

2022-23 Budget Submission

About us

The Australian Alcohol and other Drugs Council (AADC) is the national peak body representing the alcohol and other drugs sector. We work to advance health and public welfare through the lowest possible levels of alcohol and other drug related harm by promoting effective, efficient and evidence-informed prevention, treatment and harm reduction policies, programs and research at the national level. Through our members, AADC represents:

- over 550 specialist health services working to prevent and reduce harms which can be associated with the use of alcohol and other drugs, including more than 80% of the non-government organisations that receive federal funding to deliver services and support to people using alcohol and other drugs
- more than 1600 specialist practitioners working in alcohol and other drug services in the areas of prevention and early intervention, as well as all treatment settings
- researchers and policy specialists dedicated to building the evidence-base to support robust, high impact practice and programs, and
- people who use or have used alcohol and other drugs, and their families.

AADC's budget submission identifies the sector's three highest funding priorities affecting the delivery of high quality services that respond to community need, informed by consultation with our members.

1. Delivery of alcohol and other drug services commensurate with community need

It's long been acknowledged that alcohol and other drug (AOD) services are acutely underfunded in comparison with the real levels of community need. The 2014 *New Horizons Report* calculated that the \$1.261 billion being provided in total funding to deliver AOD services at that time met between only 30%-50% of total service demand. From 2016-17 to 2021-22 the *National Ice Action Strategy* (NIAS) delivered an additional \$450 million investment in AOD services nationally. Despite an evaluation of the NIAS completed in March 2021, which found it improved community access to effective AOD treatment and support, no decision has been made regarding the future of this funding beyond July 2022. Lack of funding surety is known to lead to the loss of skills and knowledge in the sector as experienced staff seek more secure employment.

AADC is calling for:

- Urgent announcement of the continuation of the funding previously delivered through the NIAS, incorporated into core AOD health services funding through the Department of Health, with all existing contracts to be rolled over subject to performance. **Estimated cost: \$75M p.a. indexed.**
- The update of the Drug and Alcohol Services Planning Model (DASPM) and progressive implementation over a multi-year period of funding for the delivery of AOD services commensurate with demand, based on needs-based population planning, to ensure investment in services is targeted and delivered in those areas and to those people who need it most. **Estimated cost of update and implementation plan: FY23 \$515,000; FY24 \$320,000; FY25 \$220,000; FY26 \$225,000; FY27 \$230,000.**
Estimated cost of additional service funding: FY25 \$96M; FY26 \$198M; FY27 \$306M.¹

¹ Additional funding contribution required of the Federal Government (does not include the State and Territory contributions), minus private funding and that provided to generalist GP, Medicare, and hospitals etc.



2. Maintaining and growing a strong and skilled specialist alcohol and other drugs workforce

As stated in the *National Preventive Health Strategy 2021-2030*, the health workforce plays an integral role in the delivery of Australia's health system. Investment in workforce development, particularly the AOD workforce, is critical to achieving our health goals.

Australia's *National Alcohol and other Drug Workforce Development Strategy 2015-2018* is currently being reviewed under the leadership of the Department of Health and the National Centre for Education and Training on Addiction (NCETA). Whilst recognising the need to deliver a sustainable specialist AOD prevention and treatment workforce, the prior strategy had no implementation plan nor resources dedicated to ensuring its delivery. The *National Aboriginal and Torres Strait Islander People's Drug Strategy 2014-2019*, which includes goals for the delivery of workforce initiatives that enhance the capacity and capability of community-controlled AOD services, has also been allowed to lapse with no effort made towards its renewal.

AADC is calling for:

- The review and update of the *National Aboriginal and Torres Strait Islander People's Drug Strategy 2014-2019* and its workforce development goals. **Estimated cost: \$140,000.**
- The development of a formal implementation and evaluation plan to accompany the revised *National Alcohol and other Drug Workforce Development Strategy* and workforce goals contained within the *National Aboriginal and Torres Strait Islander People's Drug Strategy*, incorporating consultation with the AOD sector, including the Aboriginal community-controlled AOD sector, to identify the manner and amount of resources required for implementation and evaluation of each strategy's workforce development goals. **Estimated cost: \$210,000.**
- Funding for the proper implementation and evaluation of the revised *National Alcohol and other Drug Workforce Development Strategy* and workforce development goals contained in the *National Aboriginal and Torres Strait Islander People's Drug Strategy* through budget forward-estimates. **Estimated cost: TBD.**

3. Reform of national governance structures relating to alcohol and other drugs

Since May 2020 and the replacement of the Council of Australian Governments (COAG) with the National Cabinet, and associated disestablishment of the Ministerial Drug and Alcohol Forum, there has been no formal national structure for intergovernmental engagement, oversight and decision-making with respect to alcohol and other drugs.

Australia continues to require ongoing, coordinating leadership at the Ministerial level to deliver consistent, transparent, workable cross-government, cross-sector and cross-portfolio governance structures capable of overseeing the effective long-term implementation, evaluation and improvement of national AOD-related strategies and sub-strategies. These structures should continue to be premised on addressing alcohol and other drug issues through a health frame. They should ensure all arms of Australia's AOD response system operate consistently, and deliver outcomes in accordance with the system's overarching goals. They should provide equitable inclusion of government and non-government representatives, including active participation of First Nations peoples and people who use or have used alcohol and other drugs and their families.

AADC is calling for:

- funding to support a full-year consultation, to be led by AADC and the state and territory peak body representatives of the AOD sector, to inform the design, implementation and long-term evaluation of new national governance structures to replace the Ministerial Drug and Alcohol Forum. **Estimated cost: \$210,000.**