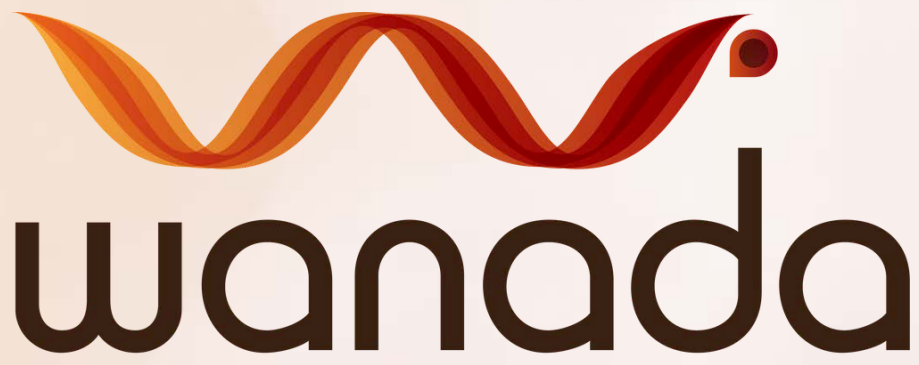




Western Australian Network of
Alcohol & other Drug Agencies



Annual Report
2024 - 2025



Western Australian Network of
Alcohol & other Drug Agencies

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WANADA is a not-for-profit organisation
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Annual Report
Published in October 2025

TABLE OF CONTENTS

Acknowledgement of Country.....	4
About WANADA.....	4
Board of Directors.....	5
Chairperson & CEO Statement.....	6
Treasurer's Statement.....	8
Key Result Area One: Advocacy and Influence.....	9
Advocacy, Policy, Strategy and Reform.....	9
Environmental Analysis.....	10
Mental Health and Alcohol and Other Drug Strategy.....	11
Regulation.....	12
Communications.....	12
Key Result Area Two: Sector Development.....	13
Alcohol and Other Drug & Human Services Standard.....	13
Capability Building Projects.....	14
Collective Efficiency Programs.....	16
Workforce Development.....	16
Key Result Area Three: Aboriginal Self Determination.....	17
Developing alcohol and other drug responsiveness in Aboriginal Community Controlled Services	17
Supporting the development of the Kimberley Youth Alcohol and Other Drug Plan.....	18
Continued Engagement With Elders.....	19
Key Result Area Four: Alcohol and Other Drug Stigma and Discrimination.....	20
Understanding Alcohol and Other Drug Lived Experience Leadership Report.....	21
Key Result Area Five: Strong Peak.....	22
WA Alcohol and Other Drug Conference.....	22
WA Alcohol and Other Drug Excellence Awards.....	24
Regional, Rural and Remote Managers Forum.....	26
WANADA's 40-Year Anniversary.....	27
Commitment to Continuous Quality Improvement	28
Membership List.....	29
Membership Benefits.....	30
WANADA Staff.....	31
Extract of WANADA Annual Financial Report.....	32
Appreciation and Acknowledgement to Funders and Supporters.....	34

ACKNOWLEDGMENT OF COUNTRY

We acknowledge the traditional custodians of the land on which we live and work, and recognise their strength in connection to the land, sea, and community. WANADA's office is based on Whadjuk Noongar Country.

We pay our respect to Elders past and present and extend that respect to Aboriginal peoples from across the State. WANADA commits to continuing the work of listening, learning and reconciliation. We stand in solidarity with Aboriginal and Torres Strait Islander peoples.

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, harm reduction, treatment, and support sector in Western Australia.

WANADA is a proudly independent not-for-profit organisation, driven by the passion and hard work of its member services. WANADA's aim is to enable a specialist-sector led approach to achieve reduced harms associated with alcohol and other drugs for all Western Australians. Our purpose is to lead a shared voice within the specialist alcohol and other drug service sector that drives and influences systemic change needed to achieve best community outcomes.

WANADA continues to meet the requirements for certification against the ISO 9001:2015 (Quality Management Systems) Standard.

VALUES



BOARD OF DIRECTORS



Sue Budalich
Chairperson
(Appointed March 2025)



Carol Daws
Vice Chair and Secretary



Andrew Amor
Treasurer



Alex Arpino



Emma Jarvis



Jane Fajardo
(Appointed)



Paul Dessauer



Simone Clinch-Moore

We acknowledge and sincerely thank the Board members who resigned during this reporting period — Karl O’Callaghan (Chair, January 2025), Lorraine Keane (March 2025), and Mark Walker (resigned July 2025) — for their significant contributions to WANADA and the sector.

CHAIRPERSON AND CEO STATEMENT

This year's Annual Report marks WANADA's 41st year of championing a specialist sector-led approach to reducing alcohol and other drug related harms for all Western Australians, as we reflect on a year defined by progress, connection, and sector-wide impact.

For Sue, this is her first Chairperson's report, following her election to the Board at last year's AGM and subsequent appointment as Chairperson after Karl O'Callaghan's resignation. It is a particularly meaningful moment, as 2025 is the first year since 2009 that WANADA has operated with an all-membership Board, with the Board appointing a chairperson from within the membership rather than appointing an independent chairperson. Being acknowledged and supported by my peers to take on this exciting role is a true privilege, and I extend thanks to Karl for his contribution during his tenure.

We warmly acknowledge the ongoing support of our members throughout this reporting period. Whether through site visits, phone calls, email feedback, or social media engagement, your generosity and openness have helped shape our advocacy, policy input, and sector development. Your voices continue to guide our work, and we are grateful for the trust you place in WANADA.

The 2025 WA State Election brought new leadership to key portfolios. We extend our congratulations to Hon Meredith Hammat MLA, appointed as Minister for Health; Mental Health, and to Hon Minister Winton MLA, appointed as Minister for Preventative Health. These portfolios are vital to the wellbeing of Western Australians and hold the potential to create lasting, positive change. We look forward to working with both Ministers as they shape policy, funding priorities, and strategic direction for the alcohol and other drug sector. We also take this opportunity to thank Hon Amber-Jade Sanderson, former Minister for Health; Mental Health and Mr Simon Millman, the former Parliamentary Secretary to the Minister, for their support of WANADA's work. Simon's retirement from politics marks the end of a valued partnership, and we wish him all the best.

One of the highlights of the year was WANADA being named a 2025 Winner for Best Workplace; a recognition of WANADA's commitment to employee engagement and effective work practices. This award, based on independent assessment by Xref Engage, celebrates organisations that give their people a voice and use feedback to drive positive change. We are incredibly proud of the WANADA team and the culture that has been built together.

Another standout achievement was the 2025 WA Alcohol and Other Drug Conference, held in Fremantle/Walyalup from 5–7 March. With the theme "Pathways, Systems, Strategies", the conference welcomed around 300 participants and provided a vibrant space to strengthen professional networks, address shared challenges, and explore strategies that make a real difference. A key feature was the integration of lived and living experience perspectives, recognising their essential role in shaping services and sector priorities.

During the conference, WANADA hosted the Western Australian Alcohol and Other Drug Excellence Awards 2025, celebrating the best of our sector. Congratulations to all category winners and nominees. It was inspiring to recognise and celebrate the positive impact you have all made.

We also welcome the development of the Mental Health Commission's Western Australian Mental Health and Alcohol and Other Drug Strategy 2025–30, and the opportunity to provide feedback on the proposed strategic directions. WANADA provided comprehensive feedback, informed by significant consultation with our members, to ensure the sector's voice was heard. We are pleased to see much of our input reflected in the proposed strategic directions.

CHAIRPERSON AND CEO STATEMENT

A major achievement this year was the successful completion of the Certification Readiness Project, which supported Western Australian Aboriginal community-controlled services to strengthen their alcohol and other drug responsiveness within a quality framework (WANADA's Alcohol and other Drug and Human Services Standard). Funded by the WA Primary Health Alliance and led by WANADA in partnership with the Aboriginal Health Council of WA (AHCWA), a significant outcome has been the validation of the strength of the Standard's cultural security and its value to Aboriginal Community Controlled Health and Healing Organisations. WANADA continues to engage with participating services to support their responsiveness to alcohol and other drugs. Additionally, Milliya Rumurra Aboriginal Corporation, on behalf of the Kimberley Aboriginal Regional Governance Group, has subcontracted WANADA to support the development of the Kimberley Youth Alcohol and Other Drug Plan. This has seen WANADA involved in significant consultation across the region.

One particularly meaningful initiative was our research project on lived and living experience leadership. The project highlighted the diversity of lived experience and the importance of representing that diversity in policy development and planning. A shared theme across this diversity was the experience of stigma, discrimination, and prejudice. It is important to remember that the alcohol and other drug sector in Western Australia was founded by people impacted by their own or another's substance use. Nearly 70% of our current workforce has relevant personal experience, with many also having achieved relevant tertiary qualifications. This lived-living experience is the heart and passion that drives our sector.

While we celebrate these achievements, we also acknowledge the challenges faced by the sector. The timing of both State and National elections contributed to delays in strategy development, service planning, and implementation. Despite this, services on the ground remain strong, motivated, and deeply committed to meeting community needs. The professionalism and compassion of our workforce deserve recognition and respect.

The sector is united in its understanding that alcohol and other drugs significantly impact the wellbeing of Western Australians and place pressure on health, justice, and social systems. Yet, we still face a shortage of treatment services to meet community need. The sector also requires resources to empower communities, support early intervention, and build the capability of other community services to respond effectively. The alcohol and other drug sector cannot do this alone. WANADA continues to advocate for an evidence-informed, quality, and adequately resourced service system; one that fosters collaboration, coordination, and community engagement to reduce harm and improve outcomes.

As we look ahead, we do so with optimism and determination. We extend our deep gratitude to our dedicated staff, members, funders, partners, and the broader community who have supported WANADA throughout the year. We also thank the Board for their strategic guidance and governance expertise.

Together, we remain focused on leading a shared voice within the specialist alcohol and other drug service sector—one that drives and influences the systemic change needed to achieve the best outcomes for our communities.

Here's to another year of progress, partnership, and purpose.

Sue Budalich, Chairperson

Jill Rundle, CEO

TREASURERS STATEMENT

I am pleased to present WANADA's financial summary for the year ending 30 June 2025. The organisation continues to maintain a stable financial position, supported by sound governance and financial controls.

Total income for the year was \$2,278,880, with total expenditure of \$2,084,013, resulting in an operating surplus of \$194,867.

Funding Sources:

- Core service agreement funding accounted for approximately 62% of total income.
- One-off project funding and grants contributed around 28%.
- Membership fees and member contributions for direct support services, donations, interest and other independent funding made up the remaining 10%.

I would like to acknowledge the invaluable contributions of WANADA's funding bodies in the 2025-2026 financial year, including:

- Western Australian Mental Health Commission
- Australian Government Department of Health, Disability and Aging
- Western Australian Department of Health
- Western Australian Primary Health Alliance
- Lotterywest

Milliya Rumurra Aboriginal Corporation, on behalf of the Kimberley Aboriginal Regional Governance Group, subcontracted WANADA to contribute to a significant project in the Kimberley. WANADA appreciates the recognition and trust afforded to meaningfully contribute.

I would also like to extend my thanks to Stefanie Palmer, Finance and Operations Manager, for her continued professionalism and clarity in financial reporting to the Board.

For the 2024–2025 financial year, WANADA received an unqualified audit opinion, confirming sound financial management and compliance with regulatory requirements. I am confident that WANADA remains financially well-positioned to deliver on its strategic objectives.

The audit was conducted by Armada Audit and Assurance Pty Ltd. On behalf of the Board, I propose a resolution at the 2025 Annual General Meeting for their reappointment as WANADA's financial auditors.

A copy of the full independent auditor's report is available upon request or can be accessed directly via the WANADA website.

Andrew Amor, Treasurer

Key Result Area One: Advocacy and Influence

WANADA's leadership is effective, influencing policy and sector development decisions.

ADVOCACY, POLICY, STRATEGY AND REFORM

WANADA is committed to effective engagement and collaboration with all stakeholders with the aim of achieving sector development for improved community outcomes and reduced alcohol and other drug harms. Our key stakeholders include member services; government; collaborators; and the broader community.

WANADA advocates on behalf of the sector through meetings and discussions with decision makers, including state and national ministers, members of parliament, and senior bureaucrats from the Mental Health Commission and other relevant government agencies. Our engagement with government builds awareness of the concerns of the alcohol and other drug sector, and are purposeful and solutions focused.

WANADA's engagement with members is essential to inform our input and responses to State and National government policy and strategy development. WANADA continues to consult with member services to ensure our understanding of the sector's strengths, challenges, and perspectives remains contemporary.

Our collaborators include alcohol and other drug peak bodies from across Australia; Western Australian community peak bodies; related health and community advocacy bodies, and research institutions. These collaborations strengthen our shared voice.

WANADA is uniquely positioned to strengthen the relevance of alcohol and other drugs across all human service sectors; contribute to strategy and policy implementation; ensure the Western Australian alcohol and other drug sector context is considered at the state and national levels; and influences relevant reform.



ENVIRONMENTAL ANALYSIS

There is light at the end of the tunnel and the alcohol and other drug sector in Western Australia has a reason to be optimistic.

- The National Drug Strategy is under review.
- The National Drug Strategy is under review.
- The National Inquiry into the health impacts of alcohol and other drug use was stalled due to the Federal election, however, has recommenced. This Inquiry will have an impact on the review of the National Drug Strategy.
- The re-establishment of a national alcohol and other drug governance structure – decommissioned due to the pandemic – has been called for from across governments and departments, the network of alcohol and other drug peaks, and other advocacy bodies.
- The report on the review of nationally funded alcohol and other drug programs is yet to be released.
- At the state level, commissioning/planning will be informed by the pending Mental Health and Alcohol and Other Drug Strategy.
- The Western Australian Mental Health and Alcohol and Other Drug Strategy is in development and due for release at the end of the 2025 calendar year.
- We are fortunate to have a state alcohol and other drug governance plan, which includes the establishment of the Office of Alcohol and Other Drugs with dedicated responsibilities for alcohol and other drug policy and strategy.
- The MHC's Alcohol and Other Drug Framework development is pending and will provide dedicated focus on the alcohol and other drug service system.

WANADA will continue to advocate for sector planning that effectively and efficiently reduces alcohol and other drug harm; the re-establishment of a national governance structure; a strengthened cross-sector leadership capacity from the Western Australian Office of Alcohol and Other Drugs; and effective contemporary and aligned national and state strategies.

Our member services have let us know that recruitment and retention of qualified staff is a challenge – particularly in regional Western Australia where access to housing is a significant barrier. A considered and consultative approach is needed to inform workforce planning for the future, ensuring that people with appropriate qualifications are available for the various roles our sector has to offer. Enabling local people to build a career in the alcohol and other drug sector is essential in our regions.

Members have also made it clear that there is a need to build alcohol and other drug responsiveness, including early intervention and appropriate referral, across the broader human services system. Cross-sector services need early intervention capability-building support to be appropriately responsive to the intersecting needs of people experiencing alcohol and other drug-related harm, contributing to reducing the burden on specialist alcohol and other drug services.

Contemporary research continues to confirm that the current quantum of treatment services nationally can only support access for 30 – 48% of people needing and wanting treatment. Increased funding to the alcohol and other drug sector is needed to support service expansion across the range of service types if we are to better meet the needs of the Western Australian community.

MENTAL HEALTH AND ALCOHOL AND OTHER DRUG STRATEGY

A significant example of WANADA's influence can be demonstrated through our response, on behalf of the alcohol and other drug sector, to the MHC's Mental Health and Alcohol and Other Drugs Strategy 2025 – 2030 Discussion Paper, and the more recent response to the Western Australian Mental Health and Alcohol and Other Drugs Strategy 2025 – 2030: Proposed Strategy Directions. WANADA drew on its significant sector engagement to represent the Western Australian alcohol and other drug sector's perspective in its responses to these papers. Our responses were informed by:

- participation in an advisory group coordinated by the MHC and engaging in formal and informal conversations with senior MHC staff
- consultation with the sector, including a two-day Regional, Rural and Remote Managers Forum, allowing us to interrogate the strategic intent from the unique perspective of regional areas, and regularly engaged in discussions with metropolitan service providers to understand their needs associated with alcohol and other drug system planning and strategy
- discussions with other jurisdictional alcohol and other drug peak bodies and other key stakeholders to ensure alignment with broad system-wide developments throughout the nation.

The concerns of the sector include (but are not limited to): not enough services to meet community demand, increasing complexity of service user presentations (resulting from other sectors not addressing the needs of people with alcohol and other drug concerns); an increasing imbalance in the alcohol and other drug service system (resulting in increased acuity of impact from alcohol and other drug use); and recruitment and retention of suitably qualified staff (particularly in the regions) indicating a need for workforce planning and informed professional development.

WANADA appreciates the challenging task for the MHC in developing a strategy across two distinct systems – mental health and alcohol and other drug. WANADA proposed fourteen recommendations in response to the Discussion Paper, all of which were evidently reflected in the Proposed Strategic Directions - the views of the alcohol and other drug sector were heard. WANADA expects sector specific considerations to be addressed in the planned Alcohol and Other Drug Framework - to be developed once the Strategy is finalised.



Mental Health Alcohol and Other Drug Strategy Social Media Tile, Mental Health Commission.

REGULATION

WANADA's advocacy efforts continue to focus on regulatory reform to ensure the human rights, dignity and respect of service users are maintained, and ethical quality services for people with alcohol and other drug concerns are delivered.

Contributing to service regulation reform, WANADA continued to meet with a range of government and non-government stakeholders, including senior public servants, cross-sector representatives and alcohol and other drug sector leaders. We have been involved in consultations and provided written responses to relevant legislation reviews, including the Health and Disability Services (Complaints) Act (1995), and the Guardianship and Administration Act (1990).

We have also met with the Licensing and Accreditation Regulatory Unit (LARU) to discuss how they may be able to incorporate licensing and regulation of alcohol and other drug services. In all of our engagements we have offered to support sector consultation to inform practical relevance.

COMMUNICATIONS

WANADA continues to promote the alcohol and other drug sector and support timely information exchange between members and interested stakeholders. Our monthly e-newsletter FYI is sent to over 720 people with an interest in the alcohol and other drug sector, and we shared 63 Member Update e-bulletins with sector CEOs and senior management.

Great communication and updating members of important changes and where WANADA has made great strides within community. (Manager, AOD Service)

The 2025 WA Alcohol and other Drug Conference and the WA Alcohol and other Drug Excellence Awards provided opportunities to engage more broadly. WANADA's website includes interviews with, and presentations delivered by keynote speakers. It also provides updates on WANADA projects. One to look out for is the video on the Hepatitis C Capability Building Project, produced with input from Peer Based Harm Reduction WA and Hepatitis WA.

The GreenBook directory of alcohol and other drug services continues to be a resource for cross-sector referrals and to inform people of the alcohol and other drug services available to them. WANADA has now worked to improve the map function, and we continue to update listings to ensure accuracy.

Praise to WANADA for providing such a useful resource [GreenBook] with a wealth of information on AOD services. (GP – Joondalup Health Campus)

We are always very happy to share sector achievements, the latest research, trends, resources, events, and developments happening across Australia with members and the wider community. We welcome your input, feedback and opportunities to collaborate.

Key Result Area Two: Sector Development

WANADA leads quality and evidence-informed sector-wide development

WANADA delivers sector development projects that aim to result in the development of organisation and/or system wide solutions that meet the current and future needs of the Western Australian alcohol and other drug sector and community. Project development is informed by the sector, research, and emerging state, national and/or international priorities.

The solutions developed through our projects are shared with the sector and funding bodies. Implementation is supported by WANADA and/or by services working independently. WANADA ensures that projects are designed so that benefits can be sustained and incorporated into continuous quality improvement.

WANADA's projects are as varied as the sector's needs, with some focused on capability building – for the alcohol and other drug and/or intersecting sectors; and others supporting collective efficiencies that minimise duplication of administrative and coordination costs.

ALCOHOL AND OTHER DRUG & HUMAN SERVICES STANDARD

WANADA's Alcohol and other Drug and Human Services Standard (the Standard) continues to be nationally recognised as one of the required standards for alcohol and other drug treatment services. Most of the Western Australian alcohol and other drug treatment services funded by government are certified to the Standard.

As the Standard owner, WANADA ensures its efficacy and maintains a range of support resources, including the WANADA Scheme, Interpretive Guide, and Self-Assessment Tool. Improvement registers for all three resources are maintained and actioned in accordance with quality and review processes determined by the Joint Accreditation System of Australia and New Zealand (JAS-ANZ). This process allows for improvements to the Standard and supporting documents, where opportunities or risks have been identified at a system, organisation and service level, or where significant changes have occurred that impact quality and/or the alcohol and other drug service system. WANADA welcomes any feedback on the Standard, resources, or the certification process from all organisations certified against the Standard.

In this report period WANADA commenced a review of the Scheme (effectively the guide for auditors) as a priority action outside of the typical cycle of Standard and Scheme reviews. This was in response to identified risks informed by the Inquiry into the Esther Foundation and unregulated private facilities. An initial analysis of the Scheme with key stakeholders identified several improvements that could strengthen the Scheme and improve clarity and processes to the benefit of alcohol and other drug services, and by extension the service users. WANADA has collaborated with JAS-ANZ to ensure due process and plans to see the reviewed scheme implemented in the 2025-26 financial year.

CAPABILITY BUILDING PROJECTS

The *Hepatitis C Virus Care Capability in Alcohol and other Drug Treatment Tool* (HCVCAT) was originally developed in 2020 as part of the WANADA Hepatitis C Virus Treatment Project funded by the Paul Ramsay Foundation through the Eliminate Hepatitis C Australia Partnership. The tool has since been refined with valuable input from the specialist alcohol and other drug service sector.

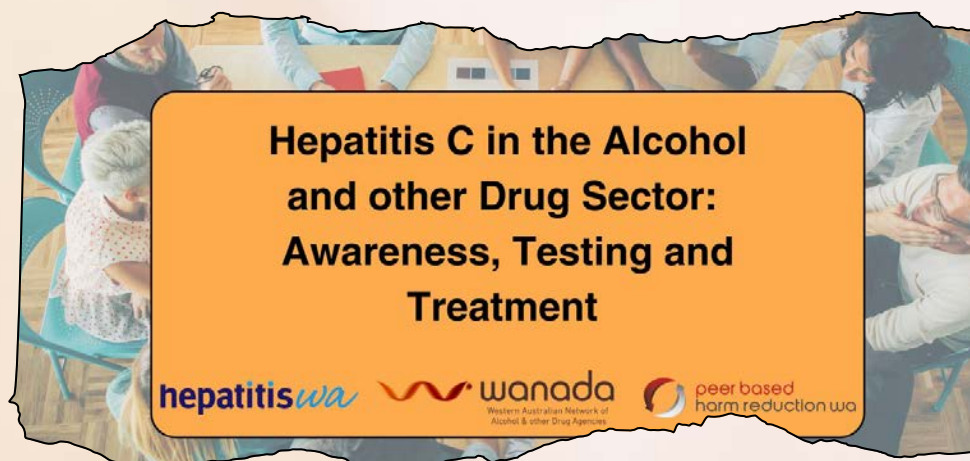
With support from the Western Australian Department of Health, WANADA continued to support alcohol and other drug services to enhance service confidence and capability to support service users to access HCV information, education, testing, treatment, and ongoing support.

In 2024, service representatives who had previously participated in WANADA Hepatitis C capability projects were re-engaged to help refine the HCVCAT. This collaboration led to a more effective, self-supported tool. A total of 40 services were re-engaged, with many adopting the enhanced Tool. These services received additional support through peer-informed information and training sessions, delivered in partnership between WANADA and Peer Based Harm Reduction WA. Through this process, a range of common enablers, barriers, and opportunities were identified, highlighting the need for a collective response that could be facilitated by WANADA and its partners.

In 2025, feedback from services highlighted challenges in onboarding new staff and maintaining awareness of Hep-C and related issues, including treatment options. This insight informed the project to develop additional supports including a capability building video designed to assist with onboarding and ongoing education to maintain awareness. Developed in collaboration with Peer Based Harm Reduction WA and Hepatitis WA, the video *Hepatitis C in the Alcohol and Drug Sector: Awareness, Testing and Treatment*, has been well received. It has been shared by key stakeholders such as the Australian Indigenous Health-InfoNet, and accessed by services across Australia. These supports aim to strengthen sector capability and ensure consistent awareness of Hepatitis C across service teams.

...staff watched the Hep-C video in preparation for the HCVCAT process, and they thought it was great. It was identified as an OFI for the whole team to watch and included in the induction process". (Regional CADS Team)

The continuing process with ongoing support from WANADA and collaborating partners has enabled participating alcohol and other drug services to incorporate Hep-C care into their ongoing continuous quality improvement processes, further supporting the sector's contribution to the global goal of elimination of Hep-C by 2030.



*Hepatitis C in the Alcohol and Other Drug Sector Video
Title Screen*

WANADA continues to maintain, enhance and develop its suite of capability building tools, as needed. Evidence supports the value of reciprocal capabilities (capabilities shared across related sectors) in improving outcomes for people presenting with dual/multiple challenges. Two examples of existing Tools include:

- *Co-occurring Capability Review Tool (CCRT)* – was developed to support alcohol and other drug and mental health services build their reciprocal capability to better meet the needs of people presenting with these co-occurring concerns. This tool was informed by validated tools used in the different sectors internationally, ensuring through trials and pilots with services across Western Australia that the combined resource was suitable for this context. It was developed through a partnership between the alcohol and other drug and mental health peaks in Western Australia. Many services in the alcohol and other drug sector have incorporated this capability-building approach into their continuous quality improvement processes. Ideally funding would support a roll-out of the Tool across the dual sectors, and evaluation to build co-occurring capability and inform collective barriers and enablers for an identified priority population.
- *Family and domestic violence and alcohol and other drug Intersecting Capability Review Tool (ICRT)* – was similarly developed to support services in both sectors to build their capability to be responsive to these significantly intersecting concerns. The Tool was developed in partnership between the peak bodies in these two sectors. Again, many alcohol and other drug services have incorporated the review into their ongoing/continuous quality improvement processes and roll out would enable the identification of barriers and enablers for effective responsiveness. It would also assist in ensuring both sectors are supported to meet the pending capability requirements as defined in the State Government's pending Family and Domestic Violence Workforce Capability Framework.

In related work, WANADA has contributed to a national project led by Australian Alcohol and other Drug Council in partnership with NOFASD Australia to adapt a Canadian Fetal Alcohol Spectrum Disorder (FASD) online training resource to better suit Australian alcohol and other drug services in their evidence informed responses. There is sufficient evidence indicating that a significant proportion of people presenting to alcohol and other drug treatment services globally (potentially up to 40%) are likely to have FASD, taking into consideration the significant barriers of diagnosis. In response, the FASD-Informed Practice for the Australian Alcohol and Other Drug Workforce project was initiated and progressed during this reporting period, with finalisation and release scheduled for 2025-26. WANADA coordinated input from Western Australian service representatives with relevant experience, ensuring their feedback and perspectives were incorporated throughout the review process.

WANADA continues to draw on these change management tools, and the process and deeper understanding achieved through their development, to inform future projects and our advocacy responses – for example WANADA's response to the Family and Domestic Violence workforce capability framework developed by the WA State Government.

COLLECTIVE EFFICIENCY PROGRAMS

These programs are designed to reduce costs and administration of services across the sector, enhance information sharing and to generate support between services.

- WANADA continued to support services in their use of the *Pharos data system* through forums and direct assistance. These opportunities enabled services using Pharos to collaborate, share insights, and strengthen their capacity to collect and use data in ways that reflect practice on the ground. In 2024-25 services valued WANADA's role in facilitating relationship building and engaging with system developers to address shared concerns.
- WANADA continues to offer its *umbrella Employee Assistance Program* (EAP) program by engaging a market assessed suitable provider that meets the sector employees' needs. The quantum of employees and volunteers covered through this umbrella arrangement ensure value for money and reduced administration. In this report period the umbrella EAP met the needs of 30 participating member organisations with a total of 2,234 eligible staff and volunteers, each able to access up to six counselling sessions. The program also extends support to employees' immediate family members. Deidentified participation details inform organisation reports and a collective report that informs trends in sector employee wellbeing.
- WANADA's longstanding (since 2000) *Childcare Access Program* (CAP) continued to help reduce access barriers for service users with under school aged children. The program significantly supports facilitated connections with local childcare providers and provides breathing space to apply for available government subsidies where such arrangements have not previously been established. During this reporting period, WANADA has commenced planning to review the program to check that it still meets service and service user needs.
- Another longstanding program that WANADA offers is the *Interpreter Access Program* (IAP). This program addresses access barriers for people with language barriers, including those who are deaf or have hearing impairment. In this report period the program facilitated interpreter-supported appointments in more than 10 languages. Feedback indicates this program is not only enabling communication but also fostering longer-term improvements in therapeutic relationships and improved outcomes.

WORKFORCE DEVELOPMENT

Workforce recruitment and retention remain an ongoing and significant challenge for the Western Australian alcohol and other drug sector, particularly in regional, rural and remote locations. Several projects have been initiated by WANADA over the years; however, sustainability has been reliant on funding. This will be a focus for WANADA in the 2025-26 financial year, with a plan to develop a workforce monitoring tool independently or in partnership with the MHC. WANADA will focus on ensuring that monitoring meets the sector's needs and is accessible by the sector within appropriate timeframes. In addition, this initiative is intended to inform and provide evidence to support any collective workforce planning and development that WANADA undertakes or for which we advocate.

Key Result Area Three: Aboriginal Self Determination

WANADA advocates for and enables the implementation of Aboriginal self-determination within the alcohol and other drug sector

In 2023 WANADA developed the *‘Nothing about us without us’: Aboriginal alcohol and other drug sector leadership report*. Informed by significant consultation with sector Aboriginal workers, community members and other key stakeholders WANADA continues to advocate for the Report recommendations. This, together with the Time for Action statement developed at the 2023 Aboriginal Workers Forum and presented to the respective Minister for Health at the time, has provided us with a strong advocacy position to help actualise self-determination.

In this report period WANADA has had the privilege of contributing to practical initiatives that align with self-determination as it intersects with alcohol and other drugs.

DEVELOPING ALCOHOL AND OTHER DRUG RESPONSIVENESS IN ABORIGINAL COMMUNITY CONTROLLED SERVICES

The certification readiness project to support Western Australian Aboriginal community-controlled services to develop their alcohol and other drug responsiveness within a quality framework (as represented by Alcohol and Other Drug and Human Service Standard) was successfully concluded in this report period. This initiative, funded by the WA Primary Health Alliance, was led by WANADA in partnership with the Aboriginal Health Council WA (AHCWA).

A key outcome for WANADA, as custodian of the Standard, was the validation of the Standard’s cultural security and its relevance and value to Aboriginal Community Controlled Health and Healing Organisations. WANADA continues to engage with participating services to support their commitment to quality and evidence informed alcohol and other drug responsiveness.

The project working group at the ACCHS I work for was impressed by the cultural responsiveness of the Standard. (Participating Regional ACCHO)

[The Standard’s Performance Expectation] 1 specifically has enabled us to be more mindful of our practices and how we are demonstrating cultural security in practice”. (Participating Metro ACCHO)

WANADA presented on this initiative, on behalf of AHCWA and participating services, at the Association of Alcohol and other Drug Agencies NT Conference 2025. NT services including ACCHO’s, also recognised the effectiveness of a systems approach and application of the Standard as a quality framework and effective strategy to embed alcohol and other drug responsiveness into intersecting services.



SUPPORTING THE DEVELOPMENT OF THE KIMBERLEY YOUTH ALCOHOL AND OTHER DRUG PLAN

WANADA commenced provision of support to Milliya Rumurra for the development of the Kimberley Youth Alcohol and other Drug Plan in April 2025, which marks the first substantial focus in this area in over five years. WANADA was sub-contracted by Milliya Rumurra to provide support to the project, inclusive of consultations across the Kimberley and development of a plan. The project focus was with four towns across the Kimberley and surrounding communities – Fitzroy Crossing, Derby, Halls Creek, and Wyndham – albeit inclusive of Broome and Kununurra. This renewed consultation effort aims to gather relevant insights to determine if the findings and recommendations from the previous engagement and subsequent report by NOUS consulting in 2020 remained reflective of the current Kimberley context. Consultations and the final report are scheduled for completion in the 2025-2026 financial year.

An empowerment approach consistent with a range of relevant State and National strategies has emerged – one that is consistent with the principles of self-determination and “community led solutions”. WANADA is confident that any model proposed will be supported by the community, will be based on relevant evidence, and can be practically implemented within the service landscape of the Kimberley. Ultimately the model will be able to contribute to reducing current and future alcohol and other drug harms while considerate of known service provision barriers such as workforce and cultural safety.

WANADA has gained a lot from this process, including a deeper awareness of the challenges faced by regional communities, and the value of a recognised regional leader driving the project and informing appropriate consultation approaches. WANADA will advocate for similar, locally appropriate processes to be undertaken across the State’s health regions.

“Our children are our future”. There are significant gaps in alcohol and other drug service provision for children and young people in every WA region. There is a need to reduce the impact of alcohol and other drug related harms experienced by young people, including: as a response to intergenerational trauma; escalation of family and domestic violence; FAS-D; cycles of incarceration; and disengagement with the education system (Time for Action: WA Aboriginal Alcohol and other Drug Workers Forum, 18 and 19 May 2023 Message to the Hon. Amber-Jade Sanderson MLA, Minister for Health).



WANADA Staff with the Milliya Rumurra Team



Gantheaune Point in Broome



Rochelle McIntosh and Andrew Amor
at NAIDOC Week celebrations in
Kununurra



Rochelle McIntosh with Milliya
Rumurra CEO Andrew Amor during
WANADA's visit to the The Kimberley

CONTINUED ENGAGEMENT WITH ELDERS

WANADA continues to be guided by Aboriginal Elders Aunty Oriel Green and Aunty Moya Newman, as well as Professor Stanley Nangala. As Elders, Aunty Oriel and Aunty Moya have supported WANADA for many years, providing invaluable advice and guidance. Stanley's continuing advice, alongside the Aunties, is an extension of his role as the chair of the former reference group of WANADA's alcohol and other drug Aboriginal Leadership project. Aunty Oriel, Aunty Moya and Stanley attended and enjoyed the 2025 WA Alcohol and other Drug Conference.

We are grateful for the honesty and heart the Elders bring to our work and look forward to their continuing engagement as we plan for the 2026 WA Alcohol and other Drug Worker Forum.



Elders Aunty Moya Newman and Aunty Oriel Green.

Key Result Area Four: Alcohol and Other Drug Stigma and Discrimination

WANADA leads a values-based systemic approach to reducing stigma and discrimination and enhancing empowerment.



The health and wellbeing of people impacted by alcohol and other drugs is jeopardised because of stigma and discrimination. Stigma and discrimination negatively impact individuals, families, and communities as well as system efficiency, policy effectiveness, and practice capacity. Stigma and discrimination limit the effect of prevention efforts, help seeking, service access, and quality of care. The result is poorer outcomes for service users, adding to pressure on the specialist alcohol and other drug services as well as other systems and services.

Stigma and discrimination impact people with a range of health and social issues and often compound intersecting concerns. The World Health Organisation identifies alcohol and other drug dependence as the most stigmatised health condition.

There is no easy fix to eliminating stigma and discrimination. WANADA continues to support staff (and some key stakeholders) to participate in training on values messaging, as developed by Common Cause Australia. This evidence informed approach has offered an impactful guide to ensure the messaging WANADA uses in our advocacy, communications, and resource development uses values informed messaging that effects change and contributes to reduced stigma.

WANADA undertook a literature review and focused engagement with people with lived-living experience to build an understanding of what is needed to enable lived-living experience representation that can inform systemic advocacy. We also identified possible next steps to a systemic approach to reducing stigma and discrimination. These include advocating for, and supporting:

- a planned approach for comprehensive alcohol and other drug harm reduction responses
- the alcohol and other drug governance structure within the Mental Health Commission to be empowered to incorporate effective inter-agency coordination and accountable planning
- a community alcohol and other drug summit that brings together relevant research, practice, and community engagement to ensure suitability, feasibility, and acceptability of needed sector development and reform that is evidence informed.

UNDERSTANDING ALCOHOL AND OTHER DRUG LIVED EXPERIENCE LEADERSHIP REPORT

WANADA completed a project to better understand and promote lived-living experience leadership for the Western Australian alcohol and other drug sector. This included a comprehensive literature review guided by senior research oversight, supported focus group discussions with key stakeholders, and development and synthesis of a comprehensive report with findings and recommendations. WANADA presented the report findings to the Office of Alcohol and Other Drugs within the Mental Health Commission, which funded the initiative.

The literature review included consideration and comparative analysis of varied roles (identifiable lived-living roles as well as leadership roles) and other sectors (e.g., mental health) to explore broader lived-living experience applications. Grey literature from alcohol and other drug conferences and other jurisdiction peak bodies was also reviewed, recognising the wealth of quality information and experience within the sector, as well as peer reviewed research. Conversations with representatives from other states and territories provided interjurisdictional insights.

Three stakeholder focus groups involving service users, peer workers, and sector leaders with lived-living experience highlighted key themes, barriers and enablers in lived-living experience leadership in Western Australia.

As a result, WANADA has produced a report that provides an overview of the role of lived-living experience within the sector and provides recommendations for integrating lived-living experience leadership across alcohol and other drug services and sector governance, with contributions from diverse voices within the sector. The report also acknowledges, yet differentiates, lived-living experience in the mental health sector, while addressing shared challenges.

I found reading this report to be extremely informative, from my point of view...I thought the report was well balanced and commend WANADA on this easily understood report, and the way in which the needs of the peer workers have been addressed. (AOD lived- living experience, parent representative)

This project inspired the inclusion of a Lived-Living Experience Panel Discussion at the 2025 WA Alcohol and Other Drug Conference. Delegate feedback indicated the Lived-Living Experience Leadership Panel was one of the highlights of the conference program.

This report provides a guide for WANADA, the sector, and government to strengthen and validate a shared approach to lived-living experience engagement and participation, recognising the long-standing effective inclusion of lived-living experience in the alcohol and other drug sector.



Understanding Alcohol and Other Drug Lived and Living Experience Leadership Poster.

Key Result Area Five: Strong Peak

WANADA is a sustainable peak body, both leading and responding to its members.

WA ALCOHOL AND OTHER DRUG CONFERENCE 2025

WANADA proudly delivered the WA Alcohol and Other Drug Conference 2025, sponsored by the Mental Health Commission (MHC) and Hope Community Services as the Presenting Partner, and guided by a steering group of sector representatives. WANADA partnered with the National Drug Research Institute (NDRI), who hosted their Symposium the day before the Conference, allowing for program alignment and a shared keynote speaker.

With the theme “Pathways, Systems, Strategies”, the Conference welcomed approximately 300 participants over 5 – 7 March 2025 in Fremantle/Walyalup. The event was designed to strengthen professional networks, address shared challenges, and explore strategies that will make a positive difference in our community. The program featured four keynote presentations from leading experts including Professor Sir Ian Gilmore, Nicole Hewlett and Peter D’Abbs, Dr Peter Gates, and Professor Alison Ritter AO.

A key feature of the conference was the integration of lived-living experience perspectives, recognising their role in shaping services and sector priorities. Two panel discussions facilitated by Dr Stephen Bright and Andrew Amor showcased lived-living experience leadership and community-led engagement.

It was empowering to hear the achievement of the sector and stakeholders through 48 abstract presentations across themes such as advocacy, workforce, cross-sector collaboration, inclusive practice, and policy. A total of 14 WA alcohol and other drug organisations, 5 research bodies, and 12 affiliated organisations shared their exceptional contributions to the sector, with some joining forces to deliver powerful, collaborative presentations.

Three workshops and an interactive plenary session brought participants together to advance systemic advocacy, peer referral, and prevention through collective impact. The sector came together to share both challenges and inspiring success stories, creating space for learning, reflection, and collective growth.

The conference exceeded our expectations, and my team benefitted from attending...the exposure of our message and the interactions with the conference organisers was amazing. Thank you.
(Conference Delegate)

Evaluation results from the conference survey reflected the conference’s strong impact with 97% valuing the networking opportunities, 95% finding the event relevant to sector needs, 95% of participants affirming they would attend again with a 96% satisfaction rating of WANADA’s support and services.

What stood out most wasn’t just the conversations we had, but the genuine sense of momentum in the room. It’s clear that our sector is increasingly committed to making space for people with lived and living experience – not as an afterthought, but as a driving force for change. (Presenter and Delegate, WA - AOD Service)



Peter Gates During his Keynote Presentation.



The Lived Experience Panel Discussion.



Alison Ritter closes out her Keynote Address.



Individuals Engaged in the WA Alcohol and Other Drug Conference 2025 – Including Speakers, Delegates and Sector Representatives.

WA ALCOHOL AND OTHER DRUG EXCELLENCE AWARDS

The Conference also celebrated sector achievements through the WA Alcohol and other Drug Excellence Awards, which highlighted the innovation, dedication and impact of alcohol and other drug programs across Western Australia. Across 9 categories, 23 outstanding finalists were recognised and WANADA was proud to present the 2025 winners:

- Excellence in Community Development, Capacity and Capability Building Award: Cyrenian House – For the Inner City Alcohol and Drug In-Reach, Outreach and Thru-Care Service in partnership with 360 Health and Community
- Excellence in Improving Alcohol and Other Drug Outcomes for Aboriginal Peoples Award: Palmerston Association & Wungening Aboriginal Corporation – For the Solid Steps AOD Program at Casuarina Prison
- Excellence in Preventing and Reducing Alcohol and Other Drug Harms in Young People Award: Mission Australia – For the SHIFT Youth AOD Outreach Service
- Excellence in Consumer Engagement Award: Cyrenian House – For AOD Lived Experience Representative Training
- Excellence in Reducing the Risk of Alcohol and Other Drug Related Harms Award: Peer Based Harm Reduction WA – For the Enhanced Outreach and Mobile Health Clinics, Case Management, and Peer Support
- Excellence in Treatment Award: Yaandina Community Services Community Services – For the Turner River Rehabilitation Centre
- Excellence in Partnerships Award: Holyoake – For the RISE Program in partnership with WA Police
- Excellence in Working with Families and Significant Others Award: Palmerston Association – For the Parents under Pressure Program
- Excellence in Translating Research into Practice for Improved Alcohol and Other Drug Outcomes Award: Cyrenian House – For the Alcohol and Drug Cognitive Enhancement Program

WANADA extends its gratitude to all delegates and supporters of the conference.



WA Alcohol and other Drug Excellence Awards Winners.

REGIONAL, RURAL AND REMOTE MANAGERS FORUM

The Regional Rural and Remote Managers Forum was re-established by request in this report period, having lapsed due to the pandemic. The Forum provides an opportunity for regional, rural and remote managers, who can be isolated from sector colleagues, to engage in networking and information sharing, with facilitated discussion centered on issues specific to regional providers. The Forum also provides WANADA with an opportunity to build and maintain its appreciation of both the achievements of regional services and the challenges faced by these services and communities – to ensure our work remains relevant and the regional voice is heard in policy and planning.

The participants of this forum have asked WANADA to coordinate where possible forums two-monthly, with a plan for a face-to-face in one of the regions. Feedback on the benefits of the forums to date has been very positive.

Thank you to the WANADA team for hosting this event. The opportunity to share, learn and discuss the future of alcohol and other drug service delivery and strategy across the state was both valuable and motivating". (CADS Regional Manager, Nov 2024)



Sector Representatives from the Regional, Rural and Remote Meeting in Perth.

WANADA'S 40-YEAR ANNIVERSARY

In this report period WANADA marked its 40 years of driving positive change for the alcohol and other drug sector and the community with a celebration following the 2024 AGM.

Rose Walley delivered a beautiful Welcome to Country, setting a unifying tone for the event. Inaugural Board members, Terry Murphy and Rev. George Davies, shared their views on the establishment years. Their ongoing contributions and support of WANADA is a testament to their commitment for its intended purpose. Past and continuing sector leaders that have contributed to WANADA's development and evolution, including Professor Steve Allsop, Mary-Anne Paino, Ann Deanus, Andrew Amor, Carol Daws, and Paul Dessauer, reflected on many of the sector's challenges and successes over the 40 years. Parliamentary Secretary Simon Millman MLA also spoke of his respect for WANADA and the sector, and future challenges.

WANADA thanks its members and supporters for joining the celebrations and looks forward to the next 40 years of supporting sector growth and development for improved community well-being.



WANADA CEO Jill Rundle with, Carol Daws, Aunty Oriel Green, Mr Simon Millman, Sue Budalich and Lorraine Keane.

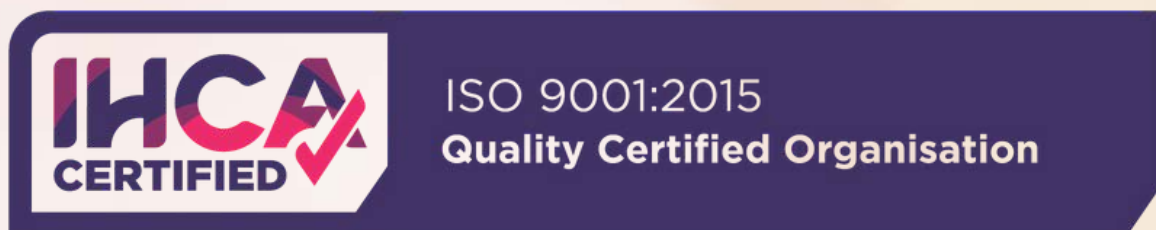
Rose Walley Issues a Welcome to Country at the Sector Forum.



Attendees Gather at the Perth Town Hall for the 2024 Annual General Meeting and Sector Forum.

COMMITMENT TO CONTINUOUS QUALITY IMPROVEMENT

WANADA continues to maintain its certification against the ISO 9001:2015 Quality Management Systems Standard. As a Standard owner, WANADA is committed to walking the walk and being accountable to demonstrating an appreciation of applying a rigorously reviewed continuous quality improvement approach. The audit found that WANADA's Quality Management Systems are effective in meeting the requirements of the ISO 9001:2015 Standard.



MEMBERSHIP LIST (AS OF OCTOBER 2025)

Full Members

- 55 Central
- Adult & Teen Challenge WA
- Alcohol and Other Drug Consumer and Community Coalition
- Bega Garbarringu Health Services
- Bloodwood Tree Association Inc.
- Breakaway Aboriginal Corporation
- Cyrenian House
- Doors Wide Open
- Fresh Start Recovery Programme
- Garl Garl Walbu Alcohol Association Aboriginal Corporation
- Goldfields Rehabilitation Services Inc
- HepatitisWA Inc.
- Holyoake
- Hope Community Services
- Kimberley Mental Health and Drug Service - Kimberley CADS
- Luma: For her health and wellbeing
- WA Country Health Service - Midwest CADS
- Milliya Rumurra Aboriginal Corporation
- Mission Australia WA
- National Drug Research Institute
- Next Step Specialist Drug and Alcohol Services
- Ngnowar Aerwah Aboriginal Corporation
- Outcare
- Palmerston Association Inc.
- PED Test Australia
- Peer Based Harm Reduction WA
- Salvation Army WA
- Smart Recovery Australia
- St John of God Social Outreach
- St. Patrick's Community Support Centre
- Swan City Youth Service Inc.
- Tenacious House
- Uniting WA
- Wunan Health
- Wungening Aboriginal Corporation
- Yaandina Community Services

Associate Organisational Members

- Armadale Youth Accommodation Service
- Cancer Council WA
- Centre for Women's Safety and Wellbeing Inc
- Consumers of Mental Health WA
- Esperance Crisis Accommodation Service Inc.
- Fremantle Women's Health Centre
- Health Consumers' Council WA Inc.
- HelpingMinds Limited
- Indigo Junction
- Jungarni-Jutiya Indigenous Corporation
- Langford Aboriginal Association Inc
- LUMERA Recovery Pathways
- Mental Illness Fellowship of WA
- MercyCare
- Multicultural Futures
- Nindilingarri Cultural Health Services
- North Metropolitan TAFE
- Nyoongar Outreach Services Inc
- Orana House
- OVIS Community Services
- Perth Inner City Youth Service
- Ruah Community Services
- South Coastal Health and Community Services
- St Bartholomew's House
- WAAC
- Yorgum Healing Services
- Youth Affairs Council of Western Australia
- Youth Futures Ltd
- Zonta House Refuge Association Inc.

Other

- Western Australian Community Action and Advocacy Network

Individual Members

- Alison Jane Moore
- Amanda Kendal
- Amy Cook
- Angela Seymour-Boss
- Belinda Jane Carlisle
- Brent Dalglish
- Cliaan Coenraad
- David Ian Tucker
- Emma McCallum
- Rev George Davies
- Gina Sherry
- James Paxman
- Jason Thomas
- June McNamara
- Kathryn Boon
- Lisa Norrie
- Logon Rhem Smith
- Lou Wilson
- Luke O'Malley
- Lyddia Van Eyk
- Maxine Kent
- Michelle Downie
- Nethmini Tharushika Ranasinghe Gamaralalge
- Paula Whyatt
- Priscilla Daniels
- Raelene Bianchini
- Rebekah Ervin
- Sheila McHale
- Stephen Hickey
- Steve McKinney
- Susanne Pestana-Lewis
- Troy Edwards

MEMBERSHIP BENEFITS

Benefits	Full Organisation Members	Associate Organisation Members	Associate Individual
Stay informed			
E-newsletters	✓	✓	✓
E-bulletins (Member Update)	✓	✓	
Policy and Advocacy			
Opportunities to contribute to sector development and policy planning through WANADA led consultations	✓	✓	✓
Sector, organisation and workforce development			
Job listings on the WANADA website	✓	✓	✓
Quality and certification support, including access to relevant resources and service capability building tools	✓		
Participation in relevant sector forums	✓		
Member programs			
Employee Assistance Program (at discounted rates)	✓	✓	
Childcare Access Program	✓		
Interpreter Access Program	✓		
Member Contribution			
Eligibility for nomination to WANADA Board	✓		
Voting rights at Board elections and general meetings for appointed delegate	✓		
Networking			
Conferences and events (member discount where available)	✓	✓	✓
Invitations to member and sector forums	✓	✓	

WANADA STAFF



Jill Rundle
Chief Executive Officer



Rochelle McIntosh
Sector Development
Manager



Stefanie Palmer
Finance and
Operations Manager



Deanne Ferris
Strategic Communications
Coordinator



Ganit Poleg-Spark
Advocacy Manager



Paola Bohorquez
Quality and Operations
Support Officer



Roxanne Gervais
Events and Data Administrator



Helin Cimen
Project Officer



Calvin Sims
Communications
Support Officer



Amie Furlong
Advocacy Manager



Kathleen Blackburn
Project Officer

We wish to acknowledge and extend our gratitude to valued staff members leaving in this report period: Matt Ryan and Christel Barthelemy for their significant contribution to the sector.

EXTRACT OF WANADA ANNUAL FINANCIAL REPORT

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2025

	2025	2024
	\$	\$
Revenue		
Grant revenue		
Unearned revenue carried forward	265,199	265,908
Grant funding – current year	1,701,764	1,534,541
Conference fees	213,601	38,806
	2,180,564	1,839,255
Unearned Conference Fee Revenue	(54,693)	(16,431)
Grant balance transferred to unearned revenue	(22,801)	(277,698)
Repayments of Grant Funds	(50,939)	(28,617)
Total grant revenue	2,052,851	1,516,509
Other income	226,029	164,978
Total revenue and other income	2,278,880	1,681,487
Expenditure		
Salaries, benefits and associated expenses	(1,253,054)	(1,103,034)
Amortisation of right-of-use assets	(68,612)	(67,884)
Depreciation	(4,213)	(2,502)
Computer	(34,731)	(33,773)
Consultancy	(253,332)	(114,555)
Employee assistance program	(111,050)	(99,885)
Interest expense	(4,426)	(3,733)
Other expenses	(354,595)	(188,201)
Total expenditure	(2,084,013)	(1,613,567)
Profit/ (Loss) for the year	194,867	(67,920)
Other Comprehensive Income		
Other comprehensive income for the year	–	–
Total comprehensive income/ (loss) for the year	194,867	(67,920)

A copy of the full independent audit report by Armada Audit & Assurance Pty Ltd, will be available upon request or directly accessible on our website at www.wanada.org.au.

EXTRACT OF WANADA ANNUAL FINANCIAL REPORT

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2025

	2025 \$	2024 \$
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	2,323,390	2,164,403
Trade and other receivables	48,619	10,725
Other current assets	23,389	10,612
TOTAL CURRENT ASSETS	2,395,398	2,185,740
NON-CURRENT ASSETS		
Property, plant & equipment	10,777	8,586
Right-of-use asset	68,612	137,224
TOTAL NON-CURRENT ASSETS	79,389	145,810
TOTAL ASSETS	2,474,787	2,331,550
LIABILITIES		
CURRENT LIABILITIES		
Trade and other payables	116,185	69,226
Amounts due to ATO	69,872	32,804
Provisions	155,155	114,782
Contract liabilities	226,871	402,780
Lease liabilities	141,650	70,033
TOTAL CURRENT LIABILITIES	709,733	689,625
NON-CURRENT LIABILITIES		
Provisions	-	4,547
Lease liabilities	-	67,191
TOTAL NON-CURRENT LIABILITIES		71,738
TOTAL LIABILITIES	709,733	761,363
NET ASSETS	1,765,054	1,570,187
EQUITY		
Reserves	221,418	176,182
Retained earnings	1,543,636	1,394,005
TOTAL EQUITY	1,765,054	1,570,187

A copy of the full independent audit report by Armada Audit & Assurance Pty Ltd, will be available upon request or directly accessible on our website at www.wanada.org.au.

APPRECIATION AND ACKNOWLEDGEMENT TO FUNDERS

WANADA extends our gratitude to our 2024-2025 funders for their valuable support: the WA Mental Health Commission, Australian Government Department of Health, WA Primary Health Alliance, WA Department of Health, and Lotterywest.

We also thank our members for their active engagement and contributions, which empower us to represent and support the sector and community.

Lastly, we are grateful to our partners and collaborators for generously sharing their expertise in advancing the alcohol and other drug sector.



Government of **Western Australia**
Mental Health Commission



Australian Government
Department of Health



Government of **Western Australia**
Department of Health



**WA Primary
Health Alliance**
Better health, together



**Thank you from the team at
WANADA**