Understanding how to create earlier pathways to AOD help and support: the right information, in the right format, at the right time

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Introduction: Access to high quality information helps reduce the risk of AOD harms by supporting early pathways for behaviour change. The Alcohol and Drug Foundation (ADF) provide a range of resources to prevent and reduce AOD harm, but for this information to be effective it must meet the needs of those seeking it. We set out to better understand the needs of people seeking AOD information and their experience of seeking support and treatment.

Method: Two online, Australia-wide surveys were completed by almost 2,500 members of the general community who use AOD or are concerned about another person's AOD use. The survey captured AOD knowledge, AOD information and help seeking behaviour, the availability and helpfulness of information, and explored experiences of support or treatment, including the common barriers.

Key Findings: Respondents reported strong AOD knowledge and awareness of the risk and protective factors related to AOD harms. Rates of accessing AOD information were "moderate", with people most frequently seeking information for themselves via Google, but reported AOD-focussed websites and doctors as the most helpful source of AOD information.

Of those who wanted support or treatment, approximately half did not access services, citing concerns around privacy and judgement from others. Respondents also commonly experienced judgement from family and friends.

Discussions and Conclusions: Australians value online sources of AOD information, like that provided by the ADF, but are worried about being judged by family and friends, who they rely on for support. This suggests a need for AOD information designed for loved ones of people who use AOD.

Implications: These comprehensive surveys helped the ADF maximise the reach and impact of AOD information by identifying current needs and gaps in resources. These findings also informed the creation of new AOD resources and tools.