

31 October 2025

Dr Mike Freeland MP
Chair
Standing Committee on Health, Aged Care and Disability
PO Box 6021
Canberra ACT 2600

Submitted via Committee website

Dear Dr Freeland

headspace National Youth Mental Health Foundation welcomes the opportunity to provide this supplementary submission to the House Standing Committee on Health, Aged Care and Disability's inquiry into the health impacts of alcohol and other drugs in Australia.

headspace provides early intervention mental health services to 12- to 25-year-olds, via a network of 172 services across Australia. headspace also offers online and phone support services and resources through eheadspace. Our services provide four core streams of service: mental health, physical health, alcohol and other drugs support, and vocational services.

In our submission to the inquiry conducted in the previous Parliament, we highlighted the importance of harm reduction, the role of integrated service delivery, and the need for ongoing workforce support. In this supplementary submission, we offer the Committee contributions from members of our national reference groups (both young people and family members) on these and related themes.

headspace would welcome the opportunity to discuss ways to minimise the health impacts of alcohol and other drug use among young people in Australia, or to explore any of the themes in our submissions with the Committee in more detail.

Yours sincerely,



Vikki Ryall

A/Chief Executive Officer

Submission to the Standing Committee on Health, Aged Care and Disability

1. Introduction

The previous Committee highlighted young people as a priority population, noting:

- it is a peak time for beginning to use AOD, although only a subset of young people will develop a problem with AOD use
- those who do need help with their AOD use can experience barriers accessing support, including limited health literacy, geographic isolation, stigma, social exclusion or concerns about confidentiality
- early intervention and proactive approaches are essential.

Our submission to the previous committee highlighted headspace's integrated model of care for young people with AOD concerns, priority populations of young people for prevention and early intervention, and the importance of harm reduction across other sectors.

This supplementary submission offers additional perspectives and experiences of young people, primarily providing input from the following groups:

- young people who are members of the headspace Youth National Reference Group (hYNRG)
- young people who are members of headspace's First Nations Youth Advisory Council (FNYAC)
- parents and family members of the headspace Family Reference Group.

Contributions from reference group members (quoted below) have been de-identified for inclusion here.

This submission was written on the lands of the Wurundjeri people of the Kulin Nation. headspace acknowledges Aboriginal and Torres Strait Islander peoples as Australia's First People and Traditional Custodians. We value their culture, identities and continuing connection to country, waters, kin and community. We pay our respect to Elders past and present and are committed to making a positive contribution to the wellbeing of Aboriginal and Torres Strait Islander young people, by providing services that are welcoming, safe, culturally appropriate and inclusive.

2. Responding to young people's use of alcohol and other drugs

Many young people use alcohol and other drugs as teenagers or young adults, and some can experience problems relating to their use. Reference group members highlighted the broad range of factors that contribute to AOD use:

There are different ways young people use substances, it can be experimental, situational, intensive, recreational, or dependent use.

hYNRG member, aged 22

Young people's relationship with alcohol and other drugs is complex and shaped by many factors (such as social, emotional, and environmental etc). Substance use is often less about recklessness and more about coping with what's happening beneath the surface. I think many young people turn to alcohol or drugs as a way to manage anxiety, social pressure, or trauma, especially when other coping supports are unavailable or stigmatised.

hYNRG member, aged 22

Young people who engage in alcohol or other drug use often experience underlying mental health challenges, which frequently predate substance use. Many turn to drugs or alcohol as a means of coping with emotional pain or trauma. It is therefore essential that services are accessible and responsive, providing young people with viable alternatives and supportive interventions. Effective

programs should offer safe spaces, constructive activities, and opportunities for connection, enabling young people to address their mental health needs while reducing reliance on substances as a coping mechanism.

FNYAC member, aged 24

Young people's use of alcohol and other drugs is shaped by a mix of cultural, social, and environmental factors not just individual choice. For university students like me, there is often strong pressure (social, cultural, academic) to drink.

hYNRG member, aged 23

Members of the First Nations Youth Advisory Council were also concerned about the use of alcohol and other drugs among First Nations young people in Australia, including the reliability of the data captured on this:

There are higher rates reported of illicit drug use among First Nation people in remote areas than non-indigenous Australians (27% vs 15% used illicit drugs in the past 12 months), but the surveys and monitoring have a low-sample reliability due to the ways data is collected in these areas. So these results may not even reflect the actual harm this is doing to the First Nation communities due to not safe and aware practices used to collect this data.

FNYAC member, aged 26

3. Prevention, early intervention and harm minimisation

Prevention, early intervention and harm minimisation are all essential to prevent harm and reduce the immediate and long term negative impacts of AOD use. This includes approaches to keep young people who use substances as safe as possible. Reference group members reinforced the need for comprehensive approaches:

Young people need realistic strategies to stay safe, such as knowing safe limits, understanding how substances interact, recognising early signs of dependence, and knowing what to do if someone experiences an overdose or panic reaction.

hYNRG member, aged 22

Young people's substance use is often linked to stress, social expectations, and environmental pressures. Support strategies should go beyond prevention and focus on creating safer environments, promoting wellbeing, and reducing stigma so young people feel comfortable seeking help.

hYNRG member, aged 23

Early intervention is critical, as it can prevent harmful patterns from developing. This should be followed by comprehensive education, ensuring young people understand appropriate substance use and the potential consequences of misuse. Providing young people with alternative opportunities and constructive activities is also essential.

FNYAC member, aged 24

Reference group members also highlighted the culture around AOD use in Australia, and noted that we need to 'reframe how we talk about alcohol in society'. This can mean changing how alcohol is portrayed in the media, normalising non-alcoholic alternatives at events and parties, and creating spaces where young people (particularly young men) can connect without AOD.

Preventing and reducing harm from alcohol and other drug use requires addressing the broader culture around drinking in Australia, rather than simply viewing young people as the problem.

hYNRG member, aged 23

In certain settings like workplaces, schools and homes, alcohol can be deeply embedded in social life or culture. This makes it harder for young people to set boundaries or make changes.

hYNRG member. Aged 23

Drinking is often celebrated and even expected in many social and professional environments. This normalisation makes it harder for young people to recognise when their use is becoming risky.

hYNRG member, aged 22

Further, the stigma and stereotypes around AOD use in young people persists, and needs to be addressed so that it no longer prevents young people from accessing help.

The stigma around alcohol and drug use needs to be less and not come from a place of judgement.

FNYAC member, aged 26

Stigma and fear continue to stop young people from asking for help early. Many worry about being judged, labelled, or reported, particularly in small communities or within schools.

hYNRG member, aged 22

Finally, prevention must extend beyond the AOD, mental health and health sectors, to consider broader factors that contribute to problems with AOD use:

We need to address the broader pressures that contribute to substance use, such as cost-of-living stress, unstable housing, academic burnout, and social isolation. When these underlying drivers are ignored, the focus shifts unfairly onto individual behaviour rather than the environment around it.

hYNRG member, aged 22

4. Responding to young people's use of alcohol and other drugs

When young people experience problems with their AOD use, they need accessible, non-judgmental and holistic care. As reference group members noted:

Services must be easily accessible and non-judgmental. Shaming young people is counterproductive, as they are often already aware that their behaviour is harmful; supportive, empathetic care is far more effective in helping them seek and engage with help.

FNYAC member, aged 24

I know from my own family's experiences with alcoholism and drug addiction that support services are not always available or easily accessible. When we've reached out for help in the past, our family members were often treated in ways that made them feel less than human waiting hours for proper care, only to be met with poor treatment once it arrived. As Aboriginal people, this experience is even more disheartening.

FNYAC member, aged 24

It's always important to give young people education around AOD use and supporting them with reasonable goals and solutions that are realistic and what the individual is wanting to do/ achieve.

hYNRG member, aged 22

You have to come from a place of compassion and not judgement, you need to understand the nuances and complexities of the culture of substance use in Australia.

FNYAC member, aged 26

As highlighted in our submission to the earlier committee inquiry, headspace services are designed to provide integrated support for mental health and AOD use. headspace reference group members highlighted how important this is for young people:

Seeing AOD use up close has really reinforced for me that substance use often reflects an underlying struggle with mental health, rather than simply "bad choices."

hYNRG member, aged 22

I used substances to help numb and forget about my own issues that plagued my mind. If we have more supports and services that catered towards youth who are experiencing these issues we can help to prevent further harm to them with their substance use.

FNYAC member, aged 26

You can not just look at one aspect of these issues but at them as a whole and everything that interconnects with the use of substances.

FNYAC member, aged 26

Reference group members also highlighted some key elements of the headspace model of care that are particularly important when responding to young people's AOD use. These include: holistic, coordinated care provided by a multidisciplinary team; building a trusting relationship between young people and clinicians; providing trauma-informed care; and family inclusive practice.