

# atdc

Alcohol, Tobacco  
and other Drugs  
Council Tasmania Inc.

## *Report*

### ATDC Stakeholder Survey 2015 Analysis of Results

August 2015



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# Introduction

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The Alcohol, Tobacco and other Drugs Council has been conducting a stakeholder survey continuously for the last four years. The survey is a key tool in assisting the ATDC in continuing to build its effectiveness as the peak body for the alcohol, tobacco and other drugs sector. Over the years a core set of questions have been used to gather feedback about the organisation's performance against strategic directions and priorities and to assist in the identification of policy and research priorities for the organisation. Additional questions in the survey for 2015 asked respondents to:

- highlight their awareness of the work of the ATDC in relation to promotion, prevention and early intervention
- comment on the effectiveness of the ATDC's communication and how to maximise the use of social media.

This report analyses responses to the survey and makes comparisons between results from year to year.



# Scope and limitations

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The ATDC stakeholder survey is administered by the organisation using the electronic tool, SurveyMonkey®. The survey was circulated to ATDC e-News subscribers on Monday 14 April, and was open for a period of one month. During the survey period follow-up reminder emails were sent to recipients and the survey period closed on Monday 11 May 2015. Survey respondents self-select to complete the survey.

One hundred and two (102) people completed the 2015 ATDC Stakeholder Survey, which was sent to all 700 ATDC e-News subscribers. This represents a 14.57% response rate. The majority of responses (52.09%) were from workers in the community sector, and of those 23.96% work specifically in the ATOD community sector. 40.63% of responses were from Tasmanian Government workers and 4.17% of responses were from Australian Government workers. There was a decrease in the rate of responses from ATDC members with 58% in 2014 to 47.5% in 2015. The rate of those who were unsure whether they were ATDC members increased from 27.5% in 2014 to 29.7% in 2015.

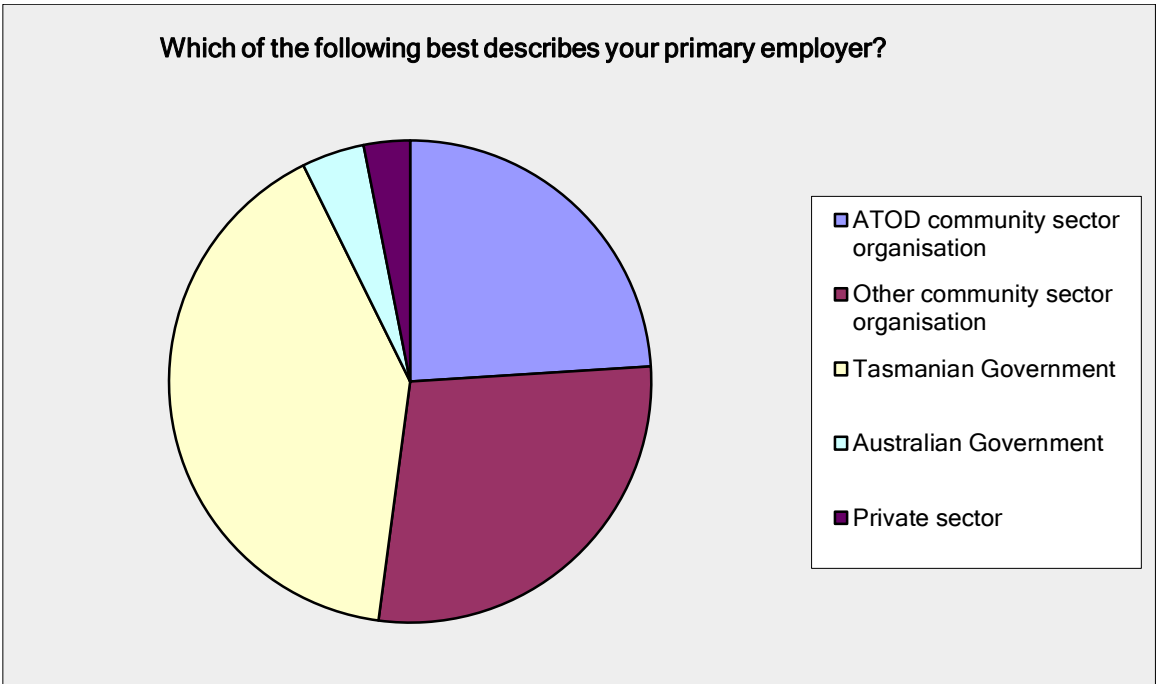


Chart: Primary Employer of Respondents

As a consequence of the sampling technique (self-selection) the data is not representative of all ATDC members or wider stakeholders. The data is limited in inferences to the ATOD sector and broader stakeholders, but it is wholly representative of those respondents who completed the survey.

## Support received from the ATDC

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Of the respondents who were ATDC members, 81.25% felt that they were well supported by the organisation and 16.67% were unsure.

68.83% of all respondents feel that they were well supported by the ATDC in the past year. This represents a decrease of 10.57% from 2014. Of the other responses, 5.19% said they did not feel supported and 25.97% indicated they were unsure.

Respondents were asked to indicate their level of satisfaction with the ATDC over the past year. The majority of responses were positive, with 61.46% indicating they were either very or extremely satisfied with the ATDC over the past year. The charts below provide response rates for ATDC members and all survey respondents.

### Q5 How would you describe your level of satisfaction with the ATDC in the last year?

Answered: 96 Skipped: 6

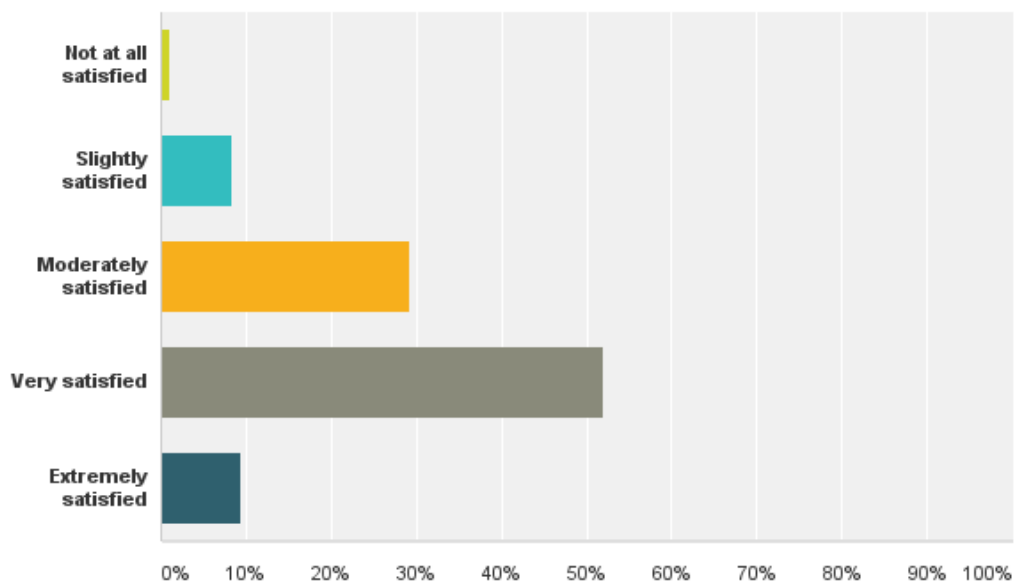


Chart: All Respondents Indicating Their Level of Satisfaction with the ATDC

## Q5 How would you describe your level of satisfaction with the ATDC in the last year?

Answered: 48 Skipped: 0

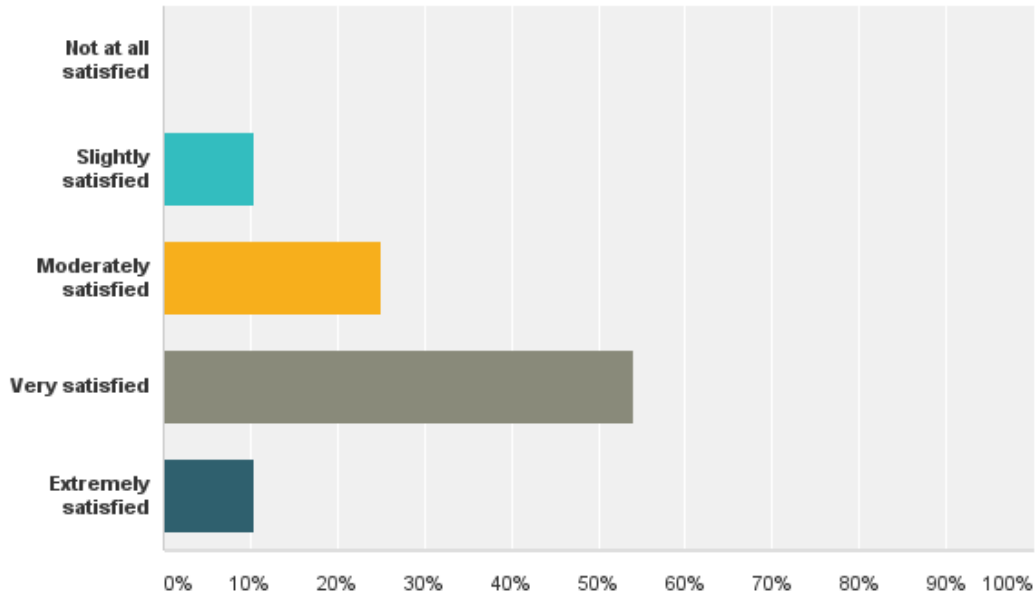


Chart: ATDC Member Respondents Indicating Their Level of Satisfaction with the ATDC

## Key achievements

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Survey respondents were asked to think about the ATDC's work during 2014 and identify the key activity or achievement that stood out for them. Whilst some people identified specific activities or events such as the ATDC Conference held in 2014, or eNews many people identified key themes such as:

- The provision of training and events
- Professional development opportunities
- Consumer engagement
- Advocacy and representation
- Media articles.

## Performance against the 2011-14 Strategic Plan

In the 2015 survey, respondents were once again asked to assess the ATDC against the priorities in the 2011-14 Strategic Plan. The table below represents a summary of how respondents rated performance against those objectives. Responses are provided for 2015 and the three previous years (2014, 2013 and 2012). Due to the way in which the survey is administered it should be noted that this data provides broad trend information only. Year-by-year comparison should be interpreted with caution.

Whilst respondents have consistently rated the ATDC as performing either moderately, very or extremely well against most of the strategies there has been a shift in results for 2015 away from the extreme satisfaction level towards the very or moderate level for a number of strategies.

	Strategy	Year	Rating (%)					Extremely	Unsure
			Not at all	Slightly	Moderately	Very			
1	Providing strong leadership and advocacy for ATOD CSOs	2015	1.2	3.5	11.6	44.2	23.3	16.3	
		2014	0.0	3.4	18.5	45.5	24.4	8.4	
		2013	0.0	2.8	6.5	60.7	22.4	7.5	
		2012	1.0	2.0	9.2	44.9	31.6	11.2	
2	Representing the views of ATOD CSOs to Government	2015	0.0	4.6	12.8	36.0	22.1	24.4	
		2014	0.0	2.5	16.0	42.9	23.5	15.1	
		2013	0.0	2.8	11.2	49.5	23.4	13.1	
		2012	0.0	2.1	12.4	46.4	18.6	20.6	
3	Advocating for continued growth of the ATOD CSOs	2015	0.0	7.0	10.5	39.5	27.9	15.1	
		2014	0.0	1.7	23.5	38.7	26.9	9.2	
		2013	0.0	1.9	11.3	45.3	32.1	9.4	
		2012	0.0	1.0	12.4	43.3	29.9	13.4	
4	Advocating for funding on ATOD issues	2015	2.3	3.5	15.1	41.9	21.0	16.3	
		2014	0.0	4.2	16.8	42.0	21.8	15.1	
		2013	0.0	1.9	11.3	45.3	32.1	9.4	
		2012	0.0	1.0	12.4	43.3	29.9	13.4	
5	Ensuring the voice of ATOD CSOs is heard in public debate and in the media	2015	1.2	3.5	13.9	38.4	25.6	17.4	
		2014	0.0	5.0	21.0	48.7	17.6	7.6	
		2013	0.0	4.7	16.8	49.5	22.4	6.5	
		2012	0.0	6.1	20.4	38.8	21.4	13.3	
6	Actively seek consumer input and including that in ATDC work	2015	2.3	5.8	10.5	39.5	23.3	18.7	
		2014	2.5	5.9	17.6	35.3	22.7	16.0	
		2013	0.9	4.7	18.7	38.3	26.2	11.2	
		2012	1.0	5.1	19.4	33.7	25.5	15.3	
7	Develop ATOD policies that guide responses to harms arising from substance use	2015	1.2	4.6	12.8	50.0	13.9	17.4	
		2014	1.7	1.7	18.5	41.2	17.6	19.3	
		2013	0.0	2.8	13.1	45.8	24.3	14.0	
		2012	2.0	3.1	15.3	34.7	21.4	23.5	
8		2015	1.2	8.1	11.6	36.0	32.6	10.5	
		2014	0.8	4.2	8.4	41.2	39.5	5.9	



	Contributing to a skilled, professional workforce	2013	0.0	1.0	9.5	36.2	48.6	4.8
		2012	0.0	3.1	6.1	33.7	49.0	8.2
9	Conducting relevant events and training and facilitate networking	2015	1.2	4.6	8.1	39.5	38.3	8.1
		2014	0.8	2.5	14.3	29.4	49.6	3.4
		2013	0.0	1.9	7.6	31.4	52.4	6.7
		2012	0.0	2.0	5.1	26.5	62.2	8.2
10	Demonstrating best practice governance	2015	0.0	8.1	15.1	33.7	16.3	26.7
		2014	0.8	2.5	13.4	42.9	18.5	21.8
		2013	0.0	0.9	10.4	35.8	30.2	22.6
		2012	0.0	4.2	9.4	35.4	25.0	26.0
11	Building an active and broad membership base	2015	2.3	7.0	13.9	39.5	18.6	18.6
		2014	1.7	2.5	19.3	36.1	21.8	18.5
		2013	0.0	1.0	12.4	44.8	30.5	11.4
		2012	0.0	6.1	12.2	33.7	30.6	17.3

Table: Assessment of Performance Against ATDC Strategic Plan 2011-14

## Future strategic priorities for the ATDC

Survey respondents were advised that the ATDC had recently finalised its 2015-18 Strategic Plan and that Plan has three broad goals relating to Leadership and Representation, Sustainability of the ATDC and the ATOD sector, and Consumer Engagement. Respondents were asked to rate the strategies within the Plan in terms of whether they should be classified as high, medium or low priority. These ratings will assist in the prioritisation of activities and effort for the ATDC over 2015-16 and beyond.

The top six most highly rated priorities include:

- Facilitating access to professional development opportunities (71.60%)
- Promoting evidence-based best practice (70.37%)
- Gathering member, consumer and stakeholder views to represent the interests of the sector (67.90%)
- Ensuring that the ATDC is a well governed organisation (67.90%)
- Research and promote policy and position papers regarding models of engagement with consumers, users, families and friends (66.67%)
- Maintain effective partnerships with stakeholders (66.67%).

Strategies	Priority (%)			
	Low	Medium	High	Unsure
Gather member, consumer and stakeholder views to represent the interests of the ATOD sector	2.47	20.99	67.90	8.64
Maintain relationships with all levels of government	1.23	23.46	62.96	12.35





Maintain effective partnerships with stakeholders	2.47	20.99	66.67	9.88
Promote evidence-based best practice	1.23	19.75	70.37	8.64
Support the adoption of promotion, prevention and early intervention	3.70	20.99	66.67	8.64
Use a range of communication channels to promote the ATDC and the ATOD sector	3.70	41.98	45.68	8.64
Develop policy and position statements on issues affecting the ATOD sector	3.70	23.46	65.43	7.41
Facilitate access to professional development opportunities for ATOD sector staff	1.23	17.28	71.60	9.88
Support ATDC members to embed continuous quality improvement and participate in accreditation cycles	13.58	27.16	48.15	11.11
Attain accreditation for the ATDC	12.35	23.46	45.68	18.52
Ensure that the ATDC is a well governed organisation	1.23	20.99	67.90	9.88
Seek alternative sources of funding for the ATDC and the ATOD sector	6.17	22.22	58.02	13.58
Research and promote policy and position papers regarding models of engagement with consumers, users, families and friends	2.47	22.22	66.67	8.64
Promote the collection and analysis of consumer feedback within the ATDC and across the ATOD sector	8.64	27.16	58.02	6.17
Tackle stigma and discrimination within the health and human services sector and broader community	4.94	28.40	56.79	9.88
Support the creation and maintenance of Drug User Organisations within Tasmania	17.28	28.40	40.74	13.58

Table: Future Strategic Priorities for the ATDC

## Policy, research and practice priorities for the ATDC

From a list of eleven choices survey respondents were asked to identify the top five policy, research and practice priorities for the ATDC in the coming year. The table below indicates the order in which the priorities were rated by respondents.

Priority	Policy, Research or Practice Area	Ratings (%)
1	Promotion, prevention and early intervention (PPEI)	77.78
2	Consumer participation and engagement	67.90
3	Correctional health: drug use and treatment in prison, and pre and post release	59.26
4	Stigma and discrimination	55.56
5	Justice and sentencing issues (eg court mandated drug diversion, drink driving courts, suspended sentences and mandatory sentencing)	50.62



6	Clinical supervision and support models	44.44
7	Alcohol policy (legislation and regulation)	38.27
8	Legislative change	29.63
9	Needle syringe programs and blood borne virus care	27.16
10	Overdose awareness and prevention (eg Naloxone)	22.22
11	Outcomes purchasing and reporting	20.99

Table: Policy, Research and Practice Priorities for the ATDC

Of the respondents who nominated other policy areas, issues included:

- Ensuring a greater balance in investment between treatment services and law enforcement
- Increasing the availability of pharmacotherapy, particularly for those in rural or remote areas.

## ATDC communication methods

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Both the 2014 and 2015 stakeholder surveys included questions to obtain feedback about the effectiveness of various ATDC communication methods.

78 respondents answered a series of general questions regarding the frequency of ATDC communications, the format of communications and the relevance of content. The table below indicates that a large proportion of respondents believe that the ATDC's communication is either always or sometimes appropriate in terms of frequency and format and that content is relevant.

	Ratings (%)			
	Always	Sometimes	Never	Unsure
The frequency of communication is appropriate	76.92	17.95	1.28	3.85
The format of communications is appropriate	78.21	17.95	1.28	2.56
The content is relevant	75.64	21.79	0.00	2.56

Table: Ratings of ATDC Communication

In both 2014 and 2015 respondents were asked whether they follow the ATDC on social media platforms such as Facebook, Twitter and LinkedIn. Although the vast majority of respondents do not follow the ATDC on any form of social media there has been an increase amongst survey respondents following the ATDC Facebook page which increased from a relatively small 10.3% of respondents in 2014 to 22.08% in 2015. Likewise followers of both LinkedIn and Twitter have increased very slightly from 2014 to 2015 with the following shifts respectively, 4.5% to 9.21%, and 5.5% to 6.58%.



Respondents were asked to select from a range of options to identify potential elements that may attract them to follow the ATDC on social media. The table below details the results and highlights that there were not highly significant levers that are likely to draw respondents to ATDC’s social media platforms. Around 30% of survey respondents rated social media as a very useful tool for publicising upcoming events and training and making news and announcements.

	Ratings (%)					
	Not at all	Slightly	Moderately	Very	Extremely	Unsure
Upcoming events and training	35.90	10.26	8.97	30.77	11.54	2.56
News and announcements	35.90	11.54	6.41	33.33	8.97	3.85
Research and reports	37.18	6.41	20.51	25.64	7.69	2.56
Employment opportunities	43.59	8.97	11.54	25.64	7.69	2.56
Competitions	56.41	14.10	7.69	12.82	5.13	3.85

Table: Ratings of Potential Elements to Attract Respondents to Follow ATDC Social Media

## Promotion, prevention and early intervention

For the first time the ATDC survey asked a specific series of questions regarding promotion, prevention and early intervention (PPEI). Survey respondents were asked about their awareness of *Everybody’s Business*, the State Government’s Strategic Framework for Implementing Promotion, Prevention and Early Intervention (PPEI) Approaches in Averting Alcohol, Tobacco and Other Drugs Use. Half of all respondents were aware of the Framework, one-third of respondents were not aware and 16% were unsure.

Survey respondents were asked about their awareness of ATDC’s work in developing an Implementation Plan for PPEI in Tasmania. Although 21.79% of respondents were not at all aware of the ATDC’s work in the PPEI area, a combined 44.87% of respondents were either moderately, very or extremely aware of the organisation’s work.

Respondents were also asked about their organisation’s capacity to implement the PPEI Plan. A significant 43.59% of respondents were unsure about their organisation’s capacity to implement PPEI. A combined proportion 28.2% of respondents believed that their organisation had either moderate, very or extreme capacity to implement PPEI.

Respondents were asked to highlight any barriers to the implementation of PPEI. 33 respondents identified a range of barriers, however the issue that was most consistently highlighted related to the lack of resources. Other respondents identified limited organisational capacity, a lack of knowledge and training, as well as poor linkages and coordination.

The final question in the PPEI series asked respondents to identify supports required to enable the successful implementation of the PPEI Plan. Whilst many responses related to the availability of funding and resources a number of responses highlighted some interesting options for consideration, such as:



- Workforce training and development
- Communication and information
- Community and stakeholder engagement
- Case studies that demonstrate success
- A workshop or forum about the plan
- Long-term and sustainable organisational and sector change.

