



Australian Indigenous HealthInfoNet

Alcohol and Other Drugs
Knowledge Centre

aodknowledgecentre.ecu.edu.au

Alcohol and Other Drugs Knowledge Centre Project

Performance Report

1 July 2024 – 30 June 2025

Submitted to: IAHP-WA

Submitted: July 2025

Core funding
is provided by the
Australian Government
Department of Health,
Disability and Ageing

The Australian Indigenous HealthInfoNet acknowledges the Traditional Custodians of the lands and waters of Australia and the Torres Strait. We respect all Aboriginal and Torres Strait Islander people—their customs and their beliefs. We also pay our respects to Elders past, present and emerging, with particular acknowledgement to the Whadjuk people of the Noongar nation, the Traditional Custodians of the lands where our offices are located.

ECU
EDITH COWAN
UNIVERSITY

Performance report Key developments and Impact

1 July 2024 - 30 June 2025

Highlights

- ✓ The AODKC exhibited at the **APSAD conference** October 2024 Canberra
- ✓ The AODKC presented and exhibited at the **WANADA conference** March 2025 Perth
- ✓ The AODKC exhibited at the **NADA conference** June 2025 Sydney
- ✓ 2024 User Survey found **98% of respondents were likely to recommend the AOD Knowledge Centre website to others**
- ✓ Publication of **Learning from 50 years of Aboriginal alcohol programs: a summary**
- ✓ Publication of **Review of alcohol use among Aboriginal and Torres Strait Islander people: patterns, impacts and community-led responses**

Newsletters



845 newsletter subscribers **9** newsletters distributed

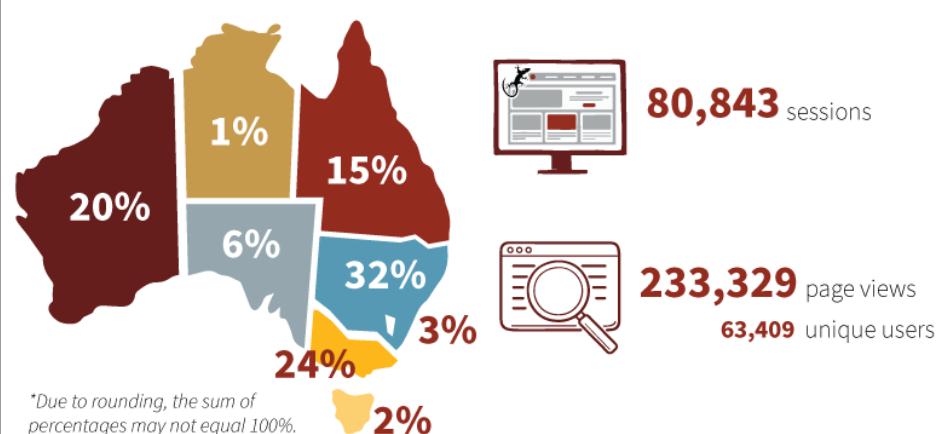
New content



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Helping to close the gap by providing the evidence base to inform practice and policy in Aboriginal and Torres Strait Islander health

Website usage and where our users are from



Social media activities

		255 engagements	11.4% engagement rate	(Industry average: 1.80%)
		41 engagements	4.3% engagement rate	(Industry average: 4.40%)
		931 engagements	5.4% engagement rate	(Industry average: 2.10%)
		1025 engagements	6.9% engagement rate	(Industry average: 3.00%)

Instructions:

This template is to be used for:

- Completion of a **Performance Report (2A and 2B)** measuring outcomes against your approved Activity Work Plan (as required in the terms of your Agreement).
- When complete, email to your IAHP-WA@dss.gov.au

1A. SERVICE PROVIDER & FUNDING INFORMATION

Organisation name & location	Edith Cowan University, Mount Lawley, Western Australia
Activity ID: 4-JOQUJ6I	HealthInfoNet - Alcohol & Other Drugs Project
Reporting period:	1 July 2024 – 30 June 2025
Contact name & position title:	Professor Bep Uink Director Australian Indigenous HealthInfoNet Edith Cowan University 2 Bradford Street, Mt Lawley WA 6050 Ph: 08 9370 6155
Performance Report Template	
The template overleaf has been created from the submitted 2024 - 2025 Activity Work Plan to enable the Community Grants Hub to efficiently assess the progress made against the grant key performance indicators during the reporting period.	

1A. ACTIVITY DELIVERABLES 2024-2025 Activity Work Plan (AWP)			2A. Performance Report																							
Deliverable	Measures	Timeline	Status (Select from Met, Partly-Met, Delayed, or Completed)	Progress Comments																						
1. New entries of publications and resources added in the AODKC's online bibliography and other information added about programs, organisations and workforce information (events, courses, funding and jobs).	Number of new entries added	1/7/2024 – 30/6/2025	Met	<p>In the reporting period, the following number of items were added to the database:</p> <table border="1"> <thead> <tr> <th>Item</th> <th>Count</th> </tr> </thead> <tbody> <tr> <td>Publications</td> <td>107</td> </tr> <tr> <td>Policies</td> <td>24</td> </tr> <tr> <td>Health promotion and Resources</td> <td>35</td> </tr> <tr> <td>Health practice resources</td> <td>51</td> </tr> <tr> <td>Programs</td> <td>42</td> </tr> <tr> <td>Organisations</td> <td>3</td> </tr> <tr> <td>Events</td> <td>119</td> </tr> <tr> <td>Courses</td> <td>18</td> </tr> <tr> <td>Funding</td> <td>12</td> </tr> <tr> <td>Jobs</td> <td>336</td> </tr> </tbody> </table>	Item	Count	Publications	107	Policies	24	Health promotion and Resources	35	Health practice resources	51	Programs	42	Organisations	3	Events	119	Courses	18	Funding	12	Jobs	336
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2. Audits of existing information on the AODKC website to ensure content is accurate and free of broken links.	<p>In the reporting period, the following topics will be fully audited, which includes:</p> <ul style="list-style-type: none"> • Volatile substance use • Prescription drugs • Kava • Harm reduction <ul style="list-style-type: none"> ◦ Pharmacotherapies ◦ Mobile patrols and sobering-up shelters ◦ Injecting drug use <p>Key facts will be audited for:</p> <ul style="list-style-type: none"> • Volatile substance use • Harm reduction • Social Impacts • Illicit drugs 	1/7/2024 – 30/6/2025	Met	<p>In this reporting period, a full audit of the following topics was completed:</p> <ul style="list-style-type: none"> • Volatile substance use • Prescription drugs • Kava • Harm reduction <ul style="list-style-type: none"> ◦ Pharmacotherapies ◦ Mobile patrols and sobering-up shelters ◦ Injecting drug use <p>The audit of these topics included auditing:</p> <ul style="list-style-type: none"> • resources (357 entries) • programs (232 entries) • organisations (74 entries) • courses (9 entries) • funding (11 entries) <p>Key facts web pages were checked for relevance and currency and updated where necessary for the following content:</p> <ul style="list-style-type: none"> • Volatile substance use – main page and all subtopics: Prevalence, Prevention, Regulation, Treatment and Support • Harm reduction – main page and all subtopics: Injecting drug use, Mobile patrols and sobering up shelters, and Pharmacotherapies • Social Impacts – main page and all subtopics: Stronger communities and Justice system • Illicit drugs – main page and subtopics: Prevalence, Prevention and education, Regulation and control, Treatment and support, and Young people. <p>The subtopics for Illicit drugs below were updated:</p>

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				<ul style="list-style-type: none"> ○ Amphetamines and cocaine- main page and subtopics: Prevalence, Prevention and education, Treatment and support ○ Cannabis – main page and subtopics: Prevalence, Prevention and education, Treatment and support ○ Opioids – main page and subtopics: Prevalence, Prevention and education, Treatment and support. <p>During the reporting period an estimated 13,340 links to publications, resources, and policies across all the HealthInfoNet's websites, including the AODKC website, were checked for accuracy and updated.</p>																																												
3. A state-of-the-art AODKC web resource to be publicly available for a minimum of 95% of the time.	The percentage of time that the AODKC website is publicly available. Usage statistics for the AODKC website reported in performance report.	Ongoing throughout the reporting period	Met	<p>In the reporting period, the AODKC website was freely available to users for 99% of the time.</p> <p>During this reporting period there were:</p> <ul style="list-style-type: none"> • 233,329 pageviews • 80,843 sessions • 63,409 unique users. <table border="1" style="margin-top: 10px; border-collapse: collapse; width: 100%;"> <thead> <tr> <th>Period</th> <th>Pageviews</th> <th>Sessions</th> <th>Pageviews/Session</th> <th>Average Session Duration (min:sec)</th> <th>Users</th> <th>Pageviews/User</th> <th>Sessions/User</th> <th>Engagement Rate</th> </tr> </thead> <tbody> <tr> <td>Reporting Period 1 Jul 2024 to 30 Jun 2025</td> <td>233,329</td> <td>80,843</td> <td>2.89</td> <td>02:36</td> <td>63,409</td> <td>3.68</td> <td>1.28</td> <td>89.12%</td> </tr> <tr> <td>Previous Period 1 Jul 2023 to 30 Jun 2024</td> <td>200,523</td> <td>93,947</td> <td>2.13</td> <td>02:41</td> <td>73,606</td> <td>2.73</td> <td>1.28</td> <td>59.58%</td> </tr> <tr> <td>All Time 1 Jul 2023 to 30 Jun 2025</td> <td>433,852</td> <td>173,885</td> <td>2.50</td> <td>02:40</td> <td>135,859</td> <td>3.19</td> <td>1.28</td> <td>72.06%</td> </tr> </tbody> </table>									Period	Pageviews	Sessions	Pageviews/Session	Average Session Duration (min:sec)	Users	Pageviews/User	Sessions/User	Engagement Rate	Reporting Period 1 Jul 2024 to 30 Jun 2025	233,329	80,843	2.89	02:36	63,409	3.68	1.28	89.12%	Previous Period 1 Jul 2023 to 30 Jun 2024	200,523	93,947	2.13	02:41	73,606	2.73	1.28	59.58%	All Time 1 Jul 2023 to 30 Jun 2025	433,852	173,885	2.50	02:40	135,859	3.19	1.28	72.06%
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4. User experience survey	A user experience survey report	By June 2025	Met	<p>A user survey on key indicators related to usability and relatability of the AODKC website was conducted in July-August 2024 with specific focus on the AOD workforce. A report was sent to the DOHAC on 5/5/2025 (see Attachment A). Results were overall positive, useful, and are being considered as part of ongoing quality improvement.</p>
5. Produce knowledge exchange products (KEPs) on a key/topical AOD content area.	<p>Publication of Summary of book: <i>Learning from 50 years of Aboriginal alcohol programs: Beating the grog in Australia</i> and associated video and factsheet (KEPS)</p> <p>Publication of Review: <i>of alcohol use among Aboriginal and Torres Strait Islander people (working title)</i> and associated video and factsheet (KEPS)</p>	<p>Summary completed by 31 December 2024)</p> <p>Completed by 30 June 2025</p>	Partly Met	<p><u>Summary of book</u></p> <ul style="list-style-type: none"> • <i>Learning from 50 years of Aboriginal alcohol programs: Beating the grog in Australia: a summary</i> - published December 2024 • Associated video and factsheet (KEPS) based on the summary - published February 2025. <p><u>Review</u></p> <ul style="list-style-type: none"> • <i>Review of alcohol use among Aboriginal and Torres Strait Islander people: patterns, impacts and community-led responses</i> - in final stages of production at the time of reporting. Anticipated publication date 30 July 2025. • Associated video and factsheet (KEPS) based on the review - in final stages of production at the time of reporting. Anticipated publication date: 12 August 2025 <p>Therefore, the deliverables were met, however with a slight delay to the Review publication and KEPs by 4 to 6 weeks, due to unforeseen circumstances.</p> <p>Note: Summary of the book <i>Learning from 50 years of Aboriginal alcohol programs</i> covers the historical context for approaches to reducing harms from alcohol use with an emphasis on lessons learned from the past, while the <i>Review of alcohol use among Aboriginal and Torres Strait Islander people: patterns, impacts and community-led responses</i> covers the most recent research with more emphasis on current approaches to addressing alcohol use harms.</p>

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6. Ongoing engagement and interaction with users and other stakeholder through the production and dissemination of AOD content on Facebook, Instagram, X and LinkedIn.	Number of social media posts, followers, impressions, engagements, and click-throughs.	1/7/2024 – 30/6/2025	Met	<p>The following table provides information on social media activities in the reporting period:</p> <table border="1"> <thead> <tr> <th></th><th>Facebook</th><th>Instagram</th><th>X</th><th>LinkedIn</th><th>Total</th></tr> </thead> <tbody> <tr> <td>Posts</td><td>8</td><td>8</td><td>125</td><td>131</td><td>272</td></tr> <tr> <td>Impressions / Reach</td><td>2240</td><td>948</td><td>17201</td><td>14707</td><td>35096</td></tr> <tr> <td>Engagement</td><td>255</td><td>41</td><td>931</td><td>1025</td><td>2252</td></tr> <tr> <td>Engagement rate</td><td>11.38%</td><td>4.32%</td><td>5.41%</td><td>6.97%</td><td>6.42%</td></tr> <tr> <td>Industry average engagement rate (non-profit organisations)¹</td><td>1.8%</td><td>4.4%</td><td>2.1%</td><td>3.0%</td><td>2.83%</td></tr> <tr> <td>No. of followers (HealthInfoNet)</td><td>6302</td><td>1858</td><td>7599</td><td>12142</td><td>27901</td></tr> </tbody> </table>						Facebook	Instagram	X	LinkedIn	Total	Posts	8	8	125	131	272	Impressions / Reach	2240	948	17201	14707	35096	Engagement	255	41	931	1025	2252	Engagement rate	11.38%	4.32%	5.41%	6.97%	6.42%	Industry average engagement rate (non-profit organisations)¹	1.8%	4.4%	2.1%	3.0%	2.83%	No. of followers (HealthInfoNet)	6302	1858	7599	12142	27901
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¹ Source: HootSuite 2025

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Deliverable	Measures	Timeline	Status (Select from Met, Partly-Met, Delayed, or Completed)	Progress Comments					
				No. of followers (AODKC X)	n/a	n/a	1634	n/a	1634
				No. of followers (AODKC LinkedIn)	n/a	n/a	n/a	811	811
<p>The social media strategy for the AODKC is performing well with engagement rates much higher than the industry average. There has also been an excellent growth in Instagram and LinkedIn followers.</p> <p>Please note that there will be move away from Twitter/X platform by 30 September 2025, in line with sector trends.</p>									
7. Regular compilation of recent research, and other information relevant to the specified health topics for distribution via the AODKC newsletter.	At least 8 newsletters produced.	1/7/2024 – 30/6/2025	Met	<p>In the reporting period, 9 newsletters were sent to subscribers.</p> <p>At the end of the reporting period the AODKC newsletter had 845 subscribers.</p>					
8. Ongoing development of strong, reciprocal, collaborative relationships, and/or partnerships, with key organisations in the	Hold one online reference group meeting each year.	September-October 2024	Met	<p>The Reference Group met online in October 2024. A call out for expressions of interest was sent inviting Aboriginal and Torres Strait Islander people with experience in the AOD workforce or as a community representative to be part of the AODKC Reference group, to help guide future directions and priorities. There was strong interest, and six Aboriginal and Torres Strait Islander persons with either lived experience or sector experience of AOD have been invited to the Reference Group.</p>					

1A. ACTIVITY DELIVERABLES 2024-2025 Activity Work Plan (AWP)			2A. Performance Report	
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Aboriginal and Torres Strait Islander AOD sector.				
9. Regular email communication throughout each year. Seek expertise, as needed, for peer review functions and reference group membership as required.	At least four email communications with consultants in the year	1/7/2024 – 30/6/2025	Met	<p>In the reporting period, electronic communication to consultants included specific emails on the:</p> <ul style="list-style-type: none"> Latest issues x 2 of the Journal of the Australian Indigenous HealthInfoNet July, December 2024, and April 2025 issue of the HealthInfoNet's Director's Communique. Promotion of the <i>Learning from 50 years of Aboriginal alcohol programs: a summary</i> and associated video and factsheet.
10. Continued engagement with the workforce and other stakeholders.	Two conference exhibitions, presentations and/or inserts in the year.	1/7/2024 – 30/6/2025	Met	<p>The following AOD specific cafés, presentations and/or inserts occurred in this reporting period:</p> <ul style="list-style-type: none"> APSAD conference October 2024 – Canberra ACT (exhibited) WANADA conference March 2025 – Perth WA (presented and exhibited) NCETA Symposium May 2025 – Adelaide SA (online presentation) NDRI May 2025 – Perth WA (online presentation) NADA conference June 2025 – Sydney NSW (exhibited) Article on the AODKC published in NADA Advocate. <p>The AODKC was also promoted at six other conferences the HealthInfoNet exhibited at (AODKC brochures, current reviews and the AODKC pull up banner displayed) as well as at two HealthInfoNet Roundtables and stakeholder meetings across the country (see Stakeholder Engagement section below for more information).</p>

1B. RISK MANAGEMENT 2024-2025 Activity Work Plan (AWP)		2B. Performance Report 1 July 2024 – 30 June 2025
Challenges - What difficulties may be experienced by your organisation in delivering the program?	Mitigation strategies – how will your organisation try to address these difficulties?	Progress - to be filled in by organisation only when undertaking a report against your deliverables Risks were identified and mitigated successfully.
There are five main risks to the HealthInfoNet's operations: <ul style="list-style-type: none"> • cultural appropriateness • quality control • financial • staffing • information technology. 	<ul style="list-style-type: none"> • Cultural appropriateness: mitigated through strong governance; oversight by the Advisory Board and strong relationships and partnerships with key stakeholders and peak bodies along with HIN's experience of over 22 years in developing and delivering websites and knowledge exchange material • Quality control: mitigated through embedded quality control mechanisms including peer-review of substantial documents • Financial: mitigated through ECU's comprehensive governance structure • Staffing: mitigated through a strong orientation and training regime along with a documented procedure manual • Information technology: mitigated through operating within a protective ECU IT environment 	<ul style="list-style-type: none"> • Cultural Appropriateness <p>The AODKC as part of the HealthInfoNet continues to have strong cultural oversight and processes that are working effectively. Cultural appropriateness of AIH materials is assessed via regular feedback processes with users and with members of the Advisory Board input who represent several Aboriginal and Torres Strait Islander peak health bodies.</p> <p>Since the last report, AIH have appointed their first Aboriginal Director, Professor Bep Uink. Of note, expectations of cultural governance have shifted across the years that AIH has been operational. In response, Professor Uink has initiated a Working Group on Cultural Governance to establish the process that AIH will follow to move to full Aboriginal and Torres Strait Islander governance. An invitation to join the Working Group was sent to all Advisory Board members, however, members indicated an inability to join the Working Group due to time constraints and thus it was decided that Working Group members should be ECU staff only. Currently members are Professor Uink, Professor Dan McAullay, Dean of Kurongkurl Katitjin at ECU, and Professor Braden Hill, Deputy Vice Chancellor Students, Equity and Indigenous at ECU. The Working Group is currently undertaking an assessment of AIH current cultural governance using the Australian Indigenous Governance Toolkit. There has been ongoing negotiation between the Professor Uink, Professor McAullay, and Professor Braden Hill about how future AIH cultural governance can be integrated into the ECU institutional cultural governance structures with special responsibility for the HealthInfoNet. This will provide a more formal cultural authority structure and ECU will provide resources to support the Advisory Board. The Working Group process is underway and will be completed in the next reporting period.</p> <ul style="list-style-type: none"> • Quality Control <p>All quality control mechanisms, such as peer review of knowledge exchange products and publications, were adhered to throughout the reporting period. All new staff were inducted and trained in HealthInfoNet and AODKC policies, procedures, and practices.</p>

1B. RISK MANAGEMENT 2024-2025 Activity Work Plan (AWP)		2B. Performance Report 1 July 2024 – 30 June 2025
Challenges - What difficulties may be experienced by your organisation in delivering the program?	Mitigation strategies – how will your organisation try to address these difficulties?	<p>Progress - to be filled in by organisation only when undertaking a report against your deliverables</p> <p>Risks were identified and mitigated successfully.</p>
		<ul style="list-style-type: none"> • Financial <p>Regular due diligence oversight meetings were held between ECU Finance and the Health/InfoNet's Director and Business Manager.</p> • Staffing <p>All new staff received induction, orientation and training as required by ECU and the Health/InfoNet policies and procedures. All new staff were recruited in accordance with ECU HR policy and procedures.</p> • Information Technology <p>The Health/InfoNet IT ecosystem continues to be managed within the ECU IT environment, with oversight by the Health/InfoNet's IT Manager. All performance indicators relating to IT performance were met. We are part of an ECU internal audit and review of IT security practices which will ensure we remain best practice.</p> <p>The Health/InfoNet continues to liaise with IT experts to update its security software and protocols.</p> <p>Building on the established Health/InfoNet Artificial Intelligence (AI) working group, the Health/InfoNet has partnered with Professor Ray Mahoney and Dr Andrew Goodman from the CSIRO Australian e-Health Research Centre to discuss potential ethical uses of AI in the Health/InfoNet. This partnership saw Health/InfoNet staff attend a focus group discussion with the Centre to provide insights into questions that need to be asked and addressed for the ethical update of AI in Aboriginal and Torres Strait Islander health. Findings from this report have been published in a co-authored report with the Centre. We are in ongoing discussions with Prof Mahoney and Dr Goodman about building Aboriginal-lead AI models. This network ensures that AIH is staying up-to-date and is actively engaged in discussions about the cultural, ethical, moral, and legal obligations for best practice use of AI in Aboriginal and Torres Strait Islander health and how they are, adopted and adhered to.</p>

Stakeholder Engagement

(provide a short narrative update on stakeholder engagement over the period)

In the reporting period there was continued promotion and engagement with stakeholders. Stakeholders included Reference Group members, partners, funders, Consultants, NACCHO and affiliates, Government agencies, NGOs, peak bodies, and professional associations.

There were online meetings, email blasts, three conference exhibition stands and promotion at six additional conferences where the HealthInfoNet exhibited.

There were face-to-face meetings conducted by the Director, Bep Uink (in Canberra, Perth, Adelaide, Sydney and Melbourne), and the Development & Marketing Manager, Tara Hoyne, in Perth, Canberra, and Adelaide. Bep met with the peak AOD body in each of the above locations.

The AODKC exhibited at three specific AOD conferences: APSAD (National), NADA (NSW) and WANADA (WA) in this period.

While not a deliverable, there was additional promotion of the AODKC at two HealthInfoNet Roundtables held in Adelaide in April 2025, which included the CEO of peak SA AOD body SANDAS and ADAC Director Scott Wilson presenting at this event (along with 4 other guest speakers) and another Roundtable event in Perth in May 2025, which included WA peak AOD body WANADA presenting at this event. These were well attended with 45-47 attendees representing a cross section of peak bodies in the sector. There were networking opportunities among attendees. The AODKC was promoted during the HealthInfoNet's Director's presentation and brochures included in the attendee kits. The AODKC was also promoted (brochures handed out) at six other conferences the HealthInfoNet exhibited at:

- APNA in Adelaide
- Compass NT PHN Workforce in Darwin
- NAATSIHWP in Perth
- NRHA in Perth
- CATSINaM in Perth
- QAAMS in Perth.

We promoted the two latest AODKC reviews to the sector and handed out hard copies at conferences.

AIH Online Community Consultations:

A series of Online Community Consultations were held in May 2025. The purpose of the consultations was to seek input into a Strategic Plan for the Australian Indigenous HealthInfoNet.

There were nine distinct consultation groups:

1. Regional, rural, and remote communities
2. Tertiary students
3. Higher education and research institutes
4. University librarians

5. Aboriginal Community Controlled Health Organisations (ACCHOs)
6. Aboriginal health workers and community members
7. Environmental health workforce
8. Justice sector professionals
9. Health practitioners.

There were 74 attendees:

Cohort	Attended
Regional, rural, and remote	12
Tertiary Education students	4
Higher education (University/TAFE/RTOs) & research institutes	11
University Librarians	8
Aboriginal Health Workers and Community members	8
ACCHO staff	7
Environmental Health workforce	9
Health Practitioners	12
Justice sector	3
TOTAL	74

98.6% of attendees 'strongly agreed' that the Health/infoNet represented good value for money.

Each cohort provided valuable input during the consultations. The importance of Health/infoNet was highlighted in addressing the gap in Indigenous health. Some key themes that emerged were: Health/infoNet's positive and sustained impact on Indigenous health outcomes, easy access to resources, centralised knowledge hub, provision of education and research tools, cultural safety and education, positive community and workforce impact, and providing visibility and awareness of best-practice.

Key areas that attendees wanted further support on included: supporting workforce capacity building, worker training & upskilling, cultural safety, allyship and applied skills, Indigenous data sovereignty (IDS) knowledge, implementation of IDS Principles, Aboriginal Health Workforce specific training and leadership, and short succinct and timely summaries of 'what is working' in the Aboriginal health sector.

Quotes from stakeholders included:

'The Aboriginal oversight and curation is very important as it gives the info some validity.' – non-Aboriginal researcher

'Aboriginal content for sure, especially statistics.' -in response to what is the best part of AIH

'We wouldn't have a resource that's reliable and curated for/by First Nations - it's a focal point to refer students to as best practice.' -in response to the question 'What would happen to your work if the AIH were to disappear?'.

This feedback shows the high usage, satisfaction, and engagement by stakeholders with the AIH. All suggested components will be considered in the upcoming HealthInfoNet's Strategic Plan and will be completed during the next funding period.

For CGH Administration

Funding Agreement Manager

Record observations and recommendations (if any)

Activity Work Plan accepted – Community Grants Hub

Signature: Date:

Name:

Team Leader Action

(EL/Team Leader to finalise)

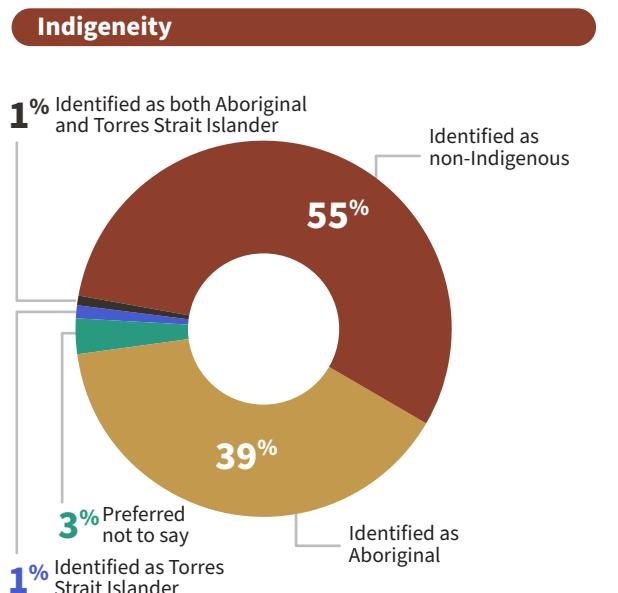
Signature:

Date:

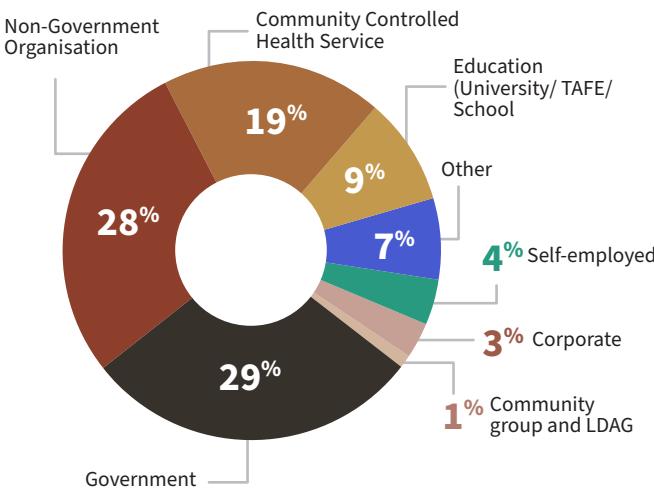
Name:



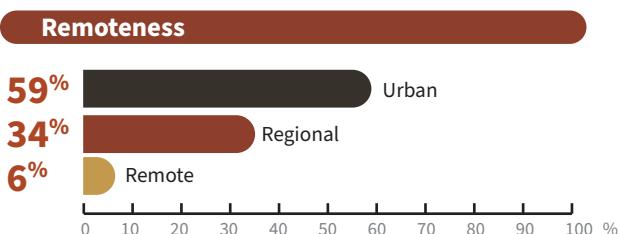
USER DEMOGRAPHICS



Employer

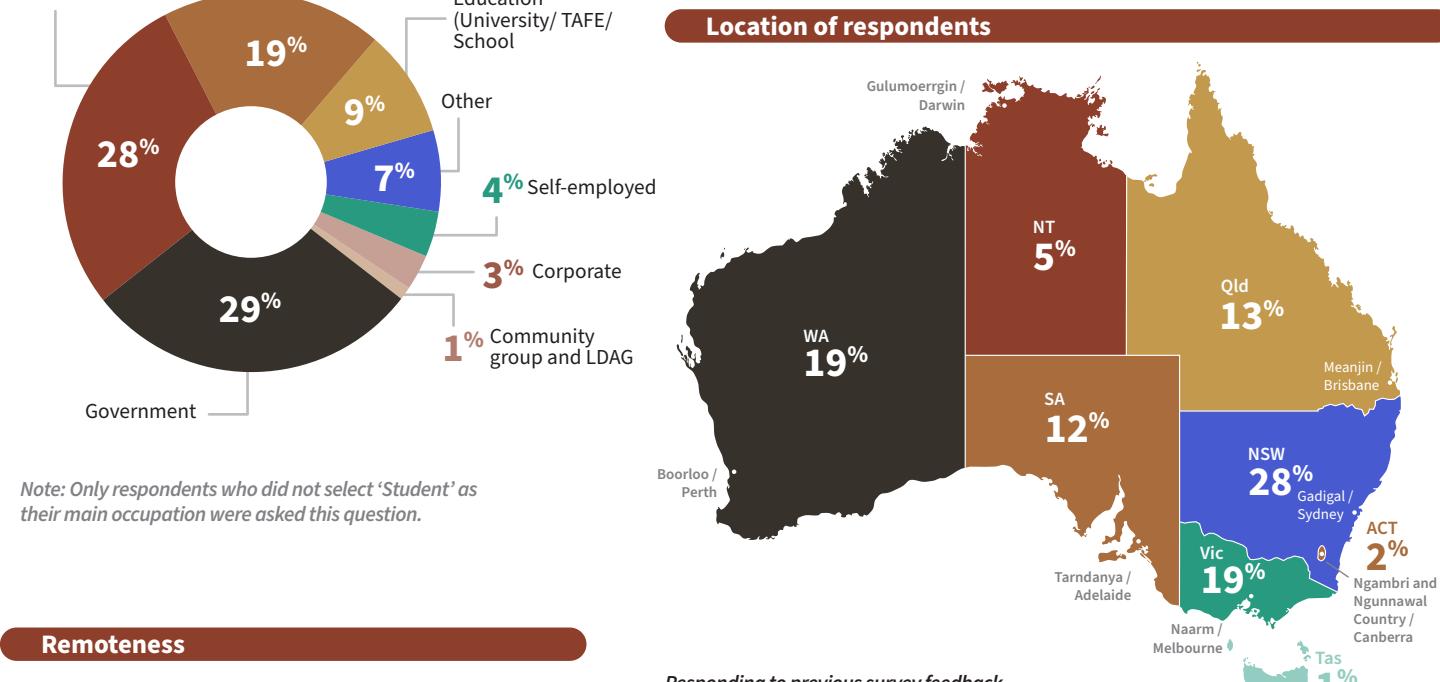
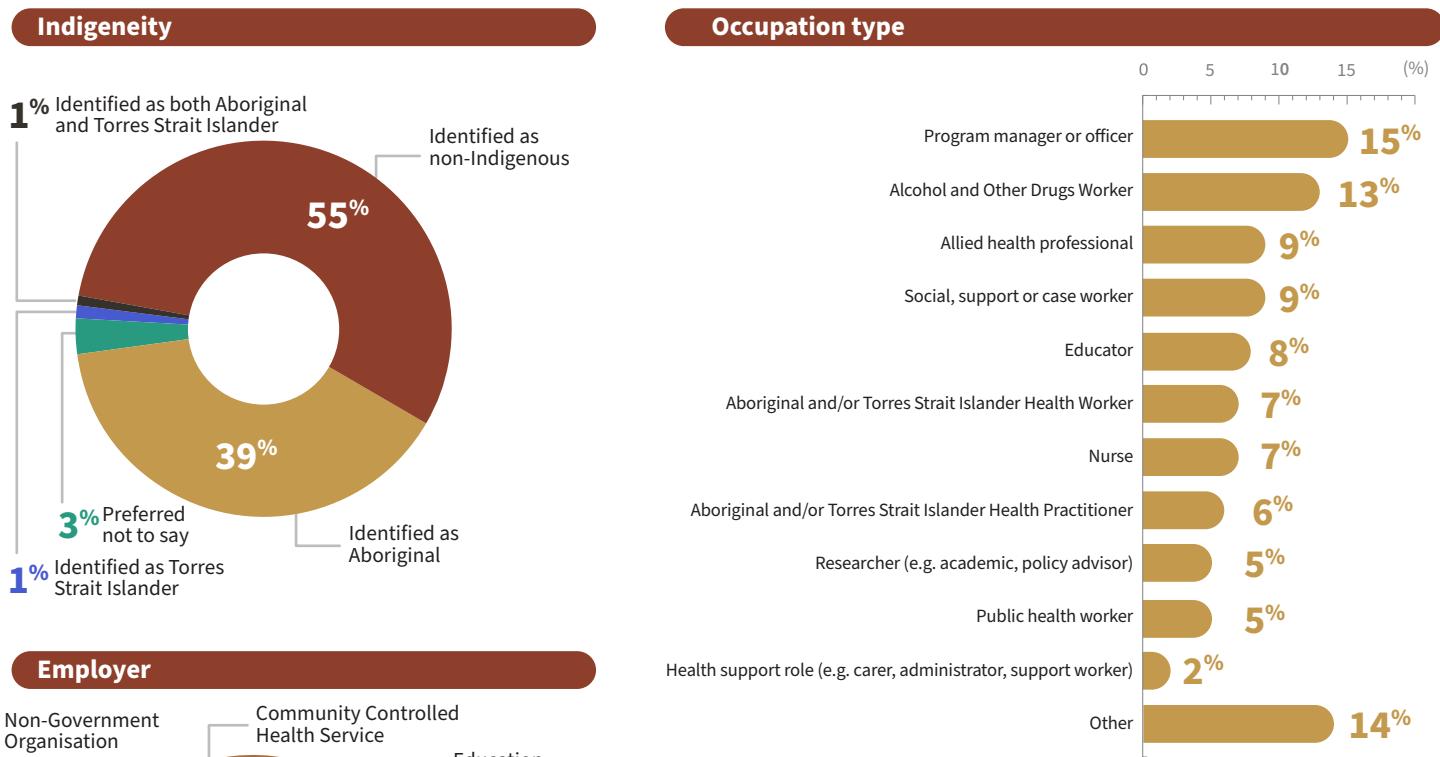


Note: Only respondents who did not select 'Student' as their main occupation were asked this question.



Technical notes: The Australian Indigenous HealthInfoNet AOD Knowledge Centre User Survey 2024 ran for three weeks in July/August 2024. It received 184 valid responses, of which 160 were from people who use the AOD Knowledge Centre for work purposes. The analysis presented here is of this subset of 160 responses. Due to rounding, the sum of percentages may not equal 100%.

This survey formed part of the HealthInfoNet's Impact and Evaluation Project, which has been approved by the ECU Human Research Ethics Committee (Project number: 18408).



Responding to previous survey feedback

In direct response to user feedback collected in our previous round of user surveys (2022), the HealthInfoNet has:

- Added the ability for users to identify open access publications
- Added thumbnail images to improve user experience
- Made improvements to the search function of the website
- Created user videos highlighting features of portals.

Core funding is provided by the Australian Government Department of Health and Aged Care



Australian Indigenous HealthInfoNet

Alcohol and Other Drugs
Knowledge Centre

AOD Knowledge Centre User Survey 2024

KEY RESULTS

Aboriginal and Torres Strait Islander and non-Indigenous respondents gave similar answers to these questions.



of respondents reported that they were likely to recommend the AOD Knowledge Centre website to others

Respondents considered that the AOD Knowledge Centre helps them to:



Develop their skills in reducing harms from AOD use



Feel more confident in their work or study about AOD use among Aboriginal and Torres Strait Islander people



Improve their knowledge about reducing harms from AOD use among Aboriginal and Torres Strait Islander people



CULTURAL SAFETY



of Aboriginal and/or Torres Strait Islander respondents agreed that the AOD Knowledge Centre is a culturally safe website.

TESTIMONIALS

“ I use this site regularly to keep me informed and provide guidance and leadership to my organisation.

Aboriginal ACCHO Chair, NSW

“ This is the easiest online resource to navigate with a wide breadth and depth of information.

Aboriginal Allied Health Professional, NSW

“ My go to destination for reliable information and subjects, in depth articles for expert advice and the latest research.

Aboriginal Health Worker, NSW

“ I use the website as a speedy way to find good quality resources that include First Nations perspectives and peoples.

Non-Indigenous Educator, Vic

“ The AOD Knowledge Centre and newsletters have helped me in my professional development and enhanced my knowledge to provide evidence-based care to my Indigenous patients.

Non-Indigenous GP, WA

“ This is a very valuable resource for our community and professionals that work in Aboriginal health.

Aboriginal Health Practitioner, SA

“ The AOD Knowledge Centre website was instrumental in providing high-quality, up-to-date information that enriched my professional development.

Aboriginal Nurse, WA

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