

Drug and Alcohol Interagency Strategic Framework
for Western Australia 2011-2015

Annual Report 2011/12

Progress report on the implementation of the *Framework*



Government of **Western Australia**
Drug and Alcohol Office

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The Drug and Alcohol Office wishes to acknowledge these agencies contribution to this report.

Data sources:

Data was extracted from databases held at the Drug and Alcohol Office (DAO) in December 2012. Whilst the data is considered to be true and correct at the date of publication, changes in circumstances after the time of publication may impact upon the accuracy of the data. The databases are active databases and therefore the data may change without notice. Changes may relate to a number of issues, including amendments made to the databases and variations in syntax used to perform the individual queries for current and previously reported years. DAO is not in any way liable for the accuracy or repeat reliability of any information printed and/or stored by a user.

This report contains data sourced from; Department of Corrective Services, Department of Racing Gaming and Liquor, and WA Police. The report is not exhaustive and does not interpret information nor in all cases contain qualifiers or contextual information. Although all due care has been exercised in the preparation of this document, no responsibility is accepted for any errors or omissions.

Note:

Minor revisions are occasionally made to publications after release. The online versions available in the DAO website will always include any revisions.

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> Introduction

This Report reviews the progress made during the 2011-2012 financial year against the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015* (the Interagency Strategic Framework). It includes qualitative reporting relating to key *Western Australian Drug and Alcohol Strategic Senior Officers' Group* agency initiatives provided in Part A of the Report and a range of key performance indicators provided in Part B.

The Introduction includes a brief overview of the Interagency Strategic Framework, including its primary goal, and key target groups and drugs of concern. It also outlines the processes used for the Interagency Strategic Framework's implementation, monitoring and review.

The Drug and Alcohol Interagency Strategic Framework 2011-2015

The goal of the Interagency Strategic Framework is to prevent and reduce the adverse impacts of alcohol and other drugs (AOD) in the Western Australian community. It is underpinned by two core elements: first, the primary focus of prevention: preventing drug use and harmful alcohol consumption; preventing drug supply; and preventing harms to individuals, families and communities; and second, providing support to those who need it.

It is aligned with current best practice and has been endorsed by senior representatives from key human and social service State Government departments through the *Western Australian Drug and Alcohol Strategic Senior Officers' Group* (DASSOG). The Interagency Strategic Framework was developed in consultation with key government departments and through public consultation.

The Interagency Strategic Framework is consistent with national strategy and provides a guide for government sector strategy, and the development and implementation of alcohol and other drug policy and services in Western Australia.

The Interagency Strategic Framework highlights priority population groups that experience greater impacts from alcohol and other drug use than others and therefore require additional support. Priority population groups include:

- Aboriginal people and communities.
- Children and young people.
- People with co-occurring alcohol and other drug and mental health problems.
- People in rural and remote areas.
- Families, including alcohol and other drug using parents.
- Offenders.

Some drugs require particular attention as evidence demonstrates that they are associated with more harm and higher use. Based on this, the priority drugs of concern outlined in the Interagency Strategic Framework for focus during the next five years are:

- Alcohol.
- Cannabis.
- Amphetamines and amphetamine type substances.
- Heroin and other opioids.

The Interagency Strategic Framework identified five key strategic areas for intervention. These are:

- **Focusing on prevention** – educating and encouraging individuals, families and communities to develop the knowledge, attitudes and skills to choose healthy lifestyles and promote healthy environments.
- **Intervening before problems become entrenched** – implementing a range of programs and services that identify individuals, families and communities at-risk and intervening before problems become entrenched.
- **Effective law enforcement approaches** – reducing and controlling the availability of alcohol and other drugs and implementing strategies that aim to prevent or break the cycle of offending.
- **Effective treatment and support services** – providing integrated, evidence based treatment and support services that promote positive and healthy lifestyle changes by effectively responding to an individual's use and those affected by someone else's use.
- **Strategic coordination and capacity building** – providing improved and targeted responses to alcohol and other drug related problems through capacity building, workforce development, collaboration, evidence based practice, monitoring and information dissemination.

A complete copy of the Interagency Strategic Framework is available on the Drug and Alcohol Office website: www.dao.wa.gov.au

Implementation, monitoring and review

The Drug and Alcohol Office (DAO) is the State Government agency responsible for alcohol and other drugs strategies and services in Western Australia and is accountable to the Minister for Mental Health. As such, the implementation, monitoring and review of the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015* is the responsibility of the DAO in collaboration with other government agencies through the *Western Australian Drug and Alcohol Strategic Senior Officers' Group (DASSOG)* that consists of senior representatives from the main human and social service State Government departments.

As at November 2012, the membership of DASSOG includes the following departments:

- Department of the Attorney General.
- Department for Child Protection.
- Department for Communities.
- Department of Corrective Services.
- Department of Education.
- Department of Health.
- Department of Housing.
- Department of Indigenous Affairs.
- Department of Local Government (including the Office of Multicultural Interests).
- Department of Racing, Gaming and Liquor.
- Drug and Alcohol Office.
- Mental Health Commission.
- Office of Road Safety.
- Western Australia Police.

Where appropriate, agencies represented on DASSOG develop, implement and report on an annual action plan that more specifically outlines their key activities to support the Interagency Strategic Framework. This 2011-12 Annual Report includes the collation of key agency initiatives and key performance indicators as reported by members of DASSOG. These annual reports are available on the Drug and Alcohol Office website: [Interagency Strategic Framework Annual Reports](#)

Other supporting documents

The *Strong Spirit Strong Mind – Western Australian Aboriginal Alcohol and Other Drugs Framework for Western Australia 2011-2015* complements the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015*. It provides guidance to key stakeholders in delivering culturally secure programs and Aboriginal ways of working in order to strengthen their efforts to manage and reduce alcohol and other drug related harm in Aboriginal communities.

A number of other plans have also been developed for the following priority areas:

- *Alcohol Support Plan 2012-2015.*
- *Illicit Drug Support Plan 2012-2015.*
- *Volatile Substance Use Support Plan 2012-2015.*
- *Capacity Building, Coordination and Monitoring Support Plan 2012-2015.*

The DASSOG agencies that have contributed to the 2011-2012 Report are as follows:

- Department of the Attorney General.
- Department for Child Protection.
- Department for Communities.
- Department of Corrective Services.
- Department of Health.
- Department of Housing
- Department of Local Government.
- Department of Racing, Gaming and Liquor.
- Drug and Alcohol Office.
- Mental Health Commission.
- Office of Road Safety.
- Western Australia Police.

> Part A: Key agency initiatives 2011/12

The first part of the Report provides a summary of some of the key DASSOG agency achievements across the five strategy areas of the Interagency Strategic Framework for 2011/2012. Some initiatives may be applicable to a number of strategic areas, however, where this is the case the activity has been mentioned once only. Initiatives that directly target a priority population group(s) of the Interagency Strategic Framework are denoted by a star symbol (★).

Focusing on prevention

Focusing on prevention – educating and encouraging individuals, families and communities to develop the knowledge, attitudes and skills to choose healthy lifestyles and promote healthy environments.

- A community with better knowledge and skills to prevent alcohol and other drug problems and reduce associated harms.
- Prevention programs that include the building of resilience and protective factors targeted at children and young people.
- A positive culture and supportive environment that is consistent with decreasing illicit drug use and harmful alcohol consumption.

Department for Child Protection

- Participated in the Fetal Alcohol Spectrum Disorder (FASD) Secondary Prevention Implementation Action Group to implement the FASD Model of Care recommendations across the service continuum, focused on prevention. The Tertiary Prevention Implementation Action Group and the Primary Prevention Implementation Action Group are due to commence in late 2012. ★

Department for Communities

- Finalised the study on alcohol and other drug (AOD) use at school leavers' celebrations. The key findings were due to be presented at the 2012 Western Australian Drug and Alcohol Conference on 7 August 2012 by the National Drug Research Institute. ★
- Promoted research on *Point of Sale Alcohol Promotions on Young People*. The key findings were presented by Professor Sandra Jones at the Alcohol Promotions and Young People seminar at the Department for Communities on 5 December 2011 and are available on the Department's website. ★
- Continued to distribute the *Young People and Alcohol: helpful information for parents and carers* publication, including at community events. ★
- The *Fit Mind – Fit Body and Soul* kit was revised and published with approximately 3,500 publications distributed through community events, high schools, the youth sector and health organisations. ★
- *The HIVE* portal continued to be updated during 2011/12. *The Hive* is an online portal to over 700 youth organisations in Western Australia, created by the Department for Communities' Office for Youth. ★
- Provided funding to Investing in Our Youth Inc for the *Be Alcohol Aware Project*. The project helps young people aged 12–17 in the South West region to plan and implement activities to increase alcohol awareness and reduce the incidence of under-age drinking. ★

- Awarded approximately \$83 000 to community organisations through the Youth Activities Grants program for young people to participate in activities that improve their wellbeing. ★
- Provided funding for a Youth Friendly Communities grant program to involve young people in community planning by local government. ★
- Released the Seniors' Wellbeing Indicators that have provided data on seniors' risk level for alcohol consumption by age.
- Funded Ngarliyarndu Bindirri Aboriginal Corporation, through the Social Innovation Grants program, to trial an alternative program for the long-term unemployed and those facing significant barriers to employment. The project is based upon principles of autonomy, flexibility, personal responsibility and ownership, and will provide support and employment to participants in a community 'work crew' to maintain Roebourne community assets and town sites. ★
- Provided five workshops to increase understanding of the impact of Foetal Alcohol Spectrum Disorder (FASD) on families and the services that work with them. The workshops were delivered in regional and metropolitan locations with diverse participants. ★

Department of Corrective Services

- Continued to provide education sessions Syndrome on FASD at Boronia Pre-release Centre for Women, and delivered two courses in 2011-2012. ★
- Provided education on preventing and reducing the transmission of Blood-Borne Viruses (BBV) to young people in detention centres and adult offenders in Western Australian Prisons. ★

Department of Health

Environmental Health Directorate (EHD)

- Worked closely with local governments and the events industry to ensure that harm minimisation strategies are given due consideration in the event planning phase for concerts and festivals, including ensuring free water and adequate food options, as well as low-alcohol and no alcohol options.
- Provided advice to the events industry and took part in interagency discussions focusing on reducing 'pre-loading' of alcohol often seen at events.

Communicable Disease Control Directorate (CDCD)

- In collaboration with other jurisdictions, CDCD developed a comic book resource providing Blood-Borne Virus prevention, testing and treatment information. The resource specifically targets culturally and linguistically diverse youth (CaLD), and was due to be finalised in December 2012. ★

WA Country Health Service (WACHS)

- Conducted promotion of the Alcohol and Pregnancy Campaign. ★
- Increased clients using the needle services in the Great Southern, and significantly increased screening for Blood-Borne Viruses. ★
- Expanded the Needle and Syringe Program (NSP) in the Midwest and negotiated with Sexual Health and Blood-Borne Virus Program (Communicable Disease Control Directorate) to establish the first Needle and Syringe Exchange Program fixed site in Country WA. This has been operating since August 2011. ★

- Implemented the *Port Hedland Boating and Alcohol Harm Reduction Project* to address high risk alcohol consumption during boating activities in Port Hedland through a social marketing campaign targeting boat owners, recreational boat users and passengers. ★
- Held a youth 'pit stop' for young women at the Portbound Youth Expo to engage young women in a range of interactive health checks, including the 'Exhaust test' (smoking), and 'Fuel Additives' (alcohol). ★
- Provided information on smoking and AOD use to parents during the NAIDOC Healthy Babies Competition to celebrate healthy Aboriginal Mums and babies in the Roebourne area. ★
- Developed, in conjunction with the local Drug and Alcohol team, Hedland's Next Top Model, a 10 week program for Aboriginal and non Aboriginal girls aged 12 to 16. The program focused on positive self image and a healthy lifestyle and included discussions regarding harms associated AOD use. ★
- Partnered with WANADA, MWCDS and the Meekatharra community to develop three Podcasts targeting binge drinking. The Podcasts were finalised in February 2012 and posted on YouTube by WANADA. ★
- Reviewed data in the Kimberley that links alcohol and drug issues with local mortality and morbidity rates to provide direction for prevention, intervention and effective treatment. ★
- A series of educational sessions, activities and information stalls were presented in the Goldfields to raise awareness of *Drug Aware* and *Alcohol. Think Again* campaigns. Community events and competitions raising awareness of new AOD prevention campaigns were funded by STRIVE grants and donations from local mining. ★

North Metropolitan Public Health Unit (NMPHU)

- Launched the Community Violence Prevention Strategy (CVPS) for the North Metropolitan Area: *Towards a Future Without Violence*, in partnership with the Injury Control Council of WA (ICCWA). The CVPS strategy was based on consultation with over 100 key stakeholders. Participants identified alcohol as the source of most drug related harm and recommended that patterns of drinking which fuel community violence be among the first components of programs developed to reduce community violence.
- Established the Community Violence Prevention Reference Group, facilitating inter-sectoral collaboration to develop, promote and implement strategies to reduce community violence in the North Metropolitan Area.
- CVPS Implementation plan: Selected Girradoola (Girrawheen, Koondoola, and Balga) network group to be the first working group in the North Metropolitan Area to pilot and implement a holistic interagency and cross-sectoral approach to violence in the community. One focus area of this plan is to address the impact of alcohol.
- Supported two local governments applying for funding to promote alcohol free events and community violence prevention.

South Metropolitan Public Health Unit (SMPHU)

- SMPHU partnered with Armadale Youth Resources (AYR), Drug Arm, City of Armadale, Police and Community Youth Centre (PCYC), and the Canning Division of General Practitioners to implement the Armadale Youth Binge Drinking Project. AYR was the lead agency for this project which was funded by the Department of Health and Ageing. Key objectives of the project were to:
 1. Increase awareness and knowledge of 12-17 year olds living in the City of Armadale on the negative health and social impacts of binge drinking.

2. Limit access to alcohol by under 18 year olds in the City of Armadale Health Service.
 3. Engage youth aged 12-17 years in the City of Armadale in alternative activities, supported by SMPHU with harm minimisation activities and resources. 12,647 youth were involved in 122 organised activities. ★
- Worked with DAO and local community groups to successfully prevent a new take-way liquor outlet from opening. SMPHU facilitated the link between DAO and the community contacts as part of the action to limit youth access to alcohol. ★

Disaster Management Regulation and Planning Directorate (DMRP)

- Endorsed the Fetal Alcohol Spectrum Disorder (FASD) project control group to develop and implement the FASD Model of Care Implementation Plan. ★

Chronic Disease Prevention Directorate (CDPD)

- Addressed harmful use of alcohol in the draft *WA Health Promotion Strategic Framework 2012-2016*, in the context of the prevention of both chronic disease and injury.
- Incorporated alcohol-related educational messages in healthy lifestyle health promotion programs and policy initiatives of the Directorate.
- Purchased the delivery of state-wide injury prevention campaign “Don’t Drink and Drown” through the not-for-profit community sector.

Department of Local Government

- Local Government awarded eight Scholarships for young people living in an area with a low socio-economic area index score and a relatively high Indigenous population. Five scholarships awarded in previous years were acquitted. It is anticipated experience gained during the scholarship will provide incentives for young people to progress to full-time employment and future involvement in local government.
- The Office of Multicultural Interests developed a good practice guide for the public sector to encourage effective engagement of CaLD communities.

Department of Racing, Gaming and Liquor

- Educated existing and potential licensees in a series of seminars about liquor control laws, including managing and supervising licensed premises responsibly in accordance with the *Liquor Control Act 1988* (‘the LC Act’).
- Continued participation in liquor accords and awareness raising about liquor control laws, particularly in relation to the responsible service of alcohol.
- Provided input on the development of educational materials and public health messaging in relation to alcohol harm and liquor control laws.
- A Regional Community Engagement Officer was employed to discuss strategies such as section 175 restrictions that prevent alcohol related harm within communities. The Regional Community Engagement Officer has visited communities within the Kimberley, Pilbara, Great Southern and Goldfields regions to raise awareness of harm minimisation strategies available under the LC Act. ★
- A restricted premises information brochure was produced to support the Regional Community Engagement Officer in raising awareness of the application process. ★
- A new *Course in Management of Licensed Premises* was accredited and is currently offered by registered training organisations. The new course is more comprehensive than the previous mandatory training required for managers of licensed premises and includes a knowledge based assessment.

Drug and Alcohol Office

- Developed and implemented Drug Aware campaigns for Amphetamines, Drug Driving, Ecstasy; the first Cannabis Campaign to target users to quit; and the Night Venues and Entertainment Events Campaign.
- Implemented three phases of the *Alcohol. Think Again* Campaign, including a new phase of the Alcohol and Cancer campaign and the development of a new Alcohol and Pregnancy campaign. ★
- Successfully sought COAG funding to expand the *Strong Spirit Strong Mind: Metro* and *Strong Spirit Strong Future: Healthy Women and Pregnancies* projects, including comprehensive media campaigns. ★
- Continued the development of strategies to protect young people from alcohol exposure, including detailed planning for a comprehensive three-year parent and youth community engagement strategy. ★
- Monitored liquor license applications and provided assistance to the Executive Director, Public Health (EDPH) in matters regarding alcohol-related harm and ill-health. Between 1 July 2011 and 30 June 2012, of the 285 liquor license applications received, 178 (62.4%) were considered to possibly pose a risk of harm and warranted investigation. During this period, 44 interventions were lodged by the EDPH.
- Implemented the Night Venues and Entertainment Events observational assessments in regional areas including the Kimberley, Pilbara, Midwest and Southwest. ★
- Worked with three regional volatile substance use working groups located in the Goldfields and East Pilbara and East Kimberley to implement local volatile substance use strategies. ★
- Produced two new DVD training resources demonstrating culturally secure approaches when working with Aboriginal clients and their families as part of the learner resources for the planned CHC41702 Certificate IV in Aboriginal Alcohol and Other Drug Worker training. ★
- Launched and disseminated a CD-ROM about AOD issues for Migrant and Refugee workers and Community Leaders in partnership with Women's Health and Family Services.
- Finalised the DAO Healthway Community Alcohol Grant partnership. A total of \$473,888 was granted to 25 initiatives from across the State over the three years of the partnership.

Mental Health Commission

- The Commission supported increased focus on mental health promotion, prevention, social inclusion and stigma reduction. Dynamic partnerships were established in 2011/12 targeting at risk communities:
 1. Country Arts WA Sandtracks - this project is delivered in the Ngaanyatjarra Lands and delivers music workshops in traditional language and English to encourage self-expression and connections to heritage, family and Aboriginal community. This program targets young at-risk men aged 18 to 26 years, as well as school children aged 7 to 17 years.
 2. Disability in the Arts, Disadvantage in the Arts Australia (DADAA) - the Esperance Emergence Project is a jointly funded initiative with the Department of Culture and the Arts designed to develop the creative skills of people with a disability or mental illness and substance use issues. It will have a day activity and respite impact, and improve social inclusion and access to innovative self-advocacy communication tools. ★

3. Community Arts Network WA (CAN WA) created a mental health category in the Catalyst Community Arts Fund called Explore. The project aims to raise awareness of mental health and social inclusion of people with mental illness, and to provide opportunities for the communities to work together to build resilience and promote wellbeing by expressing their culture and identity through creativity.
4. ActiveSmart is a successful behaviour change program aimed at increasing physical activity levels and improving community connectedness and in 2011/12 the Mental Health Commission provided investment to enable the Department of Sport and Recreation to tailor the program for individuals who have been diagnosed with a mental illness and are living in supported community accommodation.

Office of Road Safety

- Developed and implemented a campaign highlighting the risks of drink driving and the relevant laws as part of the Road Safety Council's community education program. The campaign utilised a range of media including television advertising, to target 17-39 year olds who are at risk of being killed or seriously injured in a drink driving related crash. The campaign ran for 8 weeks from 28 November 2010 to late January 2011.
- Developed and implemented a campaign highlighting the risks of drug driving and the relevant laws with the aim of raising awareness of the dangers of driving while under the influence of drugs, modify driver behaviour (to ensure greater compliance with traffic laws) and reduce drug-related road trauma. The state-wide Campaign featured a range of strategies and initiatives and targeted young people aged 17- to 29-years, who are at risk of drug driving and who occasionally or regularly drug drive. It also targeted members of the general community who may be at risk of impaired driving through both illicit and/or prescription/over the counter drug use.
- The Office of Road Safety on behalf of the Road Safety Council continued its partnership with Goolari Media to promote Indigenous road safety, specifically drink driving, through the development of Indigenous specific television and radio advertising through the PAKAM network (Kimberley and Pilbara outlets). ★
- The Remote Area Alcohol Interlock Demonstration Project commenced in Roebourne. The Ngarliyarndu Bindiri Aboriginal Corporation (NBAC) in Roebourne was contracted to coordinate the project on behalf of the Office of Road Safety and Draeger were contracted to provide the technical solutions and support. Interlocks were installed in a small number of the NBAC corporation vehicles and a number of participants recruited for commencement in early 2012/13. ★

Intervening before problems become entrenched

Intervening before problems become entrenched – implementing a range of programs and services that identify individuals, families and communities at-risk and intervening before problems become entrenched.

- Early assessment and brief intervention measures to reduce problems resulting from AOD use.
- Early intervention treatment opportunities for young offenders with AOD related problems.
- Consumer, community and stakeholder knowledge and awareness of the AOD treatment and support services available in Western Australia.

Department of the Attorney General

- Continued operation and support of the Perth Children’s Court Drug Court incorporating the Youth Supervised Treatment Intervention Regime (YSTIR) program. ★
- Continued to promote the Pre-sentence Opportunity Program (POP) Diversion Program as an early intervention for offenders within the Magistrates Court of Western Australia who consider their use of illicit substances to be problematic. ★

Department for Child Protection

- The DCP and DAO co-presented the *Alcohol and Other Drugs and Motivational Interviewing* program to DCP and community sector staff. The course aimed to provide staff with skills in assessing and working with families where there are significant AOD issues. The two day program was presented twice in the first half of 2012, with a further two programs due in the second half of 2012. The training received positive feedback with staff finding the manual, provided to all participants as part of the training package, to be a useful resource to inform practice. ★

Department for Communities

- The Women’s Information Service continued to refer and direct enquiries relating to drug and alcohol problems to a number of appropriate crisis, counselling and information lines. These referrals are made according to geographical location, associated problems raised with the clients and the client group, for example, parents making enquiries about their children’s use of drugs and alcohol.
- The Women’s Information Service Directory includes information about where women can get advice about alcohol, drugs and gambling issues. During 2011-2012 copies of the Service Directory and the Women’s Information Service Pocket Directory were disseminated.
- The Department’s Parenting WA Courses Guide continued to provide details of 26 drug and alcohol related courses provided by agencies in the Greater Metropolitan area. ★
- The Parenting WA Community Services database was maintained to provide the details of 72 Western Australian services concerned with drug and alcohol abuse that are available to all members of the community. ★
- The Department participated in the whole-of-government approach to the implementation of the WA Health Department’s Model of Care. This process is concentrating on the future delivery of services at a primary, secondary and tertiary level, and it was expected to be completed by the end of 2012.

Department of Corrective Services

- A range of education, health promotion and treatment and support services from specialist community agencies were provided to young people in detention centres. ★
- More than 3000 prisoners state-wide participated in psycho-social groups addressing alcohol and drug issues provided by Health Services Co Morbidity workers. ★
- The National Cannabis Prevention and Information Centre (NCPIC) helpline at Boronia Pre-release Centre for Women continued to offer advice, support and prevention information to women in custody about their own, or a family member's cannabis use. ★
- Adult offenders in custody experiencing problems relating to alcohol and drug use problems continued to have access to the Alcohol and Drug Information Service (ADIS) helpline. ★

Department of Health

WA Country Health Services (WACHS)

- Reviewed and updated the Geraldton Health Campus Accident and Emergency and General Wards referral form for clients identified with alcohol or drug dependency in partnership with the Midwest Community Drug Service. ★
- Incorporated the Brief Intervention (BI) screening into chronic obstructive pulmonary disease care pathway plans.
- Promoted online BI training to staff through newsletters, staff meetings and staff inductions in the Great Southern region. ★
- Smoke Free Coordinator on Regional Tobacco Control Network meetings provided regional updates on behalf of Great Southern Health Services. ★
- Implementation of the Tobacco and Alcohol BI in the Pilbara continued with plans underway to increase its profile and evaluate current effectiveness. ★
- Population Health continued to be the key liaison in regards to the Smoke Free WA Health System Policy and provided advice as requested.
- Continued implementation of the WACHS Alcohol and Tobacco Brief Intervention Policy in inpatient facilities and commenced BI project with adult clients presenting to population health services in the Wheatbelt region. ★
- WACHS Alcohol and Tobacco BI Policy is being implemented in the Goldfields. ★

Disaster Management Regulation and Planning Directorate (DMRP)

- Launched the Indigenous Drink Driving and Licensing Education Resource Kit, funded by the RTTA, aimed at reducing the incidence of drink driving and unlicensed driving among Indigenous Western Australians. ★

Department of Housing

- Continued to fund the Supported Housing Assistance Program (SHAP), a state-wide early intervention strategy to assist tenants struggling to maintain their tenancy.

Department of Local Government

- Contributed to the Strong Families Program through the meetings of the Monitoring Group and liaison with the Peel Regional Management Group.
- The Office of Multicultural Interests continued to promote implementation of the *Western Australian Language Services Policy 2008* to government agencies ensuring relevant information and support is provided in ways that are accessible to members of the West

Australian community who are not able to communicate through spoken or written English.

- The Office of Multicultural Interests completed a literature review providing insights into some of the issues facing people from CaLD backgrounds in relation to drugs and alcohol and highlighted the features of effective prevention programs.

Department of Racing, Gaming and Liquor

- Provided input on initiatives to minimise the harm or ill health caused due to the use of liquor, through DASSOG.
- Continued assistance for communities by implementation of restricted area regulations, prohibiting importation, possession and the consumption of liquor within those communities. Restricted areas included Oombulgurri, Bayulu, Irrungadji, Jigalong, Juwurlinji, Kunawarritji, Kundat Djaru, Koongie Park, Looma, Nicholson Camp, Noonkanbah, Pandanus Park, Punmu, Wangkatjunka and Yakanarra as at 30 June 2012. A further three restricted area regulations were under consideration for the communities of Bidyadanga, Warralong and Cheeditha. ★
- Owner/occupiers of private premises were assisted in having their premises declared restricted, to prevent the possession and consumption of liquor at their properties. As at 30 June 2012, the department had received 57 restricted premises applications and 44 of these were approved. The restricted premises were located in the towns of Carnarvon, Broome, South Hedland, Wyndham, Kununurra, Newman, Geraldton, Wickham, Karratha, Meekatharra and Esperance. ★
- The Regional Community Engagement program was implemented, whereby the Regional Community Engagement Officer provided numerous communities within the Kimberley, Pilbara, Great Southern and Goldfields regions with advice on harm reduction and liquor control laws, particularly in relation to section 175 restricted areas and restricted premises. ★

Drug and Alcohol Office

- Call rates to the Alcohol Drug and Information Service (ADIS) increased and recorded their highest levels ever. ADIS call numbers for 2011/12 were 23,632 representing a 10.9% increase over the 2010/11 year. As a component of this increase, contacts with Aboriginal people increased by approximately 55% in the 2011/12 year. ★
- Drug and Alcohol Youth Services established three new group programs, one of which is led by an Aboriginal youth mentor. ★
- Continued to provide the treatment component of the Early Intervention Pilot Program and supported WA Police to further develop and expand the program. ★
- Produced and disseminated CaLD resources promoting the ADIS and PDIS services to these population groups. In 2011/12 more than 1,000 of these resources were distributed to health, welfare and AOD services.
- Conducted workforce development training for Department for Child Protection workers. ★
- Provided increased access to services via the growth of the 'LIVECHAT' (real time counselling support via Drug Aware) service. Inbound emails increased by 195% over the previous year.
- Established additional AOD management plans and groups in Collie, Manjimup and Kununurra/Wyndham as well as maintained existing plans in the Kimberley, Pilbara, Great Southern and Midwest regions. ★

- Partnered with the Western Australian Substance Users Association to implement a peer education program to respond to both amphetamine and opioid overdose.
- Produced a needle and syringe program (NSP) e-learning package in collaboration with the WA Department of Health's Communicable Disease Control Directorate, Sexual Health and Blood Borne Virus Program.

Mental Health Commission

- In line with recommendations from the report of the Commissioner for Children and Young People's Inquiry into the mental health and wellbeing of children and young people in WA, the Mental Health Commission commenced planning a comprehensive mental health service for 16 to 24 year olds, including those with co-occurring AOD problems. This plan addresses the full range of supports and services required by young people and their families, including evidence-based interventions and individualised support to assist young people to re-engage with the community through work, study and developing social connections. ★
- Funding was allocated to the Department of Health to support the development of a comprehensive assessment and brief intervention service for young people aged 16 to 24 years with complex presentations or high risk psychosis and to enable mental health services in rural and remote regions that appropriately respond to the needs of young people. ★
- Recurrent funding of \$1.6 million was allocated for the expansion of mental health emergency response services for children, to enable 24 hour phone support, as well as in-reach into community and hospital emergency departments for emergency assessment and crisis intervention. Improved access to mental health services for young people in rural and remote areas were also supported with an additional \$1.6 million going to the WA Country Health Service. ★
- Through the National Partnership Agreement: Supporting National Mental Health Reform, \$13.5 million of additional funding will be directed to the Assertive Community Intervention Initiative which will expand community intervention services to children and their families who are experiencing a mental health crisis. ★
- The Commission commenced working with the Commonwealth Government to develop Early Psychosis Youth Services in WA to broaden and intensify access for young people and their families to appropriate quality services in metropolitan Perth. ★

Office of Road Safety

- Identified a range of key performance indicators for road safety that will allow the Road Safety Council to measure the success or otherwise of its priority result areas. Final outcome (number of people killed and seriously injured), intermediate outcome (changes in system risk due to enforcement and education efforts) and activity indicators were developed to gauge the success of initiatives designed to reduce the amount of trauma for drivers impaired by alcohol and other drugs.
- Received approval to draft a Repeat Drink Drivers Bill for presentation to Parliament in 2012/13. The Bill seeks legislative changes to the *Road Traffic Act 1974* to require repeat drink drivers to install alcohol interlock devices in their vehicles for a minimum period of six months at relicence and to undergo alcohol assessment and treatment programs where necessary.
- Continued monitoring of Western Australia's drug driving laws, which included provision for drivers convicted of driving while impaired by a drug to be sentenced to mandatory alcohol assessment.

WA Police

- Continued support of the Early Intervention Pilot Program (EIPP) with 540 young people offered counselling over the two years of the program. The WA EIPP will now continue until June 2013 after the Commonwealth approved an extension to the program. ★
- An independent evaluation of the WA EIPP was completed and WAPOL is now considering the six recommendations from the report. ★
- During the period WAPOL applied for alcohol restrictions across the Pilbara, Kalgoorlie and surrounding areas. ★
- Part 3 of the *Liquor Control Amendment Act 2011* relating to Liquor Restricted Premises was proclaimed on 8 October 2011. This introduced provisions enabling an owner or occupier of a residential or non-residential premise to apply to the Director of Liquor Licensing to have their premises declared a Restricted Premise for a specific period. This prohibits a person from bringing liquor into, consuming or possessing liquor on a declared restricted premise. ★
- Fifty two applications for Liquor Restricted Premises in WA have been approved with the majority being in the north-west of the State. The feedback from those granted is that the restrictions have been excellent and have had an enormous effect on life in the home. ★
- Collaborated with the Department of Racing, Gaming and Liquor to have a number of sports arenas prescribed under the Liquor Control Amendment Regulations 2012. These amendments, making it illegal to take alcohol into these sports arenas, came into effect from the 5 September 2012.

Effective law enforcement approaches

Effective law enforcement approaches – reducing and controlling the availability of alcohol and other drugs and implementing strategies that aim to prevent or break the cycle of offending.

- Responsible service and supply of alcohol to reduce harm and antisocial behaviour.
- Disruption and reduction of the supply of illicit drugs and the diversion of pharmaceuticals.
- Appropriate legal responses to decrease the impact of alcohol and other drug related crime.
- Safeguarding and protection of children and young people from the suppliers of illicit drugs.
- Treatment and support opportunities for offenders at appropriate stages of the criminal justice system to address their alcohol and other drug use.

Department for Child Protection

- Utilised new provisions made available through the *Liquor Control Act 1988* that enabled several families to apply for Liquor Restricted Premises applications to have their homes declared alcohol free. ★
- Improved the capacity of child protection workers to assist families by development of case practice guidance, including a resource providing detailed guidance for staff in supporting families to apply to have their homes declared liquor restricted. ★
- Practice guidance was developed for staff where the Department considers it necessary to submit an application under the Liquor Control Act, in circumstances where there are concerns for the safety and wellbeing of children due to excessive use of alcohol in the home. One Liquor Restricted Premises Declaration was applied for and granted to the Department on this basis. ★

Department of Corrective Services

- The Drug Detection Unit (DDU) modified operations due to diversion of prohibited Schedule 8 and 9 medications into, and within the prison environment. A DDU dog was trained specifically to detect S8 and S9 medications. ★
- Continued targeted and random urine drug testing of offenders, in custody and the community, to detect illicit drug and alcohol use. ★

Department of Health

Environmental Health Directorate (EHD)

- Coordinated with local government to ensure parallel import alcohol products are labelled in accordance with the Australia New Zealand Food Standards Code. Local governments were encouraged to take enforcement action where non-compliance is detected.
- Prepared a Food Unit Notice concerning the labelling of imported alcoholic beverages.
- Supported warnings about the risks of consuming alcohol while pregnant. ★
- Supported recommendations contained in the Labelling Logic, Review of Food Labelling Law and Policy concerning alcohol labelling.
- Investigated the labelling of alcohol shots due to concerns products were being marketed to children. ★

WA Country Health Services (WACHS)

- Partnered with the DOH Tobacco Control Branch in the implementation and evaluation of the 2011 Tobacco Retailer Compliance Survey in the Bunbury area.
- Contributed data and technical advice to DAO on 18 liquor licence applications in the South West area. ★
- Contributed data and technical advice to Local Government on 3 planning applications for new liquor outlets in the South West area. ★
- Population Health Coordinator (AOD) provided feedback on all new liquor licence applications in Great Southern region on behalf of Great Southern Health Services. ★
- Population Health attended and chaired Alcohol Management Meetings and developed an Alcohol Management Plan for Hedland. This plan is based on the Karratha plan which is also attended by Population Health. ★
- Population Health provided evidence and statistics to support DAO submission to regulate liquor licence applications in the Pilbara. Recently, this included comment on liquor license applications for Onslow and new sites in Karratha. ★
- Pilbara Population Health participated in the East Pilbara Volatile Substance Use working group responsible for developing the 'East Pilbara Volatile Substance Use Strategic Plan' in response to ongoing reported incidents of volatile substance use throughout the Western Desert Region. ★
- Provided feedback, local information and data to DAO regarding liquor licensing matters, for interventions in Wandering and York. ★
- Provided support in relation to developing Alcohol Accords in Wheatbelt Towns. ★
- Provided an annual report of activities and statistical data by the MWCDS to DAO.
- Population Health Goldfields was involved in local liquor accords and provided open support to proposed restrictions in the Kalgoorlie Boulder area. ★

Disaster Management Regulation and Planning Directorate (DMRP)

- Designed and commenced implementation of an audit tool of scheduled medicines across all State Public Hospitals.
- Made use of Project Stop to identify and act on diversion of pseudoephedrine.
- Provided rapid regulatory response to, and controls on, synthetic cannabinoids and other emerging threats from research chemicals.
- Collaborated with other agencies in the foundation of the Emerging Psychoactive Substances Review group.

Executive Director of Public Health

- In accordance with the *Liquor Control Act 1988*, the Executive Director of Public Health continued to intervene on matters before the liquor licensing authority (in particular, applications for a liquor license) where there is a high potential for, or existence of, harm or ill-health to people due to the use of liquor. Applications that posed significant negative public health impacts were opposed or conditions on the licenses were sought.

Department of Racing, Gaming and Liquor

- Continued the collaborative approach with WA Police on addressing alcohol related harm and anti-social behaviour due to the use of liquor.

- Amended the LC Act to make it an offence for a person, without the consent of the licensee, to take liquor into a licensed sports arena. Work commenced on prescribing the major metropolitan sporting venues as sports arenas for the purposes of the LC Act.
- Amended the LC Act to increase the penalty applicable when a licensee, employee or agent of a licensee sells liquor to a person when they should have reasonably suspected that the purchaser of the liquor intended to illegally resell the liquor (sly grogging).
- Imposed section 64 restrictions on all licenses in Kununurra and Wyndham. This followed consultation with all key stakeholders, including the WA Police and Executive Director Public Health. The conditions include restrictions on the hours that takeaway packaged liquor can be sold, restrictions on the quantity of takeaway liquor that can be sold according to ethanol volume, a requirement to collect sales data and the prohibition of takeaway liquor sales on Sundays. In April 2012, in response to stakeholder feedback, the hours in which takeaway liquor can be purchased were amended from 5-8pm to 2-8pm and the sales data requirement was expanded to include the requirement that information be provided for the sale of cleanskin wines. ★
- Responded to the WA Police request of the Director of Liquor Licensing to consider liquor restrictions for the towns of Dampier, Karratha, Onslow, Pannawonica, Paraburdoo, Point Samson, Roebourne, Tom Price, Whim Creek and Wickham (the West Pilbara region) based a report highlighting significant levels of alcohol related harm occurring in the West Pilbara region. ★
- Imposed restrictive conditions on licenses within the West Pilbara region after consideration of the report and in consultation with stakeholders. Licensees were given until 22 June 2012 to lodge submissions as to why these conditions should not be imposed. Submissions are being considered by the Director. ★
- Implemented a risk based/intelligence led compliance program in collaboration with WA Police.

Drug and Alcohol Office

- Diversion Programs participation increased for the 11th consecutive year.
- The focus on consolidating and strengthening existing court drug diversion programs continued through 2011/2012. Supported by strong partnerships with the Department of the Attorney General and Courts, DAO:
 1. Progressed the evaluation of the court based Pre-sentence Opportunity Program, Supervised Treatment Intervention Scheme and the Indigenous Diversion Program.
 2. Convened an advisory group of Aboriginal and non-Aboriginal stakeholders to inform the development and implementation of strategies to increase Aboriginal participation in WADP programs.
 3. Provided on site support to court based Diversion Officers in both metropolitan and regional locations.
 4. Provided advice to government in relation to expanding the WA Diversion Program to include offenders with alcohol related problems. ★
- Supported implementation of the Cannabis Intervention Requirement Scheme which came into effect from 1 August 2011, following the repeal of the *Cannabis Control Act 2003*. Over the year, continued to support WA Police, the Booking Service, Cannabis Intervention Session (CIS) providers and the community to increase the number of Cannabis Intervention Requirement (CIR) referrals and CIS attendance.

- Provided operational support, including resource development and state-wide training events, to Community Services Sector Organisations contracted to provide CIS, including a range of Aboriginal specific service providers. ★
- Developed and distributed resources targeting the Aboriginal community as part of the CIR Scheme initiative. ★

Mental Health Commission

- Progressed work to develop a detailed plan and secure \$6.7 million funding over two years to implement a Mental Health Court Diversion and Support Program in the Perth Magistrates Court and the Perth Children's Court. This is a joint pilot program by the Commission and the Department of the Attorney General. This service will put mental health expertise into the criminal courts to provide a means of diverting offenders with a mental illness into mental health treatment and support. The pilot program will run for twenty months and will provide opportunities for people with mental illness charged with criminal offences to access community mental health services, to improve their mental health and address their offending. It is expected that both the Children's Court and the Perth Magistrates Court programs will become operational in 2013. ★

Office of Road Safety

- Implemented new penalties for drink and drug driving offences in Western Australia. The changes affected monetary fines and disqualifications for first, second and subsequent drink driving and drug driving offences, with higher penalties applying to repeat offenders.
- The amended laws require some groups of drivers to drive with a zero Blood Alcohol Content (BAC), including:
 1. Drivers of:
 - i. heavy vehicles with a Gross Combined Mass exceeding 22.5 tonne.
 - ii. passenger vehicles (eg buses) equipped to seat more than 12 adults including the driver, while carrying passengers.
 - iii. omnibuses, while carrying passengers for reward or hire.
 - iv. taxis, while carry passengers for reward or hire.
 - v. vehicles carrying dangerous goods.
 2. Holders of extraordinary licences.
 3. Recently disqualified drivers.
- Novice drivers continue to be required to drive with a zero BAC and exemptions apply to prescribed emergency service employees and volunteers, when responding to an emergency incident. ★
- As part of the Budget process for 2012/13, the Office of Road Safety in collaboration with WA Police developed a business case for reducing road trauma arising from crashes driven by those impaired by drugs and/or alcohol. The Business Case sought additional funding from the Road Trauma Trust Account for enhanced breath and drug testing capacity within WA Police, in line with best practice evidence. An additional \$4.9 million was allocated to WA Police in the 2012/13 Budget to enhance drink and drug operations, with a further \$3.5 million allocated to upgrade Police vehicles with state of the art technology to detect offenders, including repeat and unlicensed drivers.

WA Police

- Continued specialist liquor enforcement operations resulted in disciplinary actions being taken against four licensees by the WA Liquor Commission.

- Intervened in 386 liquor license applications to seek conditions on the license such as reduced hours, drink-limits and increased security. These conditions are sought to minimise alcohol-related harms.
- Provided full support to Operation Unite in December 2011. This national action demonstrated the resolve of all Police Commissioners to reduce alcohol-related violence and crime.
- The Director, Liquor Licensing (DLL), issued 26 Prohibition Orders in response to applications by WA Police. These Orders are issued against persons who represent a risk to patrons frequenting licensed premises and the person may be prohibited from entering and/or working in licensed premises for up to 5 years.
- In 2011-12, WA Police issued 232 Barring Notices. The *Liquor Control Act* enables the Commissioner of Police to issue Barring Notices that prohibit a person from entering licensed premises for up to 12 months. Barring Notices can be issued where a person has been violent, disorderly, engaged in indecent behaviour or contravened any written law within licensed premises.
- Cannabis Law Reform: On 1 August 2011 the *Cannabis Control Act 2003* was repealed and a new conditional cautioning system for minor cannabis offenders came into effect under the *Misuse of Drugs Act 1981*. The main changes from the previous Cannabis Infringement Notice (CIN) scheme to the new Cannabis Intervention Requirement (CIR) scheme are: a lower limit for cannabis possession from 30 grams to 10 grams; cannabis cultivation offences are not eligible; cannabis offenders no longer have the option to pay a fine to expiate their offences; and young persons (aged 14-17) are eligible for a CIR under the new scheme. CIR recipients are required to attend a 1.5 hour Cannabis Intervention Session (CIS) with a trained drug counsellor or elect action by a court. ★
- To the 30 June 2012, WA Police had issued 1,310 CIRs.
- WA Police seized the following quantities of illicit drugs: cannabis 324,111 grams, amphetamines 19,013 grams, ecstasy 1,744 grams, cocaine 190 grams and opiates 1,357 grams. The reduction in social costs to the community, associated with the seizure of this quantity of illicit drugs, has been estimated at \$154 million.¹
- The *Misuse of Drugs Amendment Bill 2011* was passed and assented to in November 2011. Key aspects that come into effect on 24 March 2012 include:

Changes to the way in which courts sentence a person convicted of:

1. Selling or supplying prohibited drugs and/or plants to a child.
2. Manufacturing or cultivating prohibited drugs or plants in circumstances which endanger the life, health or safety of a child under the age of 16 years, or
3. Manufacturing or cultivating prohibited drugs or plants, or possessing Category 1 or 2 items (precursors), in circumstances which caused bodily harm to a child under the age of 16 years. ★

These changes in sentencing for a) and b) include the defined penalties of:

1. Suspended imprisonment.
2. Conditional suspended imprisonment; or
3. A term of imprisonment.

¹ Estimates derived using "Working Estimates of the Social Costs per Gram and per User for Cannabis, Cocaine, Opiates and Amphetamines", Drug Policy Modelling Program, Monograph 14, UNSW, 2007. Please note: lower estimate \$41 mill, upper estimate \$166 mill.

The changes in sentencing for c) [and for subsequent offences under a) and b)] include a mandatory term of imprisonment of 12 months and 6 months respectively.

- WA Police operations targeting drugs, petrol and solvents along WA/SA/NT borders continued in the Kimberley, Pilbara and Goldfield-Esperance Districts. Ongoing funding from the Families, Housing, Community Services (FAHCSIA) and Indigenous Affairs National Office is utilised to provide extra effort to target drug and solvent dealers and users in these remote areas. ★
- Increased operational presence through targeted vehicle stops at border locations has had significant results in seizing illicit drugs and apprehending drug dealers. Community events and sporting carnivals attract interstate visitors who have been identified through intelligence sources as conveying illicit drugs and alcohol.
- WA Police are progressing new drink driving legislation to come into effect 1 August 2012. The new legislation will give police officers the power to immediately disqualify a driver's licence for two months if they blow 0.08 or over.
- MDPV (methylenedioxypropylvalerone), an alkaloid designer drug of the phenethylamine class, was banned in Western Australia from 11 February 2012 when it was added to Schedule 9 of the *WA Poisons Act 1964*.
- MDPV had been a controlled substance in Australia since 2010 and from 1 May 2012 will be banned Australia-wide by the Therapeutic Goods Administration.
- Continued to monitor the emergence of new synthetic substances in Western Australia and look at ways of streamlining how these substances are dealt with under the existing legislation, recognising that a national response to the issue of emerging drugs is the most effective approach.
- WA Police participated actively in the Emerging Psychoactive Substances Review Group.

Effective treatment and support services

Effective treatment and support services – providing integrated, evidence based treatment and support services that promote positive and healthy lifestyle changes by effectively responding to an individual's use and those affected by someone else's use.

- A comprehensive range of alcohol and other drug treatment and support services to facilitate access and ensure continuity of care.
- Integrated and coordinated services through effective partnerships and collaboration between the alcohol and other drug sector and key stakeholders.
- Evidence based treatment that supports services to better meet the needs of clients and improve client outcomes.
- Family inclusive alcohol and other drug treatment and support services for individuals and families affected by someone else's alcohol and other drug use.

Department for the Attorney General

- Ongoing and continued support for the delivery of the WA Diversion Program (Young Persons Opportunity Program, Pre-sentence Opportunity Program, Youth Supervised Treatment Intervention Regime, Supervised Treatment Intervention Regime, Indigenous Diversion Program) throughout the Magistrates Court of Western Australia. ★
- Ongoing and continued support for the Perth Drug Court and the Perth Children's Court Drug Court in providing access to intensive treatment regimes for offenders whose use of illicit substances has become problematic. ★
- Continued to work collaboratively with DAO in consolidating the operations of the WA Diversion Program.
- Assisted DAO with the provision of data in relation to the evaluation of the WA Diversion Program.

Department for Child Protection

- Reviewed and updated casework practice guidance on urinalysis (UA) in December 2011, to improve how urinalysis informs assessment of drug and alcohol misuse by parents. A new Donor Card was developed that simplifies the UA process for child protection workers and business support teams as well as clients. ★
- In 2011, the Department provided all relative and general foster carers with a fact sheet on FASD. The fact sheet provides information regarding the cause and effects of the disorder and aims to provide useful tips for managing and caring for children who experience FASD. ★
- On two occasions in the second half of 2011, the Department's Fostering Services presented Foster Carer Development Workshops on FASD. The workshops provided participants with information about the effects of alcohol on the foetus, managing the behavioural challenges of these children, and prevention and intervention strategies for parents and carers. Participants of both workshops indicated they were satisfied with the content and delivery of the workshop. ★

Department of Corrective Services

- Addiction offending programs for individuals assessed as high-risk of reoffending were provided to more than 745 offenders in custody and the community. ★

- The prison pharmacotherapy program provided substitution therapy for 300 prisoners assessed as dependent on illicit drugs and/or alcohol. ★
- The Drug and Alcohol Throughcare Service (DATS) continued to provide support and counselling to offender's (pre and post release) experiencing drug and alcohol issues. DATS is contracted at all metropolitan prisons by external agencies to reduce drug use upon release into the community. ★
- Brief group interventions addressing drug use and harms were delivered to prisoners at all prisons by Health Services. More than 3000 prisoners accessed these groups. ★
- An Indigenous intensive criminogenic program, Ngurrakutu (Going Home) was developed using culturally specific audio and visual content.
- Access to the Perth Drug Court for adults and young offenders continued to be provided through the Court Assessment and Treatment Service (CATS) in conjunction with specialist drug agencies. ★
- Offenders in custody experiencing drug and alcohol issues received free, confidential access to the Alcohol and Drug Information Service (ADIS) helpline. ★

Department of Health

Communicable Disease Control Directorate (CDCD)

- Established new needle and syringe exchange programs in Fremantle, Mandurah and Geraldton. ★

WA Country Health Services (WACHS)

- Piloted Leavers Surveillance in the 2011 South West Leavers Zone medical area. Surveillance prompted an evaluation report pertaining to alcohol use in the area to inform public health strategies around South West Leavers planning. ★
- Supported the development of co-morbidity interventions across services (i.e. mental health/AOD) and provided co-morbidity guideline training and promotion to other agencies as part of the Great Southern Alcohol Management Plan. ★
- Three Youth Mental Health first aid courses, covering AOD issues, were conducted by Great Southern Mental Health Service Rural Community Support Service. ★
- Continued review and improvement of the working relationship between AOD agencies and the Central West Mental Health Service, consisting of weekly combined intake and review meetings, joint case management of clients and annual training programs. ★
- Recruitment of an Aboriginal AOD Worker facilitated Population Health's provision of AOD counselling to individuals and families, and AOD education to schools, community groups and industry over a six month period. The Aboriginal AOD Program was promoted to local and remote communities in the Goldfields, including Kalgoorlie, Coolgardie, Menzies, Leonora and Laverton. Scheduled visits were conducted monthly to provide outreach to remote communities. Referrals for counselling were received from Prospect Lodge, Kalgoorlie Regional Hospital and the public. ★

Drug and Alcohol Office

- Finalised the procurement of new treatment and support services funded through the *Royalties for Regions, Northwest Alcohol and Other Drug Support Program*, worth \$15 million over four years in the Kimberley and Pilbara regions. ★
- Agreed on the location, secured the land, and appointed the project manager and architect for the establishment of the *Royalties for Regions-funded Carnarvon Dual Purpose Centre*. ★

- Provided an additional \$4.36million to all eligible not-for-profit community service contracts in the AOD sector as part of the 15 per cent price adjustment by the State Government to support a sustainable not-for-profit sector.
- Established the Transitional Housing and Support Program for people transitioning back into the community following their residential treatment. Under the program, 15 new homes will be established across the state and 13 of these houses were secured by 30 June 2012 (in Broome, Kalgoorlie, Geraldton and the Metropolitan area). ★
- Further developed and expanded integrated treatment services in the metropolitan area. In particular the South East Metro Community Drug Service commenced operation as a fully integrated service from a new site in Thornlie.
- Provided 21,190 episodes of care (excluding sobering up centres), with 77% completed as planned (or client still engaged in treatment).
- Occupancy at Next Step Inpatient Withdrawal Services remained high with 583 admissions in 2011/2012. 78 per cent of clients completed treatment as planned.
- The Next Step (metropolitan outpatient services) Hepatitis C clinic for clients continued to run successfully with over 100 referrals received. As an outcome of the clinic, a total of 36 clients progressed on to treatment with 15 confirmed successful treatments. A further eight clients are still awaiting confirmation results.
- The Chapter of Addiction Medicine site accreditation visit to Next Step in November 2011 was successful with Next Step accredited to provide Addiction Medicine training for a further five years.
- Twenty five new Community Pharmacotherapy prescribers were trained during the 2011-2012 financial year and 38 prescribers were reauthorised.
- Produced and disseminated a *Brief Guide to the Assessment and Treatment of Alcohol Dependence.*

Mental Health Commission

- As part of the *WA Implementation Plan for Closing the Gap in Indigenous Health Outcomes*, the State Government in 2010/11 committed a total of \$22.47 million over four years to establish a Statewide Specialist Aboriginal Mental Health Service (SSAMHS), to provide specialist clinical interventions to Aboriginal people with severe and persistent mental illnesses across WA. The SSAMHS model is a highly innovative arrangement which delivers whole-of-life mental health care. SSAMHS is focused on delivering improved access to mental health services for Aboriginal people and a career structure that will encourage recruitment and retention of Aboriginal staff. When SSAMHS is fully established it will have a full complement of 83 FTE, 61.5 of which are new positions funded through this initiative. At the end of June 2012, 80% of metropolitan and 90% of country positions were filled, with the delivery of services to the community well underway. ★
- Funding was provided by the MHC in 2011/12 to support the establishment of a specialist intervention centre for the children of women participating in the Saranna Residential AOD Treatment Program. ★
- Holyoake received funding from the Commission in 2011/12 to enable the introduction of the Drumbeat therapeutic intervention program into three Western Australian prisons. The program will target Aboriginal prisoners as a means to address mental health issues associated with drug and alcohol related problems. ★

- Provided additional grant funding to enable Teen Challenge to deal with a growing number of participants needing support with complex issues. Grace Academy in Esperance is a program run by Teen Challenge that provides residential based support for young people with drug and alcohol and/or mental health related problems. ★

Strategic coordination and capacity building

Strategic coordination and capacity building – providing improved and targeted responses to alcohol and other drug related problems through capacity building, workforce development, collaboration, evidence based practice, monitoring and information dissemination.

- Appropriately aligned and coordinated local, regional state and national action across government, non-government and related sectors.
- Workforce planning and development initiatives that build the capacity and sustainability of the alcohol and other drug sector and other key stakeholders.
- Innovative and evidence based responses to alcohol and other drug issues through data collection, monitoring, evaluation and research.
- Capacity building of the workforce to better respond to the needs of Aboriginal people and communities.

Department of the Attorney General

- Continued delivery of Aboriginal Justice Program Open Days throughout Western Australia where services are brought to Aboriginal Communities in remote settings in a culturally appropriate way. ★
- Worked collaboratively with other diversionary streams where Drug and Alcohol programs may be utilised in terms of holistic treatment interventions.

Department for Child Protection

- Online Drug and Alcohol training was made available to all staff through the Department's online training site. The online course provides an understanding of the issues associated with problematic alcohol and drug use. Completion of the online course is a prerequisite to the *Alcohol and Other Drugs* and *Motivational Interviewing* training, the Diploma of Child, Youth and Family Intervention and the *Working with People with Complex Needs* program. ★

Department for Communities

- The Department's youth development officers in the Great Southern and South West regions were involved in a range of across-agency AOD initiatives, including providing information on funding opportunities and resources for schools and the community, participation in the Great Southern Alcohol Management Planning Committee and the Great Southern Drug Action Week Committee. ★
- A resource kit has been developed for internal service delivery to increase staff knowledge of Fetal Alcohol Spectrum Disorder and assist provision of parenting information and support within the community. ★

Department of Corrective Services

- Reviewed and extended the MOU between DCS and DAO to provide drug and alcohol training to DCS staff until June 2013. The number of operational DCS staff undertaking the two day training was 117 in 2011/12. ★

- The MOU between DAO (Alcohol and Drug Information Service (ADIS)) and DCS (Adult Custodial) was reviewed and extended for a further two years until June 2014. ★
- Strengthened the collaborative partnership between DCS and Path West Laboratory Medicine for offender drug analysis. ★

Department of Health

Environmental Health Directorate (EHD)

- EHD Officers assessed more than 40 events or festivals with local government, in order to address public health and safety issues, including identifying and addressing areas where AOD use and effects can be minimised.
- EHD held a biannual forum with Environmental Health Officers from local governments involved in approval and monitoring of public events. The forums address issues of concern, consider health and safety in future events, and identify innovations occurring in the industry to assess the impact on public health and safety.

Communicable Disease Control Directorate (CDCD)

- Continued to conduct surveillance of hepatitis C and HIV infections, including monitoring the contribution of injecting drug use as the means of transmission of these chronic blood-borne viral infections.
- Continued to monitor the distribution of needles and syringes to injecting drug users by the range of available services, including Department of Health premises, community pharmacies, fixed-site vending machines and non-government peer-support agencies.
- Delivered a two-day training course for needle and syringe program coordinators.
- Launched an e-learning package for needle and syringe program providers, including regional hospitals, pharmacies and needle exchanges.
- Funded DAO to support the development and delivery of an Aboriginal Blood-Borne Virus (BBV) Prevention Capacity Building Project. ★
- *NSP News*, continued to be used as an information dissemination tool. (see http://www.public.health.wa.gov.au/2/102/2/needle_and_syringe_program.pm)

WA Country Health Services (WACHS)

- Developed the Manjimup Alcohol Management Plan (AMP) in partnership with Shire of Manjimup, DAO, St John of God Community Drug Service Team and WACHS. ★
- Appointed a 0.5 FTE Manjimup Alcohol Project Officer and a 0.5 FTE Collie Alcohol Project Officer. ★
- Facilitated FARE funding of \$15,000 each to support Manjimup AMP project and Collie AMP project. ★
- Developed the Collie Alcohol Management Plan in partnership with Shire of Collie, DAO, St John of God Community Drug Service Team and WACHS. ★
- Evaluated the Bunbury Alcohol Accord in partnership with police, City of Bunbury WACHS and licensees. ★
- Facilitated and resourced the Margaret River Alcohol Forum. ★
- Population Health Coordinator (AOD) represented Great Southern Population Health at the Great Southern Alcohol Management Group interagency meetings and supported the development/implementation of Great Southern Alcohol Management Plans. ★
- Population Health Coordinator (AOD) collaborated with the regional RoadWise Officer to develop strategies addressing road injuries due to alcohol. ★

- The Population Health Coordinator (AOD) represented Great Southern Health Services on the state Fetal Alcohol Spectrum Disorder Model of Care implementation forum. ★
- Pilbara Population Health continued to develop partnerships with local industry involved in AOD issues. ★
- Pilbara Population Health chaired the Hedland Alcohol Management Committee, attended the similar meeting in Karratha and the Hedland Liquor Accord meeting. Population Health staff attended the East Pilbara Volatile Substance Use working group and was involved in the development of the Hedland equivalent. ★
- Conducted professional development on alcohol guidelines, working with Wheatbelt region local government and sporting groups for Health Promotion Officers in conjunction with DAO Workforce Development staff. ★
- MWCDS attended the Midwest Human Service regional managers group and was the lead agency for the Regional Alcohol Management Plan. This is a key document for the management group as all Human Service agencies within the Midwest have identified AOD as having a major impact on their client group. ★
- Began a major review of the Regional Alcohol Management Plan with Departments of Child Protection, Police, Housing and Education, forming a subgroup that will review and report back to the HSRMG recommendations and future strategies for implementation. ★
- Partysafe successfully delivered the Annual Drug Action Week and Leavers drug and alcohol campaigns in partnership with MWCDS, School Drug Education and Road Aware Project, local police and community agencies. ★
- Population Health initiated discussion with Community Drug Service Team, Drug Alcohol Office and other key stakeholders in relation to development of Goldfields region strategic plan to reduce harm associated with Alcohol & Other Drugs. ★
- Meetings and planning workshops with key agencies in the Goldfields region to discuss development of a regional strategic plan to reduce harm associated with AOD. The development of a strategic plan would assist collaboration, and implementation of evidence based actions to reduce alcohol and drug related harm. ★

North Metropolitan Public Health Unit (NMPHU)

- Community Safety and Crime Prevention Profiles including crime statistics, long-term trends, demographic information and alcohol related crimes were distributed to all 17 local governments in the north metropolitan area. Local governments will consider Community profiles to assist in development of health and wellbeing plans.
- Social Inclusion Mirrabooka network: Implemented chronic disease prevention activities. Activities focus on promoting healthy eating, physical activity, and alerting to the risks of alcohol consumption and tobacco smoking.
- Completed formative research on the perceptions and practices of alcohol consumption of newly arrived refugees through focus groups.
- City of Wanneroo Health & Wellbeing: Completed the health & wellbeing survey to residents of the City of Wanneroo. Identified tobacco smoking and alcohol as priority areas for action.

South Metropolitan Public Health Unit (SMPHU)

- Pilot tested 'Planning to reduce harm from alcohol consumption: A guide for local government' with several departments from a local government organisation.

Department of Housing

- Provided 100 dwellings, at various locations across the state, for National Partnership Agreement Housing Support Workers (Drug and Alcohol), under the National Partnership Agreement on Homelessness.

Department of Local Government

- Committed \$1.17 million from the Country Local Government Fund to support the scoping and costing of municipal services in Aboriginal communities across the Pilbara, Kimberley, Gascoyne, Murchison and Goldfields regions to gain a better understanding of the significant gaps in service and infrastructure standards for Aboriginal communities.
- The Department continued to assist local governments with the implementation of the Integrated Planning and Reporting framework, including asset management, long term financial planning and strategic planning. A major initiative for the year was the introduction of workforce planning as the fourth key area within the framework.
- Developed the Workforce Planning Toolkit in consultation with the Human Resources and Change Management Working Group. This toolkit will form the basis for workforce planning training workshops to be provided across the State in 2012-2013.
- The Office of Multicultural Interests developed an on-line cultural competency training package, DiverseWA, for WA public sector agencies and staff to build the cultural competency of the public sector workforce and help ensure that programs are appropriate to the diverse needs of Western Australians.

Department of Racing, Gaming and Liquor

- Continued to develop and implement strategies aimed at assisting remote communities in minimising harm caused due to the use of liquor. Strategies include section 64 inquiries, the implementation and extension of section 175 restricted area regulations for communities seeking assistance to address alcohol related matters, and restricted premises declarations for home owners/occupiers seeking assistance within their homes. ★
- Collaborated with WA Police, the Department's licensing staff and the Regional Community Engagement Officer to assess and determine all restricted premises applications. ★
- Employed a Regional Community Engagement Officer.
- Implemented the Regional Community Engagement program with the aim of providing communities with advice on matters relating to harm reduction and liquor control laws. ★

Drug and Alcohol Office

- Finalised the *Strong Spirit Strong Mind – Aboriginal Drug and Alcohol Framework for Western Australia 2011-2015* and distributed the Framework throughout the AOD sector. The Framework provides guidance to key stakeholders in delivering culturally secure programs and Aboriginal ways of working. ★
- Coordinated the Drug and Alcohol Strategic Senior Officers' Group (DASSOG) and finalised the Alcohol, Illicit Drug, Volatile Substance Use, and Capacity Building, Coordination and Monitoring Support Plans.
- Coordinated the Western Australian Collaboration for Substance Use and Mental Health in conjunction with the Mental Health Commission. ★
- Coordinated the Standing Committee on Alcohol (national committee).
- Convened the Emerging Psychoactive Substances Review Group to enhance the monitoring of the emergence of new psychoactive substances.

- Completed data collection for the Western Australian component of the 2011 Australian School Student Alcohol and Drug survey. ★
- Established formal agreements with state government agencies for access to relevant data to monitor AOD indicators.
- Conducted a review of the Cannabis Intervention Requirement scheme of the *Cannabis Law Reform Act 2010*. ★
- In partnership with the Western Australian Networks of Alcohol and other Drug Agencies held the Western Australian Aboriginal Alcohol and other Drug Workers Forum for 120 participants from across Western Australia. ★
- Completed the 2012 DAO Reconciliation Action Plan. ★
- Conducted 158 workforce development training events with 2,678 participants, including workers from Department for Child Protection, Department of Corrective Services, Mental Health and WA Police.
- Conducted the Aboriginal Alcohol and other Drug Worker Training Program, CHC30108 Certificate III in Community Services Work and will commence implementation of the new CHC40412 Certificate IV in Alcohol and Other Drugs in 2012/13. Twelve participants graduated in February 2012 with nine participants receiving their Certificate III qualification and three participants finalising competency requirements, and five workers from the Aboriginal Alcohol and Drug Service graduated in May 2012. ★
- Organised the *Western Australian Drug and Alcohol Conference Making it Happen: Improving Services through Collaboration*.
- Supported WANADA to develop the *Culturally Secure Accreditation Framework (CSAF)*, the first culturally secure accreditation standard for the AOD sector in Australia. The CSAF was registered by JAS-ANZ during the year.
- Provided additional resources to WANADA to continue the leadership and management program to expand the capacity of people working in the AOD sector.
- Established the Leaders' Forum to guide the strategic development of Integrated Services in the metropolitan area. This forum is made up of the CEOs of the partner not-for-profit providers and the DAO Executive Director.
- Provided training for undergraduate courses and linked to student placements within DAO's Next Step Drug and Alcohol Services.

Mental Health Commission

- Contributed funds along with DAO for a research project into the Mental Health Needs of Reception Prisoners with the aim of determining the nature and extent of mental health and AOD use problems within this population and examine their clinical and social needs. The study, commenced in 2010 by the University of Western Australia, will produce high quality data that will help in the planning of services in prisons and the community for people with mental disorder who offend. Data collection will be finalised towards the end of 2012 and a final report produced by June 2013. ★
- Partnered with the Drug and Alcohol Office to fund the delivery of accredited training to GPs to enhance their capacity to support people with both mental health and substance use problems. Implementation of this training in 2013 will be led by the Mental Health Program Coordinator at Primary Care WA. This position is funded by MHC to support the establishment of linkages between services and enhance access to State and Commonwealth funded programs.

- Continued the ongoing partnership with the Drug and Alcohol Office during 2011/12 to drive and support the WA Collaboration for Substance Use and Mental Health (WACSUMH). This group brings together government, non-government and community partners across the mental health, drug and alcohol, health and primary care sectors to progress initiatives towards creating an accessible, integrated and comprehensive service response for people who experience both substance use and mental health problems. This year WACSUMH has supported the development of an accredited comorbidity training program for General Practitioners and other primary health care professionals; supported the Drug and Alcohol Office's workforce development branch in the development and delivery of a comorbidity 'train-the-trainer' program; and continued to drive work on integrated pathways, prevention, promotion and early intervention to support people with a mental health problem and/or mental illness and drug and alcohol problems. ★
- The People with Exceptionally Complex Needs (PECN) program is a multi-agency initiative that supports adults with co-occurring mental illness, acquired brain injury, intellectual disability and/or significant substance use problems. During the year, the capacity of the program was doubled to cater for 18 individuals. Additionally, the Young People with Exceptionally Complex Needs project was established in early 2012 to coordinate services for young people with exceptionally complex, co-occurring needs. A coordinator for the program was appointed in March 2012, with funding and leadership being provided jointly by the Commission, Department for Child Protection and Disability Services Commission. The first three young people to participate in the program were selected in April 2012. Nine young people will be supported at any given time through the program. ★
- To improve housing outcomes for people with mental health problems who are facing tenancy eviction through the Disruptive Behaviour Management Strategy, the Commission and the Department of Housing developed a Memorandum of Understanding (MOU) which strengthens relationships and information sharing between the two agencies.
- Provided \$20,000 to the Department of Housing for their key front line staff to undertake two-day Mental Health First Aid Training. This training has assisted staff to improve their knowledge and understanding of the signs and symptoms of mental health problems and/or mental illness.

Office of Road Safety

- Released the indigenous drink driving and licensing (IDDL) resource in November 2011. Since that date, over 350 kits have been distributed to a broad range of community and government organisations who are working with Aboriginal people to obtain their drivers' licences and provide drink driving education. ★

WA Police

- WA Police continued the Intervention Enhancement Project in regional districts of WA. This project involves the specialist Liquor Enforcement Unit providing training, auditing of licensed premises, specialist legal support on interventions and prosecutions as well as general advice on targeting problematic venues. The project audited the following number of licensed premises in 2011-12: Kimberley (22), Pilbara (20), Goldfields (26), Mid-West Gascoyne (18), Wheatbelt (19), South West (20) and Great Southern (14). This project will lead to a more coordinated, uniform approach to liquor operations and intelligence gathering across the State. ★
- The Multi Function Police Facilities (MFPFs) Stage One and Stage Two implementation was completed with the official opening of the Looma MFPF in May 2012. The MFPFs

form a significant part of the Western Australian Government's response to the findings of the *Gordon Inquiry into Family Violence and Child Abuse in Remote Aboriginal Communities*. MFPPs are a partnership between WA Police, DCP and DotAG. There are now 12 MFPPs in regional and remote W.A. ★

- Police officers at MFPPs target alcohol, drug and substance use that significantly contributes to offending and anti-social behaviour. Coordinated operations are often conducted within regional Western Australia districts and the neighbouring States of South Australia and Northern Territory in an effort to prevent the distribution of drugs, petrol and sly grogging. ★
- WA Police continued to provide support to the Drug Use Monitoring in Australia (DUMA) project by chairing the state advisory group and providing researchers with access to police detainees. WAPOL recently supported a submission to extend the DUMA project to a regional centre. ★
- WA Police continued to participate in Project STOP, whereby pharmacy sales of all pseudoephedrine (PSE) based medicines are reported in real time. The data collected from Project STOP is now being used to actively target all levels of supply in relation to the diversion of PSE to illicit amphetamine-type substance manufacture.
- Investigations into PSE shoppers resulted in manufacturing charges being laid under the Misuse of Drugs Act (MDA).
- The WA Police Chemical Diversion Desk (CDD) commenced working with community, business and Government stakeholders in an effort to reduce the impact of Clandestine Laboratories on the community. Seminars and training is provided to raise awareness in relation to community safety, chemical waste issues and structural damage caused by chemicals within private and government rental accommodation.
- WA Police collaborated with the Department of Health to provide a single point of contact for Local Government and health providers during attendance at Clandestine Laboratories. The single point contact ensures all interested parties are aware of the issues at the site and ensure hazardous waste and affected persons are monitored.
- Programs for at-risk youth and Prolific and Priority Offenders (PPOs) underwent restructuring with the formation of the new Youth Policing Division. A new police role of Youth Liaison Officer was created to engage with PPOs and provide referrals to appropriate support agencies. New funding arrangements also mean that PCYCs will employ managers thereby releasing police officers from those administrative duties. ★
- WA Police contributed towards a national research project on Patron Offending and Intoxication in Night Time Entertainment Districts (POINTED) that has been funded by the National Drug Law Enforcement Research Fund (NDLERF). WA Police contributed to the project reference group and by negotiating with licensees for access to their premises as sites for fieldwork and data collection. The project is due to report to NDLERF later in 2012.

> Part B: Key performance indicators

To measure progress on the implementation of the *Drug and Alcohol Interagency Strategic Framework 2011-2015*, DASSOG is responsible for reporting against key performance indicators on an annual basis. The following performance indicators provide the latest available data on the use of illicit drugs and alcohol in Western Australia; the harm associated with AOD use including hospitalisations; and information on the disruption and reduction of the supply of illicit drugs. Information is also provided on law enforcement strategies including: drug driving and drink driving offences. Diversion program data is also included.

Table 1: Percentage of the Western Australian population aged 12 to 15 years reporting use of illicit drugs and alcohol in the past month

Substance	2008	2011
Alcohol	33.4%	21.7%
Cannabis	6.5%	5.8%
Inhalants	6.7%	6.0%
Hallucinogens	1.2%	0.8%
Amphetamines	2.0%	1.1%
Steroids	1.5%	0.9%
Heroin & other opiates	1.0%	1.9%
Cocaine	1.0%	0.4%
Ecstasy	1.9%	0.6%
Any illicit	7.3%	7.0%

Note:

- Information is based on the Australian School Student Alcohol and Drug (ASSAD) survey that is conducted every three years.
- Reported use of all substances is for non-medical purposes (i.e. not prescribed by a doctor).

Results from the 2011 ASSAD survey show that alcohol remains the most commonly reported substance used by the population aged 12 to 15 years. In 2011 the number of 12 to 15 year old Western Australian students who drank in the last month decreased by 11.7% from 33.4% in 2008. With the exception of heroin and other opiates, a decrease can be seen for use of all other drugs in Western Australia.

Table 2: Percentage of the Western Australian population aged 14 years and over reporting use of illicit drugs and alcohol at harmful levels

Substance		2010	
		WA	Aust
Alcohol	prevalence	83.0%	80.5%
	lifetime risk of harm [^]	22.7%	20.1%
	single occasion risk of harm [~]	43.3%	39.8%
Cannabis		13.4%	10.3%
Ecstasy		3.7%	3.0%
Meth/amphetamines		3.4%	2.1%
Cocaine		2.2%	2.1%
Hallucinogens		1.9%	1.4%
Inhalants		0.4%	0.6%
Heroin		0.3%	0.2%
Ketamine		0.1%	0.2%
GHB		0.1%	0.1%
Steroids		0.2%	0.1%
Methadone or buprenorphine		0.1%	0.2%
Other opiates/opioids		0.5%	0.4%
Any illicit*		15.4%	12.0%

† 2009 NHMRC guidelines: harmful relates to a person's risk of experiencing an adverse health outcome. Lifetime and single occasion risk of harm is defined as the probability of the person developing that outcome in a specific time period: short (eg a few hours after drinking), or long (eg after five years or over a lifetime).

[^] The lifetime risk of harm from drinking alcohol increases with the amount consumed. For healthy men and women, drinking no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury (NHMRC guidelines, 2009).

[~]A single occasion of drinking is a sequence of consuming drinks without the blood alcohol concentration reaching zero in between. This can be at home or at an event, but includes drinking spread across more than one context or venue. On a single occasion of drinking, the risk of alcohol-related injury increases with the amount consumed. For healthy men and women, drinking no more than four standard drinks on a single occasion reduces the risk of alcohol-related injury arising from that occasion (NHMRC guidelines, 2009).

* excludes pharmaceuticals

Note:

- Source: Australian Institute of Health and Welfare 2011. 2010 National Drug Strategy Household Survey (NDSHS) report. Drug statistics series no. 25. Cat. no. PHE 145. Canberra: AIHW. The full report is available on the DAO website: www.dao.health.wa.gov.au
- Reported use of all substances is for non-medical purposes (i.e. not prescribed by a doctor).

In 2010, 43.3% of the Western Australian population aged 14 years and over reported use of alcohol on a single occasion at a risk of alcohol-related harm, compared to 39.8% reported nationally. The use of cannabis, ecstasy and meth/amphetamines by the Western Australian population aged 14 years and over was also higher than that reported nationally (13.4%, 3.7%, 3.4% and 10.3%, 3.0% and 2.1% respectively). In 2010, 2.2% of the Western Australian population aged 14 years and over reported use of cocaine. This is a significant increase from 2007 where the NDSHS indicated 1.8% of the Western Australian population aged 14 years and over had used cocaine in the last 12 months.

Table 3: Average per capita alcohol consumption (litres) in Western Australia

Year	WA*	Aust*
2005/06	10.79	9.84
2006/07	10.62	10.40
2007/08	12.23	10.32
2008/09	11.21	10.08

* estimated per capita pure alcohol consumption (litres)

- Source: Loxley W, Chikritzhs T. N. & Pascal R. (2011). National alcohol sales data project: Stage 2, Final report. Perth: Drug and Alcohol Office, Western Australia National Drug Research Institute, Curtin University.

In 2008/09 Western Australians on average consumed more alcohol per capita than national average consumption. During 2008/09 alcohol consumption decreased by 8.3% in Western Australia from 2007/08. In comparison, there was a 2.3% decrease in alcohol consumption per capita nationally.

Table 4: Number and weight of illicit drug seizures by drug type

Drug type	2009/2010		2010/2011		2011/12	
	n	kg	n	kg	n	kg
Amphetamines	1,740	46,160.40	1,468	23,764.90	2,034	21,235.61
Cannabis	6,946	481,588.23	5,995	480,616.61	5,994	325,582.88
Cocaine	72	1,931.27	52	1,253.07	48	193.7
Hallucinogens	85	8,984.77	44	366.80	65	10,412.32
Opioid	122	582.06	111	1,008.08	143	1,359.57
Other (identified)^	12	64,616.97	11	11,423.20	7	1,372.09
Other (unidentified)	702	21,651.06	638	16,309.50	867	23,083.31
Pharmaceuticals	249	4,169.50	175	470.25	210	886.59
Pre-cursor chemicals	6	244.00	4	49.50	7	675.44
Steroids	30	*	43	872.05	69	236.23

^ *Khat*

*Data on the weight of previous seizures is unavailable so not comparable to 2010/11.

- Source: Business Intelligence Office, WA Police, 2011

In 2011/12 there were 9,444 illicit drug seizure incidents in Western Australia, a 10.6% increase on the figure reported in 2010/2011. In 2011/12 cannabis represented approximately 64% of illicit drug seizure incidents, followed by amphetamine at 22%. There was a 29% increase in the

number of opioid seizures in 2011/12 compared to 2010/11 and steroid seizures continued to rise (43 in 2010/11 compared to 69 in 2011/12).

Table 5: Number of Cannabis Infringement Notices issued in Western Australia 2011/12

	2010/11	2011/12
Number of CINs issued	1912	*
Number of Cannabis Education Session participants	39	*
Number of CIRs issued [^]	n/a	1263
Number of Cannabis Intervention Session participants [^]	n/a	746

- Source: Business Intelligence Office, WA Police, 2012
- [^] Includes juvenile data
- * Cannabis Infringement Notices ceased to be issued from 1st August 2011 to be replaced by The Cannabis Intervention Requirement scheme under the *Cannabis Law Reform Act 2011*

Note:

- Statistics are based on the date the Offender was processed by Police

Cannabis Infringement Notices ceased to be issued from 1st August 2011 to be replaced by The Cannabis Intervention Requirement scheme under the *Cannabis Law Reform Act 2011*.

1,263 Cannabis Intervention Requirements were issued by WA Police in the 2011/2012 financial Year. Of the 1,263 Cannabis Intervention Requirements issued, 746 people opted to participate in a Cannabis Intervention Session (59%).

Table 6: Number of juvenile offenders with identified drug use diverted away from the criminal justice system either by police or the court system 2011/12.

	2010/11	2011/12
Number of juvenile offenders with identified drug use diverted away from the criminal justice system either by police or the court system to WA Diversion Programs	491	405
YPOP participants [^]	480	387
YSTIR participants [^]	11	18
Number of CIRs issued ^{**}	n/a	203
Number of Cannabis Intervention Session participants ^{**}	n/a	132
Number of juvenile offenders with identified drug use referred into the Perth Children's Court Drug Court [*]	86	81

Note:

- Source: Drug and Alcohol Office, 2012
- *Source: Department of the Attorney General, 2012
- [^] Refers to programs accessed by participants
- ^{**}Source: Business Intelligence Office, WA Police, 2012

405 juvenile offenders with identified drug use were diverted away from the criminal justice system either by police or the court system to WA Diversion Programs. 387 juvenile offenders participated in the Young Offenders Opportunity Program (YPOP), and 18 juvenile offenders participated in the Young Person's Supervised Treatment Intervention Regime (YSTIR).

In addition, 81 juvenile offenders with identified drug use were referred into the Perth Children's Court Drug Court.

Table 7: Number of adult offenders with identified drug use diverted into treatment through court diversion programs in 2011/12.

	2010/11	2011/12
Number of adult offenders with identified drug use diverted into treatment through WA Diversion Programs	1555	1218
Pre-sentence Opportunity Program participants^	1362	985
Indigenous Diversion Program participants^	115	127
Supervised Treatment Intervention Regime participants^	78	106
Number of adults referred to a Drug Court Program*	254	403
Number of adults referred to a Drug Court Program who participated in a Drug Court Program*	72	97

Note:

- Source: Drug and Alcohol Office, 2012
- *Source: Department of the Attorney General, 2012
- ^ Refers to programs accessed by participants

1218 adult offenders with identified drug use were diverted into treatment through WA Diversion Programs. 985 participated in the Pre-sentence Opportunity Program, 127 participated in the Indigenous Diversion Program; and 106 participated in the Supervised Treatment Intervention Regime.

Implementation of the WA Cannabis Intervention Requirement from August 1st 2011 has likely reduced the potential pool of Pre-sentence Opportunity Program (POP) participants

In addition, 403 people were referred to a Drug Court Program, of which 24% participated in a Drug Court Program

Table 8: Number of adult offenders with alcohol and other drug issues attending programs in prison

	2010/11		2011/12	
Male	562	(89.1%)	486	(72.4%)
Females	69	(10.9%)	185	(27.6%)
Persons	631	(100%)	671	(100%)
Indigenous	231	(36.6%)	212	(31.6%)

- Source: Department of Corrective Services, 2012

In 2011/12, 671 prisoners participated in an Addiction Offending program to address alcohol and drug problems (486 male and 185 female). This is an increase of 6.4% from the

previous financial year and the number of female offenders attending programs also increased significantly. Of the total number of adult offenders with alcohol and other drug issues attending programs in prison, 31.6% (212) were Aboriginal.

Table 9: Number of *Liquor Control Act* Infringement Notices issued in Western Australia by the WA Police and DRGL Inspectors in 2011/12.

	2010/11	2011/12
No. of infringements	13,201	11,158

- Source: Department of Racing, Gaming and Liquor, WA Police
- Statistics are provisional and subject to revision

11,158 *Liquor Control Act* Infringement Notices were issued in 2011/12 in Western Australia by the WA police and DRGL Inspectors.

Table 10: Number of drink driving offences in 2011/12.

	2010/11	2011/12
No. of preliminary breath tests	767,186	892,718
No. of drivers exceeded 0.05	20,145	17,996
% of drivers who exceeded 0.05	2.6%	2.0%

- Source: Business Intelligence Office, WA Police
- Statistics extracted from TEACEIS on 10th August 2012
- Statistics are provisional and subject to revision
- BAC refers to BAC limit for each licence class (i.e. 0.02 for Probationary drivers)

In 2011/12, the number of preliminary breath tests carried out in Western Australia was 892,718. The number of these preliminary breath tests that exceeded 0.05 was 2.0%, a decline of 0.6% from the previous year.

Table 11: Number of drug driving offences in 2011/12.

	2010/11	2011/12
No. of drug driving charges	506	483

- Source: Business Intelligence Office, WA Police
- Statistics extracted from TEACEIS on 10th August 2012
- Statistics are provisional and subject to revision

In 2011/12, there were 483 drug driving offences, a reduction of 4.5% from the previous financial year.

Table 12: Number of alcohol and drug treatment episodes* (including inpatient and outpatient in government and non-government agencies funded by DAO), and the percentage of treatment episodes completed as planned (or the client is still in treatment), in 2010/11.

	2009/10	2010/11	2011/12
Open and opened episodes	21,214	20,802	21,190
Still engaged in treatment	6,181	6,359	5,622
Completed as planned	76%	79%	77%

* excludes Sobering Up Centres

Note:

- Source: Drug and Alcohol Office, Annual Reports.

In 2011/12 there were 21,190 open and opened episodes, which was a 1.9% increase compared with 2010/11. In 2011/12 there was an 11.6% decrease in the number still engaged in treatment, and a 2% decrease in the proportion of treatments completed as planned as compared to 2010/11

Table 13: Number and rate of hospitalisations related to alcohol in Western Australia in 2009/10.

Alcohol related	2009/10	2010/11
Hospitalisations	15,302	30,367
Age-Standardised Rate (per 1,000 person-years)	6.7	6.4

Note:

- Source: Epidemiology Branch, Department of Health, WA.
- Data extracted using Western Australian-specific fractions.
- Hospitalisations refer to cases discharged from hospital in the given period of time. Hospitalisations are completed episodes from admission to discharge. These data do not include presentations to Accident and Emergency Departments.
- Hospital data exclude non-acute cases and unqualified newborns and contracted services.
- The ASR (Age-Standardised Rate) is derived to allow comparison between populations with different age structures. This is necessary because rates of diseases vary with age, often increasing as age increases. The age structure of each population is converted to the same 'standard' structure. The disease rates that would have occurred with that structure are calculated and compared.
- ASRs are standardised with the Australian 2001 population.

In 2010/11 there were 30,367 hospitalisations related to alcohol in Western Australia almost double that of the previous year.

Table 14: Number and rate of hospitalisations related to other drugs in Western Australia in 2009/10.

Other drug related	2009/10	2010/11
Hospitalisations	5,459	3,770
Age-Standardised Rate (per 1,000 person)	2.4	0.8

Note:

- Source: Epidemiology Branch, Department of Health, WA.
- Hospitalisations refer to cases discharged from hospital in the given period of time. Hospitalisations are completed episodes from admission to discharge. These data do not include presentations to Accident and Emergency Departments.
- Hospital data exclude non-acute cases and unqualified newborns and contracted services.
- The ASR (Age-Standardised Rate) is derived to allow comparison between populations with different age structures. This is necessary because rates of diseases vary with age, often increasing as age increased. The age structure of each population is converted to the same 'standard' structure. The disease rate that would have occurred with that structure in different populations are calculated and compared.
- ASRs are standardized with the Australian 2001 population.
- Other drugs' refers to opioids, sedatives and barbiturates, benzodiazepines, anti-depressants, psychostimulants, hallucinogens and cannabis, volatile substances, steroids, analgesics and anti-rheumatics and a variety of combined or unspecified drug

In 2010/11 there were 3,770 hospitalisations related to drugs in Western Australia, more than a third less than that of the previous year.

> Conclusion

This report on progress made during the 2011/2012 Financial Year on the *Drug and Alcohol Interagency Strategic Framework for Western Australia 2011-2015* outlines key activities undertaken by agencies represented on DASSOG to address problems related to alcohol and other drug use in Western Australia. This report also includes reporting against outcome based key performance indicators for 2011/12. Annual Reports will be provided for the Interagency Strategic Framework's duration and trend data provided over time.

