



ACT Budget Submission

2026-2027

About ATODA

The Alcohol, Tobacco and Other Drug Association ACT (ATODA) is the peak body for the alcohol, tobacco and other drug sector in the ACT.

We lead, strengthen and advocate for the ACT's high-quality treatment and harm-reduction sector, working to provide a broad range of alcohol, tobacco and other drug treatment options to the community.

We represent organisations and people throughout the ACT committed to reducing alcohol, tobacco and drug related harms.

Our work is informed and guided by our highly valued members who work in true partnership with their peak to enhance our sector and support the ACT community.

Acknowledgement of Traditional Custodians

ATODA proudly acknowledges the Ngunnawal people as Traditional Custodians of the land we work on and recognises all other peoples or families with connections to the ACT and region.

ATODA acknowledges, respects and celebrates the continuing cultures and contributions of Aboriginal and Torres Strait Islander peoples to the life of the ACT and region. We respect and value the contributions of Aboriginal and Torres Strait Islander peoples to the alcohol, tobacco and other drug sector.

Artist Recognition

As part of its corporate identity in published content, ATODA is proud to feature artwork titled *Unspoken History, Map of Pain* (2020) by local artist Sharon. This work, unless explicitly stated otherwise, may not be reprinted, reproduced or published in any form without the permission of ATODA to ensure copyright ownership and agreement with the artist is upheld.



To learn more about the story behind the artwork, scan the QR code:

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The Hon Chris Steel MLA
Treasurer
Chief Minister, Treasury and Economic Development Directorate
By email only: budgetconsultation@act.gov.au

Dear Treasurer

The Alcohol, Tobacco and Other Drug Association ACT (ATODA) is the peak body for the alcohol and other drug sector in the ACT. We lead, strengthen, and advocate for the ACT's high-quality treatment and harm reduction sector, working to provide a broad range of alcohol and other drug treatment options to the community. We represent organisations and people throughout the ACT committed to reducing alcohol and other drug related harms. Our work is informed and guided by our highly valued members who work in true partnership with their peak to enhance our sector and support the ACT community.

ATODA's vision is a healthy ACT community with reduced alcohol and other drug related harms, served by a high-quality treatment and harm reduction sector. We work on behalf of our members to advocate for a strong and sustainable alcohol and other drug sector in the ACT, using best-practice policy, research and evidence. Underpinning ATODA's work is a commitment to reconciliation, inclusion and excellence.

In the 2026-27 financial year, we ask the government to prioritise ongoing investment into alcohol and other drug treatment and harm reduction services across our community. As demand for our services continues to grow, it is important that we remain well-resourced to deliver a range of responsive, flexible and expert services available to treat alcohol and other drug dependence. ATODA is supportive of the harm reduction measures currently in place in the ACT and asks the government to consider expanding these measures to improve community health and wellbeing. We also recommend that the government considers how this budget can reduce alcohol-related harms, harms from smoking and e-cigarette use, and improve the health of people who use alcohol and other drugs in custody.

I look forward to working with you and your colleagues towards improved health and wellbeing for people accessing alcohol and other drug treatment services in the ACT, to ensure that we continue to have a well-resourced and thriving treatment and harm reduction sector. Thank you for considering the ATODA pre-budget submission.

Yours sincerely,



Anita Mills, CEO
ceo@atoda.org.au

1 Resourcing a sustainable alcohol and other drug (AOD) sector

The ACT AOD sector continues to provide high quality frontline services to people who use alcohol and other drugs, but its operations must be sustained and resourced such that it can continue to serve current need and grow to meet future demand. Adequately resourcing the AOD sector will reduce the burden on primary and emergency services in the ACT and allow the implementation of best-practice approaches and innovative initiatives to address upstream health needs.

- AOD treatment services in the ACT have consistently proven that they can provide efficient, impactful and cost-effective health outcomes and reduce the burden of alcohol and drug-related harms. AOD services will, however, struggle to deliver programs effectively if they continue to take on increased responsibility while relying on the existing limited capacity of their workforce without adequate resourcing.
- ACT-specific modelling undertaken in 2021, identified discrepancy between funding and what is actually required to meet treatment demand in the AOD sector.¹ An updated needs analysis and modelling of sector demand in the ACT is necessary, to provide a clearer picture in the face of emerging health system concerns and cost-of-living pressures.
- As the ACT population increases and as cost-of-living and housing pressures continue to be felt in ways that are harmful to health, the demand for AOD services is rising. At the same time, the true costs of service delivery are increasing year-on-year. Without concomitant increase in funding, AOD services face a widening resource gap with implications for program development and delivery.
- There is a significant and expanding cohort of people using AOD services who have complex and co-occurring needs. Addressing these needs by funding best-practice approaches in the AOD sector, would reduce pressure across the health system.
- The ACT Drug Strategy Action Plan 2022-26 includes substantial ACT government commitment to developing and supporting the ACT AOD peer workforce.² ATODA encourages ongoing investment and resourcing into this priority workforce development area.³

Recommendation 1

The ACT Government provides sustainable funding to the ACT AOD sector to ensure an agile and flexible service system, based on analysis of current and projected need. Resourcing should respond to rising demand, increasing service user complexity and changing drug-use trends, with best-practice treatment and harm reduction approaches, and additional investment in the AOD workforce, including peer work.

2 Expanding evidence-based harm reduction measures

ATODA supports a harm reduction approach to policy formulation that considers how the needs of the whole community can best be served without increasing harm to any one portion of the community. Expanding harm reduction will improve the health and wellbeing of people who use alcohol and other drugs and will reduce pressure on costly emergency and public health services in the ACT.

- The Australian Capital Territory harm reduction cost-benefit analysis, published by the ANU and Burnet Institute in 2025,⁴ provided evidence for the expansion of existing harm reduction measures and implementation of new measures, as a cost-effective way of improving health outcomes and reducing the burden of alcohol, tobacco and other drug harms in the ACT. Such harm reduction approaches also go some way towards addressing stigma and discrimination.
- ATODA notes that access to opioid maintenance therapy (OMT) in the ACT is compromised by a lack of providers and is inadequate to meet the needs of the population. There is strong economic rationale (estimated at \$10.90 return for every \$1 spent⁴) for expanding OMT in the upcoming budget and beyond.
- ATODA strongly recommends the ACT government consider how it can expand current provision of take-home naloxone and needle and syringe programs (NSPs). Although these measures are already available to at least some of the ACT community, their expansion would provide \$17.80 and \$1.50 in economic benefits for every \$1 spent, respectively.⁴
- The continued investment in CanTEST Health and Drug Checking Service to June 2027 is commendable. Future budgets should extend funding to ensure this health service can continue. In an increasingly unpredictable drug market, CanTEST plays a role in monitoring and in providing vital health, education and harm reduction services to the community.
- A supervised consumption room should play an important role in a comprehensive harm reduction framework, reducing drug-related harms to the individual and the broader community. On cost-benefit analysis, a nurse and peer-led drug consumption room in the ACT showed a return of \$2.90 for every \$1 invested.⁴ ATODA recommends that the ACT government commit to resourcing this harm reduction measure within the next two budget cycles.

Recommendation 2

The ACT Government continue to invest in best practice harm reduction measures, with particular focus on expanding OMT provision and taking concrete steps with the sector towards establishment of a supervised consumption room in the next two budget cycles.

3

Reducing alcohol-related harms

Approximately 46 percent of people accessing AOD services in the ACT in 2023 reported alcohol as a drug of concern and 43 percent of people using AOD services nationally reported it as their primary drug of concern.⁵ Alcohol is one of the most harmful substances that is consumed in Australia and the harms from alcohol in the ACT are significant and widespread.⁶⁻⁸ Action towards limiting alcohol industry advertising, regulating online sales and delivery, and addressing the links between alcohol and gender-based violence must be taken via regulatory and legislative reform.

- Online advertising allows the alcohol industry to target individuals, including those at greatest risk of alcohol-related harms. Promotion of impulse purchasing, extreme discounts, minimum spend discounts, and free delivery offers encourage harmful alcohol use. The AIHW found that 73 percent of ACT residents would support limiting alcohol advertising online and on social media.⁹ ATODA recommends the implementation of measures to reduce targeted advertising from the alcohol industry.
- ATODA welcomes the proposed Liquor Amendment Bill 2025 and hopes to see the legislation realise its positive population health and community safety impacts through reduced delivery hours, the two-hour safety pause, and other proposed safety mechanisms that modernises regulation of the online sale and delivery of alcohol.
- The ACT government must address the complex role that alcohol can have in domestic, family and sexual violence. In the ACT, 18 percent of individuals have been verbally abused by someone under the influence of alcohol and one third of Australian women have been physically abused by an intoxicated current or ex-spouse or partner.⁵
- The ACT government should follow the recommendations set out in the Rapid Review of Prevention Approaches that all States and Territories agreed to in the National Cabinet in 2024, including regulation of alcohol sales, delivery timeframes, and advertising.¹⁰ ATODA supports the recommendation made by this review that alcohol's role in gender-based violence be explicitly addressed.

Recommendation 3

The ACT Government dedicates resourcing to reducing the harms from alcohol, including through regulation of alcohol industry advertising, and by addressing the link between alcohol and gender-based violence.

4 Reducing the harms from e-cigarettes and tobacco

The ACT government must continue to support hard-won public health gains, by committing to measures that reduce harms from tobacco and nicotine products. A key priority for the ACT government should be targeted interventions to address the uptake of illicit tobacco and e-cigarettes.

- Smoking remains one of the leading causes of preventable death and disease in Australia.¹¹ The proportion of adults in the ACT population who smoke daily or occasionally is 7.8 percent. Smoking rates amongst people accessing AOD treatment and harm reduction services are notably elevated, with over 80 percent of service users reporting that they are daily or occasional smokers.¹² The ACT AOD workforce also smokes at higher rates than the general population (about 22 percent of workers).¹³
- Offering smoking cessation support alongside drug and alcohol treatment and ensuring that AOD service users and the AOD workforce has consistent, ongoing access to best practice combination nicotine replacement therapy (NRT) and support, would help the ACT to meet the goals of the National Tobacco Strategy.
- Nicotine-related healthcare products and services should be at least as accessible and no more expensive than nicotine products themselves, including illicit products. Under any measures to improve accessibility to combination NRT and nicotine-related support, populations that are experiencing or are at greatest risk of experiencing tobacco and nicotine related harms should have tailored interventions to ensure they experience equitable outcomes.
- The ACT faces considerable challenges in addressing tobacco and nicotine harms, including the growing prevalence of illicit tobacco products and the impact of legislative changes in relation to e-cigarettes. Ongoing ACT government commitment is needed to ensure that legislation and regulation remain responsive, public health campaigns and community education are appropriately targeted, and health services are resourced to respond to these challenges.
- ATODA encourages the ACT government to continue to invest in research to guide and inform policy making and practice around e-cigarette use and cessation. This is of particular importance due to the increased risk of tobacco uptake associated with e-cigarette use, including the risk that people who use e-cigarettes turn to smoking tobacco if cessation supports are inaccessible.

Recommendation 4

The ACT Government fund renewed measures to improve access to smoking and e-cigarette cessation support, including subsidised combination NRT and behavioural support.

5

Improving equity and access to AOD treatment and harm reduction in custodial settings

People who have contact with the custodial system in Australia have the right to expect and receive healthcare equivalent to that they would receive in the community. ATODA urges the ACT government to consider how it can better invest in specialist AOD programs for the ACT custodial system that contribute to improving overall health and wellbeing, reducing rates of recidivism, and upholding the human rights of people in custody.

- The recent Healthy Prison Review of the Alexander Maconochie Centre 2025 by the ACT Inspector for Custodial Services included a recommendation for the ACT government to commit to introducing a needle and syringe program (NSP) within the next three years,¹⁴ recognising how imperative this intervention is for the health and human rights of people in the AMC. ATODA urges the ACT government to undertake collaboration and consultation with all relevant stakeholders to meet the timeframe for establishment of an NSP within the recommended timeframe.
- The ACT government must expand resourcing and provision of other important AOD harm reduction measures in custodial settings, including overdose education and training for detained people and staff, expanded provision of naloxone, and greater presence of peer support services provided by specialist AOD peer workers.
- Pharmacotherapy, such as NRT and OMT, for people who use or have used AOD in custody should be provided at an equivalent standard and availability to community, and in line with individual health needs. Similarly, specialist AOD programs must be available to people in custody at an equivalent standard and availability to those provided in community. To achieve this, there should be a greater presence in custodial settings of specialist programs offered by the ACT AOD treatment sector.
- The ACT government should consider how it can implement and expand preventative and diversionary measures to reduce interactions with the custodial system by people who use or have used AOD.

Recommendation 5

Additional resourcing should be dedicated to expanding the provision of AOD harm reduction and treatment programs in ACT custodial settings in partnership with the specialist AOD sector, to ensure provision of adequate, appropriate, person-centred and equitable care at all stages of custody.

References

1. Alcohol Tobacco and Other Drug Association ACT (ATODA). Maintaining and Strengthening Specialist Alcohol and Other Drug Services for the ACT Community Needs Assessment Analysis 2022-2025. 2021. Canberra: ATODA.
2. ACT Health Directorate. ACT Drug Strategy Action Plan 2022-2026. 2022. Canberra: ACT Government.
3. Gough C, Nikolic N, Yar E, and Hanly C. Peer Treatment Support Service: Model of Care. 2025. Canberra: Canberra Alliance for Harm Minimisation and Advocacy (CAHMA).
4. Bowring A, Olsen A, Tidhar T, Bourke K, Bailey C, Keane H, Dietze P, Scott N. Australian Capital Territory harm reduction cost-benefit analysis. 2025. Canberra: Australian National University and Burnet Institute.
5. Australian Institute of Health & Welfare (AIHW). National Drug Strategy Household Survey 2022–2023: State and Territory summaries of alcohol, tobacco, e-cigarette and other drug use. 2024. Canberra: Australian Government.
6. Bonomo Y, Norman A, Biondo S, et al. The Australian drug harms ranking study. *Journal of Psychopharmacology* 2019; 33: 759-768. DOI: 10.1177/0269881119841569.
7. Australian Institute of Health & Welfare (AIHW). Australian Burden of Disease Study: Impact and causes of illness and death in Australia 2018. 2021. Canberra: Australian Government.
8. Australian Institute of Health & Welfare (AIHW). Alcohol, tobacco & other drugs in Australia: Health impacts. 13 December 2023 ed. Online: Australian Institute of Health & Welfare. 2023. Canberra: Australian Government.
9. Australian Institute of Health & Welfare (AIHW). National Drug Strategy Household Survey 2022-23. Perceptions of drugs and policy support. 2024. Canberra: Australian Government.
10. Department of Health and Aged Care. National Tobacco Strategy 2023-2030. 2023. Canberra: Australian Government.
11. ACT Government. Smoking and Vaping. <https://www.act.gov.au/health/topics/drugs-alcohol-smoking-and-vaping/smoking-and-vaping>. 2024. Accessed January 2025.
12. Alcohol Tobacco & Other Drug Association of ACT (ATODA). Service Users' Satisfaction and Outcomes Satisfaction and Experience 2023: A survey of people accessing alcohol, tobacco and other drug services in the ACT. 2025. Canberra: ATODA.
13. Alcohol Tobacco & Other Drug Association of ACT (ATODA). ACT Alcohol, Tobacco and Other Drugs Sector Workforce Profile 2025. 2026. Canberra: ATODA.
14. ACT Inspector of Custodial Services. Healthy Prison Review of the Alexander Maconochie Centre. 2025. Canberra.

Further reading

- [Supervised Consumption Rooms](#)
- [Reducing alcohol related harms in the ACT](#)
- [E-cigarettes and Tobacco](#)
- [Custodial Health and Harm Reduction](#)
- [ATODA Strategic Plan 2025-2028](#)