



...beyond stigma

2025-2026 Annual Report

Acknowledgement of Country

The Alcohol and Other Drug Consumer & Community Coalition acknowledges the Traditional Owners of Country throughout Australia and recognises the continuing connection to lands, waters and communities. We pay our respect to Aboriginal and Torres Strait Islander cultures; and to Elders past and present.

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AODCCC
Alcohol and Other Drug
Consumer & Community Coalition



Recognition of Lived Experience

We would like to acknowledge the individual and collective expertise of those with a lived or living experience of alcohol and/or other drug use. We acknowledge the emotional labour and vulnerability that is present in this space. We also recognise the work of those who came before us to build the foundations to enable this work to take place.



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Chair's Reflection



Dear Members,

Having worked across the sector for over 30 years I am constantly reminded that substance use is not a static issue. That harm reduction resources, take home Naloxone access and support free of stigma are not optional luxuries, rather lifesaving necessities.

As a Management Committee (MC), we monitor the shifting trends of substance use in WA and the challenges faced by consumers and their support networks. Ensuring that our advocacy aligns with the immediate needs of the community we support, while maintaining strategic awareness of shifting funding landscapes and policy changes.

I look back on all that the AODCCC has achieved over the last 12 months with pride. Each achievement progress against our current strategic plan and a reflection on our ability to consult with our members, amplifying their voices with every project. The achievements are extensive from the completion of our AOD Stigma Reduction Toolkit Project; the establishment of the Alliance to End Substance Use Stigma; The numerous position papers we submitted, most notably 'The Alcohol and Other Drugs Stigma' position paper; our appearance before the House Standing Committee on Health, Aged Care and Disability; The continuation of Alcohol and Other Drug Lived and Living Experience Representative Training and the development of the Substance Use Stigma: Awareness and Action Training; the continuation of our AODCCC Reference Group and the development of our Family, Carer and Significant Other Reference Group; the partnerships we have further strengthened and developed throughout the year.

We look forward to another year ahead, seeking increases and alternate funding avenues which will allow the AODCCC to expand our footprint in the regions, and focus on culturally specific advocacy. We also look forward to drafting and establishing our next Strategic Plan in consultation with our members.

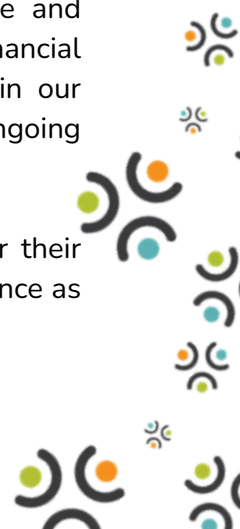
As always, it is with deep gratitude that I thank our members, families and community advocates for sharing their deeply personal, lived experience. We acknowledge their time and willingness to share their perspectives which has allowed the AODCCC in turn to advocate for structural change to systems, process and attitudes together in partnership.

To our team of dedicated and passionate staff led by our Executive Manager Alex Arpino, who has directed the organisations path over the last 6 years, thank you. Words cannot express our gratitude as we farewell Alex, wishing him all the very best as he leaves the AODCCC to explore new opportunities.

We have been very fortunate to attract a high calibre of MC members with diverse and complimentary skills. We are dedicated to sound governance practices and the financial sustainability of the AODCCC. Importantly, lived and living experience is embedded in our governance. I thank my fellow MC members for their time and generosity to oversee the ongoing development of the AODCCC.

Last but not least we thank our allies, partners and the Mental Health Commission for their support and belief in the mission of the AODCCC and the value of lived and living experience as a voice for change.

Carmen Acosta
Chairperson, AODCCC



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 safe space 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

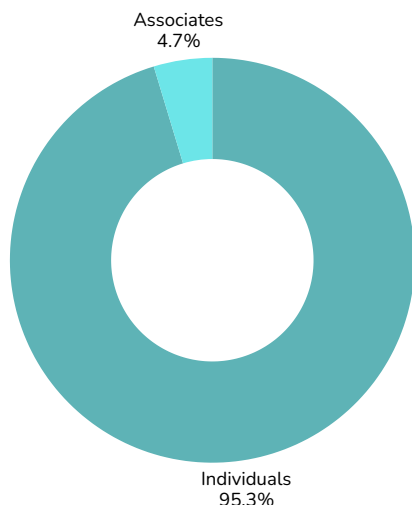
We share bold visions and take courageous steps towards what is needed in the community.



Integrity

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

Membership

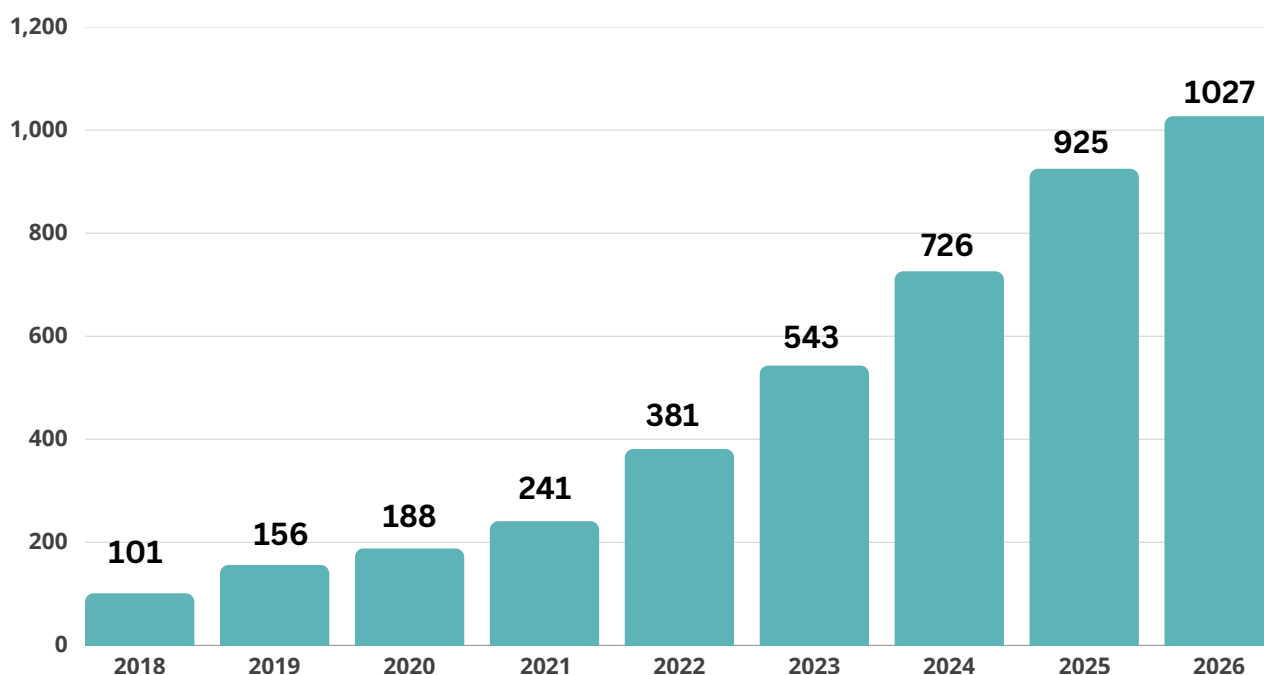


25-26 Financial Year

Total Members: 1027

Individuals: 979

Associates: 48



AODCCC has welcomed 182 new members in the 2025-2026 financial year. As we continue to reach out to the community, partner with our stakeholders, seeking to remove barriers for engagement, our membership has seen ongoing steady growth since our incorporation.

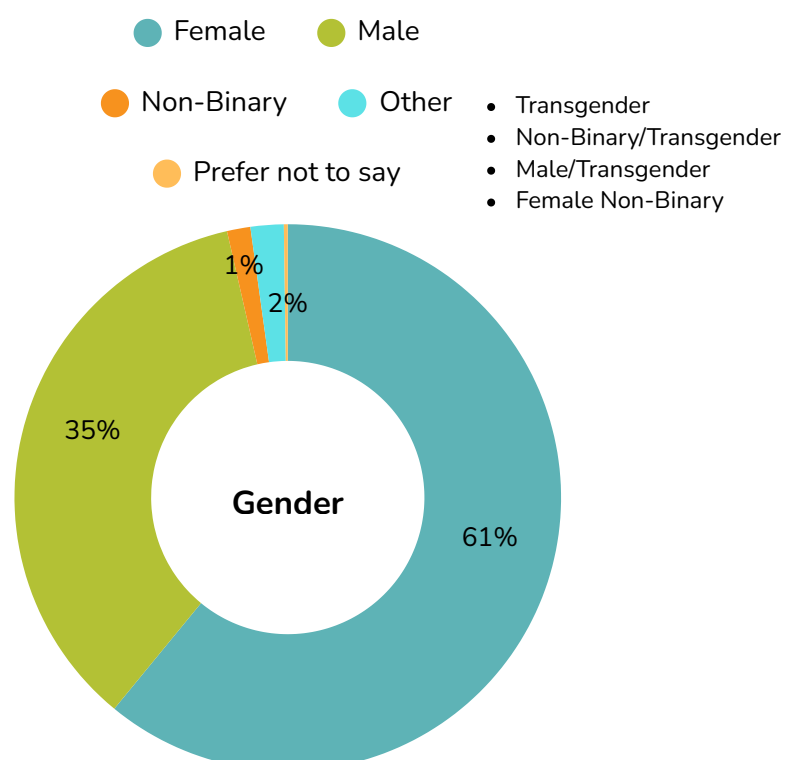
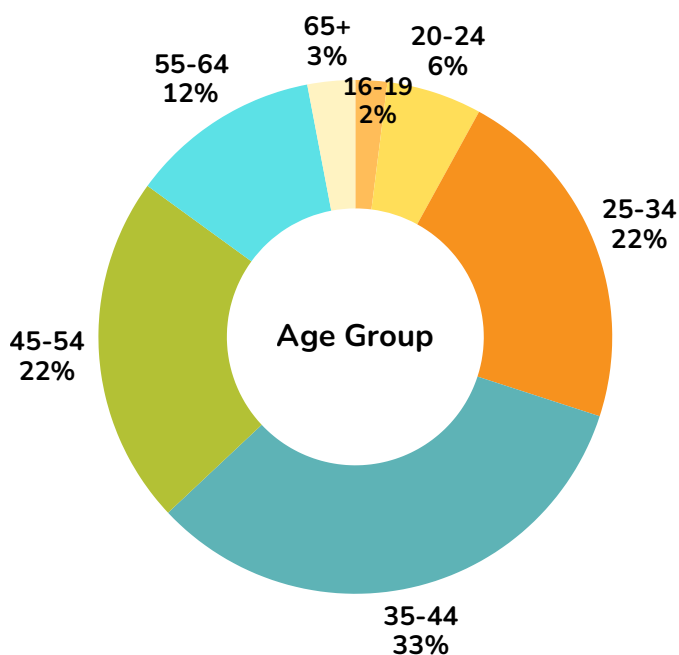
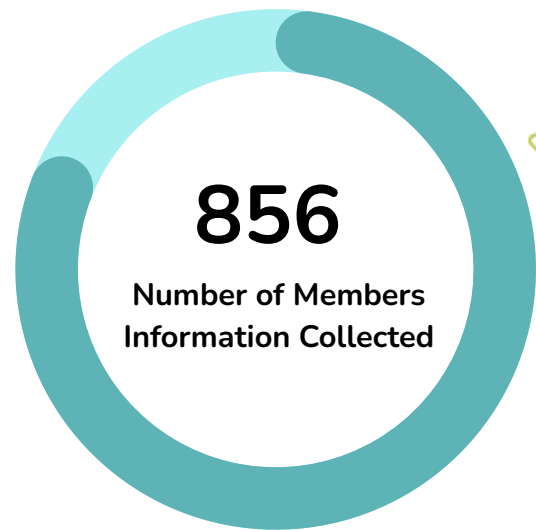
Our focus is to provide the community with opportunities to share their experience, reflect and be heard, strengthening our engagement and community empowerment year to year.

We continue to work collaboratively with our members to provide unique member incentives such as training and consultation and engagement opportunities, including access to service providers and government, to inform change at a systemic level.

Demographics

Of the **1027** members registered in the **25-26 financial year**, **856** have provided their demographic information which enabled us to understand that:

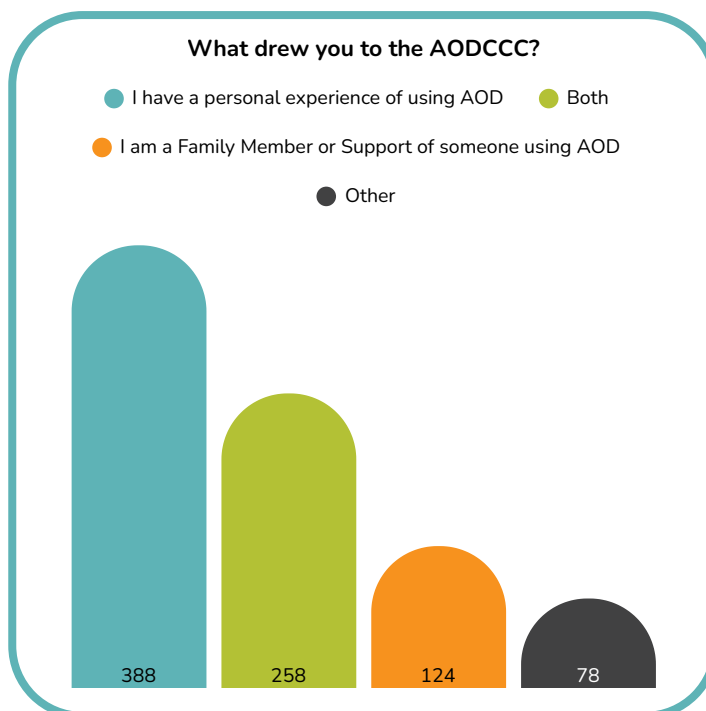
- Majority of members were aged between **35 to 44** years of age.
- **79** identified as Aboriginal and or Torres Strait Islander, **137** as Culturally and Linguistically Diverse and **165** as LGBTIQA+.
- A majority **61%** identified as female.



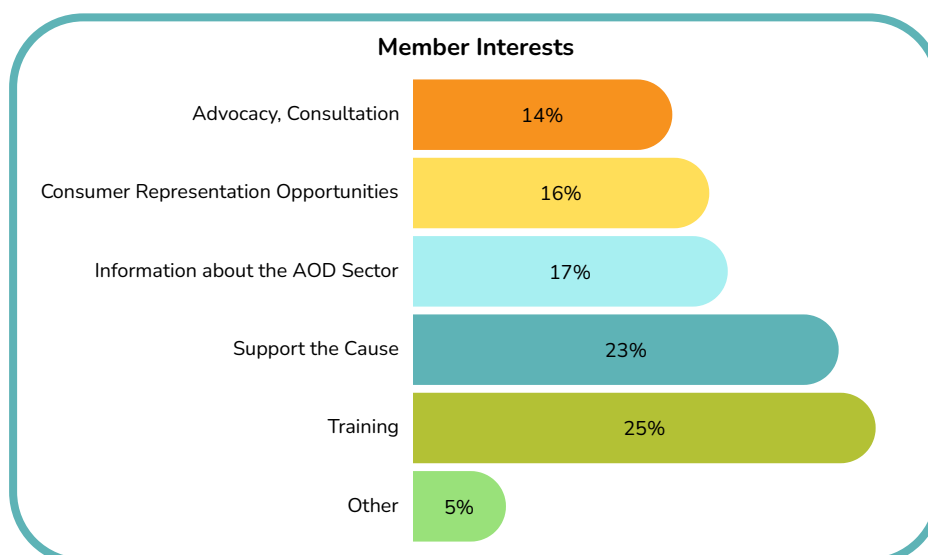
Demographics

In addition

- **388** report a personal lived experience of alcohol and other drug use.
- **124** are a family member or significant other of someone impacted by alcohol and other drugs.
- **258** have experienced both.



Majority of our members are interested in accessing Training, followed closely by an interest in supporting our cause, **to promote the interest's education and welfare of those affected by alcohol and other drugs.**



AODCCC strives to authentically engage individuals, providing space to share the unique and highly nuanced experiences of each person beyond the demographic. We actively work to safeguard from bias, stigma and stereotyping often associated when approaching the community as groups. As such, demographics are utilised as a general snapshot, while acknowledging that **diverse views and experience come in many forms**, regardless of cultural backgrounds, genders and sexual orientation.

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 Best Practice 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, with 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 the WA Council of Social Services (WACOSS) was received to hold community consultations to submit to the parliamentary inquiry *'Alternate approaches to reducing illicit drug use and its effects on the community'*.

This document was written based on 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 2023.

The delivery of the AODCCC Mission, Vision and Values mark 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.

After an intensive period of development, which included the establishment of an operational team, office infrastructure and member reference group, AODCCC secured a Service Agreement in April 2025, heralding the completion of our development phase. This support from the Mental Health Commission, provides funding to 2028 with an opportunity to extend to 2030.

Operational Report

AODCCC has enjoyed a highly productive 25-26 fiscal year, with extensive and meaningful engagement with our members and stakeholders including dedicated family, carer and significant other participation, and significant advances in stigma reduction initiatives.



This year AODCCC operated at its strongest capacity since our incorporation in 2018. With our Mental Health Commission Service Agreement in place, we were able to operate full-time over the entire fiscal year and welcome a second and third Systemic Advocate to the team.

As our organisation expands its operational reach and reputational recognition as a sustainable and authentic platform for those with a lived and living experience of alcohol and other drugs, our engagement with government and sector leaders has also increased, with new systemic advocacy opportunities accessed and our members voices amplified.

Beyond Stigma

Promote human connection and understanding of the complexity of alcohol and other drug use.

2025 saw the completion of our **AOD Stigma Reduction Toolkit Project**, a project funded by the Mental Health Commission seeking to understand and address the pervasive impact of stigma experienced by people who use substances, attending West Australian public hospital emergency departments and/or assessment and treatment teams for care.

Led by our Project Officer, Kirsty Turner, we engaged more than 200 participants, including 109 people with lived and living experience and 98 professional stakeholders. The evidence and consultations clearly demonstrate that reducing AOD related stigma is both achievable and essential.



Stigma is not inevitable, it can be addressed through coordinated, sustained action across individual, organisational and system levels.

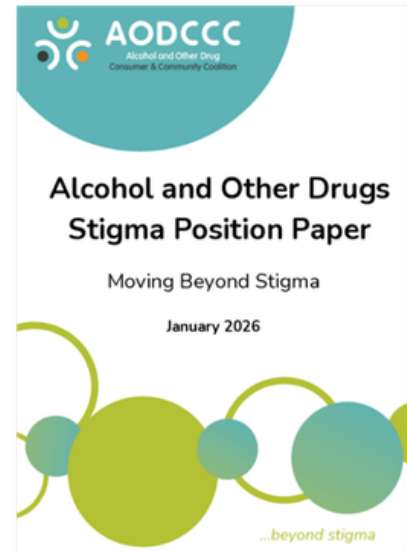
Real change depends on embedding compassion, respect, and accountability into every layer of the healthcare environment. All of our research and recommendations are now with the Mental Health Commission, to decide how this important work can inform and progress their stigma reduction actions moving forward.

To progress our own Stigma reduction work, we undertook two important initiatives, starting with the completion of our **Alcohol and Other Drugs Stigma Position Paper** and accompanied training development. The position paper was distributed in January of 2026, and provides a clear, community led pathway to understanding and addressing stigma, while providing insight into the cycles of stigma and how they entrench disadvantage and reinforce marginalisation.

The focus areas we advocate for in the document are:

1. A Whole of Government Response
2. Community Led Change
3. Education and Narrative Change
4. Workforce Development
5. Investment in Lived Experience Workforce

Our message is one of hope and empowerment, through community understanding, compassion and courage we can address these issues head on, moving beyond stigma for the benefit of all.



As an accompaniment to our position paper, we developed our **AODCCC Substance Use Stigma: Awareness and Action training**. The training was officially launched on the 26th of May 2026.



AODCCC Members and AODCCC Systemic Advocates, Kirsty Turner and Vivienne Keeley, at our inaugural Substance Use Stigma: Awareness and Action training.

The overall learning goals of the training include:

- To understand what substance-related stigma is, where it comes from, and why it persists.
- Recognise how stigma operates at personal, social, and systemic levels.
- Identify stigma in language, media, services, and everyday interactions.
- Understand how stigma impacts health, wellbeing, and access to care.
- Learn and practice self-advocacy and stigma-challenging skills.
- Build confidence using person-first, non-stigmatising language.
- Feel connected to others who want to create change in their communities.

Feedback has been very positive, and this training will continue to be a feature on our annual training calendars and an option for members and stakeholders alike.

AODCCC is aware that community collaboration and partnership is essential when tackling Substance Use Stigma. As such in February 2026, we led the creation of the **Alliance to End Substance Use Stigma WA**.

The Alliance brings together key alcohol and other drug advocacy organisations, peak bodies, service providers and lived and living experience representatives, to network, identify and or establish joint advocacy and project initiatives with the purpose of addressing alcohol and other drug related stigma and discrimination in Western Australia.



Through strategic discussions and coordinated action, the group aims to improve outcomes for the Western Australian community.

To date, the alliance members are:

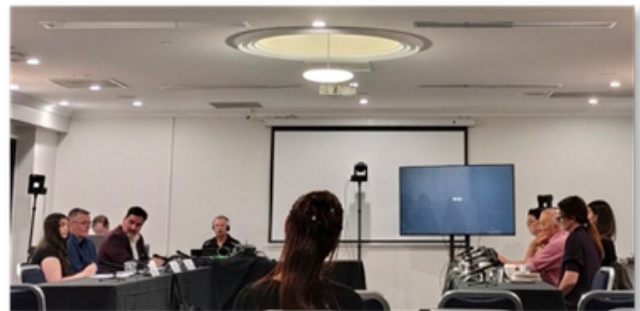
- Western Australian Network of Alcohol and Other Drug Agencies (WANADA)
- Peer Based Harm Reduction WA
- Alice Guest- Lived & Living Experience Representative
- Ben Kane- Lived & Living Experience Representative

We look forward to continuing to build and strengthen this Alliance while welcoming new members to contribute to joint advocacy initiatives in the new year.

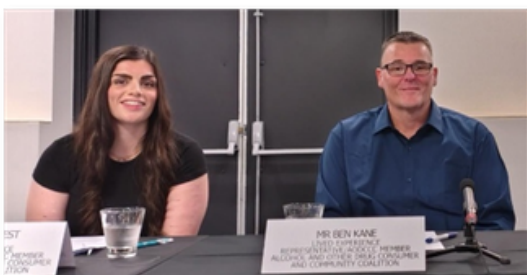
Systemic Advocacy

Advocate for healthy and connected individuals, communities, and systems.

On the 14th of April 2026, AODCCC appeared at the House Standing Committee on Health, Aged Care and Disability Public Hearing, in response to the **Inquiry into Health impacts of Alcohol and Other Drugs in Australia**. I was thrilled to be accompanied by two of our members, and Lived and Living Experienced (LLE) representatives, Alice Guest and Ben Kane.



House Standing Committee on Health, Aged Care and Disability Public Hearing



AODCCC LLE Representatives, Alice Guest and Ben Kane at the Public Hearing.

We had the opportunity to expand on our written submission from 2024 and respond to questions from the Committee. It was a welcomed opportunity to bring an LLE perspective to this inquiry, and it was a positive experience for the entire team. We are grateful to Alice and Ben for stepping forward and sharing their invaluable experience and insight.

We have had a highly productive year with several opinion pieces and submissions completed, including, a **Response to: Discussion Paper Tranche 2 Liquor Reform Options**, seeking an evidenced, harm reduction focus be included in the proposed Western Australian liquor act reforms. A submission to the Legal and Constitutional Affairs References Committee regarding the **Illegal tobacco crisis in Australia**. And an opinion piece regarding the sale of **Full Strength Beer at Optus Stadium**.

AODCCC continues to build meaningful relationships with stakeholders and pursuing joint advocacy initiatives, one such relationship has been with Cancer Council WA, where we were please to publish a joint statement clarifying our **Views on the online sale and home delivery of alcohol**.

We continue to be a strong conduit for our members, providing a platform for their voices to be heard, offering authentic community led insight and experience. We encourage you to seek out our full list of submissions and statements on our [website](#).

Education and Training

Sharing of knowledge and experiences to engage and empower individuals, families, and communities.



AODCCC Members and Systemic Advocate Vivienne Keeley at our AOD Lived & Living Experience Representative Training.

Education and training continue to be a focus for AODCCC, providing free opportunities for members to access our **Alcohol and Other Drug Lived and Living Experience Representative Training**, both online and in person. Facilitated by our Systemic Advocate, Vivienne Keeley, this training is designed to educate and inform participants on the different levels of advocacy, along with all the important considerations and skills involved in joining the lived and living experience workforce, to make a meaningful difference to the sector and community.

We were very excited to respond to a request from Mercycare to facilitate our **AOD Youth and Family Support Skills Training** for the team at Kalgoorlie Aboriginal Short Stay Accommodation (KASSA).

This provided a great opportunity to engage the local community, share and listen to their wealth of experience and insight, and provide some practical strategies to meaningfully engage and support families, carers and significant others.



AODCCC Systemic Advocate Adele James, AODCCC LLE Representatives Alice Guest and Wendy Cream, with the team at KASSA.

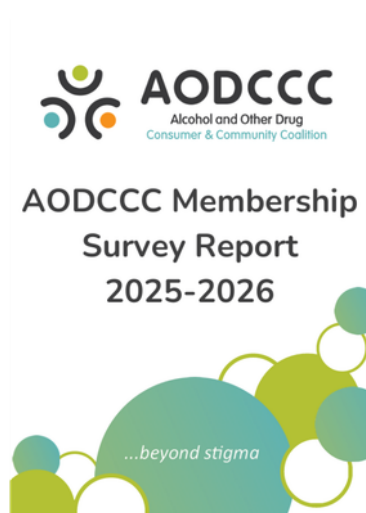
We were also afforded the opportunity to engage with Mercycare's metro teams and are always inspired to see the commitment from service providers to invest in their workforce, providing a range of insights and practical strategies from a youth and family lived and living experience perspective. We thank the team at Mercycare for welcoming AODCCC.



AODCCC Systemic Advocates Adele James and Vivienne Keeley, AODCCC LLE Representatives Alice Guest and Wendy Cream, with the Mercycare Metro Accommodation and Tenancy team.

Amplify Voices

Ensuring alcohol and other drug lived & living experience voice and influence is present and utilised within the community.



The **AODCCC Membership Survey Report** for 2025-26 continues to be an important platform for our members voices to be heard. With a new record set for engagement, this year, a total of 120 AODCCC members completed the anonymous online survey, which is a 38% increase from the previous year and our largest engagement to date.

Themes explored this year included impacts of stigma, ways in which we can educate the community, consumer safeguards and service complaint mechanisms, and lived and living experience leadership.

Through this important platform, AODCCC will use the knowledge to foster human connection and deepen our understanding of the complexities surrounding alcohol and other drug use, and guide or advocacy agenda.

We were pleased to attend the **WA Peer Support Network (WAPSN) Conference** in June 2026, hosting a stall and presenting a talk on our Substance Use Stigma Awareness and Action training, a summary of our stigma work to date. I was joined by one of our Lived and Living Experienced representatives, Ben Kane, who spoke about his journey leading to AODCCC engagement and what his work with us has meant, both personally and professionally.



AODCCC Systemic Advocates Adele James and Kirsty Turner at the AODCCC stall at the WAPSN Conference 2026.

Our inaugural **International Family Drug Support Day (IFDSD)** morning tea was a welcomed event this year. We were excited to host a gathering on the 24th of February 2026 to bring AODCC members together. While the plight of many families impacted by alcohol and other drugs is fraught with heartbreak and uncertainty, the focus of our event was **connection**, and in what better way than working on a communal art project together.

With art comes relaxed shoulder-to-shoulder conversation, a shared focus point, a sense of collaboration and therapeutic creativity. All the essential ingredients to wellbeing and relationship building, while highlighting the IFDSD theme for this year: **See the Person, Not the Drug.**



AODCCC Members and Staff at our 2026 IFDSD Morning Tea.

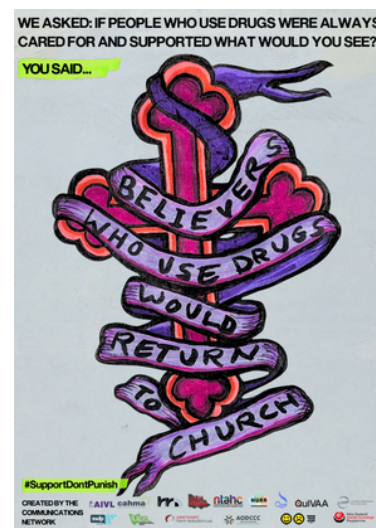


AODCCC Comms & Admin Officer, Brooke Reeves, leading our participation with Support Don't Punish 2026 alongside AODCCC Reference Group Members.

This year AODCCC joined the **Australian Injecting and Illicit Drug Users League (AIVL)'s National Communications Network (NCN)**, which is a group that meets monthly and comprises of people working within the AOD sector across Australia and New Zealand, in roles that include communications, media/ social media and health promotion responsibilities.

Through being part of the NCN, we had the opportunity to input into AIVL's 2026 **Support Don't Punish** campaign which comprises of community responses (from right across Australia & New Zealand) to a central question. This year's question was, *if people who use drugs were always cared for and supported, what would you see?*

A select amount of the total responses received, of which four were directly shared by AODCCC members, have been transformed into impactful, tattoo-style illustrations by AIVL's peer artist, and are available for public sharing to start a conversation and bring awareness of this campaign to the community.



An AODCCC member's submission!

Governance and Sustainability

Ensuring a sustainable grassroots driven organisation, for a strong future.

We were thrilled to launch our **Family Carer and Significant Other Reference Group (FCSO RG)** this year, with our new Systemic Advocate, Adele James. Established in November 2025, the FCSO RG was formed to platform the voices and expertise of families, carers, and significant others, ensuring such perspectives inform AODCCC's advocacy, policy development, and systems change initiatives.



AODCCC Systemic Advocate, Adele James, our FCSO champion!

Over the past year, FCSO RG members have been involved in navigating a range of systemic advocacy initiatives at various levels, including:

- Supporting Western Australia's inaugural International Family Drug Support Day event.
- Informing and contributing to policy submissions, consultations, and initiatives with local, state, and federal governments.
- Providing AOD lived and living experience expertise to help shape systemic change.

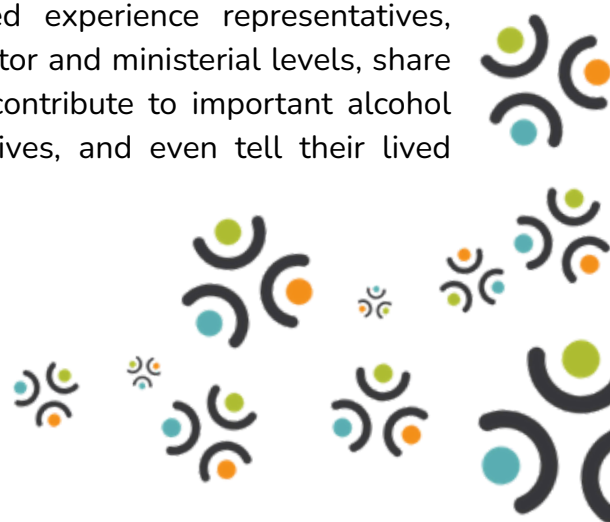
Through these activities, our members help ensure that the strengths, challenges, and perspectives of families, carers, and significant others are represented where decisions are made.



The AODCCC team with members of the FCSO RG.

The **AODCCC Reference Group (Individual)** also continues to be a guiding force for our organisation, providing authentic lived and living experience insight, informing all that we do. We are incredibly proud of our AODCCC community members who have completed their term with our Reference Group and continued to grow, connect and create change in so many ways over this last year.

We have seen members step into paid employment, undertake further study and work placements, become peer workers, trainers and lived experience representatives, contribute to advocacy and decision-making at local, sector and ministerial levels, share their voices through media and community networks, contribute to important alcohol and health advocacy, establish new community initiatives, and even tell their lived experience through published writing.



What stands out most is not simply where people have gone, but the confidence, connection and sense of purpose they have carried forward. Their experiences are being transformed into leadership, advocacy and meaningful action, ensuring the voices of people and communities affected by alcohol and other drugs are heard in the places where decisions are made.

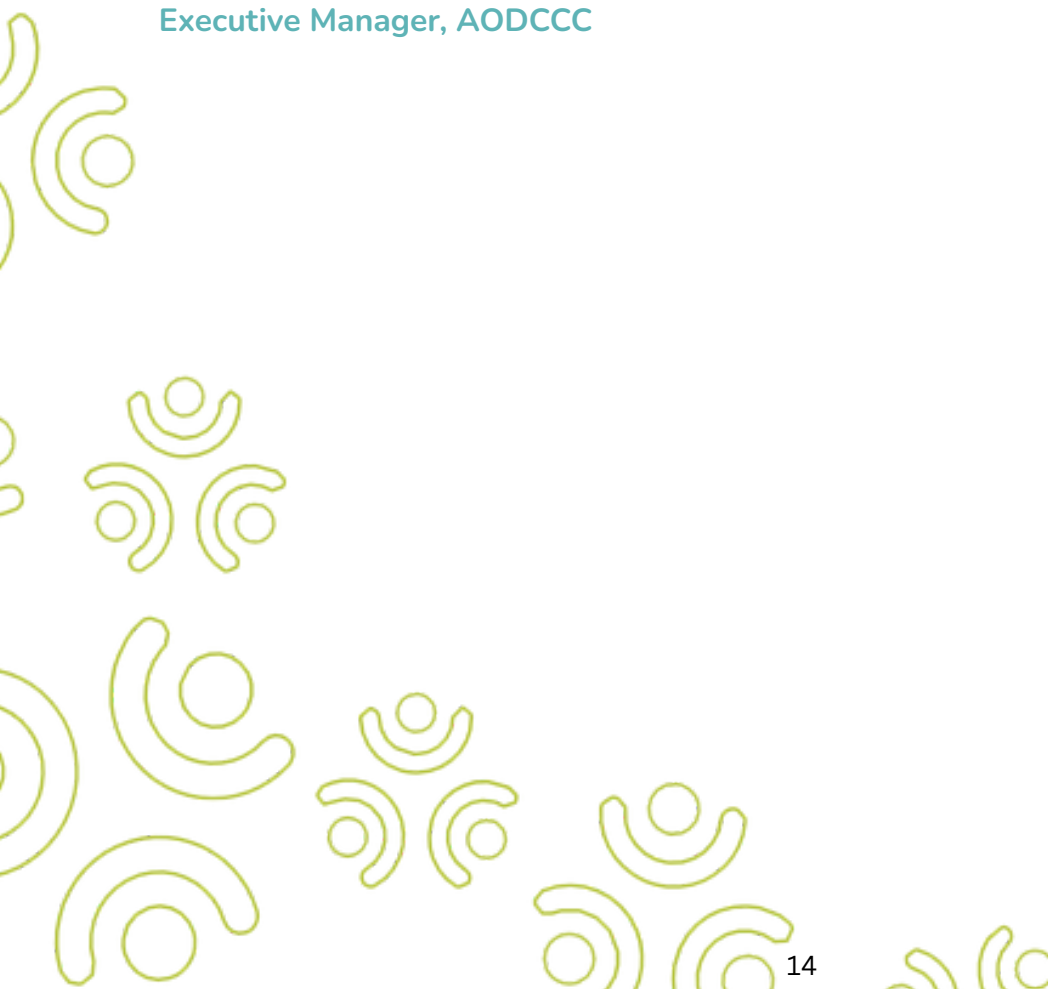
This is what moving beyond stigma looks like: people being recognised not by their past or by a label, but for their strengths, wisdom, courage and capacity to shape a more compassionate and inclusive system. It is a privilege to have shared part of their journey, and we could not be prouder of the people, advocates and community leaders they continue to become.

And finally, we share our gratitude to all those that provided donations this year, and a special mention to Glenn Pearson who continues to be our sole monthly doner. Thank you for your outstanding ongoing support!

As we take a moment to reflect on an amazing year, I am filled with optimism for the future and acknowledge the ongoing work ahead of us, gratitude for what we have achieved, and I couldn't be more confident in our members, our team and Management Committee.

Thank you.

Alex Arpino
Executive Manager, AODCCC



Treasurer's Report



I am pleased to present the financial statements of the Alcohol and Other Drug Consumer & Community Coalition (AODCCC) for the year ended 30 June 2026.

AODCCC recorded a surplus of \$129,156 for the year, compared with a surplus of \$62,661 in the previous financial year. Total revenue increased to \$693,512, reflecting the organisation's increased level of activity under its Mental Health Commission Service Agreement.

AODCCC remains in a sound financial position. At 30 June 2026, the organisation held \$251,999 in cash and cash equivalents, with total liabilities of \$69,016 and net assets of \$196,175.

Throughout the year, the Management Committee has continued to oversee the organisation's financial performance, supported by regular financial reporting and review. Maintaining appropriate financial controls, cash reserves and oversight of AODCCC's longer-term commitments will remain important as the organisation continues to grow.

AODCCC's financial statements are audited annually. Australian Audit has issued an unmodified audit opinion on the 2025/26 financial statements, concluding that the financial report gives a true and fair view of AODCCC's financial position as at 30 June 2026 and its financial performance and cash flows for the year then ended.

I would like to acknowledge the work of AODCCC's staff, accountant, auditor, and Management Committee in supporting the organisation's financial management and governance throughout the year.

John McGrath
Treasurer, AODCCC

Annual Financial Statements

Alcohol and Other Drugs Consumer and Community Coalition Incorporated (AODCCC)
Statement of profit or loss and other comprehensive income
For the year ended 30 June 2026

	Note	2026 \$	2025 \$
Revenue			
Grant Income	2	681,387	430,723
Donation		1,156	2,333
Member contribution		460	-
Other Revenue		10,509	4,500
Total revenue		<u>693,512</u>	<u>437,556</u>
Expenses			
Administration expense		(26,304)	(22,702)
Consumer fees		(21,145)	(13,439)
Employee benefits expense		(470,141)	(295,764)
Rent expense		(22,750)	(12,646)
Depreciation expense		(2,217)	(1,145)
Accounting and Audit		(9,725)	(8,180)
Insurance expense		(7,202)	(6,654)
Equipment < \$2000		(2,640)	(6,961)
Marketing and Promotion		(1,803)	(6,900)
Other expenses		(189)	(264)
Finance costs		(240)	(240)
Total expenses		<u>(564,356)</u>	<u>(374,895)</u>
Surplus for the year	9	129,156	62,661
Other comprehensive income for the year		<u>-</u>	<u>-</u>
Total comprehensive income for the year		<u><u>129,156</u></u>	<u><u>62,661</u></u>

Alcohol and Other Drugs Consumer and Community Coalition Incorporated (AODCCC)
Statement of financial position
As at 30 June 2026

	Note	2026 \$	2025 \$
Assets			
Current assets			
Cash and cash equivalents	3	251,999	252,609
Prepayments	4	1,282	5,522
Total current assets		<u>253,281</u>	<u>258,131</u>
Non-current assets			
Property, plant and equipment	5	<u>11,910</u>	<u>12,807</u>
Total non-current assets		<u>11,910</u>	<u>12,807</u>
Total assets		<u>265,191</u>	<u>270,938</u>
Liabilities			
Current liabilities			
Trade and other payables	6	35,174	27,243
Employee benefits	7	33,842	43,474
Revenue received in advance	8	-	133,202
Total current liabilities		<u>69,016</u>	<u>203,919</u>
Total liabilities		<u>69,016</u>	<u>203,919</u>
Net assets		<u>196,175</u>	<u>67,019</u>
Equity			
Retained surpluses	9	<u>196,175</u>	<u>67,019</u>
Total equity		<u>196,175</u>	<u>67,019</u>

2025/26 Management Committee



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 managed 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 - Secretary

Suzanne 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 alcohol and other drug,

homelessness, domestic violence, employment, project management and tendering. Suzanne has a passion for advocating for the rights of consumers within the alcohol and other drug sector to ensure they have every opportunity to lead their own treatment, goals and outcomes. Currently, Suzanne is the General Manager Youth Wellbeing and Accommodation at MercyCare leading teams across mental health tenancy.



John McGrath – Treasurer

John McGrath is a finance professional with extensive accountancy experience. He is a qualified CPA with a strong background in financial management, budgeting and forecasting, cashflow oversight, and financial reporting. He has held senior finance roles with responsibility for improving financial processes, strengthening internal procedures, and providing clear, practical financial insight to support effective decision-making. John is committed to supporting the work of

the Alcohol and Other Drug Consumer & Community Coalition through strong financial stewardship and accountability. He is passionate about ensuring organisations are financially sound and well-governed so they can focus on delivering positive outcomes for consumers, families, and the broader community.



Francis Lee – Committee Member

Francis Lee is a medical director with 14 years of experience in the healthcare sector across Australia. He has devised and implemented key clinical and corporate strategies that have enhanced healthcare service delivery, governance, safety and performance in organisations. His collaborative and resourceful leadership style enables him to cultivate strategic alliances and build sustainable healthcare systems across

sectors. Francis has worked as a clinician and manager in both the public and private sectors, and he has a deep understanding of the challenges that consumers and their families face. He has a strong commitment to providing quality care to people experiencing alcohol and other drug challenges, and he is passionate about advocating for the rights of consumers and their families affected by issues as a result of alcohol and other drugs.



Rachael Dalziell – Committee Member

Rachael holds a Bachelor of Psychology with a minor in Addiction Studies and has 25 years of front-line service delivery and leadership experience across the non-for-profit sector. During this time Rachael has worked across several different areas including welfare family support, justice support, homelessness, youth alcohol and other drugs (AOD) and youth AOD mental health and is currently the Program

Manager for Mission Australia's SHIFT Youth AOD Outreach Service and YouthBeat. Her previous AOD sector experience is across capacity building for comorbidity for AOD youth services, leadership including the implementation of the integrated service DAYS and youth AOD residential services and front-line service delivery.

Rachael has held memberships in various working groups including communities of practice, AOD and Human services Standards accreditation and Reconciliation Action Planning, Clinical Care and Governance Committees and professional development committees. Rachael brings a passion for supporting young people and families, and compassion and integrity to advocating for the needs of vulnerable people impacted by alcohol and other drug use.



Mike Winton - Committee Member

Mike has extensive experience in the alcohol and other drug (AOD) sector within the not-for-profit space. Throughout his career, he has been involved in the development and implementation of highly effective programs supporting a diverse range of people, including Aboriginal and Torres Strait Islander communities, multicultural communities, and LGBTIQ+SB individuals. With a strong focus on stakeholder

relationships and amplifying the voice of consumers, Mike is committed to advocating for access, equity, and the rights of people to receive the support they need.



Matt Ryan – Vice Chairperson (Term ended February 2026)

Matt holds a Bachelor of Arts and Science degree in Behavioural Science and post graduate Certificate in Human Rights. He works for the Mental Health Advocacy Service as an Individual Advocate for people living in psychiatric hostels. Previously, Matt occupied several roles while with the Western Australian Network for Alcohol and Other Drug Agencies (WANADA). He has also spent time working

various roles at therapeutic communities in community and forensic settings. Matt brings his passion about social justice; human rights and the deconstruction of stigma associated with alcohol and other drug use and mental health to his role as Vice Chairperson of the AODCCC. His lived AOD experience drives Matt's advocacy and efforts to represent the needs of AOD consumers and their community. Matt emphatically believes consumers need to be included in all decision-making processes that impact choices, life and wellbeing.



Jahan Hossain – Treasurer (Resigned November 2025)

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.



Dani Ramdhan - Committee Member (Resigned February 2026)

Dani Ramdhan has 14 years of management experience in the public utilities and private sectors, in Perth and the UK. During this time, Dani has been responsible for the successful creation, delivery, and ongoing improvement of a diverse range of customer and community support services. Dani has strong experience in governance, financial acumen,

stakeholder management, project and change management.

With a lived family experience of Alcohol and Other Drug use, Dani is passionate about advocating for the rights and wellbeing of those affected by alcohol and other drugs. Dani holds a Bachelor of Business degree and a Certified Community Director accreditation from the Institute of Community Directors Australia.



Ethan James - Committee Member (Resigned June 2026)

Ethan has extensive experience in not-for-profit, private industry and government sectors. For the past eight years, Ethan has worked in the alcohol and other drug sector in roles including peak body advocacy and treatment service quality, communications, and strategic projects. He is a current member of the WA Alcohol and Other Drug Advisory Board. Ethan has provided operational support for

governance arrangements in multiple organisations and brings with him a strong appreciation of the board's role and responsibilities. Ethan is a strategic thinker, who champions the voice of people, families, and communities as an essential part of developing real and effective solutions.



Affinee Lai - Committee Member (Resigned February 2026)

Affinee Lai brings a unique combination of professional expertise and lived experience to her role on the AODCCC Management Committee. With an MBA in Marketing and over a decade of experience across Australia's leading media companies, marketing consultancies, and creative agencies, she specialises in developing impactful communication strategies, building strategic partnerships, and delivering

ethical and sustainable business solutions across the education, NFP, tourism, and events sectors. Affinee's journey into peer work began with personal challenges that became a foundation for connection, growth, and advocacy. Throughout her journey, Affinee has collaborated extensively with organizations such as COMHWA, AODCCC, Lived Experience Australia, WA Recovery College Alliance, Shelter WA, WA Mental Health Commission, RichMind and Finding North Network. She currently works as a Lived Experience Advisor and Peer Educator, contributing to a wide range of advisory and co-design initiatives within the AOD and Mental Health and Homelessness sectors. A passionate advocate for reducing stigma and systemic inequities, particularly for people and families from culturally and linguistically diverse (CALD) backgrounds, she centres lived experience in every aspect of her work.



2025/26 Staff



Alex Arpino – Executive Manager

Alex Arpino comes with 23 years of frontline alcohol and other drug (AOD) service delivery experience, having held positions from AOD Residential Rehabilitation Worker through to Case Management and Counselling, into Management and Senior Leadership positions. Alex is a qualified Community Services Worker, Youth Worker, Trainer, and Assessor (TAE40116), an experienced Group Facilitator and has worked in Capacity Building, specifically delivering Mental Health First Aid and Suicide Prevention Training. Alex 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.



Vivienne Keeley – Systemic Advocate

Vivienne has over 18 years of WA Alcohol & Other Drug sector experience and holds a degree in Behavioural Science. She has demonstrated skills in front line service delivery and evidenced professional leadership abilities. Vivienne enjoys community capacity building, advocacy and developing collaborative relationships. She is committed to maintaining supportive, empowering, and inclusive environments that ensure high level respectful relationships both individually and with communities. Vivienne believes ALL people who have a lived and or living experience of Alcohol & Other Drugs, and the communities they live in, should have the opportunity, and supports to experience positive health and wellbeing.



Adele James – Systemic Advocate

Adele James has over 20 years' experience in the community services sector, working across not-for-profit, Aboriginal Community Controlled, and government organisations. She has held frontline roles in Primary Health, Child Protection, and Perinatal Mental Wellbeing in urban and remote settings. Adele holds a BA in Sociology and is a qualified Community Mental Health Worker, an experienced peer worker, trainer, and group facilitator. Adele brings a deep understanding of the impacts of alcohol and other drugs through both lived and professional experience. She is passionate about challenging stigma, amplifying underrepresented voices, and advocating whilst supporting individuals, families, workers, and communities to remain resilient. Adele values transformative, empowering and holistic approaches as necessary tools within systemic reform and lasting impact.



Brooke Reeves - Communications and Administration Officer

Brooke has a professional background in hospitality, management and a Bachelor of Science in Health Promotion. She has volunteer experience with WA Country Health Service in the delivery and management of Alcohol and Other Drug research and support services, around the Leavers WA celebrations in the Southwest. Brooke is passionate about a holistic approach to health and empowering people to improve their wellbeing. Her passion is driven by her lived experience combined with an interest in the Alcohol and Other Drug sector from her academic and volunteer background. She aspires to help make a positive difference to people's lives through her work.



Kirsty Turner - Project Officer – AOD Stigma Reduction Toolkit, Systemic Advocate (Funding contract ended June 2026)

Kirsty is a dynamic professional with rich lived experience and a diverse educational and career background. She has spent 21 years working across multiple human centred sectors including research, disability services, human resources and culture. She has a passion for promoting health and equity as a human right and believes in developing alcohol and other drug lived and living experience as a fundamental contributor to service development and delivery. Kirsty holds a Bachelor of Science in Health Promotion, equipping her with a strong foundation in empowering individuals and communities to have a greater sense of control over their own lives. She is passionate about the creation of more inclusive and diverse communities where everyone has an equal opportunity to express themselves as they are and feel a sense of purpose and belonging.



Thank You



**Mental Health
Commission**



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 and living experience of alcohol and other drug use, who have long been advocating in this space, we acknowledge your courage and commitment.

Thank you,

AODCCC



Alcohol and Other Drug
Consumer & Community Coalition

...beyond stigma

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