



This paper provides a brief overview of data relating to clients who are Aboriginal peoples. It utilises data from the North & West Metro AOD Service Partnership (N&WMAODSP) across the four catchments of Inner North Melbourne, North Melbourne, North West Melbourne and South West Melbourne. The data relates to the reformed adult services, and does not include data from other service providers, residential or youth programs at this stage.

Of the 7,276 clients aged 16+ years who accessed intake and assessment services through the N&WMAODSP between March 2015 and March 2016, 5.04% identified as Aboriginal, Torres Strait Islander, or both, that equates to 367 individuals. This data is drawn from those clients.

The catchment area of the North & West Metro Region AOD Service partnership includes the land of the Wurundjeri peoples, the direct descendants of the original custodians of modern-day Melbourne. Their lands cover a large area that spans the inner city, extends north of the Great Dividing Range, east to Mount Baw Baw, south to Mordialloc Creek and to the mouth of the Werribee River. The Wurundjeri community remains strong and vibrant despite the impacts of colonisation, they continue to practice Wurundjeri culture, perform ceremonies and pass on knowledge to younger generations.

Key differences in our Aboriginal & Torres Strait Islander clients

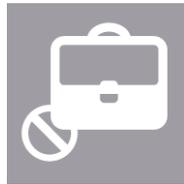
A higher proportion of women in treatment



39%

Compared to 32% for general clients

Higher rates of unemployment



74.4%

Compared to 62% for general clients

Higher rates of unstable housing



29.2%

Compared to 8.2% for general clients

Aboriginal clients are younger



34

years

Compared to an average age of 36 years for general clients

A different primary drug of concern



37.1%

ISSUES WITH METHAMPHETAMINE

Compared to 33% of general clients seeking help for their alcohol use

Lower proportions of self-referral



49.3%

Compared to 59% for general clients

AOD use

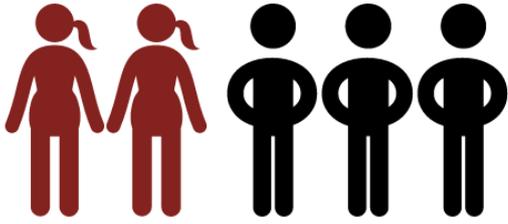
Top 4 listed primary drugs of concern:

37.1% Ice **20.2%** Marijuana
17.4% Alcohol **13.6%** Heroin



37.6% of Indigenous clients have never injected [compared to 57.6% of total clients]

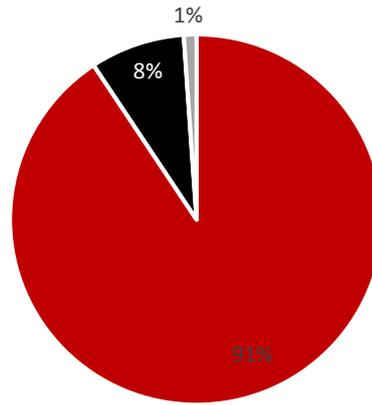
Gender



2 in 5 **female**

39.8% of 367 indigenous clients in this 12 month period were female (men made up 60.2%)

Culture



Indigenous clients

- Aboriginal but not Torres Strait Islander
- Both Aboriginal and Torres Strait Islander
- Torres Strait Islander but not Aboriginal

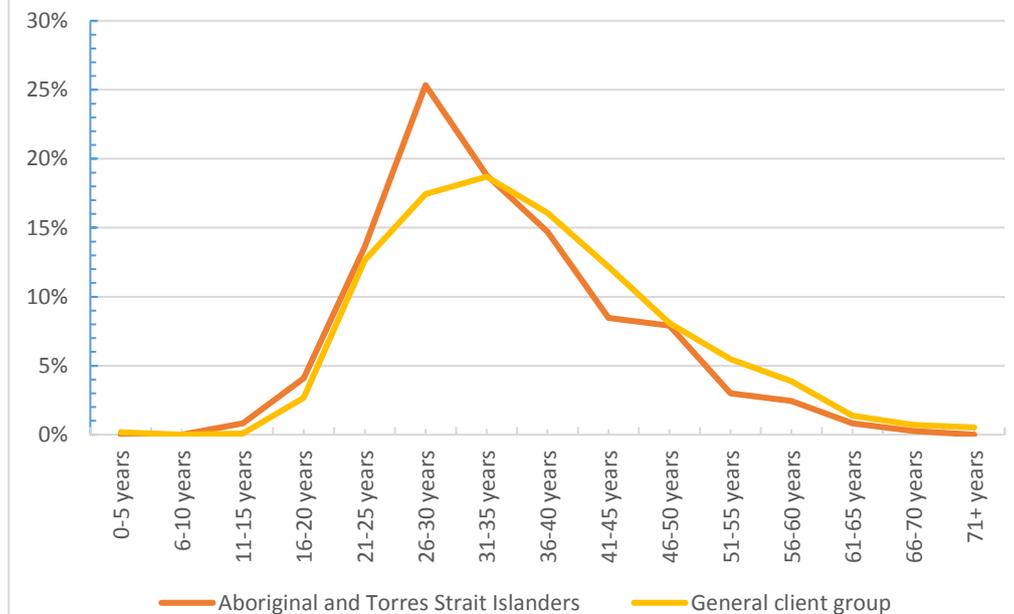
Age

This graph shows the age distribution of Aboriginal and Torres Strait Islander clients (in orange) compared to all AOD clients (in yellow).

Key facts:

- The Aboriginal client cohort is younger than the broader client group.
- Average age of N&W AOD Aboriginal clients is 34years, compared to 36.6 for the general clients.
- Female Aboriginal clients have an average age of 33years, and 34years for men (compared to 36years and 37 years respectively for the broader client group).

Age distribution of Indigenous clients compared to general clients



Consultation suggests that the higher proportion of young Aboriginal women in treatment may occur as a result of child protection issues, family violence and other factors related to intergenerational trauma.

It is a notable strength that young Aboriginal women are seeking treatment at higher than average rates and one of our tasks is to ensure we utilise this momentum as much as possible.

Housing security

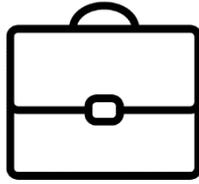


of Aboriginal clients are in **unstable housing** (including prison, caravan parks, rooming houses and rough sleeping)

This is roughly 3.5x the rate of unstable housing that is recorded in our general client group (rate 8.2%). International evidence suggests that housing stability has a significant impact on someone's capacity for recovery.

Employment & income

74.4% unemployed
6.5% work fulltime | 4.4% work part time



This is compared to a rate of 62% unemployment in our general client group, (15% fulltime work, 8% part time work). Income and employment affects recovery as it has a direct relationship with available life resources, mental health and wellbeing.

Living arrangements

We look at living arrangements as a proxy measure for health and wellbeing. These measures are indicative of life resources, social connectedness and security.



55%

Renting

(public or private)

Compared to 35.5% in general clients.

The rates of renting and private home ownership in our Aboriginal clients vary significant from the rates of our general client group.



10.6%

Privately owned house or flat

Compared to 30% in general clients.

At the two ends of the spectrum, a client living arrangements are related to isolation and social connectedness, both key concepts in drug and alcohol recovery.



21%

Live alone

Compared to 20.2% in general clients.

61% Live with at least one family member or friend

Compared to 64% in general clients.



11.4%

Live with children

Compared to 13.2% in general clients.



Further information about client characteristics and drug use patterns and behaviour will be addressed in future Catchment Based Planning information sheets. We welcome your input into topics of interest to you and your organisation.

Data notes & limitations

- We have used intake & assessment data to outline the demographics of AOD clients in our region as the N&WMAODSP provides the Intake and Assessment function for the 4 catchment. I&A data therefore represents *most of the catchment's clients* before they are referred out to allocated services (that include both partner and non-partner agencies). This data does not currently include clients who directly access non-partner agencies or out of scope services (i.e. those who have accessed Youth and Residential services directly).

Catchment based planning is working to improve consistency, analysis and reporting to ensure measureable improvements in data quality, increasing its reliability as a basis for service decisions. Ongoing monitoring and analysis in formats such as this will help this to be achieved.

The inclusion of data from non-partner agencies will improve client data analyses, please use the contact noted in the footer of this document to discuss this.