



NADA
network of alcohol and
other drugs agencies

2025-2026 Pre-Budget Submission

17 December 2024

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for the non government alcohol and other drugs sector in NSW. We represent 85 organisational members that provide services in over 100 locations across NSW. They provide a broad range of services including health promotion and harm reduction, early intervention, treatment and continuing care programs. Together, we improve the health and wellbeing of people who use, or have used, alcohol and other drugs across the NSW community.

Mail Gadigal Country, PO Box 1266, Potts Point NSW 1335
Tel 02 9698 8669
Email admin@nada.org.au
Web www.nada.org.au

ABOUT NADA

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for non-government alcohol and other drug (AOD) services in NSW. We lead, strengthen and advocate for the sector. Our decisions and actions are informed by our members' experiences, knowledge, and concerns.

We represent 85 organisational members that provide services in over 100 locations across NSW, employing over 1,000 staff. Our members are diverse in their structure, philosophy, and approach to service delivery. They provide a broad range of alcohol and other drugs services, including health promotion and harm reduction, early intervention, treatment and continuing care programs.

We provide a range of programs and services that focus on sector and workforce development, data management, governance and management support, research and evaluation, sector representation and advocacy, and actively contribute to public health policy.

Together, we improve the health and well-being of people with living and lived experience of alcohol or other drug use across the NSW community.

NADA has award-level accreditation as reviewed by Quality Innovation and Performance (QIP), under the Australian Service Excellence Standards (ASES). A quality framework accredited by the International Society for Quality in Health Care – External Evaluation Association (IEEA).

To learn more, visit www.nada.org.au.

PREPARATION OF THIS SUBMISSION

This submission is based on documents prepared for the NSW Drug Summit that cover the wait time for AOD treatment, the outcomes achieved by NSW non-government AOD services through the use of public funds, and the request for funds for these services to respond to the increasing health and wellbeing needs of NSW communities. NADA asserts that the NSW Government does not need to wait for the NSW Drug Summit report to commit funds to respond to the demand for treatment and should respond to this documented demand via the NSW budget as well as actively preparing to respond to the Summit report.

NADA contact for this submission

Dr Robert Stirling
Chief Executive Officer
Network of Alcohol and other Drugs Agencies
PO Box 1266, Potts Point, NSW, 1335
E: robert@nada.org.au
T: 0421647099

BACKGROUND

NSW has a diverse, strong and effective non-government AOD sector which has provided services to individuals, families and communities for more than 50 years. The sector has been critical in responding to the health and wellbeing needs of those affected by AOD.

The NGO AOD sector is the largest provider of residential rehabilitation services in NSW and also provides specialist treatment programs for methadone to abstinence and methadone stabilisation, Magistrate Early Referral Into Treatment (MERIT) programs and Drug Court services. It also includes Aboriginal Community-Controlled services, specialist women's and youth services, services for people in contact with the criminal justice system, and services for multicultural and LGBTIQ+ communities.

The NGO AOD sector provides a wide range of specialist prevention and treatment services including:

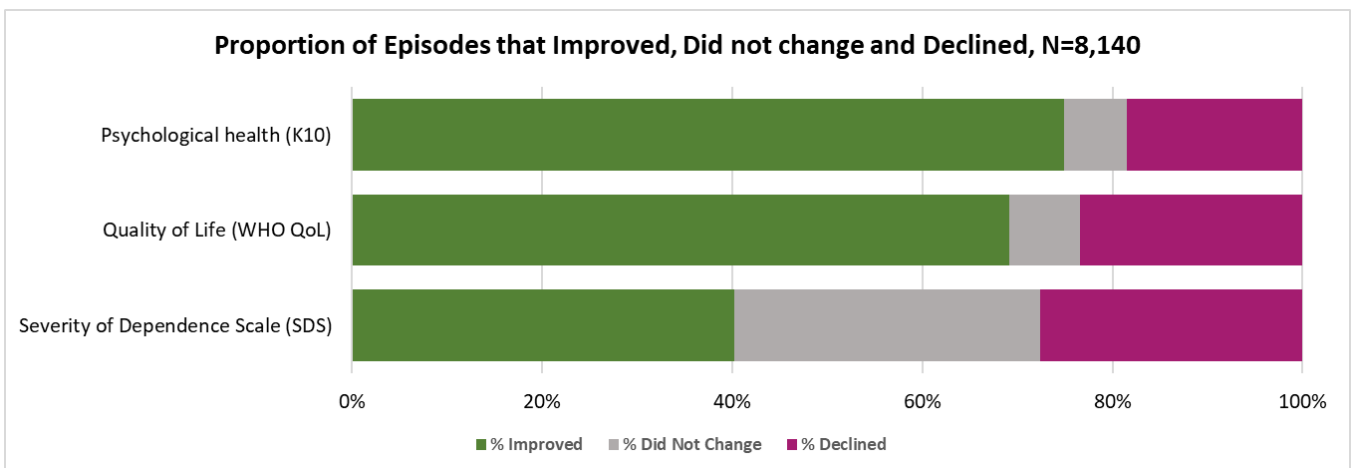
- health promotion
- harm reduction
- outreach
- counselling
- case management
- withdrawal management
- residential rehabilitation
- day programs
- support for families and significant others
- continuing coordinated care

A recent census of the NSW AOD Workforce conducted by the NSW Ministry of Health in 2022 found that the total NSW AOD workforce is comprised of 2473.8 FTE, with 60% (n=1493 FTE) employed within public sector services and 40% (n=953 FTE) employed in NGO settings, equating to an NGO workforce over 1,000.

Delivering health and wellbeing outcomes to NSW communities

The NSW non-government sector is leading on outcome measurement in the AOD field nationally, ensuring that services support positive outcomes for people who access treatment and are delivering value for money through public funds.

The data provided below shows that the NGO sector demonstrates significant outcomes across a range of outcome domains. In the 2023/24 financial year, over 8,000 people who attended NGO treatment services had a 75% improvement in psychological health outcomes, 69% reported an improvement in their quality of life, and 40% of people decreased their severity of dependence – a measure of a person's thoughts and feelings about their relationship to a substance. Considering the complexity and diversity of people who present to NGO services, these data highlight the significant outcomes of the investment of public funds.



	Improved	Did not change	Declined
Psychological health (K10)	75%	7%	19%
Quality of Life (WHO QoL)	69%	7%	23%
Severity of Dependence Scale (SDS)	40%	32%	28%

*Improved is denoted by one point difference, obtained from the first outcome assessment to the most recent assessment

Source: NADABase Outcomes Dashboard. Data is closed episodes for all NSW NGOs that submit outcome data into NADABase for 2023-24.

THE NEED FOR INVESTMENT IN ALCOHOL AND OTHER DRUG SERVICES

- In NSW, non-government services comprise 39% of all AOD treatment agencies and delivered 44.6% of all closed treatment episodes in 2021-22.
- In 2022/2023 for every dollar invested by the NSW Government in the NGO AOD treatment system, the NGO AOD sector brought in an additional dollar.
- The growing complexity of client presentations in NGO services has placed additional demands on the NGO workforce, requiring multi-disciplinary teams to meet client needs.
- Independent evidence shows increasingly complex client presentations, unfunded costs for NGO service providers, structural vulnerability in NGO contract arrangements, and extensive unmet need in NSW.

Source: Ritter, A. (2024) [Evidence brief: The NSW non-government alcohol and other drug sector](#). Drug Policy Modelling Program: UNSW Sydney.

The demand for treatment by NSW communities

There are 101,773 people in NSW who do not receive treatment despite being suitable for and wanting treatment.¹ However, little has been known about how many are actively seeking treatment on any one day. An online survey was distributed to all NSW NGO AOD organisations to report on wait data on any day in late September 2024. Organisations that responded provide many different services (e.g. withdrawal, counselling, residential rehabilitation) both within single organisations, across different locations and across organisations. The results follow:

- **There were 1,819 people waiting to enter an NGO AOD treatment organisation on any day during the week of 23-27 September 2024.**
- When asked about the number of people waiting for each service type (noting that some people are placed on multiple wait lists – the same person could be on a wait list for withdrawal management (detox) and residential rehabilitation, which is a common treatment pathway), the total number of people waiting for a specific service type on any day during the same week was 2,667.
- Residential rehabilitation had the largest numbers and proportion of people waiting for treatment (897 people or 34% of all those waiting).
- Assessment and initial treatment plan had the second highest numbers of people waiting for treatment (n=628 or 24%), followed by residential withdrawal (n=460 or 17%) and psychosocial counselling (n=257 or 10%).
- The service with the highest average wait time was residential withdrawal where 50% of all people waiting had been doing so for between 12 and 26 weeks. Noting that a proportion of these people were also waiting for residential rehabilitation which would delay the availability of a bed.

¹ DPMP, UNSW: <https://www.unsw.edu.au/content/dam/pdfs/ada/sprc/research-reports/dpmp-drug-summit-2024-explainers/2024-10-how-many-people-miss-out-on-alcohol-and-other-drug-treatment-in-nsw-dpmp-2024-v2.pdf>

- The highest proportion of people waiting to enter a service (29%) were waiting between 1 and 3 weeks. However, the second highest proportion (22% or 520 people) had been waiting between 12 and 26 weeks for AOD treatment.
- 69% of respondents said that the wait data was representative of the situation over the past 6 months.

What is data not telling us: The reported figure of 1,819 people waiting for treatment on any given day is based on data from 44 out of 84 organisations that participated in the survey. This means the actual number of people waiting could potentially be twice the reported number. Additionally, the survey does not account for those waiting for treatment in public or private AOD services, suggesting that the total number of people seeking treatment on any one day in NSW is much higher than what is reflected in this data.

Funding of NSW NGO alcohol and other drug services

In 2022/23, NSW Health provided \$64,300,00 of funds to NSW NGO AOD services. There has been additional investment in AOD services as part of the NSW Government's response to the Special Commission of Inquiry into the Drug 'Ice'. However, the quantum of funds provided to the NGO sector specifically is unknown. The funds that have been provided to the NGO sector have been provided to establish new services that have been desperately needed, predominately within regional and rural NSW. There have been small increases provided to some existing services related to MERIT and Drug Court.

The NSW Government invests in existing services via historic Ministerially Approved Grants, as well as other programs such as the NSW Drug Package, Methamphetamine Package, and Drug and Alcohol Treatment Services Package. These services have been reporting to Government concerns about their ability to address demand, complexity of presentations and workforce issues (recruitment and retention challenges due to short term contracts and wages that cannot compete with the public sector). These issues have been documented in both the *Special Commission of Inquiry into the Drug 'Ice'* and the former *Inquiry into rehabilitation in regional and rural NSW*. Both Inquiries included a recommendation to apply the Drug and Alcohol Service Planning Model to inform planning and funding – a similar tool to that used in mental health, *The National Mental Health Service Planning Framework*. Unfortunately, these challenges have worsened since COVID-19, with rising costs to deliver services (including insurances) and maintain a suitably qualified workforce. New funds to the AOD sector have been used to establish new services rather than support the existing service system that the NSW Government has invested in over many years.

The sector is requesting that the NSW Government increase the annual investment to the sector to respond to the demand and complexity of presentations to the NGO AOD sector. The request for an incremental increase in funds over the next five years will allow for a staged approach to increasing the workforce and service system capacity over that time.

The sector is seeking the funds to be negotiated directly with existing services to be flexible to the local and diverse needs of NSW communities. Based on consultation with the sector, this would include:

- Expand place-based prevention and harm reduction services to respond to AOD-related harms
- Recruit staff to enable access to beds in residential services that are currently unused due to underfunding and ensure appropriate client to staff ratios.
- Recruit appropriate medical staff to enable residential rehabilitation services to provide withdrawal management, including for women and children.

- Recruit multi-disciplinary teams to respond to complexities related to complex mental and physical health, family and domestic violence, etc.
- Recruit First Nations, Multicultural and LGBTIQ+ identified staff, including those with living/lived experience to ensure that services are culturally safe and appropriate.
- Recruit staff to provide support to people waiting for treatment and/or those that have recently completed a program to provide continuing care.
- Support currently unfunded, or minimally funded, operating costs for NGO service providers that would improve the quality and safety of care being provided to people in NSW, including insurance, clinical and cultural supervision.

Outcomes for the NSW Government and community

The NGO AOD sector excels at responding to the social determinants of health for people experiencing harms from alcohol and other drugs. The pre-budget submission responds to several of the wellbeing themes identified by the NSW Government:

Healthy - good physical and mental health

Funding will enhance NGO service's capacity to respond to the holistic health and wellbeing needs of people impacted by alcohol and other drugs and reduce the impact on the public health system.

Skilled - realising potential through training and education

Funding will increase the capacity of the NGO workforce and ensure that they are able to deliver quality care that is culturally appropriate, and also increase the capacity to support people that access NGO services into training and education

Housed - residents and families have stable living conditions

Funding will support case management for people accessing AOD services to navigate the system to seek stable living conditions.

Community - being with family, friends and community, and promotion of recreation, diversity and culture

Funding will support the availability of identified First Nations, Multicultural and LGBTIQ+ roles to respond to the diversity of people that access AOD services. Further a key component of AOD services is about building community connections, including relationships with, and support for, families.

Connected - access to government services and digital technology

Funding will support people accessing AOD services to navigate other health and social services and use digital technology to engage with people pre-and-post treatment, where appropriate.

More specifically the investment will:

- Increase the number of available residential withdrawal and rehabilitation beds and community-based services to reduce the wait time for treatment.
- Increase the number of medical and allied health workers employed by NGOs to respond to the complexity of presentations that are currently unable to be met by the sector and therefore impact on the public system, including emergency departments.

- Increase access and treatment availability to culturally safe and appropriate AOD services to First Nations, Multicultural and LGBTIQ+ communities, young people, women, parents and children.
- Reduce alcohol and other drug-related harms via targeted place-based prevention and harm reduction strategies, including those delivered by and for specific communities (First Nations, Multicultural and LGBTIQ+).
- Provide access to clinical and cultural supervision, and other professional development opportunities for the workforce to ensure the quality and safety of care.
- Increase the sustainability and viability of the NGO AOD sector to deliver quality care.

The sector acknowledges that the NSW Government is waiting for a report on the NSW Drug Summit. However, it is well established that the existing service system is not able to respond to the complexity of presentations and meet the demand for services by NSW communities. The inclusion of funding in the next budget would allow for the NSW Government to respond swiftly to the recommendations of the NSW Drug Summit report.

RECOMMENDATIONS

RECOMMENDATION 1: That the NSW Government increase funding to existing NSW NGO AOD services by an additional \$13,000,000 each year for the next five years to increase the total quantum of recurrent funds to the sector to \$65,000,000 by the fifth year. This is in addition to the projected cost escalation that are applied to NGOs each year by the NSW Government.

2025-26	2026-27	2027-28	2028-29	2029-30
\$13,000,000	\$26,000,000	\$39,000,000	\$52,000,000	\$65,000,000

RECOMMENDATION 2: That the NSW Government works in collaboration with existing NGO services to ensure that funds are provided in a way that responds to existing demand, and is flexible to the local and diverse needs of NSW communities – based on the needs identified by the sector above.

RECOMMENDATION 3: Consolidate historic funding sources to existing funded NGOs into a single fund for the NSW NGO AOD sector (including, NSW Drug Package, Methamphetamine, Drug and Alcohol Treatment Services) to simplify contract arrangements and support workforce retention. This should include a commitment to fold the new investment from the Special Commission ('Ice') into that fund once evaluated.