



**Reducing Alcohol and Other Drug harm post COVID-19**  
**Alcohol and Drug Foundation**  
**Pre-Budget Submission**  
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## Executive summary

The COVID-19 pandemic has placed extraordinary stress on Australian communities, deepening a crisis left after the summer bushfires in some parts of Australia. Mental health problems are on the rise with increased stress, anxiety, depression and loneliness, presentations for intentional self-harm are more frequent and Australians are drinking more alcohol, more frequently or increasing their drug use in response to the unprecedented situation.

Prior to the pandemic, alcohol and drugs posed significant burden on our community contributing to over 6,000 deaths<sup>i</sup>. The costs of alcohol alone were around \$36 billion in 2010<sup>ii</sup>. Alcohol and other drugs impact not only on our health, criminal, social and justice systems but also burden individuals, their families and local communities. Alcohol and other drugs have, and continue to be, significant concerns to the Australian people.

There are concerns that changes in AOD use in response to COVID-19 will persist in the longer term. Even as restrictions are lifting, people who increased alcohol use during the lockdown are continuing to drink as they did during the restrictions, increasing the risk of greater harms from alcohol into the future. Alcohol related harms such as domestic violence and in-home assaults have increased during COVID-19 and the potential net increase in alcohol and drug use will have profound long term effects.

Increasing risk factors for alcohol and drug use as a result of the pandemic, such as unemployment, financial insecurity, homelessness, mental health, stress and loss of community connection also present short and long term challenges.

Responses to increased alcohol and drug use during the pandemic require efforts to support those who have increased use in changing behaviours before they become entrenched habits. Efforts also need to rebuild community connection and support key community institutions such as community sport in the critical and central role they play for communities in crisis.

This budget submission presents a range of responses to the increased use of alcohol and drugs, and the increasing mental health challenges Australia faces post COVID-19. All are designed to prevent short and long term harm. Several are immediate solutions such as seeking to change behaviour around alcohol use before they become entrenched habits. Other proposals take a longer term view, noting that recovery will require support for many communities to rebuild and reconnect.

Proposals are outlined below:

### **Boosting recovery of community sport and addressing AOD and mental health harms through Good Sports**

#### **1. Good Sports for long term recovery**

Community sport has a central role in community wellbeing with participation in sport an important protective factor for AOD use. The Good Sports program has a strong track record in reducing AOD related harm, strengthening club viability and increasing participation in sporting clubs.

With almost 10,000 Good Sports clubs, the Good Sports program impacts approximately 2.5 million Australians. On average the program grows by an additional 450 clubs every year.

Funding provided by the Australian government will enable us to recruit an additional 450 clubs every year reaching nearly 12,000 clubs by 2023. This enables the program to increase its impact across the country and support Australian communities.

There has never been a more important need for Good Sports, given the heightened AOD risk and the

value the program provides for community sport to reconnect with their membership in a mental health context.

## 2. Tackling mental health through community sport (Mental Health)

The strong link between mental health and AOD use is well documented. COVID-19 has seen many Australians increase their use of alcohol, cannabis, benzodiazepines and meth/amphetamine. Mental health problems have significantly risen. Community sporting clubs are reporting significant concerns with the mental health of their membership and seeking access to information and training that will strengthen their capacity to identify and respond to mental health issues. They are also seeking ways they can strengthen the club role in preventing mental health problems.

This initiative will respond to Club priorities post COVID-19 and provide additional mental health supports to Good Sports clubs. It will improve the confidence and capacity of club leaders to respond appropriately when mental health issues arise in their membership and ensure club leaders are trained in Mental Health First Aid.

## 3. Supporting youth in recovery post COVID-19 through community sport (Great Leaders)

The significant impact of COVID-19 on young people is well recognised, as they are particularly vulnerable to mental health problems and have been more affected by job losses than other age groups. The potential for increased AOD related harms in this group post COVID-19 is also significant. Community sport play a key role in protecting younger people from AOD related harms, but participation in community sport often starts to decline around 15 years of age. Young people aged from 15 to 25 within sporting clubs may also be at risk of developing risky drinking behaviours particularly when a culture of risky drinking behaviours is entrenched within communities and sporting clubs.

This initiative will train leaders in community sport to increase role modelling of positive behaviours that will reduce alcohol and drug use, promote positive mental health and retain young people in community sport.

## 4. Alcohol and drug behaviour change beyond the club setting

Whilst there is significant harm associated with alcohol in Australia, many people are unaware of this and often do not perceive alcohol to be a problem. Without this knowledge, they are less likely to take steps to address alcohol harm.

Good Sports Clubs have already started on the process of change by engaging in the program, recognising that they need to address alcohol within the club setting. The new digital model of delivery for Good Sports provides an opportunity to deepen this engagement with friends and families connected to Good Sports clubs so that more people understand alcohol-related harms, steps to reduce it and the important role of sport in building protective factors around AOD. As we enter a post-COVID-19 phase, families and friends can champion ways to re-connect in positive and supportive ways that don't focus on alcohol and related activities.

This initiative will use the Good Sports program as the foundation and will build targeted campaigns that engage, inform and educate communities by targeting families and friends to improve understanding of steps to reduce alcohol related harm and raise awareness about the positive role sport plays in building protective factors and minimising the harms of AOD.

## Reducing long terms alcohol and drug related harm post COVID-19

### 1. Extension of the COVID-19 alcohol campaign for longer term benefits

Many Australians increased their use of alcohol in response to the pandemic. As lockdowns are being

lifted, there are short and long term risks of increased AOD related harm. Around half of those who increased alcohol consumption during lockdown are continuing to drink at the same level, and in jurisdictions where restrictions are lifting, alcohol related presentations to emergency departments are rising.

The ADF, with funding from the Federal Government, developed an early response to the changing behaviour of Australians in response to the pandemic. The COVID-19 Alcohol campaign, Little Habit, showed early success in engaging people who had increased alcohol use during lockdown, or who were drinking at risky levels, connecting them to support and information to change behaviours. The national campaign was supported by two micro-campaigns that promoted messaging directly targeted at groups who were demonstrating the most significant changes (parents and younger women).

The ADF proposes a two year plan of activity that aims to extend the success of the initial national COVID-19 Alcohol Campaign and raise awareness of AOD harms and information and support that can help Australians make positive behaviour changes, The campaign will change knowledge, awareness and behaviours associated with alcohol use to support more Australians to understand recommendations for low risk alcohol use, understand the early signs of problematic use and to support them to take steps to reduce alcohol use and reduce risks of associated harm

### Summary of costs

	2020/21	21/22	22/34	23/24
Good Sports for long term recovery	-	\$5.76 M	\$5.19 M	\$5.36 M
Tackling mental health through community sport	\$1.0 M	\$0.9 M	\$0.9 M	-
Supporting youth in recovery post COVID-19 through community sport	\$0.58 M	\$0.72 M	\$0.53 M	
AOD behaviour change beyond the club setting	\$0.78 M	\$0.78 M	\$0.78 M	\$0.78 M
National COVID-19 Alcohol Campaign	\$5.0 M	\$5.0 M		
<b>Total</b>	\$7.36 M	\$13.16 M	\$7.4 M	\$6.14 M

## Background

### The Alcohol and Drug Foundation

Established 60 years ago, the Alcohol and Drug Foundation (ADF) is Australia's leading evidence-based, preventative health organisation in the alcohol and other drug (AOD) sector. Our community programs, policy work and information services are creating a healthier and more informed Australia. As an independent, evidenced-based organisation, the ADF is constantly searching domestically and internationally for programs that work.

The ADF is a trusted partner of the Australian Government in delivering preventative health programs in the AOD sphere, notably through Good Sports and Local Drug Action Teams, as well as evidence based AOD information. The case for investment in AOD preventative health is compelling: the longer use is delayed, the better the long-term outcomes in key socio-economic drivers such as mental health, education and employment. This then reduces pressure on AOD and mental health treatment sectors, hospitals, the social welfare budget and Australia's criminal justice system. Investment in preventative health should be viewed as a major nation building project with benefits across generations.

### Alcohol and other drugs in Australia during COVID-19

#### Alcohol and other drugs

Alcohol related illness and injury is one of the greatest causes of harm in Australia and contributes to over 4000 deaths each year<sup>iii</sup>. A quarter of Australians drink at levels that increase their risk of accident or injury and one in six drink at levels that increase their risk of health issues like cancer<sup>iv</sup>. Alcohol accounts for 10-15% of all ED presentations and about 25% of the time of frontline police officers<sup>v</sup>. Alcohol use accounts for around 4.5% of the burden of disease<sup>vi</sup> and the cost of alcohol-related harm was estimated to be \$36 billion in 2010<sup>vii</sup>. In December 2019, Health Minister Greg Hunt announced the government will commission a report to estimate the social costs of alcohol to Australian society, the first in 15 years.

Alcohol use has increased during the COVID-19 pandemic for many Australians, adding to an already significant problem. During the lockdowns, around 20% of Australian adults increased their alcohol consumption<sup>viii</sup>. Many reported drinking on a daily basis (around 14% during COVID-19<sup>ix</sup>, compared to 5.4% prior to COVID-19<sup>x</sup>) and the increase in consumption was more commonly reported by Australians aged 18-35 compared to middle aged and older Australians<sup>xi</sup>.

Patterns of use of illicit drugs are also changing as a result of the pandemic with an increase in the use of cannabis and benzodiazepines, and a decrease in MDMA and cocaine. More than half of those who use cannabis reported increased usage during restrictions, with 29% of people who used benzodiazepine increasing their use. About a quarter of people who used meth/amphetamine reported increased use during restrictions with 39% reporting their use of meth/amphetamine remained stable<sup>xii</sup>.

#### Mental health and AOD

Commonly reported drivers of increased alcohol and drug use include stress and anxiety (38%) and boredom (38%)<sup>xiii</sup>. Increasing mental illness during and after the pandemic will also drive increased substance use and vice versa. Alcohol impairs self-control and can contribute to someone entering a mental health crisis point. Evidence shows acute alcohol use increases the risk of attempted suicide<sup>xiv</sup>. The risk of suicide is also elevated in dependent drinkers, and an increase in population-level alcohol use tends to be associated with an increase in suicide rates<sup>xv</sup>.

Half of all individuals with a lifetime history of alcohol use disorders have at least one other mental health disorder<sup>xvi</sup> while 32% of smokers have a mental health disorder<sup>xvii</sup>. Health Minister Greg Hunt has noted a "very significant overlap between mental health and drug and alcohol abuse".

Recent research indicates that the community prevalence of depression and anxiety during the COVID-19 health restrictions increased significantly. There were significant increases in feelings of despair, fear, anger, boredom, loneliness and stress between March and April 2020<sup>xviii</sup>. Suicide prevention and crisis organisations reported higher demand<sup>xix</sup>.

In Victoria, there was a 33% increase in young people presenting to ED for intentional self-harm in July/August compared to the same time in 2019, and a 10% increase in all people presenting to ED for intentional self-harm. Urgent and emergency mental health services had experienced a 19% increase in July/August compared to the same time in 2019 with a 29% increase in mental health support by telephone<sup>xx</sup>.

Over a third of people who use drugs reported worse mental health during the pandemic and 37% had sought mental health treatment. Nearly 1 in 10 people who used drugs who had sought mental health treatment were unable to access it<sup>xxi</sup>

The National Mental Health and Wellbeing Pandemic Response Plan, endorsed by National Cabinet in May 2020, noted “a significant risk for mental health and suicide posed by alcohol and other drug use. There are strong indications that the pandemic may result in increased substance use within the community”.

## Domestic violence and violence in the home

While alcohol does not cause domestic violence, the evidence is clear that it is a risk factor for increased frequency and severity of family violence<sup>xxii</sup> <sup>xxiii</sup> and alcohol-related domestic assaults account for up to 50% of all recorded domestic assaults in Australia<sup>xxiv</sup>.

During the pandemic, almost half (47%) of family violence specialists reported an increase in their caseload with the majority being new clients. About half (51%) of them reported an increase in the involvement of alcohol in family violence situations since COVID-19<sup>xxv</sup>. The national counselling service 1800 RESPECT reported an 11% increase in contacts in May 2020 compared to May 2019<sup>xxvi</sup>. In Victoria, the frequency of ED presentations for assault in the home increased by 48% in May 2020 compared to May 2019<sup>xxvii</sup>.

## COVID-19 and Community Sport

COVID-19 caused significant disruption to community sporting clubs across Australia, disrupting their seasons, reducing revenues and resulting in a loss of members and volunteers. Many community sports clubs are in regional and remote Australia where communities were also drastically impacted by the bushfires.

Sporting clubs provide extraordinary value to the wider community. They provide healthy activities for club and community members to meet, exercise, and connect. Participation in supervised sporting activities is a key protective factor for young people for both mental health and AOD use, and key to preventing uptake among young people<sup>xxviii</sup>. A sense of belonging and connectedness to community is a critical protective factor for reducing AOD harms and supporting communities recovering from the impacts of COVID-19.

Sport, physical activity and exercise can be used to support treatment for a range of mental or behavioural conditions. Depression is one common mental health concern that may affect persons at any age. There is a growing body of evidence that supports the use of physical activity, particularly sport participation because of the social interaction benefits, as part of a treatment strategy<sup>xxix</sup>.

Surveys with community sporting clubs indicates that financial security and the mental health of their members after the pandemic are areas of significant concern. Additionally, clubs face significant challenges with re-engaging members, volunteers, sponsors and players<sup>xxx</sup>. A survey by the Australian

Sports Foundation found that one in four clubs faced solvency concerns, with 93% clubs reporting a decline in revenue and 43% of clubs seeing a decline in volunteering.

As clubs return to play post lockdown, significant restrictions are still in place, with some unable to travel beyond their regions to compete, and restrictions on social events. The ongoing and everchanging environment increases potential impacts on mental health and strengthens risk factors for AOD use.

Long term disruptions to community sport, through financial insecurity or loss of members, will have negative impacts on the local community's recovery post-COVID-19. Supporting the recovery of community sport, as a critical component of community and individual recovery post pandemic will be critical.

## Early responses to COVID-19 and AOD related harm

As the COVID-19 pandemic started and evolved, the ADF observed immediate impacts on Good Sports Clubs, Local Drug Action Teams and on the Australian community. We quickly mobilised to understand and respond to these impacts. This included;

- Leading the conversation around AOD harm prevention, with a focus on alcohol, by highlighting risk and protective factors to reduce AOD related harms to individuals and communities with a series of online campaigns to highlight risks of increased alcohol use. Two targeted digital campaigns focussed on raising the awareness of specific target audiences about the impact of their drinking during lockdown. The approach has been to help individuals reflect on their behaviour by aligning to personal values and beliefs.
- Driving awareness of the ADF and other credible sources of information and support across channels to prompt actions to reduce AOD harms and creating better pathways to this information
- Surveying clubs and LDATs to understand their immediate needs.
- Delivering social media upskilling session so clubs could better engage with members and players online.
- Transitioning to online and phone support and implementing a process for sharing stories and new ways of working so GS clubs and LDATs across our vast network could benefit. Key to these efforts were strategies for Clubs to connect with isolated members and volunteers.
- Webinars and online forums to respond to the needs of clubs and LDATs. This has included providing clubs with "Fundraising Smarts" Toolkits, links to national and state grants programs, sessions conducted by fundraising experts and social media tips.
- Developing a mass media campaign that was delivered across television, digital and social media and supported by a strong public relations effort. The Little Habit ad targeted those who were reporting greater increases in alcohol use during the pandemic (21-50 year olds) who may have recognised their drinking had increased during isolation and may be concerned but not yet dependent or are concerned about not being able to return to "normal" drinking post COVID-19.

## Longer term responses to COVID-19 and AOD related harm

The long term consequences of the pandemic are well recognised and are likely to include increased harms from AOD and the potential for increased dependence and demands on treatment providers.

AOD risk factors have increased during the pandemic and have immediate and long-term implications. These include the economic impact, loss of employment, social isolation, poorer family relationships, homelessness, reduced community engagement and trauma, grief and loss. In many parts of Australia



this is compounded by the summer bushfires.

Behaviours in the use of alcohol and other drugs that changed during the pandemic are also at risk of being continued as restrictions lift. In parts of Australia where restrictions are lifting, more than half of those who increased their alcohol use during lockdown are drinking at the same levels and more than half want to reduce their drinking<sup>xxxi</sup>. This suggests that higher levels of use during the pandemic are not returning to pre-pandemic levels for some people, increasing the risks on dependence and ongoing problematic use.

As restrictions lift, returning to pre-pandemic use of alcohol and other drugs also carries risk of increased harms. As use of cocaine and MDMA has declined during COVID-19, experts have expressed concern of an increase in the frequency of overdoses with lower tolerance levels. Some jurisdictions have seen an increase in alcohol related harm as restrictions lift, thought to be attributable to reduced tolerance and increased use. In WA, Department of Health data showed there were 190 alcohol-related ED admissions between June 24 and July 14 this year, representing a 21 per cent increase in admissions compared with the same time last year<sup>xxxii</sup>.

Responses to alcohol and drug related harm resulting from the COVID-10 pandemic therefore need to take a short and a longer term view. They need to include steps to target people who have changed the way they use alcohol and other drugs during the pandemic that may lead to long terms harms such as overdose and dependence. They need to support the recovery of community sport as a key plank of efforts to build protective factors and prevent additional harms as a result of increased risk factors post pandemic.

The following section outlines the ADF initiatives proposed as a response to alcohol and drug related harms post COVID-10

## Strategies to reduce short and long term harms from AOD post COVID-19

The ADF is well placed to help drive the Australian Government's COVID-19 recovery agenda

- Ensuring Australians are supported to minimise the impacts of the pandemic on alcohol and drug related harm and mental illness
- Supporting the recovery of community sport, a critical component of community recover, post COVID-19.
- Supporting the Australian Government's Ten Year National Preventive Health Strategy, part of its Long- Term National Health Plan.
- Supporting the Prime Minister's and Health Minister's strong focus on mental health and suicide prevention.
- Supporting implementation of the National Foetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan.
- Supporting the National Alcohol Strategy and the soon to be finalised NHMRC Alcohol Guidelines.
- Ensuring that regional and Indigenous Australia, disproportionately affected by the harms of alcohol and other drugs (AOD), receive access to information and preventative AOD programs.
- Facilitating access to early intervention and reducing demands on the treatment sector.

## Good Sports for long term recovery post COVID-19

The ADF engagement with community sport through Good Sports provides opportunity to not only use this program to support the rebuild of community sport post COVID-19 but also to leverage this critical community setting to build its capacity to address mental health and alcohol and other drug use, particularly among younger players.

The ADF proposes four solutions linked to the Good Sports program. These initiatives are outlined below.

### Initiative 1: Growth of Good Sports

#### Why

Good Sports is proven to reduce risky drinking at participating clubs by 37% and reduce alcohol-related accidents among Good Sports club members and supporters by 42%. Between 2011-2012, Good Sports was estimated to have averted 1,300 alcohol-related falls, assaults and/or road accidents – saving approximately \$14 million a year<sup>xxxiii</sup>.

Sporting clubs provide healthy activities for club and community members to meet, exercise, and connect which is a critical protective factor for reducing AOD harms and support for communities recovering from the impacts of Covid-19.

Good Sports makes community sporting clubs healthier, safer and more family friendly, increasing club engagement with the community. Good Sports clubs experience an increase in the number of non-players, junior teams, female participants and club members compared to non-Good Sports clubs<sup>xxxiv</sup> reinforcing its importance in the recovery phase post COVID-19 and importance in rebuilding community sport.

Good Sports also makes financial sense, reducing the downstream financial burdens associated with the alcohol harms in community: In 2011-12, KPMG Health Economics Group conducted an economic evaluation of the Good Sports program. This analysis showed a \$4.20 return on investment for every \$1.00 spent<sup>xxxv</sup>.

More than 50% of clubs reported concerns around the impacts of COVID-19 and alcohol consumption amongst their sporting community as well as concerns with their financial future, and engagement of players, members and volunteers<sup>xxxvi</sup>.

Now, more than ever, Good Sports clubs recognise their role in helping their communities and members recover from recent events and eighty per cent of clubs believe Good Sports will be important or very important in helping their community recover post-COVID-19.

Funding additional growth of Good Sports will enable the program to continue to make its mark amongst sporting clubs and into Australian communities. Potentially every community club in Australia (of which it is estimated there are 70,000<sup>xxxvii</sup>) stands to benefit from the Good Sports program.

“Through the Good Sport Awards, sporting clubs right across the country are leading the way in demonstrating healthy behaviours for the whole community” - Hon. Senator Richard Colbeck, Minister for Youth and Sport.

#### What

With the Good Sports program estimated to impact 2.5 million Australians there is still the potential for Good Sports to have an even greater impact in communities. This proposal will enable the program to recruit an additional 1,350 clubs over a three-year period (450 clubs each year).

Federal Government investment has supported the ADF to develop the Good Sports digital model which extends the impact of the Good Sports program beyond alcohol and drugs to mental health and junior

participation and enables to program to reach more clubs for lower investment.

The digital model supports clubs, with access to ADF staff and program resources, to progress their way through the program and implement activities designed to change behavior. It broadens the areas of focus for Clubs from alcohol and other drugs to include mental health and strengthens the club role in prevention of risky AOD use by junior players in the short and longer term.

The ADF will develop promotional material, deliver campaigns, continue to develop the program and provide support to clubs that need it over the 4 year period. The ADF will work to ensure 80% of Good Sports clubs are active members, regularly engaging with the platform and achieving acknowledgments and recognition along the way.

### **Deliverables**

- Introduce an additional 450 new clubs into the Good Sports program each year, taking the total number from 10,400 to 11,750 clubs by 2024.
- Ensure 80% of clubs are progressing through the program and achieving recognition/status achievements across all program content (alcohol, illegal drugs, mental health, junior participation).
- Initiate and encourage behaviour change in up to 3 million Good Sports club members by 2024.
- Develop promotional material and campaigns to encourage non-Good Sports clubs to join the program and support existing clubs to become active participants.
- Evaluate the program and its ability to meet program objectives.
- Maintain and develop a robust infrastructure to support a national scalable and efficient program.

**Cost of initiative 1: \$16.31M from 2021 - 2024**

### **Initiative 2: Tackling mental health through community sport**

#### **Why**

The strong link between mental health and AOD use is well documented. COVID-19 has seen many Australians increase their use of alcohol, cannabis, benzodiazepines and meth/amphetamine. Mental health problems have significantly risen. Community sporting clubs are reporting significant concerns with the mental health of their membership and seeking access to information and training that will strengthen their capacity to identify and respond to mental health issues. They are also seeking ways they can strengthen the club role in preventing mental health problems.

Leaders in Good Sports clubs recognise that they provide a critical service to their membership and local community, and recognise the Good Sports program as an ideal channel by which to achieve these aims.

#### **What**

The Good Sports digital model incorporates activities that will strengthen club capacity to raise awareness of ways to identify mental health problems amongst their membership, support members and link people to appropriate support services. The ADF has been testing an approach to enhance Club capacity to identify and respond to member mental health problems in Tasmania since 2018. This approach aims to increase mental health literacy in clubs, as well as build club infrastructure to encourage early intervention and mental health supports. Participating Clubs displayed high levels of

engagement in mental health activities with over 700 activities implemented across 350 clubs in the pilot period. Workshops provided as part of Club activities, were found to improve attendees' knowledge of mental health stigma (93%), the role clubs can help support positive mental health (92%), and confidence to support someone to improve their mental health (89%)<sup>xxxvi</sup>.

This proposal seeks to respond to Club priorities post COVID-19 and provide additional Mental Health supports to Good Sports clubs beyond the current program resources. This includes

1. Improving the confidence and ability of leaders within sporting clubs to respond appropriately when mental health issues arise by further developing and providing access to ADF's online resources (mental health, alcohol management and illegal drugs) and delivering additional tools to promote mental health supports.
2. Supporting Club leaders to complete Mental Health First Aid training which is associated with improved knowledge of mental illnesses and their treatments, knowledge of appropriate first aid strategies, and confidence in providing first aid to individuals with mental illness, benefits which are maintained over time. Some studies have also shown improved mental health in those who attend the training, decreases in stigmatising attitudes and increases in the amount and type of support provided to others<sup>xxxviii</sup>.

### Deliverables

- Strengthen Club Leadership capacity to recognise early signs of mental health problems and/or alcohol problems and support people to get early help through workshops and webinars.
- Develop and provide access to Good Sports Mental Health, Alcohol Management and Illegal Drugs online modules aimed at general club membership.
- Support club leaders from 2,000 Good Sports clubs to access fully funded Mental Health First Aid courses.
- Evaluate the initiative and make recommendations for future developments.

**Cost of initiative 2: \$2.8M over 3 years (includes \$1.5M in grants for Mental Health First Aid)**

Initiative 3: Supporting youth in recovery post COVID-19 through community sport

**'Good Sports Great Leaders' initiative**

### Why

The significant impact of COVID-19 on young people has been recognised by many, as they are particularly vulnerable to mental health problems and have been more affected by job losses than other age groups. The potential for increased AOD related harms in this group post COVID-19 is also significant.

Community sport play a key role in protecting younger people from AOD related harms, but participation in community sport often starts to decline around 15 years of age. Young people aged from 15 to 25 within sporting clubs may also be at risk of developing risky drinking behaviours particularly when a culture of risky drinking behaviours is entrenched within communities and sporting clubs. Programs that support positive role modelling among young people are important strategies in retaining their engagement in community sport and in reducing AOD use. These include mentoring programs and programs developing peer leadership<sup>xxxix</sup>.

Mentoring programs that have most success have many characteristics that lend themselves to the community sporting model, making this an ideal setting for the development of mentors who can role model less risky use of alcohol and drugs to younger players. These characteristics include strong family acceptance, the creation of community partnerships, high intensity, and meeting consistently and frequently<sup>x1</sup>.

The Good Sports program provides an ideal vehicle by which to strengthen the ability for positive role models to engage with at-risk youth to continue their engagement in community sport and reduce the risk of AOD related harm, particularly in a post COVID-19 environment. Good Sports can develop club leaders so they act as positive role models and recognise and support at risk young people, encouraging other club members to do the same.

## What

This initiative aims to identify and recruit members from Good Sports clubs and train them to develop their leadership qualities and ability to role model positive behaviours that will reduce alcohol and drug use, promote positive mental health and retain young people in community sport.

The ADF will develop a process for recruitment and selection of program participants (Great Leaders) and materials to train, develop and support them in their work over the program period. This includes AOD online modules including Alcohol Management, Illegal Drugs and Mental Health, training in role modelling positive behaviours and tips and sport retention strategies to encourage their younger club members to keep participating in their sport. Identified Great Leaders will also seek to increase the frequency of their engagements with young club members throughout their training experience.

clubs.

The Great Leaders initiative will be trialled and evaluated over two years commencing January 2021.

## Deliverables

- Develop the Good Sports, Great Leaders program including content on alcohol and illicit drugs, and role modelling positive behaviours as well as strategies to retain young people in community sport.
- Develop and deliver training for identified club leaders within 500 clubs in the Good Sports network.
- Develop an evaluation plan designed to determine increased knowledge and confidence of AOD mentoring skills, frequency of positive behaviours, retention of young people, reduced AOD use among young people.
- Develop promotional content to encourage recruitment of Great Leaders amongst the Good Sports network.
- Evaluate the Great Leaders trial over a two year period including the measurement of increased knowledge and confidence of Great Leaders.

**Cost of initiative 3: \$1.8M over 3 years**

## Initiative 4: AOD Behaviour Change beyond the Club Setting

### Why

Whilst there is significant harm associated with alcohol in Australia, many people are unaware of this

and often do not perceive alcohol to be a problem. Without this knowledge, they are less likely to take steps to address alcohol harm. Many Australians do not understand the concepts of standard drinks or recommended levels for low risk alcohol use<sup>xii</sup> and often do not perceive their alcohol use to be problematic. For example, 70% of leaders in non-Good Sports Clubs don't recognise that alcohol may present a problem at their club<sup>xiii</sup>. Without this knowledge, many are not ready to take steps to change patterns of drinking to reduce alcohol related harm.

Good Sports Clubs have already started on the process of change by engaging in the program, recognising they need to address alcohol within the club setting. The new digital model of delivery for Good Sports provides an opportunity to deepen this engagement with friends and families connected to Good Sports clubs so more people understand alcohol-related harms, steps to reduce it and the important role of sport in building protective factors around AOD. As we enter a post- COVID-19 phase families and friends can champion ways to re-connect in positive and supportive ways that don't focus on alcohol and related activities.

Social marketing is proven to promote behaviours to accept, abandon, modify or reject. The most effective social marketing initiatives are sustainable, taking a long-term view based on a thorough understanding of behaviour change methodologies. The ADF proposes to use a social marketing approach to build awareness of risky drinking and alcohol-related harms so that members of sporting communities can champion positive behaviours in sporting environments, alongside club representatives, that lead to improved physical and mental wellbeing. |

## What

This initiative will use the Good Sports program as the foundation and will build targeted campaigns that engage, inform and educate communities by targeting families and friends to improve understanding of steps to reduce alcohol related harm and raise awareness about the positive role sport plays in building protective factors and minimising the harms of AOD. Taking a social marketing approach, we will focus on the following:

- Extending our reach from Good Sports Clubs and their members to their members, friends and families in Good Sports club communities
- Raising awareness of the problem – educate about risky drinking and low risk drinking (as outlined in the NHMRC Guidelines) and the problematic relationship between sport and alcohol consumption
- Provide solutions – build understanding of the role of community members in building protective factors in sport and motivate friends and families to take positive actions as sporting clubs look for ways to re-connect with members

We will do this by utilising alcohol-related research and data gathered over the 20 year history of the Good Sports program and more recently, our experience through the COVID-19 pandemic, creating a value exchange for Good Sports clubs communities so the benefits of change are clear, compelling and relevant in the post-COVID-19 environment and co-designing the approach with Good Sports clubs community members. In addition, we will focus on Good Sports clubs in areas of greatest need including regional communities and areas of lower social economic status.

## Deliverables/Outputs

- Two social marketing campaigns per year targeting Good Sports club communities (families and friends)
- Increase in awareness of the relationship between sport and behaviours around alcohol by members of the community, club volunteers and committee (baseline data to be captured as

part of social marketing planning)

- Increase awareness and understanding of recommended levels for low risk use of alcohol, standard drinks and steps to reduce alcohol use
- Impact and effectiveness measures. These will include:
  - Reach and frequency – social marketing activity exposure amongst target audience (Good Sports club communities in selected locations TBC) via social media, digital advertising and stories in the media
  - Readiness to change – awareness of key messages, increase in the number of Good Sports clubs that identify alcohol as an issue at their club (pre and post research to establish baseline and target)
  - Engagement - number of Good Sports clubs (community members or club representatives) to attend webinars, complete enquiries (online form, email, phone), downloads of tools and support kits
  - Other social marketing measures – unprompted and prompted recall, message takeout and media recall will provide measures of the reach and penetration of the activities

**Cost of initiative 4: \$780,000 per year or \$3,120,000 over four years**

## National COVID-19 Alcohol Campaign

### Helping Australians move from negative behaviours to healthier lives

Throughout the COVID-19 pandemic the ADF has undertaken marketing and communications activities focussed on minimising the harms from AOD use, particularly alcohol. The ADF mobilised quickly and determined that it would:

- Lead the conversation around AOD harm prevention, with a focus on alcohol;
- Drive awareness of ADF and other credible sources of information and support across channels to prompt actions to reduce AOD harms as this period likely represents a time of greater risk of increased substance mis-use;
- Develop activities that resonate with the changing thoughts, feelings and actions of Australians as the pandemic evolved;
- Support all Australians looking for credible information and resources in an environment of uncertainty, confusion and isolation.

### Marketing and Communications Response

Through the funding provided by the Federal Government and by refocussing our work effort the ADF has undertaken an Australia wide program of digital campaigns and mass media activity supported by public relations.

#### Digital Campaigns

Two targeted digital campaigns focussed on raising the awareness of specific target audiences about the impact of their drinking during lockdown. The approach has been to help individuals reflect on their behaviour by aligning to personal values and beliefs. Each digital campaign ran for a period of three weeks to maintain relevance and minimise audience fatigue.

## Mass media campaign

An advertising campaign delivered across television, digital and social media and supported by a strong public relations effort. The [Little Habit](#) ad targets 21-50 year olds who have recognised their drinking has increased during isolation and may be concerned but not yet dependent or are concerned about not being able to return to “normal” drinking post COVID-19. The ad first aired on 9<sup>th</sup> August and will run until 27<sup>th</sup> September.

## **Engagement, reach and relevance**

The ADF’s COVID-19 related activity has been integrated, focussed and effective due to an extensive PR, media and digital communications strategy that ensured we maximised opportunities to reach the target audience in every available channel. The overall results are impressive; nearly 800,000 website sessions, 1,800 stories in the media, 773,000 video views, 540,00 impressions on social media and 31.9 million impressions across digital channels in 14 weeks. However, it is the engagement and sentiment coupled with the reach that tells the true story of the importance of the ADF’s activities.

Signs the Little Habit campaign messaging has resonated with an Australian public in the midst of uncertainty was seen in just the first two weeks where the campaign generated more than 62,000 sessions on the website. In addition, more than 15,000 people used the [Drinks Calculator](#) to assess their levels of drinking – a key aim of the campaign. 73% of people who completed the Drinks Calculator explored further information with most proceeding to [How to Change](#) pages. This engagement indicates the campaign is providing a pathway to raising awareness of risky drinking, is building knowledge of the signs of problematic use and is providing information about positive behaviours and the strategies to reduce risky consumption of alcohol.

The results from the Drinks Calculator provide further evidence the campaign is reaching its intended audience – those who are drinking more or who have recognised changes in their drinking. 84% of people who completed the calculator reported a score of seven or more indicating they were drinking at risky or high risk levels.

Through the integrated campaign approach the ADF has ensured there have been multiple narratives to drive behaviour change and have adopted a tailored approach to drive effectiveness. Key campaign messages have been delivered, case studies shared and conversations sparked amongst our target audiences.

## **Proposal**

As lockdowns are being lifted, there are short and long term risks of increased AOD related harm. Around half of those who increased alcohol consumption during lockdown are continuing to drink at the same level, and in jurisdictions where restrictions are lifting, alcohol related presentations to emergency departments are rising.

The exceptional responses of ADF activities throughout COVID-19, such as those of the Little Habit campaign are strong signs of their relevance and importance. Research over the past five months shows that the COVID-19 environment is always changing. To ensure efforts to support increased awareness of low risk use of alcohol, and support efforts to change behaviour, close monitoring of the response to COVID-19 though AOD use will be important.

The ADF aims to address the long term impacts of the COVID-19 pandemic by delivering targeted responses based on results of polls of Australians that raise awareness of alcohol related harms while showing empathy and understanding.

The ADF proposes a two year plan of activity that aims to raise awareness of AOD harms and information and support that can help Australians make positive behaviour changes, extending the success of the



initial national COVID-19 Alcohol Campaign. The ADF aims to do this by delivering targeted and integrated public facing campaigns to key audience segments.

- Two national campaigns per year (Little Habit x two creative executions are ready for deployment)
- Three micro campaigns per year which will target particular audiences through rapid response digital and PR activity based on emerging data and trends
- Reach and impact buying strategy through television, out of home and digital (static and video) advertising which will raise awareness and build campaign momentum
- Message boosting via social media and public relations by providing shareable and useful information that will encourage conversations
- Engagement opportunities via Drinks Calculator, further information and pathways to support services
- Campaign measurement and evaluation reports

Consideration for messaging that will reduce the potential for increased harms as a result of increased drug use, and return to illicit drug use post restrictions will also be considered.

### Outcomes

The ADF Little Creature campaign is currently in market. We have commissioned three waves of tracking to measure not only recall and understanding of the campaign, but to provide a monitor on behaviours and attitudes towards alcohol consumption. The findings from the first wave conducted prior to the campaign's launch are yet to be reported and will form the benchmark for future campaigns.

- Campaign reach and frequency– effective coverage across all states and territories and on digital and offline channels to ensure campaign visibility
- Increase in information seeking by target audience to ADF website with interactions on key pages (Know the Signs/ Assess your Risk/ How to Change/ Pathways to Support.
- Increase in % of people within the target audience who were exposed to the campaign and reflected on their drinking behaviours, felt concerned about their level of drinking and contemplated reducing their drinking.
- Behaviours and behaviour change – decrease in reported alcohol consumption by target audience. Change in alcohol consumption will form an outcome measure to be tracked over time as campaigns roll out and compared between those who have and have not been exposed to the campaigns.
- Campaign impact and effectiveness measures – unprompted and prompted recall, message takeout, media recall and liking digital posts will provide measures of the reach and penetration of the campaigns.

**Cost of initiative: \$5M each year for two years**

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