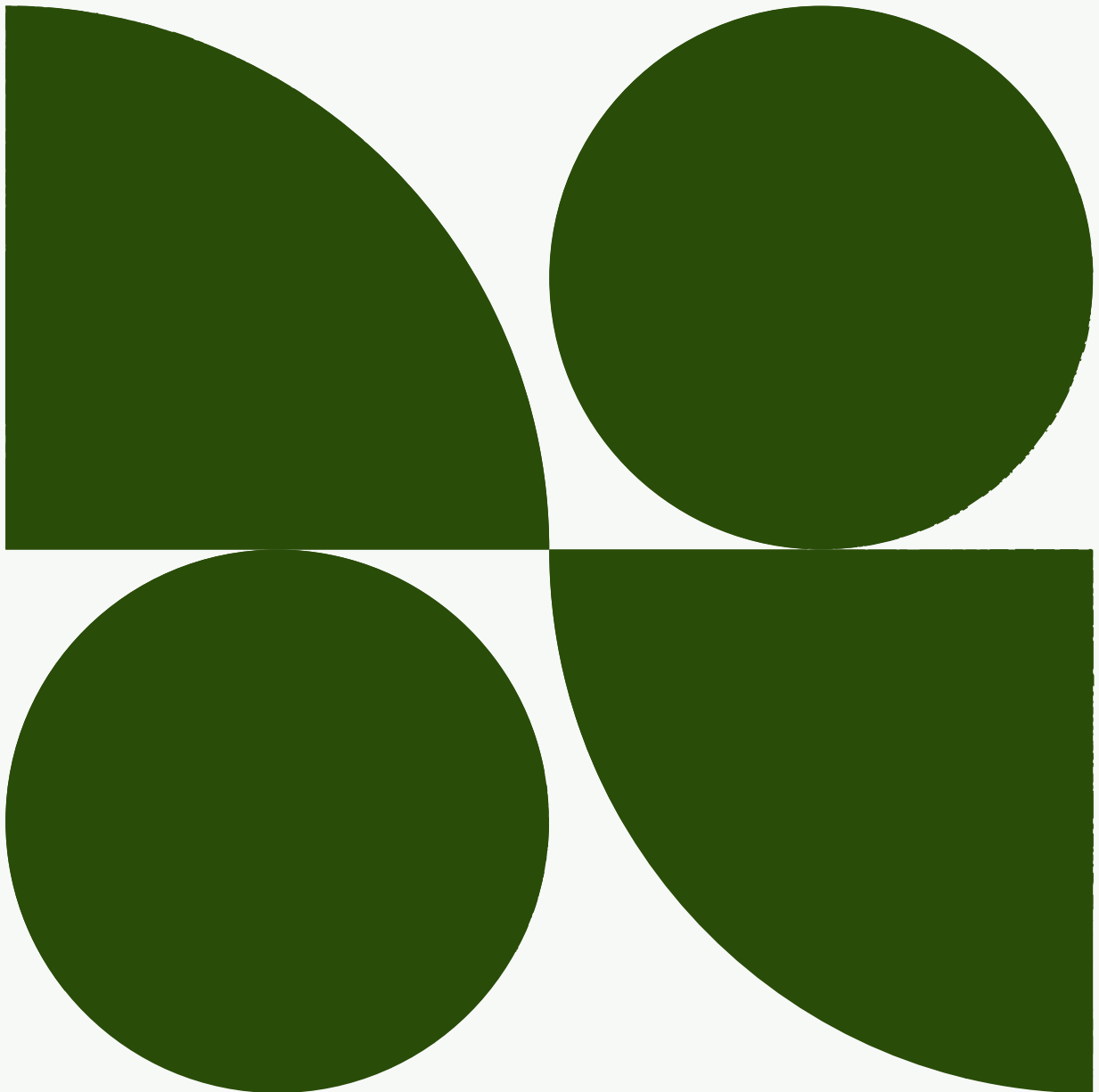


# Submission

# WA Youth Action Plan



## Acknowledgement of Country

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WANADA acknowledge the traditional custodians of Country on which this submission was developed, the Whadjuk people of the Noongar Nation. We acknowledge their continuing and unbroken connection to land, sea and community. We pay our respect to their culture and Elders, past and present and acknowledge their ongoing contribution to WA society and the community.

## About WANADA

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The Western Australian Network of Alcohol and other Drug Agencies (WANADA) is the peak body for the specialist alcohol and other drug education, prevention, treatment and support sector in Western Australia. WANADA is an independent, membership-driven, not-for-profit association, currently representing approximately [65 member organisations](#) (over 100 alcohol and other drug specific services across the state).

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

## Foreword

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WANADA welcomes the opportunity to provide a submission to inform the WA Youth Action Plan.

Young people are our future. Supporting the wellbeing and protecting the interests of young people is a key role of government<sup>1</sup> and indeed, our communities.<sup>2</sup> Supporting equity amongst young people builds a strong foundation for the development of life skills and lifelong wellbeing.

WANADA's submission focuses on the supporting the wellbeing of young people by developing an environment where young people are protected from alcohol and other drug harms and provided with the tools they need to respond to alcohol and other drug issues. This includes investment in: sector-led capability building for responsiveness to neurodisability in young people (including Fetal Alcohol Spectrum Disorder (FASD)) at an organisation, systems, and individual level; community development and prevention, including expanding community alcohol and other drug knowledge; and, limiting young people's exposure to alcohol advertising.

## Young People, Alcohol and other Drug Harms and Policy Context

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Alcohol and other drugs – whether it be via own use or someone else's use - broadly impacts the wellbeing of young people in WA and across the country.

In WA:

- some communities experience a high prevalence of Fetal Alcohol Spectrum Disorder (FASD), with as many as one in five children born with FASD.<sup>3</sup> In 2015-16, 36% of young people in Banksia Hill Juvenile Detention Centre were diagnosed with FASD, with 89% exhibiting at least one domain of severe neurodevelopmental impairment.<sup>4</sup>
- over 1,700 young people (aged 10-19) access alcohol and other drug services each year for their own use, representing nearly 12% of all service users.<sup>5</sup>
- over one in three young people (aged 18-24) are at risk of alcohol-related harm (either in the short-term, such as injuries and road accidents, or in the long-term, such as alcohol-related disease).<sup>6</sup>

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<sup>1</sup> Government of WA (n.d.) [Our Commitment to Child Safety and Wellbeing](#).

<sup>2</sup> Commissioner for Children and Young People (n.d.) [Statement of Commitment to Western Australia's children and young people](#).

<sup>3</sup> Fitzpatrick, JP., Latimer, J., Olson, HC., et al. (2017) [Prevalence and profile of Neurodevelopmental and Fetal Alcohol Spectrum Disorder \(FASD\) amongst Australian Aboriginal Children living in remote communities](#). *Research in Developmental Disabilities*.

<sup>4</sup> Bower, C., Watkins, RE., Mutch, RC., et al. (2018) [Fetal alcohol spectrum disorder and youth justice: a prevalence study among young people sentenced to detention in Western Australia](#).

<sup>5</sup> AIHW (2023) [Alcohol and other drug treatment services in Australia annual report](#).

<sup>6</sup> AIHW (2024) [National Drug Strategy Household Survey 2022-2023](#), Table 9b.22.

- One in five (19%) young people (aged 15-24) report recent use of cannabis.<sup>7</sup> Please note: this does not necessarily indicate risk of harm or a dependence.
- Six ambulances are called to treat intoxicated children (aged under 18) each week.<sup>8</sup>

At a national level:

- alcohol use disorders are a leading cause of disease burden for young men (aged 15-24).<sup>9</sup>
- young people (18-24) are the most likely age group to be a victim of an alcohol-related incident, such as verbal or physical abuse, or being put in fear by someone under the influence of alcohol.<sup>10</sup>

Young people are more likely to engage in risky behaviour relating to alcohol and other drugs, and therefore are more at-risk of permanent brain damage. It is on this basis that the *National Drug Strategy 2017-2026* identifies young people as an at-risk population, with a key priority to prevent uptake, delay first use and reduce use, noting that the evidenced approaches supporting this priority (as part of a broader demand reduction strategy) include "improving community understanding and knowledge, reducing stigma and promoting help seeking; programs focused on building protective factors and social engagement; and addressing underlying social, health and economic determinants of use."<sup>11</sup>

As a sub-strategy, the *National Alcohol Strategy 2019-2028* supports reducing promotion of risky drinking behaviours and inappropriate marketing to reduce harm to young people – a shared responsibility between the States and Commonwealth – and notes that people with impaired cognition, including those with diagnosed or suspected FASD, are a key priority group.<sup>12</sup>

The *Western Australian Health Promotion Strategic Framework 2022-2026* identifies preventing and delaying the uptake of alcohol by children and young people as a key priority.<sup>13</sup> The *Western Australian Mental Health Promotion, Mental Illness, Alcohol and Other Drug Prevention Plan 2018-2025* notes reducing young people's exposure to alcohol advertising, promoting community-led initiatives, and building youth literacy to address stigma and discrimination as key strategies to prevent or reduce alcohol and other drug harms experienced by young people.<sup>14</sup>

The state and national policy context reveals a shared vision and intent for young people being well supported and enabled to grow up in safe environments where their exposure to alcohol and other drug harm is delayed, if not prevented. This vision is echoed by the Commissioner for Children and Young People's Wellbeing Monitoring Framework: "That all children and young people are heard, are healthy and safe, reach their potential and are welcomed as valued members of the community and in doing so we build a brighter future for the whole community".<sup>15</sup>

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<sup>7</sup> AIHW (2020) [National Drug Strategy Household Survey 2019](#), Table S.29

<sup>8</sup> Cancer Council WA, WANADA, ADF, TKI (2022) [WA's hidden crisis: Harm from alcohol](#).

<sup>9</sup> AIHW (2022) [Australian Burden of Disease Study 2022](#).

<sup>10</sup> AIHW (2020) [National Drug Strategy Household Survey 2019](#), Table 3.48

<sup>11</sup> Commonwealth Department of Health (2017) [National Drug Strategy 2017-2026](#), pg. 10, 21.

<sup>12</sup> Commonwealth Department of Health (2019) [National Alcohol Strategy 2019-2028](#), pg. 9-10.

<sup>13</sup> WA Health (2022) [Western Australian Health Promotion Strategic Framework](#), pg. 56.

<sup>14</sup> WA Mental Health Commission (2018) [Western Australian Mental Health Promotion, Mental Illness, Alcohol and Other Drug Prevention Plan 2018-2022](#), pg. 35.

<sup>15</sup> Commissioner for Children and Young People (n.d.) [Wellbeing Monitoring Framework](#).

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## **Build the Capability of the Alcohol and other Drug Sector to Respond to Neurodisability and Enable Support for Capability Building Across the Broader Human Service and Community Sectors**

While the prevalence of FASD is being increasingly recognised, the focus is on prevention, often without adequate consideration of support for those impacted (diagnosed or otherwise).<sup>16</sup> The need for appropriate responsiveness and support extends to cognitive impairments and neurodisabilities of all kinds.

Between 50-70% of alcohol and other drug treatment service users are affected by cognitive impairment.<sup>17,18,19</sup> Given young people with neurodisabilities are more likely to experience harms from alcohol and other drugs,<sup>20</sup> responsiveness and intervention in the early life stages within the alcohol and other drug sector is essential. The *National Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan 2018–2028* identifies support and management for those experiencing FASD as a national priority, and notes collaboration and partnerships, and sustainability as key guiding principles.<sup>21</sup>

It is understood that many neurodisabilities, including FASD, are underrepresenting in terms of diagnosis – particularly those experiencing mild impairment – risking a significant portion of people going without support. The sector has reported increasing complexity in the case management of young service users, with increasing prevalence of neurodisability (diagnosed or suspected) a significant contributor. There is a clear call from the sector for support to respond to these needs.

WANADA has a significant role in supporting sustainable, long-term change management in the alcohol and other drug sector. In partnership with the relevant peaks, WANADA has co-developed and successfully piloted multiple capability building tools, including the *Co-occurring Capability Review Tool* for responsiveness to alcohol and other drug and mental health co-occurrence, and the *Intersecting Alcohol and other Drugs and Family and Domestic Violence Capability Review Tool* for responsiveness to the alcohol and other drug and family and domestic violence intersection.

It is on this basis that WANADA recommends resourcing the development of a sector-led, change-management initiative aiming to build the capability for responsiveness to neurodisability at an individual-, sector-, and systems-level. This is to be led in partnership with the National Organisation for Fetal Alcohol Spectrum Disorder (NOFASD) and must take into consideration culturally appropriate responsiveness. Building the responsiveness capability of the alcohol and other drug sector enables and supports the broader human and community services sectors to follow suit.

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<sup>16</sup> WA Mental Health Commission (2020) [Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025](#), pg. 16.

<sup>17</sup> Copersino, M., Fals-Stewart, W. & Fitzmaurice, G. et al. (2009) [Rapid cognitive screening of patients with substance use disorders](#). *Experimental and Clinical Psychopharmacology*. 17(5):337-44.

<sup>18</sup> Marceau, E., Lunn, J. & Berry J. et al. (2016) [The Montreal Cognitive Assessment \(MoCA\) is sensitive to head injury and cognitive impairment in a residential alcohol and other drug therapeutic community](#). *Journal of Substance Abuse Treatment*. 66:30-36.

<sup>19</sup> 360Edge (2024) [Twitter Post](#).

<sup>20</sup> Robertson J., Emerson, E., Baines, S. & Hatton, C. (2020) [Self-reported smoking, alcohol and drug use among adolescents and young adults with and without mild/moderate intellectual disability](#). *Journal of Intellectual and Developmental Disability*.

<sup>21</sup> Commonwealth Department of Health (2018) [National Fetal Alcohol Spectrum Disorder \(FASD\) Strategic Action Plan 2018-2028](#), pg. 4-5.

## Invest in Community Development and Alcohol and Other Drug Prevention for Young People

Alcohol and other drugs is a whole of community issue, impacting a wide breadth of areas such as health, mental health and wellbeing, housing, justice, and police, amongst others.

The alcohol and other drug service sector has reported that many young service users are accessing treatment and support at a point where they are already experiencing high levels of alcohol and other drug harms, and significant support is needed. Young alcohol and other drug service users are most at-risk of experiencing considerable harms relating to social disadvantage, with key intersections such as trauma, homelessness, and neurodisability. Many young service users have already had contact with the justice system. Concurrently, there is only one youth-specific alcohol and other drug service in the state, located in the metro area, and the demand for other alcohol and other drug services that see young people often outweighs service resources.

Given that young people are developing, there is clear opportunity to invest in early intervention, community development, and community-based prevention, namely primordial, primary, and secondary services to reduce, if not prevent, alcohol and other drug related harms in young people. Community development and community-based prevention are place-based, grass-roots programs that engage the local community to prevent, and identify their own solutions to, the alcohol and other drug-related harms that impact them. This includes playing a role in developing community alcohol and other drug knowledge to address stigma and discrimination. Taking this approach aligns with:

- the identified need in *Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025* for communities across WA to develop place-based Alcohol and Other Drug Management Plans to reduce alcohol and other drug related harm.<sup>22</sup>
- the *Sustainable Health Review's* first recommendation, to "increase and sustain focus and investment in public health, with prevention rising to at least five per cent of total health expenditure by July 2029."<sup>23</sup>

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<sup>22</sup> WA Mental Health Commission (2020) [Young People's Mental Health and Alcohol and Other Drug Use: Priorities for Action 2020-2025](#), pg. 16.

<sup>23</sup> WA Health (2019) [Sustainable Health Review](#), pg. 10.

There is strong evidence that exposure to alcohol marketing is causing underage alcohol consumption,<sup>24</sup> and is associated with high-risk drinking in young people.<sup>25</sup>

Children can be exposed to alcohol advertising via many different mediums, and this has only been exacerbated by targeted digital marketing increasingly used by the alcohol industry.<sup>26</sup> Further, the self-regulatory and voluntary nature of the Alcohol Beverages Advertising Code (ABAC) poses a clear conflict of interest.<sup>27</sup> The ABAC Panel works reactively, relying solely on consumer complaints to detect non-compliance, rather than actively monitoring. Concurrently, digital advertising is only visible to its target audience and is often fleeting, and therefore not open to public scrutiny. This exposes a gap in monitoring advertising – it is unlikely that adults will be fully aware of alcohol marketing children and young people are exposed to online. Other forms of young people's exposure to alcohol, such as alcohol industry branding on non-alcohol products, is also of concern.<sup>28</sup>

Given that children and young people are amongst the most vulnerable cohort in our community, it is essential that they are appropriately protected from alcohol advertising.

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<sup>24</sup> Sargent, J. & Babor, T. (2020). [The Relationship Between Exposure to Alcohol Marketing and Underage Drinking Is Causal](#). *Journal of Studies on Alcohol and Drugs*.

<sup>25</sup> Jernigan, D., Noel, J., Landon, J., Thornton, N. & Lobstein, T. (2016) [Alcohol marketing and youth alcohol consumption: a systematic review of longitudinal studies published since 2008](#). *Society for the Study of Addiction*, 112(1).

<sup>26</sup> Digital marketing is predicted to account for 30% of alcohol advertising spend in 2023. See: Alcohol Focus Scotland (2022) [Realising our Rights: How to Protect People from Alcohol Marketing](#), p. 17.

<sup>27</sup> Pierce, H., Stafford, J., Pettigrew, S., Kameron, C., Keric, D. & Pratt, I. (2019). [Regulation of alcohol marketing in Australia: A critical review of the Alcohol Beverages Advertising Code Scheme's new Placement Rules](#). *Drug and Alcohol Review*, 38, p. 22.

<sup>28</sup> Vidler, A. & Keric, D. (2020) [Non-Alcoholic Alcohol: Another cynical ploy by the alcohol industry?](#) *Drinktank*.