

Acknowledgment

The Alcohol and Other Drug Consumer & Community Coalition acknowledges Aboriginal and Torres Strait Islander peoples as the Traditional Custodians of this country and its waters. We pay our respect to Elders past and present, and extend this to all Aboriginal and Torres Strait Islander peoples.



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Chair's Reflection

On behalf of the Alcohol and Other Drug Consumer & Community Coalition (AODCCC) Management Committee, it is my pleasure to present the 20-21 annual report, to you, the members, stakeholders, supporters and advocates.



Dear Members,

It was an honour and a privilege to take on the role of Chair for the Alcohol and Other Drug Consumer and Community Coalition (AODCCC).

I would like to acknowledge and pay my respects to all those individuals that fought so hard to establish the AODCCC. Not an easy task, and one that requires both courage and understanding. Courage to speak up and declare that another voice is required, the voice of lived experience, a voice that is necessary to bring about fundamental change. Change in supports, programs and community responses to alcohol and other drug issues. Similarly, understanding that members are not a homogenous group, rather that they are made up of individuals, families, and workers with differing opinions of what is required to bring about this change.

Over the last 12 months the impact of COVID-19 has continued to be felt across the world, and while we have in so many ways continued our lives as 'normal' in Western Australia we acknowledge that the strain on many individuals has been anything but 'normal'. Lock downs, an increased number of rental evictions and homelessness and the inability to connect with family and friends have all taken their toll.

Incredibly we adapt, we have learnt to do things differently to engage in ways that we haven't previously. Individuals and organisations have worked more closely together, to collectively voice their concerns to government about the lack of supports for individuals and families in need. While not all strategies have been effective, we have learnt several valuable lessons. Importantly, that the voice of lived experience is essential and must be included wherever possible.

The AODCCC has been invited to sit on many of these new networks and working parties over the last 12 months. Notably this is an acknowledgment and belief that the AODCCC is able to appropriately represent the voices of its members. Much of the work that has taken place relates to the voice of lived experience, either engaging members, advocating the importance of lived experience or setting up protocols for individuals and or families to be heard. I am confident that this work will continue to gain momentum over the next reporting period and look forward to the development of new strategies of engagement.

We thank the Mental Health Commission for their trust and extended 12-month funding to build on the development and capacity of the AODCCC. I would like to personally thank our Development Coordinator Alex Arpino for driving the essential operational work of the AODCCC, without his knowledge and skills none of this would be possible. I would also like to thank my colleagues on the board for their passion and support over the last 12 months. I welcome our two new staff Trish Owen and Naomi Campbell and believe that together we will continue to provide essential benefits to our members.

To you our members I extend a warm welcome to participate, to engage, to provide us with your experiences, your knowledge your learnings so that we can advocate appropriately on your behalf. This engagement can occur in a variety of ways to suit your level of comfort. This is a member organization as such your voice is paramount.

Carmen Acosta Chairperson, AODCCC

Mission, Vision & Values

Mission

To promote the interests, education and welfare of those affected by alcohol and other drug use.

Vision

Community understanding shaped by the voice of people and families with lived experience of Alcohol and Other Drugs.

Values

The following set of values were developed utilising consultation inputs from the consumer and community think tank held in 2018:



Inclusion

We acknowledge the legitimacy of everyone's experience and provide a safespace for diverse views to be shared.



Collaboration

We look for opportunities to bring consumers, family, community, policy makers and providers together for real change.



Accountability

We consult broadly and are open about our intent, activities and outcomes.



Leadership

We share bold visions and take courageous steps towards what is needed in the community.



Integrity

We respect and value the different perspectives and experiences of alcohol and other drug use.

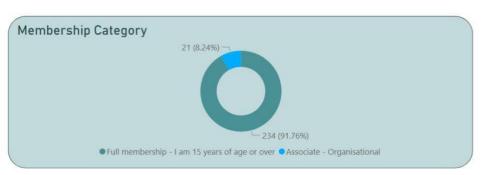
Membership

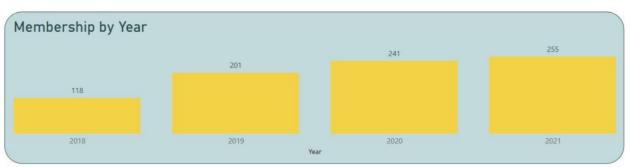
Membership Report Date Range 2/08/2018 30/06/2021



..beyond stigma







As of June 30th 2021, the AODCCC membership stands at **255**. The membership cohort is comprised of **234** Full Members (Individuals) and **21** Associate Members (Organisations).

This is an increase of **34** since the last reporting period (June 30th 2020).

Strategies to build the membership are underway. We are mindful of the need to step out of the norm and engage those that may not be accessing mainstream networks. Diversity is key in ensuring we are representing the authentic voices of a broad range of the community.

We will achieve this through staff recruitment and identifying and supporting lived experience representatives within the membership, in order to engage the community on behalf of the organisation. This will increase our capacity to engage the grass roots community directly with formal and informal engagement (community presentations, informal networking etc). We have also improved our online engagement tools (Mailchimp, LinkedIn, website feedback mechanisms, Facebook, Instagram) and investing in promotional materials.



Demographics



As part of our ongoing development, it become clear that the AODCCC membership application lacked demographic information, which is crucial to our ability to effectively report and advocate on behalf of the membership.

As such, we amended the application to include demographic questions in late 2020. For existing members (prior to 2021), a drive to receive this data continues with the development of a Member Update Form. We respect that some may not be prepared to provide more information than they already have (name, email), so this is at the discretion of each pre 2021 member.

To date we have captured the demographics of **71** members. The above diagram provides a summary.

- 22 report a personal lived experience of alcohol and other drug use.
- 11 are a family member or significant other of someone impacted.
- 17 have experienced both.

Members interests in the AODCCC is fairly balanced between supporting the cause, obtaining information about the alcohol and other drug sector, seeking consumer representation opportunities, advocacy, consultation and training.



A Brief History...

In 2015, the Health Consumers' Council (HCC) was funded by the Mental Health Commission (MHC) to co-ordinate a project to build on the recommendations from the November 2014 Forum, Improving Consumer Involvement in the Alcohol and Other Drug Sector.

An Alcohol and Other Drug Advisory Group (AODAG) comprised of government agencies, not for profit organisations, and consumers was developed to progress this project.

Over time, this group imposed a 50% consumer quorum to ensure the group-maintained consumer led focus and leadership.

The project specifically addressed the following recommendations:

- 1. to develop a common set of principles for engagement.
- 2. outline best practice engagement strategies for the sector.

As a result, a consumer consultant was hired to undertake this work and, the 'Principles and BestPractice Strategies for Consumer Engagement in the Alcohol and Other Drug Sector in Western Australia' was delivered to the MHC in January 2017.

In March 2017 the WA Primary Health Alliance (WAPHA) funded the HCC to support the ongoing work of the AODAG to progress towards incorporation and the development of consumer training. With this funding, the group became the Transitional AODAG.

Additional funding was received from the Western Australian Network of Alcohol and Drug Agencies (WANADA) and broad consultation in relation to these deliverables was undertaken.

In June 2018 the Alcohol and Other Drug Consumer Community Coalition (AODCCC) was formed and Incorporated, the constitutional purpose being, "to promote the interests, education and welfare of those affected by alcohol and other drug use". It was decided that family and significant others were to be recognised as equal consumer members and that an avenue for broader community inclusion was necessary, resulting in the name "Consumer and Community Coalition".

Following the establishment of the AODCCC an interim committee was formed. This committee began to build a membership base and progressed to the 1st Annual General Meeting where a Board of 12 were elected. In January 2019 a small capacity building grant from WA Council of Social Services was received to hold community consultations in order to submit to the parliamentary inquiry "Alternate approaches to reducing illicit drug use and its effects on the community".

This document was written on the basis of feedback from 80 participants and submitted to the Inquiry Committee in February 2019. Soon after this the AODCCC began funding negotiations with the Mental Health Commission, and received funding toward establishment to June 2021.

The delivery of the AODCCC Mission, Vision and Values marks the achievement of successfully meeting the first funding deliverables. June 2020 saw the commencement of recruiting a Development Coordinator and initiated the next stage of operational development for the AODCCC.

20-21 saw the completion of this development, meeting key milestones set out in the MHC funding agreement, with a subsequent contract extension to June 30th 2022.

Operational Report

In the 20-21 reporting period, Alex Arpino – Development Coordinator, held oversight of the operations of the AODCCC.



The 20-21 reporting period has seen significant development within the organisation, including the recruitment of Alex Arpino in late July 2020. Work was underway to meet all the milestones set out by the 19-21 Mental Health Commission (MHC) funding agreement. These milestones included completion of our 21-23 Strategic and Operational Plan, 21-22 Budget, a comprehensive policy and procedure suite (pertaining to operations, governance, finance, Occupational Health and Safety and Human Resources) and membership and Management Committee development. In addition to this, work was undertaken to develop membership engagement tools (mailchimp newsletter integration, LinkedIn page development, AODCCC website development) and Management Committee development and stabilisation.

At the recommendation of the MHC in November 2020, AODCCC established an agreement with Connect Groups to collaborate in the completion of 32 core policies and the development of data collection tools. These tools now allow us to document all of our engagement and projects undertaken, while also track membership demographics to inform our advocacy. This partnership was very productive and supportive and saw the completion of these important milestones.

Management Committee Development

As a result of resignations and committee member movements, in October 2020 AODCCC sought out highly skilled and experienced individuals with lived history, extensive alcohol and other drug sector and governance experience to join the Management Committee. This has provided the guidance required to complete this extensive development phase of the organisation and ensures progress moving forward.

Engagement & Project Accomplishments during the 20-21 reporting period

In addition to the completion of this development phase, Alex Arpino continued to engage the sector, community and membership. Here is a brief summary of a few key activities undertaken during this time:

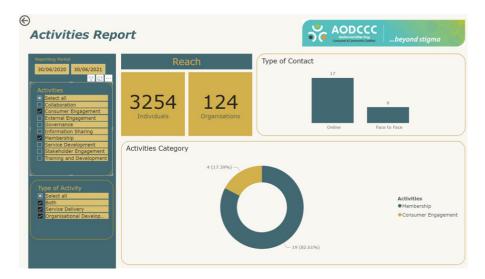
Member of the MHC One Stop Shop Project Implementation Management Group. For the
establishment of an enhanced single point of contact support to consumers, carers, health
professionals and service providers, to navigate the system, identify and access appropriate
alcohol and other drug and services and supports. AODCCC is ensuring the alcohol and other
drug voice is being heard and informing the implementation of this important project.

- Development of an Alcohol and Other Drug Peer Workforce mapping and development project. AODCCC established a Memorandum of Understanding with The Western Australian Network of Alcohol and other Drug Agencies (WANADA) to undertake this initiative.
 With a focus on wellbeing and harm reduction, the intent of this project is to:
 - Scope existing 'peer worker' and consumer engagement activities in the sector;
 - Develop a deeper understanding of the current workforce of alcohol and other drug sector workers with expertise gained through personal lived experience; and current consumer engagement practices;
 - o Identify opportunities to enhance peer leadership and consumer engagement at the systems level.

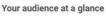
A comprehensive survey is in its final stages of completion and has been informed by consumers and service representatives, including those that identify as peer workers.

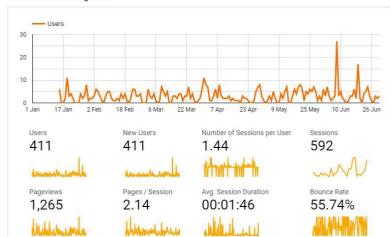
- Member of the WA Recovery College Alliance (WARCA), providing guidance on Alcohol and other Drug related policy and procedures, and a member of the WARCA Governance Steering Committee.
- Member of the MHC Peer Workforce Project Steering Committee.
 This project sets out to create a Western Australian Peer Workforce Framework by employing a co-design approach to;
 - O Define the Peer worker role, values, and its principles;
 - Explore key questions to develop key elements of what a thriving peer workforce requires;
 - Outline what the current gaps are in the peer industry, from a consumer, carers, family, significant other, worker and organisational viewpoint;
 - Use the information to build a Peer Workforce Framework that can be used by all stakeholders to draw on for help and advice;
 - o Facilitate the development of the profession; and
 - Focus on educational development, recommendations for organisations targeted at both management and worker level to become peer workforce ready and supportive, evoking the true social justice element and value that peer workers conveys.
- Outsourced training opportunities for our membership including Customised Governance Training, Resilience in Times of Change, Funding & Income Diversification, De-escalating Conflict & Aggression, Aboriginal Mental Health First Aid, Grant Writing Skills, Individual Advocacy, Sharing Your Story, Marketing on a Shoestring.
- AODCCC monthly newsletter has seen significant improvement over the last 8 months with the integration of Mailchimp, providing the tools to track engagement and provide a better user experience. As of June 30^{th,} there were 223 members accessing the newsletter, and 146 of those opening the email with a 33% click rate on links within the newsletter.

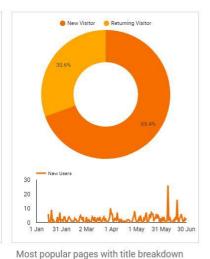
In addition, throughout this reporting period AODCCC has had **3254** occasions of consumer and membership engagement through online and face to face contacts. The majority of these have been via newsletter and email correspondence due to the staff resources available.



The AODCCC website has also received some improvements with the publishing of annual reports and strategic plans, management committee and staff biographies. A resource page for visitors was also set up, providing a range of resources including consumer peaks and alcohol and other drug treatment services. Google Analytics indicates the following traffic statistics from the 17th January 2021 (commencement of recording statistics) to 30th June 2021.







 Gender
 100% of total sessions

 45.85%
 54.15%

 Female
 Male

 Age
 100% of total sessions

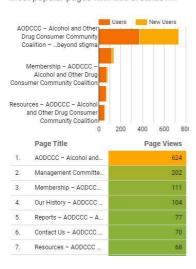
 27.50%
 33.50%
 15.50%
 12.50%
 5.50%
 5.50%

25-34

35-44

45-54

55-64



11





Carmen Acosta- Chairperson

Carmen Acosta has 30 years of senior leadership and management experience across both the private and not for profit sectors. During this time Carmen has worked across several different areas including disabilities, homelessness, youth, alcohol/drugs, family/children's, mental health, domestic violence, employment/training and community legal across WA including both rural and remote. Carmen has been responsible for the establishment, delivery and

continuous quality improvement of many new and innovative services and multidisciplinary teams. She has a particular skill set in strategic, operational, financial and contract realignment; quality frameworks; the research, evaluation and assessment of community services. Carmen is also a seasoned board member having previously sat on the board of two WA peak bodies WAAMH and WANADA.



Suzanne Caren – AODCCC Secretary

Suzanne Caren is a graduate of the Australian Institute of Management holding a Graduate Certificate in Business and is currently completing her Masters. She is a past Board Member of the Youth Affairs Council of WA and Perth Inner City Youth Service and a member of Youth Work WA.

Suzanne has a varied community service background with experience in youth and adult AOD, homelessness, domestic violence, employment, project

management and tendering. Suzanne has a passion for advocating for the rights of consumers within the AOD sector to ensure they have every opportunity to lead their own treatment, goals and outcomes. Currently Suzanne is the Operations Manager of Youth Focus headspace Midland and Northam, overseeing frontline services and education programs which aim to reduce symptoms associated with suicide, depression, anxiety and self-harm, and build long term mental wellbeing.



Matthew Ryan - Vice Chairperson

Matthew recently graduated with a Bachelor of Behavioural Science (with Distinction) along with achieving Notre Dame University's 'Heart Award' for his commitment to social justice, community spirit and reconciliation. Matt applies these skills in his role as AODCCC Vice-Chairperson to provide collaborative conversations and empowerment opportunities for AODCCC members. He is passionate about developing the voice, interests and

opportunities for AOD consumers, their families, carers or friends individually, in the community and within governance circles. Matt believes that AOD consumers and the community that surround them are experts-by-experience in their lived involvement and for that reason are best placed to authentically be included to unpack a lived experience in decision-making circles. As someone with 20 years lived experience as an AOD consumer, developing these conversations and critically examining policies, plans and service provision, are issues close to his heart. Understanding and deconstructing the stigma that exists around AOD use in all levels of society, remains a consistent goal because he believes that the voice of AOD consumers and their support networks can be a powerful force of positive change in the community and in the lives of individuals.



Jahan Hossain - Treasurer

Jahan (JWH Director, CA SMSF Specialist, DFP, B. Bus Registered Tax Agent, Registered SMSF Auditor) is a Chartered Accountant with 17 years professional practice experience in various organisations. He has been successfully operating a consulting practice specialising in Self-Managed Superannuation Fund. He is a registered Tax Agent and ASIC registered Self-Managed Superannuation Fund Auditor. He is conscientious and a self-

motivated finance professional with extensive experience in various client-centred environments. Jahan is passionate about helping others and is committed to the AODCCC meeting the needs of consumers and the community at large, with good governance and strong financial acumen.



Bridget Silvestri – Ordinary Member

Bridget Silvestri brings authentic family lived experience to the AODCCC Management Committee, spending many years trying to manage AOD and mental health issues. Her journey for the most part was unsupported while she attempted to navigate 'the systems'. This has led her to want to improve outcomes for consumers, family members and the community at large. Bridget's contribution is to progress the AOD consumer and community voice,

for the learning and understanding necessary within the alcohol and other drug space.



Kirsty McGeachy – Ordinary Member

Kirsty has a Bachelor of Social Science and Graduate Certificate in Developmental Trauma and is in her final year of Social Work. She has 13 years' experience working in drug and alcohol, justice and homelessness. Kirsty is passionate about early intervention, accessibility and policy change for those effected by drugs and alcohol, mental health and trauma. Kirsty's current role is Coordinator Accommodation and Tenancy Support, Mercy



Staff



Alex Arpino – Development Coordinator

Alex Arpino commenced his part time role with the AODCCC on July 27th 2020, and comes with 23 years of frontline Alcohol and Other Drug (AOD) service delivery experience. His AOD sector experience is very broad having held positions from AOD Residential Rehabilitation Worker through to Case Management and Counselling, into Management and Senior Leadership positions. Alex was one of the founding members of the Drug and Alcohol

Youth Service (DAYS), specifically in the area of Withdrawal and Respite and Residential Rehabilitation. Alex is a qualified Community Services Worker, Youth Worker, Trainer and Assessor (TAE40116), an experienced Group Facilitator and has worked in the area of Capacity Building, specifically delivering Mental Health First Aid and Suicide Prevention Training. Alex's passion is drawn from a personal lived history, he seeks to empower the voices of AOD consumers, families, significant others and the community at large, with the task to address stigma, and draw out the vast experience and wisdom in the community.





Treasurer's Report

AODCCC's finances are audited annually. The audited financial statements including the auditor's report are presented to members at the Annual General meeting and submitted to funders as a part of the acquittal process.



I am pleased to present the financial statements of the Alcohol and Other Drug Consumer & Community Coalition (AODCCC) for the year ended 30 June 2021.

Throughout the year, I have reviewed the monthly reports prepared by our accountant Graham Baldisseri and reported to the board on an ongoing basis.

Robert John Campbell of Australian Audit issued an unqualified audit opinion on 5 November 2021 confirming that the financial statements give a true and fair view of Alcohol and Other Drug Consumer & Community Coalition (AODCCC) assets and liabilities as of 30 June 2021, and income and expenses for the year.

Alcohol and Other Drug Consumer & Community Coalition (AODCCC) recorded a surplus of \$3,871 for the 2021 year, which saw the net position increase from \$1,320 at 30 June 2020 to \$5,191 at 30 June 2021. In concluding that Alcohol and Other Drug Consumer & Community Coalition (AODCCC) is going concern at 30 June 2021, Australian Audit have confirmed our view that the net assets are sufficient to sustain operations through the coming year.

Alcohol and Other Drug Consumer & Community Coalition (AODCCC) received the MHC funding for 2021-2022 financial year operation in June 2021 which has been appropriately reflected in the financial statements for the year ended 30 June 2021.

Jahan Hossain CA
Treasurer, AODCCC







Annual Financial Statements

Alcohol and Other Drugs Consumer and Community Coalition Statement of Profit or Loss

For the 12 months ended 30 June 2021

	2021 \$	2020 \$
Income	•	•
Grants	159,377	88,767
Total Income	159,377	88,767
Expenses		
Accounting Fees	8,810	14,345
Administration Services	4,500	11,830
Advertising	944	350
AGM	27	-
Audit Fees	4,000	-
Board Expenses	162	2,749
Catering Expense	441	-
Consultancy Fees	60,000	1,200
Depreciation	1,249	379
Events	647	-
General Insurance	1,588	1,137
IT Expenses	1,975	2,515
Memberships & Subscriptions	-	672
Motor Vehicle Expenses	154	-
Printing & Stationery	1,091	4,398
Room Hire	68	-
Superannuation	5,402	3,227
Telephone & Internet	165	94
Training	1,500	8,673
Travel and accommodation	126	195
Wages and Salaries	57,804	36,533
Wages Leave Accrual	3,728	-
Workers Compensation Insurance	1,125	470
Total Expenses	155,506	88,767
Surplus/(Loss)	3,871	-
Income tax expense	-	-
Net Profit/(Loss) for the Year	3,871	

Thank You



The AODCCC Management Committee would like to thank the Mental Health Commission of Western Australia for their ongoing support and funding, we simply could not have done it without you.

We wish to thank the ongoing support and encouragement received from our members, advocates and the many people across sectors that have enabled our progress to date.

To those with a personal lived experience of alcohol and other drug issues, who have long been advocating in this space, we acknowledge your courage and commitment.

Thank you,

AODCCC







