-return-2>, p.8.

YOUTH

- Environment:** Ensuring that the specific needs of youth are addressed is fundamental in the development of a holistic, balanced and responsive system of alcohol and other drug services in Western Australia.
- Opportunity:** There is an opportunity to enhance alcohol and other drug services' capacity to best respond to the particular needs to youth.
- Solution:** Capacity building will enhance services' ability to best respond to the particular needs of youth, and have established effective referral pathways to appropriate youth specific services across the entirety of the State. This must be complemented with investment in parental support and engagement programs, including family centred approaches.
- Achievable:** Strengthening services capacity to deliver targeted youth and family-centred approaches will deliver improved and sustained health and wellbeing outcomes, and support effective cross-sector connections.

Recommendation:

11. Deliver targeted **youth** initiatives across the alcohol and other drug sector.

Costing:

\$5.4 million over three years for 15 x FTE youth workers within alcohol and other drug services to support targeted youth responses and referrals, including parental support and engagement programs.

TRANSITIONAL HOUSING AND SUPPORT PROGRAM

- Environment:** People leaving residential treatment must be fully supported to transition back into the community. Stable housing is a critical ingredient of enduring treatment impact. This includes assisting clients to manage long term tenancies, and live as independently as possible.
- Opportunity:** The Transition Housing and Support Program (THASP) assists this transition by providing short term accommodation where people are further supported to build their networks and skills, be assisted to engage with the community, and access tenancy references.
- Solution:** The short term rental accommodation and transitional support service provided through THASP is an essential component in supporting sustainable outcomes for people leaving residential services.
- Achievable:** Funding certainty is required as THASP funding is currently not confirmed from the 2019-20 financial year.

Recommendation:

12. Continue the **Transitional Housing and Support Program**, and explore opportunities to build on the service model.

Costing:

A continuation of existing funding levels, adjusted to account for appropriate indexation and the variability in cost of the program due to the long-term nature of the service.

Priority Area Three
CONSUMER AND COMMUNITY ENGAGEMENT

CONSUMER AND COMMUNITY COALITION

- Environment:** Consumer systems advocacy and advisory bodies ensure people are valued for their experience and meaningfully contribute to policy, planning and service design and delivery. These organisations: enhance individual consumer capacity to participate; support service capacity to co-design practices; ensure consumer input into policy, planning and decision making; and provide a consumer-led community platform for greater systems advocacy.
- Opportunity:** In July 2018 the Alcohol and Other Drug Consumer and Community Coalition (AODCCC) was successfully incorporated. The AODCCC's purpose is to promote the interests, education and welfare of those affected by alcohol and other drug use. The organisation has been widely supported by individuals across multiple communities and sectors in WA.
- Solution:** There is an opportunity to assist the AODCCC's activities, through funding for the organisation to undertake targeted sector consultation to determine engagement, resource and capacity building opportunities.
- Achievable:** Funding AODCCC to undertake targeted sector consultation will enable it to develop targeted responses that:
- support consumers either pre, post and/or and during treatment;
 - determine cross-sector navigation needs;
 - strengthen organisational engagement strategies; and
 - provide a collection point for the variety of needs and perspectives of alcohol and other drug consumers, their families and community.

Recommendations:

13. Fund the Alcohol and Other Drug
Consumer and Community Coalition.

Costings:

\$750,000 over three years for 2 x FTE.

COMMUNITY CONNECTION AND CONFIDENCE

Environment: Increasing community connection and confidence are central to any systemic response to reducing the harms of alcohol and other drug use.

Opportunity: There has been a notable shift in community perceptions regarding alcohol and other drugs over the past decade, with a majority of people now support education and treatment (as opposed to law enforcement) responses to alcohol and other drug use issues.¹⁵ It is important that this sentiment is supported by building stronger links between communities and the system of services that is designed to address their needs.

Solution: Building community connection and confidence in the alcohol and other drug sector requires a strategic, systemic solution that addresses a range of interrelated factors. These include: ensuring service quality; raising community awareness of services and access requirements; enhancing cross-service navigation; and addressing stigma and discrimination.

Achievable: This systemic approach will increase community support for alcohol and other drug service investment and improve service access.

Recommendations:

14. Leverage existing efforts to build **community connection and confidence** in the alcohol and other drug service sector.

Costings:

- \$250,000 for the develop an holistic sector promotion campaign .
- \$80,000 for revision of the Green Book service directory, to raise existing community and cross-sector awareness of available support services.
- \$350,000 for the development and delivery of a stigma reduction strategy through the established Social Inclusion Steering Group.
- Require all alcohol and other drug treatment and support services operating in Western Australia to achieve and maintain certification against a sector-approved industry standard.