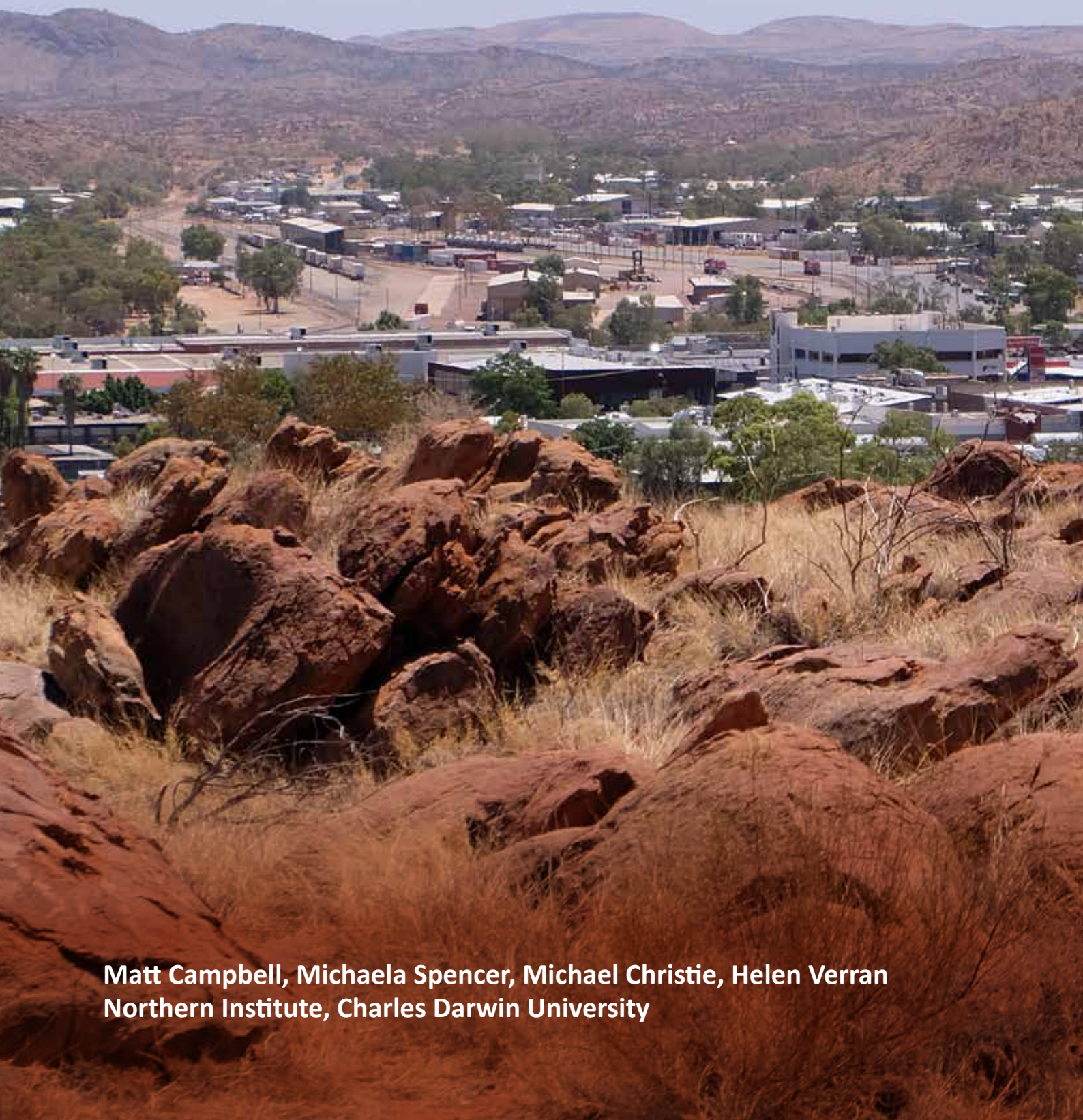
Tangentyere's Integrated Support Program (ISP) Evaluation

FINAL REPORT

May 2019



Matt Campbell, Michaela Spencer, Michael Christie, Helen Verran
Northern Institute, Charles Darwin University

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Charles Darwin University

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This document may contain the names and/or images of Aboriginal people who have since passed away.

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Key Insights

- The ISP is widely seen as a very important addition to the 'alcohol support landscape' in Alice Springs.
- The demand for alcohol support services such as those provided by the ISP, especially insofar as they work with those who are seen to have 'fallen through the cracks', is currently greater than can be supplied.
- According to the Integrated Support Program (ISP) staff, there are two interacting professional logics at work in the ISP. There is the structural logic of professional roles and responsibilities, funding and accountability, and a rich and complex practice of networking within and beyond the ISP.
- The second of these logics accounts for much of the ISP's success, and sees the ISP as a participant in a broader ecology of service delivery and reception. It is less visible than the top down structure that makes it possible.
- The many and often hardly visible complex collaborations within this networking ecology, produce positive effects in families and the community beyond servicing the needs of the individual.
- The establishment of trusting relationships are key to the possibility of producing sustainable change for participants who rely on the support provided through the relationship to deal with the significant issues they face.
- The ISP staff and other professionals interviewed in the evaluation are interested to improve and make more visible and valued their often-hidden collaborations and have them recognised as key indicators of success.
- The ISP conducts its support activities in a way that respects and enhances traditional Aboriginal ethics of autonomy and reciprocity within networks of care and concern, avoiding top-down disciplinary action. This is seen by participants and other community members as consistent with the wider Tangentyere Council (TC) approach to work in the Town Camps, and their participant-focused provision of support.
- For example, the front desk of the TC Patrols building, which assists people to access a range of TC's services, allows for unobtrusive assessment of people with needs, and help and/or direction toward whatever services may seem useful to meet these needs, including the ISP.
- The focus within the ISP on building a team based approach, and trusting the professional judgement of staff, has enabled differentiation between quite distinct categories of alcohol users. This allows the tailoring of specific support programs for individual participants. This gives rise to important highly professional spur-of-the-moment discretionary work which is critical to the success of ISP.
- The success of the ISP is sometimes limited by lack of effective communication between individuals and agencies in the wider network even as it works to enhance that communication.
- Most participants in the evaluation noted the need for more thoroughgoing publicity and information strategies, variously directed towards community members, potential participants, public health professionals and their organisations, and policy makers.

- The evaluation identified there is significant potential to enhance the usage and capacity of Supportlink, with relation to the everyday functioning of the program and its evaluation. For example, the Supportlink database could also be used as a source for storing and generating case-study claims towards improving the TC's generation of an evidence base for its ongoing policy development and funding applications.
- The networked flexibility of the ISP workers allowed for a generative evaluation process that further developed and improved ISP practices and evidence base.
- Key to the success of the ISP evaluation is the work of the Indigenous researcher-evaluators in the Tangentyere Council Research Hub (TCRH) who have an essential combination of expertise in both Western and contemporary Aboriginal knowledge and governance systems. The Indigenous researchers constitute a critical asset for the evaluation and improvement of service delivery within Tangentyere Council and for the production of evidence.
- The contributions of the Indigenous researchers are often expressed in insightful narrative form, rather than in structured questionnaires or statistics. These narratives can be worked into short case studies that have great potential for providing evidence for improved policy and practice.

Back Story

In June 2017, researchers from the Ground Up team within the Northern Institute of Charles Darwin University (CDU) were engaged by Tangentyere Council to undertake an evaluation of their Integrated Support Program (ISP). In the evaluation, CDU would facilitate stakeholder engagement and participation through meetings and workshops, focusing on the effectiveness of the program itself as well as its processes. The evaluation also articulates with Tangentyere Council's desire to implement Evidence Based Policy and Practice (EBPP) more broadly across its service provision portfolio. Part of CDU's role was to work closely with the Tangentyere Council Research Hub (TCRH) which undertook work with program participants and key Town Camp stakeholders.

This Final Report details the evaluation process, its findings and a series of recommendations. This report will be accompanied by a separate document (which we are calling the 'Evaluation Toolbox') which provides a program and resources for ongoing evaluation.

Alcohol management in Alice Springs

Awareness of the problems that alcohol causes, and accompanying strategies for mitigating these problems, have a long history in Alice Springs. Various reports, starting with a Federal Government Committee report and the 40 Gallons a Head report in the mid-1970s, and continuing through subsequent decades (see, for example Hauritz, McIlwain et al. 2000, Hogan, Hogan et al. 2006, Senior, Chenhall et al. 2009, Tangentyere Council 2016), have detailed the scale of the issue and made recommendations for addressing the problem.

Alice Springs has been at the forefront of policy change in relation to alcohol management in the Northern Territory. The NT's first liquor control trial was conducted in the town in 2002, the NT's first Alcohol Management Plan (AMP) was implemented in 2006 and the town also saw the trials for an electronic monitoring of alcohol purchases in 2008, paving the way for Identity scanning trial in 2011, prior to the introduction of the Banned Drinkers Register (BDR) in 2012. The town was the site for the introduction of Temporary Beat Locations (TBLs), since renamed Point of Sale Interventions (POSIs), whereby Police are stationed at bottle shops to monitor the purchasing of take away alcohol (Alice Springs Alcohol Reference Group 2016). Most recently the BDR has been reintroduced to more efficiently restrict the purchase of take-away alcohol, which is seen as a key contributor to alcohol problems.

The current NT government is pursuing an evidence-based approach to alcohol management reform. As a first step in seeking to address the high rates of consumption (Department of the Attorney General and Justice 2018), and to reduce harm and associated costs from alcohol (Whetton, Hancock et al. 2009), the NT government commissioned a review into alcohol policies and legislation in the NT. The Alcohol Policies and Legislation Review, commonly known as the 'Riley Review' (Riley, Angus et al. 2017), was completed in October 2017 and provides an update on the damage and costs of alcohol misuse in the Northern Territory (NT), and strategies for how it might be addressed. This review makes a range of recommendations which have implications for the ISP and Tangentyere more broadly, including: that treatment programs be better understood, and that they have long term funding certainty if they are considered to address alcohol related harm; that research and data collection be conducted to understand the issue and change over time; that investments be made in early childhood and to address social determinants to effect long terms change; and that education and action be directed to those whose drinking cultures lead to deleterious effects in the short and long term (Riley, Angus et al. 2017pp 10- 24)

Current NT Alcohol Policy

Following the publication of the Alcohol Policies and Legislation Review the NT government has undertaken a range of initiatives including developing a Northern Territory Alcohol Harm Minimisation Action Plan 2018- 2019, released in February 2018. This outlines how the NT government is responding to the recommendations of the Alcohol Policies and Legislation Review, including: action around housing, addressing secondary supply, investment in youth rehabilitation, regulatory reform, the introduction of a floor price and upgrading research, data and evaluation initiatives to better understand the effects of alcohol and the results of interventions arising from the Review.

The NT government provides updates on progress in relation to the Alcohol Policies and Legislation Review and the Northern Territory Alcohol Harm Minimisation Action Plan 2018- 2019, as well as providing statistical information relating to alcohol related harm on their Alcohol policies and Legislation Reform website: https://alcoholreform.nt.gov.au/home.

Alcohol management services and Tangentyere Council

Tangentyere Council, through its Research Hub, contributed to the development of the 2016 Alice Springs AMP by undertaking a research project to enable Aboriginal people living in Town Camps to have input into the plan. This research found that Town Campers are worried about the impact that alcohol has in their lives and want assistance to deal with it, but in ways that are respectful of their culture and in which they are key players. This research also produced a range of recommendations, from ensuring that all people buying takeaway alcohol must show identification, through to the development of Alcohol Action Plans at the Town Camp level.

The ISP is one initiative that grew out of the AMP research. The AMP research identified a range of initiatives that Town Campers wanted to see to assist with addressing alcohol misuse that have informed the development of the ISP. This includes programs focused at the Town Camp level, resourcing for people to return to the bush, more research on what drives drinking behaviour, and more options for rehabilitation- better and more accessible programs to help people who want to cut down or stop their drinking

The Integrated Support Project began its life through a series of discussions held between staff of Tangentyere Council and the NT Department of Health following the finalisation of the Tangentyere's AMP research and the ratification of the Alice Springs AMP.

The components of the ISP, as listed in the Program Schedule, are:

- Service Navigation and Referral
- Early Intervention and Family Support
- Assertive Outreach and Case Management
- Return to Country
- Facilitation of Self Help Groups
- Community Health Promotion
- Pre-employment Support and Training
- Participatory Action Research Evaluation

In addition, Tangentyere is actively integrating two other existing programs under the ISP banner, seeking to create synergies between them, recognising their mutual aims, with many participants benefitting from the range of programs brought together. These programs are:

- Emergency Relief
- Identification services

In connecting these services, the ISP seeks to provide an integrated approach to harm minimisation within Alice Springs and nearby communities. Whilst the program has a significant focus on working with individuals and families to address alcohol use and the symptoms of alcohol related harm, Tangentyere seeks to keep developing collaborations with other service providers to tackle the underlying social determinants of health particularly in the domains of employment and early childhood development and in addressing the behavioural risk factors of problem drinking.

This ISP has also created a Community Development Worker position, whose role is to work on issues at the community level (as opposed to individual case focused work). This role seeks to engage community members in activities and seeks to 'prevent problems before they occur'. This work aims to address the social determinants of health through community health promotion action and was deliberately included to assist in the ISP's ability to respond to issues raised by community members which focused on community building.

Tangentyere sees its service provision from a holistic point of view and is actively working to ensure that discrete programs work together where appropriate. Tangentyere's aim in this is to maximise the benefits for constituents across the range of services the organisation provides through active coordination.

BLK

Evaluation approach

Employing a research approach that we call 'Ground Up', we have set out to work collaboratively with ISP staff, managers and internal and external stakeholders, as well as with local Indigenous researchers (through TRCH), program participants and their families. The Ground Up approach allows the external evaluators to work generatively with the ISP, assisting the program to identify and take action on issues as they arise, rather than waiting for reports to be produced for recommended actions to be articulated. This approach to evaluation fits well with the reflexive approach employed with the ISP, while the formality of an independent evaluation supports the process of ongoing iterative change to be made visible. The emphasis on generativity enabled the evaluation to be embedded in the ongoing day to day work of the ISP, allowing coordination and recording of the process which may otherwise not have occurred.

The 'Ground Up' approach produced information throughout the project, firstly to inform stakeholders about the evaluation in real time, so that action can be taken where appropriate, secondly as resource for reflection and consideration in workshops, and thirdly to inform the ongoing 'shape' of evaluation activities. In this project there were three broad stages:

Stage 1 of the process centred on fact-finding around the on-ground delivery of the service. This entailed working closely with the staff of the ISP and relevant managers from within Tangentyere Council to build a robust picture of the service, its logics and practices, as a basis for understanding the structure of the program and its actions.

Stage 2 focused on consultations with program participants and their families, and, selected internal and external stakeholders, bringing together stories of the ISP from a wide variety of involved parties and participants. The work of the TCRH was critical to the success of this stage which laid the foundation for Stage 3.

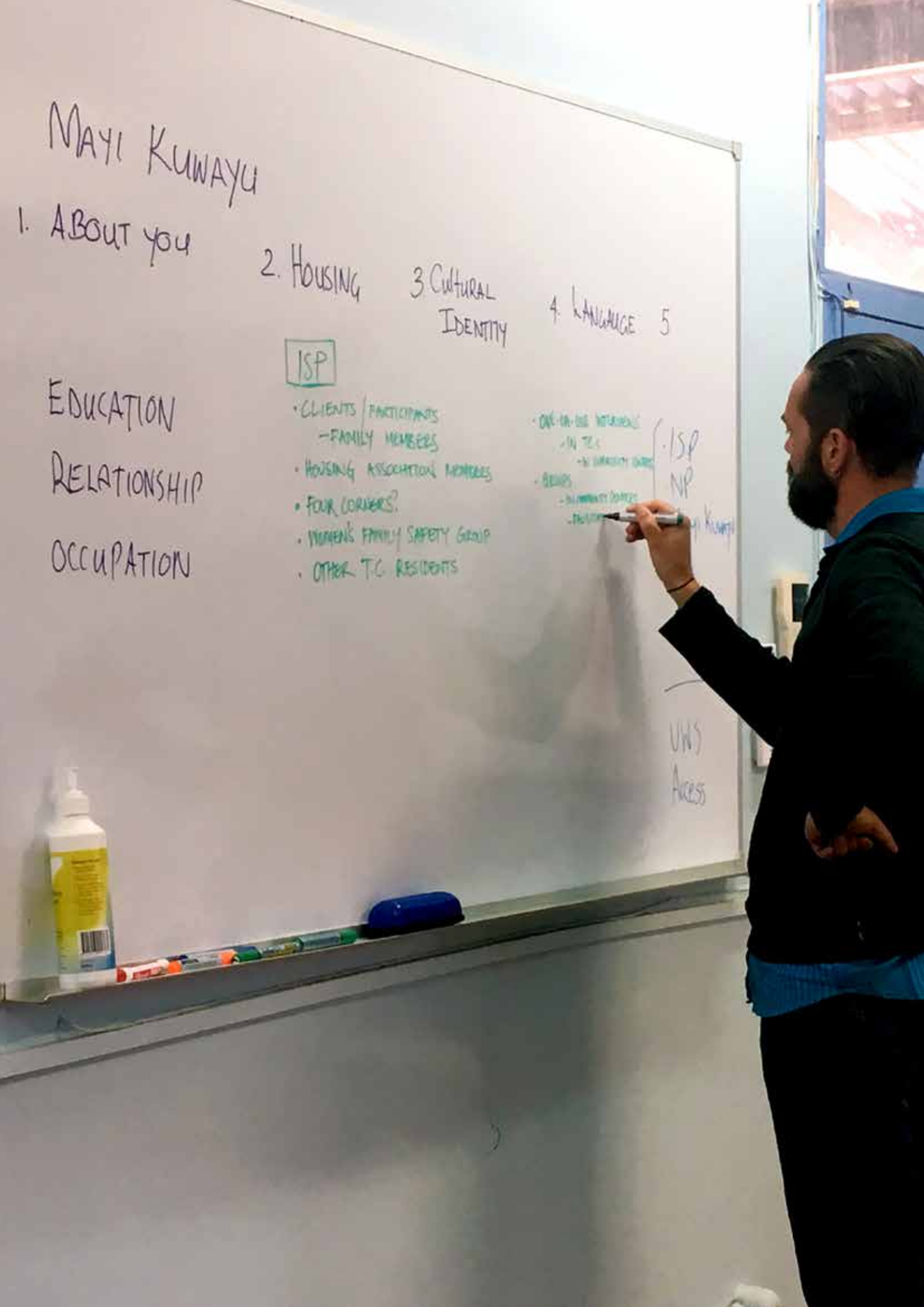
Stage 3 of the process entailed further work with ISP staff and relevant Managers in which the information produced in the first two stages were reflected upon and actions developed for implementation.

Through the collaborative work we have developed and enacted an approach to evaluation research which encourages iterative and ongoing improvement within service delivery, importantly a process that need not conclude with the completion of this project. As evaluators we were conscious throughout the project of the 'active' role we played in eliciting information for consideration by stakeholders. This was considered useful and productive, bringing issues to light that would otherwise have remained invisible. Because of this work, and aware of the complexity of the space that the ISP operates within, we have developed an accompanying document for this report (the Ongoing Evaluation Toolbox) which details suggestions for continuing evaluation work in the ISP, built on the critical role that evaluation has played in identifying these issues.

Data and Evidence

One of the intents of this evaluation project was that it contribute to the development and implementation of Evidence Based Policy and Practice (EBPP) at Tangentyere Council. This report is based on the data that was collected or produced in diverse settings and situations over the life of the project. The bulk of this data exists in text form, collected as notes, reflections, answers to questions, statements by stakeholders, emails and transcriptions. Taken together these data are the raw materials that constitute the evidence for the claims made in this report.

The Ground Up approach to working with data is interactive and comparative and relies on developing iterative feedback processes with research participants. Ground Up practices are particularly relevant it situations such as those that constitute much of Tangentyere's work, where what Aboriginal people perceive and value, may be somewhat different from what the other stakeholders (e.g. Tangentyere staff or the government workers) see and value. The categories and values which are assumed to be relevant by program planners or on-ground workers, may be quite different from those which the participants identify. Additionally, an emphasis on narrative and storytelling which is very natural to Aboriginal community members and the Tangentyere researchers, also allows for new categories to be identified or put into focus, and for others to be de-emphasised.


MAYI KUWAYU
1. ABOUT YOU
2. HOUSING
3. CULTURAL IDENTITY
4. LANGUAGE
5
EDUCATION
RELATIONSHIP
OCCUPATION
ISP
• CLIENTS / PARTICIPANTS
– FAMILY MEMBERS
• HOUSING ASSOCIATION MEMBERS
• FOUR CORNERS?
• WOMEN'S FAMILY SAFETY GROUP
• OTHER T.C. RESIDENTS
• ISP
NP
UWS
ACCESS

What we did

We conducted seven visits to Alice Springs over the life of the project. In these visits we worked closely with ISP staff and the Divisional Manager, other Tangentyere staff, including closely with the TCRH, and a range of other stakeholders both within and outside the organisation.

The CDU team conducted on site visits in August, October, November and December of 2017 and in February, May and August of 2018.

As indicated in the 'Evaluation Approach' section above, the evaluation methods entailed collecting and sharing information as the basis of an iterative and ongoing reflection amongst stakeholders aimed at making changes to improve the ISP. Information was collected through across a range of activities including, workshops, one-on-one discussions, semi-formal interviews, focus-groups discussions and informal group discussions. Notes were taken during all interactions, with some of the interviews also being recorded using audio recording (with permission) which were later transcribed, and notes distributed.

After each visit we provided feedback to participants in the form of 'one pagers', outlining issues raised, emerging findings and plans for future activity. In addition, where appropriate we asked ISP staff to engage in evaluation focused activities between our visits, where issues discussed in workshops suggested action be taken, which could then later be discussed for relevance and impact.

Work with the TCRH

We welcomed the opportunity to work with the TCRH to undertake the evaluation. Their involvement was positioned by Tangentyere as critical for the development and implementation of the participatory aspects of the evaluation in the Town Camp context.

We began talking to the TCRH in mid-2017, initially around the development of the application for Ethical Clearance for the project through the Central Australian Human Research Ethics Committee (CAHREC). In this, issues around 'Reciprocity, Respect, Equality, Responsibility, Survival and Protection and Spirit and Integrity' (CAHREC 2018), were specifically addressed in terms of research approach and methods, conscious of the complex position of research within Aboriginal contexts.

The participation of the TCRH was critical in making the role of Aboriginal knowledge and governance practices in addressing alcohol issues visible. The TCRH drew our attention to care as a day-to-day practice within the Town Camp community, and to clarifying that complex networks of care contribute to the success of the ISP. We were also sensitised to the potential impact of this evaluation and were encouraged to ensure that the research contribute to the effectiveness of elders and senior community members in their ongoing work of addressing alcohol related difficulties.

> ***"There are rules in Town Camps that govern informally how things work. Like research to do things properly you have to know and follow the rules." (TCRH researcher)***

The TCRH was deeply involved in developing the Town Camp component of the evaluation, which included writing flyers and questionnaires, conducting reconnaissance, informing key people about the evaluation facilitation, workshops with ISP staff, conducting and analysing interviews, and participating in focus-group discussions. The local knowledge of the TCRH was invaluable on many levels, from their knowledge of key people, their ability to conduct the research respectfully and in the right way, to their skills in translating and interpreting on the spot, ensuring that people without a strong grasp of English were not excluded from participation. Their capacity to narrate more broadly the underlying issues that impact on the ISP proved important in framing how some of the instruments for data collection were developed.

The value of the TCRH lies not just in their ability to conduct interviews with Aboriginal people. Their involvement in all aspects of the research process ensured that aspects of the ways issues are framed sat in the middle of the whole process, drawing attention to how people creatively and collaboratively build their understandings of their world so that they may act to address concerns. Work in intercultural contexts often misses significant issues and perspectives, not because they are 'hidden', but because they are not readily amenable to traditional western evaluation processes. Being able to frame the right questions, which are then asked in the right ways, is critical to eliciting information and enabling problems to be reconceptualised and understood in new ways. Such work creates opportunities for developing solutions that may otherwise remain invisible. The Aboriginal researchers' ability to 'domain cross' in ways non-Aboriginal researchers cannot, meant they actively contributed to the shape and form of the research process at all stages.

The TCRH made it possible to garner many of the insights developed here, with important implications for Tangentyere in the ongoing implementation of the ISP, as well as around the development of Evidence Based Policy and Practice more generally. The work with the TCRH researchers helped us to understand some of the logics which enable the ISP to work productively with Aboriginal people, including the critical work of supporting the networks of people and practices that ongoingly administer care for those in situations of need.

Building on the Interim report

A draft Interim Report was submitted in March 2018, which detailed the activities and emerging findings from the first stage of the project. This Final Report builds significantly on the feedback from Interim Report, as well as reporting work done in the second and third stages of the project.

Findings

How the findings are structured

As noted earlier (see section on Evidence in the Evaluation approach section) the evidence for the findings is drawn from material collected during the project. This material is diverse and collectively shows the complexity of the context in which the ISP operates. The findings are structured to assist readers to make sense of this complexity, working from the broad to the specific. This structure illuminates the interdependent nature of the findings, recognising that the ISP is part of a greater field of activity, encompassing many individuals and organisations, that seeks to address the impacts of alcohol in central Australia.

1. Alcohol in the life of Alice Springs and central Australia

Alcohol related concerns

This ISP operates in a context in which alcohol is implicated in a wide range of problems. These problems are multifaceted, have complex origins, and are long term. The impact of these problems is felt by individuals, families and communities, and not just those who come into the orbit of a 'problem drinker'. People have long been concerned about these problems yet do not always know how to address them effectively, owing to their complex origins and disagreement about possible solutions.

Some of the more senior respondents in the evaluation talked of the breakdown in regimes of authority within Aboriginal contexts across central Australia. They did not think of these regimes of authority as being irretrievably broken, rather in need of support and reinvigoration, a process which requires sustained and complex political work, critically not only within Aboriginal domains. Such work requires resourcing. There was a sense that strong Aboriginal governance is a key to dealing with the issues that alcohol raises, yet it cannot be strengthened separately from the issues that it needs to deal with: when community elders are positively engaged in dealing with emerging problems their authority as elders is enhanced. Organisations and governments who want to deal with problems like alcohol have a role in recognising and strengthening the regimes of governance that success in any particular initiative depends upon. How Aboriginal governance might be included in and strengthened through action around alcohol studies that people see as important in organisations like Tangentyere.

> ***"We want help and Tangentyere is the right organisation to help us." (Senior community member)***

Aboriginal people talked about the concern they have for their family members who have alcohol related issues. However, as this evaluation and previous research makes clear, family members' roles do not include direct intervention in the choices a person makes (even though they may experience problems because of those choices), rather to assist them with ongoing provision of support. This may mean direct help, such as taking people to the doctor or helping with Centrelink, or it may be through other action such as caring for children. Because of the strong ethic of personal autonomy Aboriginal people are reluctant to engage in action that may be construed by others as attempts to undermine this autonomy.

> ***"We worry when we see the impacts [alcohol has] on a person. If someone goes into hospital that creates worry for us." (Community respondent)***

At the local level some of the concerns are related to visitors to Town Camps, predominantly family members whose usual residence is one of the communities outside Alice Springs. When visiting Alice Springs these people often will stay with family, invoking the responsibilities of kin to provide them somewhere to stay. People are reluctant to say no, due to the importance of acting in the right way toward family, even though in some cases this creates problems.

> ***"The real concern is needing to deal with people causing problems not necessarily those who are staying a long time." (ISP staff member)***

Some people see family coming from elsewhere as being 'unconstrained' in Alice Springs, and that they come to town to drink, where their behaviour is not regulated in the same way as it is in their home community. The presence of family does create complex problems for residents of public housing (housing in Town Camps is classified as public housing), both culturally and legally, with strict tenancy conditions prescribing what is and isn't allowed. People are often unable to work through the complexities of the issues they face on their own, which can result in tenancy issues that can negatively affect whole families.

> ***"It's my families from out bush that comes into town to party at my house. My place is always quiet until families come in to visit." (ISP participant)***

In the views of senior community members, traditional Aboriginal ethics of autonomy within networks of care and responsibility make the institutional involvement of Aboriginal organisations critical to harm minimisation due to their ability to work with people constructively and sensitively through the complex and multi-faceted issues that people confront.

People identify Alice Springs as a site of strong liquor control, much of which they feel is directed at Aboriginal people. People think that this contributes to what they see as the rise of secondary supply, which in turn is related to the abuse of Basics Cards as people seek to get cash to enable them to have access to liquor. Such reports are anecdotal and the unintended impacts of other actions in the space remain poorly understood.

> ***"Part of the task should be to map the environment what does alcohol consumption and the issues associated with it actually look like?" (ISP staff member)***

ISP operating environment

Charged with seeking to address alcohol related issues through integrated activity, the ISP faces difficulties in acting in relation to the broad range of concerns that people express, particularly given their multifaceted and long-term nature. Many of the concerns are not directly amenable to ISP action- the ISP has a schedule that sets out what it is supposed to do – yet they impact upon it. The ISP primarily provides targeted and valued support for participants who are formally in the program, focusing on the 'day-to-day' issues they experience. However, it also desires to implement action to address broader underlying issues, attending to concerns that people identify as being useful in curtailing problems later. The ISP workers creatively use their experience and discretion[1] to balance actions which address immediate on the ground needs, with those that may address broader underlying issues with the view to minimising harm in the future. The intricacy of this work has implications for each individual staff member's workload and must be managed within the limits of the resources and timeline of the program overall.

1 Discretion in this sense is drawn from the book 'Street Level Bureaucracy' (Lipsky, 2010). Staff who occupy these roles (like ISP staff) use their discretion to balance meeting the needs of the client while maintaining policy fidelity.

> ***"Where ISP staff identify particular issues at the Town Camp level that ought to be addressed but fall outside of the ISP's core activities I do what I can to leverage funds (where possible) to support action or refer them to others who could. Our focus is on supporting the ISP to address the broad range of issues that emerge within Town Camps recognising the importance of responsive action." (Government respondent)***

In the evaluation, people identified the breakdown of Aboriginal regimes of authority in the broader environment as an issue. Consequently, we explored this issue and were encouraged to engage with the two 'quasi-governance' bodies of Tangentyere- the 4 Corners men's group and the Women's Family Safety Group (WFSG). In our discussions with them they indicated that they want to be more involved in the future, though the form of this involvement is not clear. As entities of Tangentyere this could be facilitated, creating the possibility of action at different levels and enabling contact with a broader and different range of people. However, the question that needs to be answered is how would this practically be integrated within the ISP?

The NT government's emphasis on changing the way alcohol is viewed and managed in the NT has implications for Tangentyere. The Riley Review's broad set of recommendations implicate Tangentyere and the ISP, but without being prescriptive. This places a lot of responsibility on Tangentyere to be proactive in relation to the recommendations, to ensure that it is recognised for the work that it does and the role it plays, particularly considering that the ISP is dealing with a cohort of people who are considered the most difficult clients.

Services demand

The demand for alcohol support services, such as those provided by the ISP, is greater than can be supplied

> ***"There is more demand than service provision." (External service provider)***

> ***"There is no shortage of referrals and there is unfilled demand." (ISP staff member)***

> ***"We turn 2400 people away from this service every year and they are the ones we should be referring on to the ISP because we can't give them what they need." (External service provider)***

Since its inception the demand for the services provided by the ISP has always exceeded its capacity. This demand means that staff are always busy: engaged with participants, other service providers, or other forms of professional activity. The ISP maintains good connections with other alcohol support service providers, who also experience the same issue.

Through their work the ISP has identified (broadly) three types of drinkers they deal with, each of whom presents different support challenges.

> ***"There are three types of drinkers we deal with: the first group are people from outside Alice Springs who come in here to run amok usually for shorter periods of time. The second are those who have long term problems and are trying to stabilise their lives and the third are older homeless people whose drinking exacerbates other problems they experience." (ISP staff member)***

These broad working categories emerged from the work of the ISP on the ground; the networked nature of the ISP, enabling staff to collectively differentiate categories of drinkers through their work. As a consequence, these categorisations inform how they work with each participant to ensure they best address the specific constellation of issues that may attend their individual alcohol use.

"Knowing who you are dealing with is important we need to assess people and not just assume that everyone has a similar problem." (ISP staff member)

Participants are referred into the program from a variety of places, most notably the hospital, however the ISP only works with them if they actively want support and are willing to engage with the program.

"If people don't want to be in a program it won't work." (ISP staff member)

It was noted that while there are many people in Alice Springs who would benefit from the flexible and focused support provided the ISP, the reality is that as an oversubscribed service. Adhering to the clear criteria for inclusion is vital for the program's success, at the same time as there appears to be scope for the program to expand if there was funding to support such a move

2. Relationship between the ISP program logic and structure and its success

The evaluation established that the program does not have a formally articulated statement of the logics that underpin the structure and practices of the program. However, it is clear that the program was designed drawing on a range of logics, and that a focus on iterative development, has refined an approach suited to its context. The particular working context, which includes a central Australian location, a predominantly Aboriginal cohort of participants, and alcohol, calls for a unique program. Factors that have been considered in designing the program include Aboriginal imperatives around the balancing of autonomy and relatedness (Myers 1986, Peterson 1993), harm minimisation, and ensuring the program has a strong theoretical social work foundation (see for example Ashford and LeCroy 1991, McCallum 2002).

"I see the ISP as building on the work that's been done by Tangentyere previously. We're building on things like the ICMS and putting a program together that meets the needs of the people we're dealing with." (Tangentyere staff member)

The program deals with a range of people, many of who are not supported by other services. While participants like this are undoubtedly a challenge for any program, the way the ISP is designed and practiced means that it is well equipped to respond, drawing on established social, cultural and institutional networks to provide holistic support to people in need.

"We deal with people, who for a variety of reasons have fallen through the cracks…we often get referrals from other agencies that they cannot manage." (ISP staff member)

"We get a lot of handballs [cases deemed too difficult by other service providers]." (ISP staff member)

The staff are competent professionals who approach participants in flexible and responsive ways, seeking to build relationships with them and their social network (where appropriate) to provide support to address the needs as defined by them. Staff are encouraged to use their professional discretion to determine the nature and timing of support provision, knowing that they can seek support from their peers and supervisors.

"People in crisis can make change quickly but it requires support workers who are able to respond promptly." (External service provider)

The logic of the program is integral to the ISP's success, because its empowering of the social worker, along with the relationship focus, means it is not trying to make 'messy' situations 'neat' by focusing on the removal of 'causes' to produce 'outcomes'. Rather the success is due to its focus on dealing with the problem

of the moment as understood by the participant themselves. This is particularly important in this work because of the opportunity that crises provide.

> ***"ISP has filled a hole that existed in the aftercare service provisions landscape." (External service Provider)***

Participants value the program because it focuses on them and their needs. Participants often feel like they are not valued and that no-one cares about them. The provision of support that prioritises face to face contact and meeting people on their own terms is important.

> ***"They come and do camp visits which is good because I don't have a car to get around." (ISP participant)***

> ***"They come and check me up all the time and they listen to what I want or need." (ISP participant)***

> ***"Without them who gonna help me to my appointments and medications?" (ISP participant)***

While the program's focus is working with referred participants through an intensive case work support model, there is awareness that other action should also be undertaken that seeks to mitigate the effects of alcohol in the long term through preventative activity. A Community Development worker is employed by the ISP whose role is to work with people and groups to undertake activity that they feel is 'protective'. Community members see the strength and resilience of individuals and families being built through undertaking a range of activities that support 'culture'. This ISP actively seeks to support these initiatives, often through the development of 'Alcohol Action Initiative' submissions.

> ***"The long game is engagement with the people who aren't drinking." (ISP staff member)***

> ***"It's good if they [the ISP] can take all the family out bush to cook roo tails, you know like a picnic." (Community member)***

Stakeholder engagement

The evaluation found that stakeholders, including Tangentyere staff, ISP participants, community members and professionals external to the organisation, think that the ISP is a valuable addition to the alcohol support environment, and does work that no-one else does.

> ***"One of the good things about the ISP is that it does not just cater for those in Town Camps." (External service provider)***

> ***"The ISP is a valuable addition to the support landscape in Alice Springs. The provision of ongoing intensive support is very important given the long-term nature of the problems some people experience." (Government respondent)***

External stakeholders recognise that Tangentyere occupies a unique place in the service provision landscape in Alice Springs. Its identity as an organisation that represents Town Camp and other Aboriginal people means that people recognise that it is working on behalf of those people when it is providing services, which marks it as being different to many other service providers. Its identity as an organisation that works in both advocacy and service delivery means that it is well trusted to be working to make Aboriginal people's lives better through its work.

"The fact that the ISP is delivered by Tangentyere makes a big difference." (External service provider)

"Tangentyere mob got what it takes to help an old lady like me." (ISP participant)

Additionally, the diverse range of services provided by Tangentyere is seen as positive, generating the possibility of linking people with additional services that may be beneficial to them. External stakeholders articulated that people often need extensive assistance, but without the knowledge of what services are available or how they may access them. Tangentyere is ideally positioned to assist people; they are trusted and the broad range of services offered increases the likelihood they will get the support they need.

"I only know that Tangentyere Council can help us in many ways." (ISP participant)

For those who do come into regular contact with the program, one of the most valued attributes of the program is the responsiveness of the staff. In contexts in which people are often in crises, responsiveness, particularly prioritising meeting people face to face at short notice, can be the difference between someone getting help and missing out on engaging with a service at all.

"The ISP is good at dealing with the highest risk clientele- the people who come into the hospital regularly with alcohol implicated in their presentation." (External service provider)

"The hospital can offer brief interventions to people while they are in hospital, for this reason their relationships with aftercare providers is critical- where do they go once they get out? We find the ISP is useful because of its responsiveness and its commitment to meeting people face to face." (External service provider)

"The face to face work and outreach that ISP does is valuable." (External service provider)

The ISP seeks to be accountable to others in the sector. It values its relationships and has moulded its service to ensure that it is filling a gap in the service provision landscape and is not replicating an existing service. The prioritisation of providing a face to face service

"The program has made a conscious effort to be relevant; to assist in the management of alcohol related harm to reduce the impact on the hospital and other AOD services." (External service provider)

"Other outreach services do not provide the service that ISP provides." (External service provider)

However, at the same time, the ISP's reach is limited due to the reliance on its day-to-day links as the main source of information and knowledge about the program. While stories are shared between staff who engage around participants or the services provided through the ISP, there is limited flow on of information to other (real and potential) stakeholders. The ISP has not prioritised the production of information that would enable it to communicate broadly. The evaluation found that many stakeholders would like more information about the ISP, including compelling stories of change attributable the ISP.

"It would be good to have informational materials available of all the services that Tangentyere provide, how they relate to each other so that referrals can be made with this knowledge." (External service provider)

"Case studies are a form of evidence that really make a difference." (Tangentyere staff)

Emerging within the evaluation was the critical importance placed on the ISP being 'visible'. As a program which has time limited funding, yet which is catering for people with long term issues and in an environment where demand exceeds supply, ensuring that people external to the program know about it, understand its role and be able to see its success, is of paramount importance.

> ***"We are a bit worried about our lack of visibility; we're going to do some work to create a 'picture' of the ISP so others can see what we do." (ISP staff member)***

> ***"We are thinking about where we can tell people about the work we do. [Housing Association] AGMs are one place where we are trying to do this." (ISP staff member)***

> ***"The promotion of what they have achieved is lacking. Visible stories- on the website, in social media, in the newspaper- would be valuable showing the success of the program." (Government respondent)***

> ***"If there were one thing the ISP could improve it would be to have a stronger presence across the community." (External service provider)***

> ***"The ISP does not promote the ISP as well as they could…the promotion of what they have achieved is lacking." (Government respondent)***

The program is meeting the needs of participants through its flexible, responsive relationship-based approach to supporting participants and the people around them. The ISP is highly valued by them.

> ***"I feel like they support me a lot for my alcohol problems." (ISP participant)***

> ***"They [the ISP] are a great help for her [my sister]. I have my own problems trying to look after my family, so their help is really helpful." (Community respondent)***

> ***"They come and check on me all the time and they listen to what we want or need to be done." (ISP participant)***

> ***"I am happy with the support they are giving me- which is a lot of support." (ISP participant)***

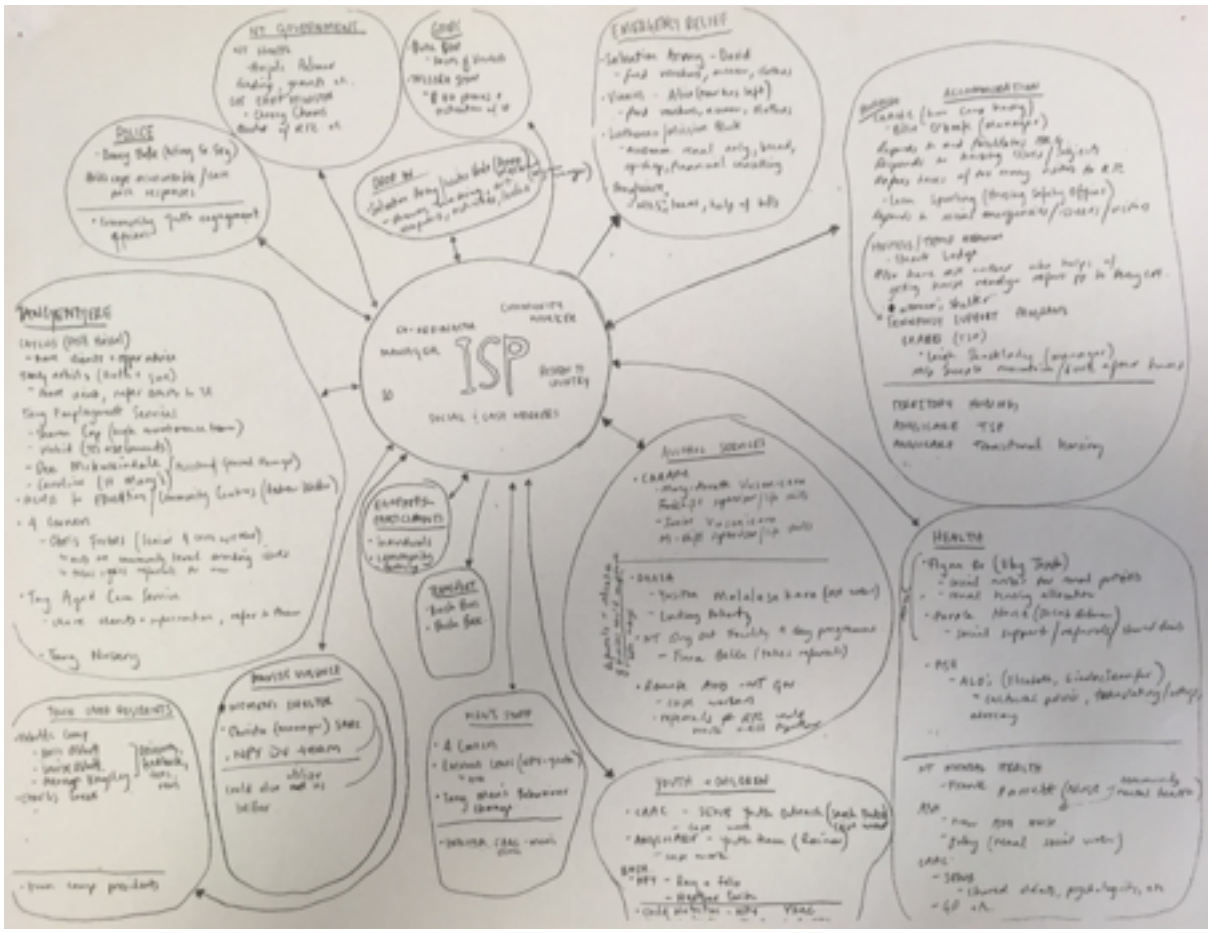
3. The broader ecology of service delivery and reception

There are a range of agencies and programs whose work centres on alcohol, and together with the participants and their social networks, comprise what is best described as an 'ecology' of ***service delivery and reception***. The metaphor of an 'ecology' is preferred to that of a 'system'; a 'system' implies greater coordination between actors, and a mechanical understanding of change and information communication than is evident. The ISP deals with an issue of great complexity, and seeks to work productively with others also working in the area. One of the keys to its success is being able work across boundaries, integrating its activity with other agencies that also work with people experiencing alcohol related harm.

The ISP, while a discrete program housed within Tangentyere Council, is best understood as a participant in this ecology, which is connected through alcohol and the problems it causes. It has become clear through the evaluation that Aboriginal people receiving services are active members of this ecology, and thus the manner in which they meet and receive services is of critical importance. The ISP has proved itself to be mindful of, and responsive to, how its service is received by program participants, iteratively reframing the service it delivers in response to the needs of each participant and their broader social network. In this sense the ISP

does not deliver a service so much as it collectively negotiates support practices with participants and other organisations.

The ecology metaphor allows the ISP to be more easily understood as comprised of people, places, processes, policies, practices, artefacts and history, all of which play a role in constituting the issue and action to deal with the problems a participant faces. This understanding means that the focus may not be alcohol in the first instance. It also means that the ISPs success can be attributed to the strong links it has created that in turn support the program. This includes links at a variety of levels (governance, operational, community) and between a range of stakeholders (external people and organisations, and participants and their wider social networks).



A service mapping diagram developed by the ISP team to visually represent the individuals and agencies they work with and their roles in supporting people with alcohol related problems. This was produced at a particular moment for a specific purpose and does not represent the ISP in an ongoing sense.

Headings include: Tangentyere; Health, Youth and Children; Transport; Police, Accommodation.

The practical effect of understanding the ISP as a participant in a broader ecology is that it focuses attention on the interactional nature of ISP work. Its effectiveness and success are brought about by the inter-organisational and intra-community connections facilitated under the ISP's name, as much as by things which are seen to be 'within' the ISP (understood as a separate and discrete program). These interactions take place in a broad range of contexts and are enacted by a range of actors who represent the ISP in various ways, including the ISP staff and coordinator, Managers and others who play representational roles on behalf of Tangentyere.

Understanding the ISP as participating in a broader ecology also enables us to draw attention to the actions that contribute to the successes of the ISP which may otherwise go unnoticed, and therefore has implications for how recommendations for program improvement might be framed.

ISP 'communities of practice'

The ISP as a ***participant*** in a broader ecology of service delivery and reception, has a number of identifiable sub- groups, or 'communities of practice [2]', through which people and processes connect in regular and distinguishable ways.

These communities of practice link up a range of people - including staff who work for Tangentyere and other organisations, people from Town Camps (as participants and in governance and quasi governance roles in Aboriginal organisations)- through established, though informal, information sharing processes, each having preferred modes of communication. Communication processes within each community of practice have evolved informally, enabling the sharing of relevant information for specific purposes.

> ***"I connect with Tangentyere through a variety of channels including phone calls, emails, inter-agency meetings and face to face meetings." (Government respondent)***

A consequence of the informal development of these communication processes is that those outside any particular community of practice do not normally receive the information shared within it. This results in fragmentation where insights and concerns are not easily shared, limiting opportunities for innovation or efficiency to be developed. The success of the ISP is sometimes compromised by this lack of effective communication between different parts of the network of which it is a part.

> ***"The sector is a bit disjointed who does what and how does each learn about others?" (External service provider)***

Some of the communities of practice work primarily through face to face interactions. While this results in relational, flexible and responsive practice (which considers the needs of the participants, cognisant of their broader social network), the reality is that knowledge developed in this way is not readily shareable. Specific attention must be paid to how information generated in these face to face interactions is documented as well as integrated with attendant action to ensure that processes for sharing this information are developed and used.

> ***"There is a lot of work done at the practitioner level that works really well because it is negotiated between people working at the same level and on the same kinds of issues however it's not clear how much gets communicated to others." (Tangentyere staff)***

2 See Cox, A. (2005), What are communities of practice? A comparative review of four seminal works.

Community of practice	Main modes of interaction/ communication	Nature of issues addressed	Accountable for
Managerial	Meetings, email, phone	High level strategic; emerging significant problems with public impact; reporting	Reporting- funding agency, organisational governance Staff management
Coordination	Meetings, email, phone	Information provision; answering questions; mid-level strategic	Collating reports Program planning Staff workloads Program fidelity
Interagency- staff-staff	Face to face, phone, email	Coordination of service provision	Coordinated action relating to participants Referrals Follow up
ISP internal	Face to face	Information sharing; problem solving; logistics; peer support	Coordinated action relating to participants Information recording
ISP staff-participant	Face to face	Support	Support design and provision Feedback Engagement
Town Camp/ community	Face to face	Service appropriateness; information gathering; coordination	Support Information Feedback

Communities of practice at work within the alcohol support ecology (of which the ISP is a part)

The interactional and dynamic nature of ISP activity within a service ecology, focuses attention on the importance on information flow. This information flow underpins the provision of support for the benefit of participants and their wider networks. Understanding this ecology itself as being comprised of communities of practice assists in identifying how information can be collected and shared for the benefit of all stakeholders.

Understanding the ISP as being comprised of several communities of practice, who don't routinely communicate with each other, is therefore a concern for the program and for Tangentyere more generally. People who comprise the communities of practice, and therefore the ecology more broadly, are key stakeholders in the process of ensuring that the ISP is visible and the outcomes it produced are recognised.

Recommendation: The ISP invest resources to specify clearly the key networks upon which the success of the ISP depends and to develop formal mechanisms that make information available for members of the range of communities of practice who constitute the ecology.

4. Day-to-Day work

Overview

As the name indicates, the ISP integrates a number of discrete components within one program, seeking to generate efficiencies through coordination. It was designed drawing on a number of reports, including Tangentyere's AMP report, and the concerns of people within Tangentyere, all of which drew attention to the fact that people in Town Camps were calling for more support around the issue of alcohol.

The initial conception for the program entailed an integration between a range of components, but with specific detail of the actions to be taken within these components to be finalised through the implementation of the program. This flexibility was part of funding agreement and the ability to mould the program in response to the issues it deals with has proven to be a key to its success. The flexibility has empowered the staff, as professionals, to respond to the situations they find themselves in, and use this as the basis for the iterative design of the program. This avoided potential problems associated with determining in advance the nature of the problems the program would find itself dealing with, potentially circumscribing what the program could do.

Having the ISP auspiced by Tangentyere contributes to its success. Tangentyere has been an active organisation in Alice Springs for around forty years and has built up a reputation of responsive and accountable work.

> ***"The ISP utilises Tangentyere networks and the trust people have in the organisation." (External service provider)***

The design and implementation of the ISP is consistent with Tangentyere Council's long history of integrated and community engaged work. The ISP is structured to foreground responsiveness to Aboriginal concerns and relies on the discretion of staff to plan and implement action that recognises and draws on existing networks of care that exist in the community.

> ***"The ISP being within Tangentyere means it is responsive and knows how to work them Aboriginal people in respectful ways." (External service provider)***

Tangentyere's reputation and reach also mean that people referred to the ISP will trust that the program is likely to be conducted in a considerate culturally appropriate manner.

> ***"The fact that the ISP is delivered by Tangentyere makes a big difference…often people don't know the ISP, but they do know Tangentyere." (External service provider)***

There is a concern that the demand for the services provided by the ISP, coupled with the participant-centric approach, creates a situation where ISP staff become embedded in the day to day work without allocating sufficient time to reflect on their work for strategic purposes. As noted earlier the alcohol management space is undergoing significant change, and the knowledge and insights that ISP staff hold is potentially very valuable in terms of understanding the impact of these changes, and in contributing to research and evaluation around them.

> ***"We definitely have a tendency to focus on our day to day work. It's probably the coordinator who is responsible for working at that next level." (ISP staff member)***

> ***"The program is very busy, however they ought to take some time out to 'look up' and direct some energy into raising the profile of the program so that more people know about it and can access it." (Government respondent)***

The front desk

The first encounter many people have with the ISP occurs at the front desk at the Elder Street 'Patrols Building' office of Tangentyere Council. This front desk has served for many years as the place where people come for Proof of Identification cards and/or Emergency Relief services- services which previously stood alone but have been drawn in under the ISP banner. Having the front desk, and the services it has traditionally provided, as part of the ISP means that there is an alternative entry point for people who may be having trouble in their lives but have not come to Tangentyere to specifically access the ISP, or who are unlikely to be referred into it from other places. This potential entry point, along with other ways of engaging with the ISP, is a positive feature of the way Tangentyere structures its public interface. The front desk allows a suite of public health and safety services that Tangentyere provides to be accessed seamlessly by people in need of assistance and without needing to be channelled into a formal program.

Intensive Case Work

Tangentyere used the flexibility afforded them to design the components that comprise the ISP. Our evaluation discerned that Tangentyere exercised this flexibility to first develop the Intensive Case Work (ICW) component, which sets out the logics of the program in a broad sense. This component was designed drawing on insights from Social Work theory (McCallum 2002, Bennett, Zubrzycki et al. 2011), Aboriginal knowledge making (Coghlan 1991), and local social work practice (Hassall 2015) which have a long history in Alice Springs (including the Malpa project which began in Ilperle Tyathe (Warlpiri Camp) in 2012), producing a program has two distinct logics which inform its practice.

- Relationship centred support provision
- Team oriented configuration

The two logics work together to produce the practice of the ICW, and while they are distinct and can be analysed separately, they work interdependently. The design of the ICW has resulted in the development of a program that is unique in its conception and framed to accommodate: the ISPs mandate to deal with alcohol, the realities of social work as a professional activity, and, the knowledge and practices of Aboriginal people living in central Australia.

- **Relationship centred support provision**

Experienced social workers in Alice Springs position relationships as the central aspect of successful work.

> ***"The one thing we know is that you cannot achieve anything of substance with Aboriginal people if you don't have a relationship with them." (ISP staff member)***

Knowing that relationships are key sits at the heart of the logic of the support the ICW provides. Positioning relationships at the centre means that the focus of the support is not the substance, alcohol, but the person. While to be eligible to be a participant a person must have a significant issue with alcohol, the actual support focuses on the problems of the moment as they are experienced by the participant. This orientation deliberately focuses on the development of a relationship between the staff member and the participant in the first instance, while addressing real day to day issues that are causing problems for the participant (and possibly others).

> ***"Relationships are the basis of the success of the program through them I learn what participants need so that I can support them in ways that suit them." (ISP staff member)***

Placing the relationship between a staff member and participant at the centre of the support logic orients a staff member's thinking about their work. Rather than support provision being governed primarily by rules and processes, staff are encouraged to work with participants flexibly, seeking to meet the needs as

articulated by the participant, while building the relationship between themselves and the participant. These needs are assessed iteratively in negotiation with the participant. This orientation sees the relationship as the foundation of current and future support provision, recognising that without a trusting relationship, the possibility of sustained change is minimal. This belief is informed by both social work theory (Ashford and LeCroy 1991), and the experiences of social workers with long histories in Alice Springs.

> ***"The ISP has a really good focus on building rapport. They are also good at finding people!" (External service provider)***

Conceptualising relationships at the core of support work also allows staff to provide support cognisant that participants are embedded in social networks which impact and influence them. This enables an expansion of the scope to best meet a participant's needs. Aboriginal people's social networks are very important, in terms of how others are affected by an individual's actions, as well as by how others provide support to people experiencing difficulty. This means that a staff member may work with people in a participant's social network to cooperatively provide support for a participant.

> ***"The ISP has a role in supporting people [who are] supporting people [participants]." (Community respondent)***

Case work (rather than case management)

The relationship centred approach also supports the choice of structuring the program on a case work, rather than case management, model. Case work privileges the relationship between a social worker and a client, and support is provided through this arrangement. Case management, on the other hand, assesses clients, and identifies them as having particular issues, which it sees as being dealt with by issue-specific specialists, with the case manager overseeing the process. Case work has been deliberately chosen as the approach that best suits this context (McCallum 2002). A case work approach also implicitly recognises that support provision has spatial and geopolitical components- what, how and where a service is delivered all impinge on the outcomes that are produced, something that is important to consider in the Alice Springs context.

"We have chosen to use a case work approach because different Town Camps have different cultures and different people have different needs. The relationships we have with people in different places produce different intervention practices."

- **Team Based configuration**

At the outset the designers of the program (primarily the ISP coordinator, the Social Services Manager and the Social Policy and Research Manager) were aware that the ISP would be dealing with 'difficult' people. Many of the people who become ISP participants are those who have fallen out of other support programs, or for whom other programs are not considered appropriate.

> ***"The ISP takes in people no-one else will. We get a lot of handballs from other agencies who are not able to provide the kind of support people need." (ISP staff member)***

Knowing this meant that a primary design consideration was ensuring staff members themselves would receive appropriate support to do their difficult work. The first aspect of this was building a team-based

support structure, where peer support, complemented by structured supervision and professional development activity, were integrated.

> ***"Staff need to feel supported and able to make decisions." (ISP staff member)***

The ISP staff have individual desks in a room with a central table, around which they conduct their weekly meetings. The space was deliberately configured like this to encourage staff members to informally share stories of their experiences with others in the team, recognising that they are ideally placed to understand the nature of the dilemmas each other may face, and to help each other to do effective work.

> ***"Often I have learning experiences in which I think I could do things differently [next time]." (ISP staff member)***

Professional development (PD) is a mandatory component of staff responsibilities. Staff undertake PD as a team, as well as having individual PD as part of their ongoing work. This commitment to PD ensures that staff keep up to date with changes in their profession, as well as acting as a team building exercise.

> ***"The ISP staff appear to get great support. The PD is great, they are getting training and support." (External service provider)***

The ISP team have one member who is designated as a 'Community Development Worker'. This staff member's role is to work with community members on initiatives that do not fall within the scope of case work, but which are directed to addressing alcohol misuse more broadly. This role diversifies the range of interactions that the ISP can engage in, seeking to address community concerns around alcohol though coordinated action at a variety of levels.

Harm minimisation

As a program operating under an Alcohol and Other Drugs (AOD) banner, the ICW emphasises participant wellbeing through adopting a harm minimisation model, cognisant that abstinence-based models were unlikely to succeed in this context. Harm minimisation focuses on the person and the difficulties they are facing in real time, seeking to support them to reduce the harm they are experiencing.

"People with severe alcohol problems live lives characterised by chaos, for them, and in turn they inflict this chaos on those around them. To solve their problems, they need help to deal with the chaos around them, be it housing, money, relationships. We work with the person to try to generate stability, and if you do this the dysfunctionality and chaos produced by alcohol will go down." (ISP staff member)

In the ISP this manifests itself in deliberately not focusing on a participant's consumption of alcohol in the first instance, though it may be a contributing factor, recognising that such an approach undermines the possibility of building a trusting relationship. Rather the focus is on the person who is experiencing harm in which alcohol is a factor, seeking to address the problems they are facing as understood by them.

"There is not a lot of harm minimisation talk in the sector- this is why we work with the ISP so much - because they take this approach." (External service provider)

- **Referral process**

There is active referral into and out of the ISP. These referrals can be tracked through Supportlink, however it is unclear whether there is an easy way of producing the data in useful numerical form.

Part of the process underpinning the referral process is service mapping. While this has not been done formally, the ISP's strong links at the practitioner level with other organisations ensures that they are aware of how to refer to the ISP. However, it is also apparent that other organisations would like more information about the ISP and the referral process, believing that available information would be of benefit to the ISP, other organisations and potential clients.

> ***"The referral process is not well known about and it should be better. Improved knowledge around the referral process would have a lot of positive spin offs." (External service provider)***

> ***"I found out about the ISP from the doctors at the ASH [Alice Springs Hospital]." (ISP participant)***

Part of the ISP's success is due to its capacity to meet the needs of other agencies who deal with people who have alcohol related issues but are not themselves support providers. The hospital is one source of referrals who value the ISP because of its responsiveness and its emphasis on face to face engagement. Recognising that crises are opportunities, the hospital actively refers people who needs support, but who are likely to 'disappear' back into the community if they don't receive immediate personal attention, to the ISP, because they know the ISP will come to the hospital and meet people face to face at short notice.

> ***"If I have someone in here who has alcohol implicated in their presentation, and for whom that alcohol use is likely to be a problem when they leave, I will contact someone in the ISP first. The ISP is good at dealing with the highest risk clientele- people who are often homeless and using ASH as their safety net. However, they only get seen by the AOD staff if they are admitted; we can't do anything if they get dealt with in Emergency and leave. If they are admitted there is still often only a short window to deal with them and get them hooked up with aftercare that will help to make a difference. I know I can trust the ISP and refer people there because of its responsiveness and its commitment to meeting people face to face. For a person in crisis actually meeting someone can make all the difference. For these kinds of clients, a service that says they can send someone next Tuesday at 4pm for a meeting is just not going to work." (External service provider)***

- **Supportlink**

The ISP uses a database called Supportlink to store data relevant to the program. Staff members have access to this database and record information relevant to their interactions with participants within it.

At the commencement of the program a broad range of categories were developed so that information developed and collected by staff could be coded for later analysis. While some of the categories that were developed are used frequently, many others are not. There are several categories for recording data that are not used, making the database more cumbersome to use. At the outset there was a hope that data, stored in Supportlink, would be useful in making assessments about the program overall.

> ***"We want to know if the program is successful. We want to know the difference each role makes. We want to be able to make assessments about the links and synergies between the various roles and components of the ISP." (ISP staff member)***

Staff members have developed their own strategies for coding their activity within Supportlink. The result of this is that practitioner activity is not uniformly coded, which in turn means that the data recorded, while rich and comprehensive, is necessarily partial in nature and should not be considered as offering an overview of the program.

> ***"The statistics produced from Supportlink are a not as good as they could be because the categories are the wrong ones perhaps they were established too early and we've not changed then to reflect the differentiations between various things as we've gone along and learnt things." (ISP staff member)***

Supportlink is designed to record information for individual participants. Each participant has a file that details their interactions with their case manager, and this forms the basis of case review meetings held between the staff member and the coordinator to reflect on and plan activities relating to the individual participant. These individual files also support the program overall from a risk mitigation standpoint. They house the range of forms that are associated with an individual, as well as the notes on their interactions, and would form the basis of any program audits.

> ***"Having the back room in order protects the program." (ISP staff member)***

The design of Supportlink, which is framed around individuals, is a limitation for recording action when the locus of activity is a group of people or a community. Part of the logic of the ISP was to complement work done in ICW with actions of a preventative nature, working with groups in the community wanting to proactively build resilience within their communities. While efforts have been made to address this shortcoming within Supportlink, no ideal solutions have thus far been found.

> ***"The way its set up now Supportlink is not fit for purpose to deal with the community-based activity we do." (ISP staff member)***

Supportlink is used to generate reports which are provided to NT Department of Health on a quarterly basis to fulfil the reporting requirements of the contract. The evaluation has found that while the data stored in Supportlink is sufficient, when aggregated, to meet the reporting requirements of the program. However, the data that can be produced does not provide deep insight into the processes, outcomes or wider impact of the program in the community. This is due to the way data is coded when it is entered, the categories being used, and the units used for enumeration within each category.

> ***"Having good data is important. Being able to understand what this data tells us is more important particularly to assist the program to achieve its goals." (Tangentyere staff member)***

> ***"Supportlink is more about accountability so it doesn't seem 'active' in any sense to guide things. We're mainly using it as a repository for risk management purposes." (ISP staff member)***

There is a strong sense that the opportunities presented by the ISP, in terms of the data that could be collected and used, are not being adequately taken advantage of to inform either the program directly, or the work of Tangentyere more generally. This relates to a suite of issues including: how Supportlink is structured; what data is collected; understanding how data could be used to analyse and understand the program; the different ways different stakeholders understand 'value'; and, lack of time and resources to change existing practices.

> ***"Tangentyere often only records the information required by the funding agency. This is not the best use of the process to collect data." (Tangentyere staff member)***

There was a sense among external stakeholders that more information about the program, its logics, services, and outcomes would be valuable. Much of this information is currently not readily available, and the connection between practices and outcomes has not been documented. In addition, the diverse stakeholder groups, who value different aspects of the program present challenges to the program in terms of what should be recorded and how. However, there is universal agreement that more information, which is produced for the consumption of external stakeholders would be valuable.

> ***"In terms of the logics and processes it seems that the ISP has much to teach… for service provision in this context more generally." (External service provider)***

> ***"The ISP could provide a lot of information that would be useful… vignettes would be good as they would help people to understand the change and would be useful in promoting what the ISP does." (Government respondent)***

Recommendation: The ISP team should reflect on the role and structure of Supportlink, and undertake action to develop use practices best suited to supporting their everyday work, and generation of evidence for evaluation, reporting and further development of the program.

Questions such as: what is useful? What could be added? What could be dropped? Who should be able to access it? should all be considered in determining the place of Supportlink in effectively capturing and communicating data about the program and its effects. The discussion should focus on the benefits of changing practice around Supportlink given its importance in creating visibility and accountability for the program.

5. The Schedule

The ISP program Schedule outlines nine components, some of which are linked and others of which stand alone. At the point of completing this evaluation there is extensive action in some areas, while in others there is very little or perhaps none. Owing to the way the ISP has evolved since it began we have begun above by detailing our findings in relation to the major work being done by the ISP as it is being practiced now. We will provide detail on other components later in the report.

When the program was designed the main objective was to develop a support service for people and their families experiencing significant harm arising as a result of alcohol misuse. This work mainly takes place in the Intensive Case Work (ICW) component of ISP. In terms of size and activity the ICW is the main component of the ISP and is highly valued by both internal and external stakeholders.

The ISP was designed with ICW at the core. Previous work and ongoing negotiations throughout the Town Camp community identified that there was a desperate need for targeted, responsive support required for people suffering from alcohol related problems. However, it was always the intention of the ISP not to only provide this kind of support; it would be augmented with other, less direct community focused work, which would be integrated with the work of ICW. Most of the work taking place within the ISP is in the Intensive Case Work Support component.

- **Memorandums of Understanding (MOU)**

The program schedule set out that the ISP should sign MOUs with other organisations in the sector. While the evaluation shows that the ISP success depends on its links with other organisations (which are good and productive), MOUs have not been the avenue through which these links have been developed or maintained, rather they are cultivated at the staff (rather than organisational) level. While the links through which ISP action is negotiated and undertaken are strong, the ability for organisations to work together strategically is compromised by not having MOUs in place.

"MOUs are not a critical part of how things work on the ground." (ISP staff member)

Recommendation: Formalising MOUs at the organisational level. This may offer added support to already existing links maintained in the day-to-day practice of the program, contribute to strategic development within the sector, and assist in ongoing evaluation.

- **Early Intervention and Family Support**

Currently Early Intervention and Family Support (EI and FS) within the ISP is primarily conducted by the Community Development Worker. This component has not been as well developed as the ICW component, with which it was intended to strongly articulate in the original design of the program. A range of activities have taken place in this component, some of which have been supported as Alcohol Action Initiatives (see https://health.nt.gov.au).

Additionally, because of the responsive nature of work in the ICW component some of their support comes under the EI and FS banner.

"Case workers are community workers too." (ISP staff member)

A concern expressed during the evaluation was the difficulty of accounting for EI and FS work within the Supportlink database, which is built to store data for individuals, as opposed to groups and communities, which are what EI and FS actions are directed toward. This means that while a range of activity within the ISP may qualify as EI and FS there are not good mechanisms for identifying this work specifically. This is a limitation for understanding the impact of this work and thus being able to argue for its effectiveness.

Tangentyere also does work in this area in other programs, and therefore the links between ISP and the Access to Education (A2E) Division's programs could perhaps be examined to see how the programs might cooperate to address issues around alcohol at a community level.

Recommendation- to explore how EI and FS work can be better captured by Supportlink and consider if other evaluative activity is required for the production of evidence relating to the outcomes of work done in this area.

- **Return to Country**

Return to Country (RTC) is actively used and promoted by the ISP. It is seen as a valuable component of the program and is valued by people wishing to get out of Alice Springs. This program assists people visiting Alice Springs to return to their homes in communities around central Australia via the various transport services that now exist. A Return to Country service has been provided by Tangentyere for some time and was drawn into the ISP when the funding for the overall program was received. This has allowed the program to be accessed more strategically to meet the needs of individuals, Town Camps, remote communities and the Alice Springs community.

"The connection [of the ISP] with RTC is valuable, this means that people can get help to get home, while some people are better directed toward the [other aspects] of the program." (Government respondent)

The RTC program, while valuable as a stand-alone program, realises some of its value through its embeddedness with the ISP. Alcohol impacts not only on the individuals who are drinking, but on families and communities, often in ways that cannot be planned for, only reacted to. The ISP, due to its emphasis on being present in the community, often becomes aware of issues relating to alcohol misuse that accrue to those who are not formally part of the ISP. Through RTC the ISP can use its knowledge and networks to intervene for the benefit of everyone who is affected.

"There was a mob of people at Karnte who'd been there for a while and who were drinking and so I went to offer to help them with Return to Country. They were causing other people a bit of trouble and given business had finished and the weekend was coming it was important to help them to get home if we could. It was pretty busy when I got to the camp and I went and sat with the Town Camp president who told me about all the humbug and noise that had been going on. From there I went to an old bloke's house, who wasn't home, but his wife was who told me the same story. Across the road was a house full of people milling around. While I was there a Police car drove past but didn't stop.

I went to another house where I sat down and was told another similar story about noise and drinking. While it was clear to me that I should go and offer some RTC to those people who were causing problems and were in from the bush it didn't seem to me they were in any state to be ready to take up the offer. So instead thought I'd get on to the Police and Housing Safety Officers to let them know what was happening so they could provide support to people in the camp. When I got back to the office I talked to the Manager about what had happened, and then he also emailed his contacts in the Police and Housing to make sure that the message got across.

The next day I went again, a bit earlier, and did talk to people about RTC and managed to hook some people up who got themselves ready to go home. But after a few more days it was clear that they hadn't gone, so I tried to find out what was happening. It turned out that having a ticket on the bush bus doesn't mean there will be a seat for you when it comes. With Karnte being at the end of the line the bus had ended up being full or almost full day after day when it arrived. When I found this out I followed up with someone in the Chief Ministers Department who agreed to provide some assistance to get a special bus and so maybe a week after my initial visit it was organised and all the people who had been running amok got on the bus and went home- much to everyone's relief!" (ISP staff member)

- **Facilitation of Self Help Groups**

Self Help Groups have not been developed. At this point there is no staff member available with either the time or the training to undertake these groups. While they have been discussed, and informal discussions conducted about getting them up and running, the sense is that that there is no real demand for such a service. While a socially based forum through which people with alcohol issues could support each other has been raised previously (for example, it was supported as a possibility by 4 Corners during the AMP research), the form, purpose and modes of facilitation of the groups need to be further discussed before resources should be directed toward establishing them. Participants talked of their interest around activities in which they could get out of Alice Springs, to cook kangaroo tails and share stories, and formalising such activity under the ISP may be an additional activity provided that comes under this banner.

"It would be good if the ISP could take me and my family on country visit with kangaroo tails and damper." (ISP participant)

One of the TCRH researchers commented that trips like this might be the equivalent of a Town Camp Alcoholics Anonymous meeting. They would entail going a little way away (but not too far), and being able to sit and talk quietly together away from pressure of family and other worries.

Recommendation: Support for self-help groups, and their potential form/s and activity could be canvassed by the TCRH

- **Community information materials**

There is no evidence that community information materials have been developed. As indicated elsewhere in this report the ISP works through a diverse range of informal channels, and demand for the services provided by the ISP directed through these channels exceeds supply. Therefore, there is no incentive for the ISP to devote resources to developing materials when it will not enable them to undertake more work as a result. However, the logic of this stance has been questioned by external stakeholders, who would like more information about the program, and who would like to see the ISP grow and prosper in the long term.

> ***"Other service providers would appreciate knowing more about the ISP and the service it provides that would be helpful to them and their clients." (Government respondent)***

External agencies, Aboriginal people in Town Camps, and others who know of the ISP, all want more information, including about: who and how to contact the program, the referrals process, the services offered, inclusion/exclusion criteria, its relationship to other Tangentyere programs/ services, and, the logic of the program. External stakeholders feel that the ISP is responsible for producing and disseminating this information as those who don't know about it are unaware (so don't know to ask), while for others actively seeking information about the ISP is a task they feel like they don't have the time for.

> ***"People don't know what the service provides. People don't want to go through the process to find out if they are unclear." (External service provider)***

> ***"It would be good to have informational materials available of all the services that Tangentyere provide, how they relate to each other so that referrals can be made with this knowledge." (External service provider)***

Recommendation: Comprehensive service mapping should be undertaken, enabling the production of a range of material to be developed that meet the needs of other stakeholders. This work should involve the TCRH where appropriate.

- **Pre-employment training and support**

The ISP does not offer this service in any formal sense, though does refer participants to other specific pre-employment training programs if it forms part of their overall support program (negotiated on an individual level).

There is the sense that the participants in the ISP are mostly not at the point where they are close to work or training ready. This is not to say there are no other people who might benefit from being on the ISP who are close to work ready, just that the ISP is not able to deal with these cases at this point due to resource constraints.

Tangentyere offers these services through other programs. The extent to which the programs are working together is not clear at present. It is also unclear what it would take for them to work in a more coordinated fashion, given their clientele appear to be very different.

Recommendation: Tangentyere should seek to understand the role of alcohol as a factor impacting on people's work readiness across the suite of programs Tangentyere delivers in this area. This would allow the organisation to determine whether targeted alcohol initiatives would benefit people for who this is an issue.

- Participatory evaluation

See Section 6- The TCRH component- which deals specifically with the work we have done with the Tangentyere Council Research Hub (TCRH) on the evaluation.

- Final Report

This document is the final report of the evaluation process. It will form part of Tangentyere's overall report on the ISP.

6. TCRH component

This evaluation was undertaken with Tangentyere Council's Research Hub (TCRH) . This partnership enabled the evaluation to collect data which would have been unable to be collected otherwise. The work of the TCRH on the Town Camp elements of the work gave insight into service reception (in contrast to service provision), which in turn helps us to understand the ISP as a dynamic service that responds to the needs of their participants, as individuals but also understood as embedded within broader social networks (characterised by world making logics quite different from those within organisations and funding regimes).

The TCRH has been part of Tangentyere since 2002, and over the intervening period has undertaken a wide range of research projects. This work has allowed the TCRH to build its own history of good practice, marked by work which respects contemporary Aboriginal knowledge production and governance practices, which are poorly (if at all) understood by many professional researchers. The TCRH 'brand' is relatively well known in Town Camp circles, and its location within Tangentyere (a known and trusted entity), enables it to conduct work that could not be done by anyone else.

The research conducted by the TCRH generates meaningful content which is enormously valuable to the evaluation and the ISP. This work done by the TCRH could not be done by other researchers, whose knowledge and status as Aboriginal researchers grants them a unique insider/outsider perspective.

> ***"When I'm out there doing the interview the main thing I'm doing is making a connection with the person. As an Aboriginal person who is also a researcher the first thing I need to do is to make sure that the person is happy and comfortable to tell their story. To do this we need to make our connection in the Aboriginal way. This is the thing that lasts from doing the interview - the connection. I need to make it to get that person's story, but the thing that remains is the connection, and so this is the main thing I need to pay attention to…" (TCRH researcher)***

Research is not generally viewed in Town Camps or by Aboriginal people in Alice Springs as useful or productive. Ever since the TCRH began its work it has encountered the view that research rarely delivers the value that researchers promise. In research conducted by 'outsiders', many people's wariness of research results in them being reticent to give 'real answers' for the fear of what might happen if they do. While researchers may think this such a stance is unwarranted, the reality remains that many Aboriginal people are suspicious of the motives of those coming into their communities to collect information.

> ***"People don't just trust anyone who comes along asking questions." (TCRH researcher)***

TCRH researchers embed the research in the overall knowledge economy of the community. This entails recognition of, and conducting work under, the regimes of authority that exist in each research setting. In Town Camps this means working through formal structures (such as the Housing Associations) as well as informal structures (significant old people), both to give the research legitimacy, but also to recognise and build these governance and leadership structures and validate their role more broadly.

"People know best what is happening in their camp. They know what they need. Research is a way to get their stories." (TCRH researcher)

Part of the reason the TCRH can do productive research is that its work is embodied and responsive and focused on collaboratively generating improved practice; research is not understood as something that stands apart from everyday life and needs to be conducted in accordance with the rules that regulate social activity generally. As insider/ outsiders, the TCRH researchers understand the social environment in which they conduct their research, which is far greater than (but which includes) the interpersonal dynamics between researcher and interviewee. The TCRH researchers conduct their work in deeply ethical ways, respecting the knowledge production protocols of the community, which in turn supports and strengthens them.

"We make sure we do things in the right way, who we approach first depends on the issue and the camp but often the President [of the Housing Association] is the right person to start with." (TCRH researcher)

In practical terms TCRH researchers are very conscious of creating a comfortable environment for people participating in research; they know how to read people's body language and other non-verbal cues and adjust their practice in response. Ensuring that people are comfortable is a key to ensuring that the research experience is a positive one, and which in turn ensures that good information is elicited.

"Approaching someone starts with family connections, finding a way to connect through [known] relationships so that they can feel comfortable." (TCRH researcher)

Several Aboriginal languages are spoken in central Australia, with many people speaking them as their first language. English proficiency is variable, and so in research settings, TCRH researchers often must translate and/or interpret during interviews to help people to understand and participate.

"Often I'll have to do some translation into the person's first language." (TCRH researcher)

A critical contribution to this evaluation has been the role the TCRH researchers have made in making visible different regimes of what is valuable in Town Camp and Aboriginal domains. Some of this has emerged through participatory reflections around the interviewing process, which revealed some aspects of interpersonal relations that Aboriginal people value highly, but which are difficult to elicit directly.

Recommendation: The Research Hub should be deeply involved in the ongoing work of evaluating the ISP. The production of evidence demonstrating the impact of the ISP's work is critical for the programs continued existence. TCRH researchers are best placed to elicit stories and information from Aboriginal stakeholders, enabling the articulation of values and outcomes which are rarely captured by external evaluators.

Work that could be considered for the TCRH includes: embedding researchers in the day to day work of the ISP; developing case study profiles of ISP participants and their broader networks (where appropriate) to demonstrate impact; developing feedback materials for distribution in Town Camps; and, integrating data collected from a variety of sources to assist with people's own efforts to address the impact of alcohol in Aboriginal families and communities.

Recognising the crucial role that local researchers play in making visible Aboriginal values in programs like the ISP suggests the need for structured professional development of researchers (as opposed to research training), and an organisational commitment to strengthening the Indigenous researcher-consultancy workforce.

7. The role of evaluation in the ongoing work of the ISP

Arising from the evaluation are a range of reflections on the evaluation process itself, including its potential ongoing role within the ISP. The evaluation project has enabled the identification of a range of practices, logics and values inherent within the work of the ISP that were invisible due to their lack of explicit articulation, and enabled these to become available to staff.

> ***"More and more there is an emphasis on Evidence Based Policy and Practice. We want to make sure our programs are evidence based but also contribute to that base where possible. We see the evaluation as one way to help this process." (Tangentyere staff member)***

The demand for services, combined with a commitment by staff to deliver for participants, created an environment in which structured reflection is a key element of the program, but sometimes difficult to act upon given other demands and time pressures.. The conduct of an external evaluation provided the program with the resources and opportunity to reflect on their work without needing to design and structure the process themselves.

> ***"We are grateful for the evaluation. It will help us to sort things out in terms of what works." (ISP staff member)***

Throughout the evaluation the emphasis was on how evaluation could assist in making changes in real time, rather than being a primarily reflective process that would report findings at the end. This generative disposition meant that a number of small changes were implemented over the course of the evaluation, which have contributed to changed practices, as well as coalescing to provide higher-level insights such as those contained in this report.

Remaining consistent with the program logics, changes which will improve the ISP must emerge from the problems staff and those they interact with confront as they do their work. The experiences of the staff are therefore the key to developing actions directed at solving problems. However, the workload and demand for the services of the program, coupled with the complexity of the work suggests that while ongoing evaluation is of value to the program, expecting the program itself to drive it is unrealistic. Developing creative ways to ensure ongoing evaluation activity can occur that is not onerous for the staff is essential.

> ***"We are busy doing what we do. We want to know more about what we are doing especially how the participants find the support but we don't really know how to go about it." (ISP staff member)***

Recommendations

1. **The ISP invest resources to specify clearly the key networks upon which the ISP's success depends and to develop formal mechanisms that make information available for members of the range of communities of practice who constitute the ecology.**

    a. **Articulate a communication strategy** which outlines: who needs information, in what form, at what intervals (this articulates with the accompanying 'Evaluation Toolbox'), how they would be developed and by whom, and, what mode of communication will be used for each. Target audiences include: participants, Town Camps, the Tangentyere BoD, other Service Providers, funding agencies and the broader central Australian community.

    b. **Informational pamphlets or poster should be developed** that can be distributed widely to inform people about the ISP; what services it offers, how to get more information and how referrals into the program can be made.

2. **The ISP continue to explore and evaluate action among the program components. Drawing on the outcomes of this work Tangentyere should consider implementing allied action outside the ISP to address concerns and formulate action around alcohol and its impacts in Town Camps.** 4 Corners and the WFSG should be at the forefront of this work (supported by the ISP) and integrated with the work of the Board of Directors.

3. **Support should be sought from the Northern Territory Government or Federal Government to develop a sector-wide group to address alcohol issues strategically,** including in relation to issues within the sector, i.e. the Riley Review, Banned Drinkers Register (BDR), Point of Sale Interventions (POSI) etc. This could be convened by Tangentyere, though sits outside the remit of the ISP.

4. **A comprehensive document, detailing the work, logics and practices of the ISP should be developed, with a special focus on EBPP.** The approach to Case work is unique and has developed from local and broader theoretical underpinnings which contribute to its success and has relevance for Tangentyere and service providers in related contexts more broadly. This would form the foundation of the ISPs evidence-based policy and practice (EBPP) claims. The understanding of the ISP working in an ecology of service delivery and reception is an important aspect of this story, as it highlights the interactional nature of this work, which centres Aboriginal knowledge making practices and governance as central to the design and implementation of a service. The empirical material for the development of this document would be collected from ongoing work using the Toolbox, and would be developed in consultation with an evaluation consultant.

5. **Discussions within the ISP team should be conducted to reflect on and, if appropriate, to plan and undertake action around Supportlink.** Recognising that there is spare capacity, and that it could be used to more effectively capture and communicate data about the program and its effects, the discussion should focus on the costs and benefits of changing practice around Supportlink. The ISP team should consider action to enhance the role of Supportlink in supporting their everyday work, and its role in generating evidence for evaluation, reporting and further development of the program.

6. **The voices and experiences of participants, and other stakeholders in Town Camps, is critical for the development of a full understanding of the impact of the ISP (and of Tangentyere's services more broadly) for the Alice Springs and central Australian community.** The work of the TCRH is essential for capturing these voices and experiences, both because of their ability and capacity to conduct research that is able to elicit them most effectively, but also because of the role the research

plays in strengthening Aboriginal knowledge governance more broadly. **More work on the TCRH's methodology is required.** Discussions around who should fund this work are necessary for the TCRH's work to deliver maximum benefit; to develop programs through evaluation internally, and for informing policy development externally.

7. **Evaluation needs to be ongoing for it to deliver maximum benefit to the program and organisation. Evaluation work needs to be embedded in the day to day work of programs and must not entail onerous demands on program staff.** Work to encourage external stakeholders to participate in ongoing evaluation is important, as the mobilisation and sharing of information from around the ecology underpins iterative learning and programs that work. The evaluation is the first step in the process in developing a structured reflective process, which assists with making things visible, which in turn allows them to be shared.

8. **Support for self-help groups, and their potential form/s and activity could be canvassed by the TCRH.**

9. **Comprehensive service mapping should be undertaken, enabling the production of a range of material to be developed that meet the needs of other stakeholders. This work should involve the TCRH where appropriate.**

10. **The Research Hub should be deeply involved in the ongoing work of evaluating the ISP. The production of evidence demonstrating the impact of the ISP's work is critical for the programs continued existence.** TCRH researchers are best placed to elicit stories and information from Aboriginal stakeholders, enabling the articulation of values and outcomes which are rarely captured by external evaluators.

    Work that could be considered for the TCRH includes: embedding researchers in the day to day work of the ISP; developing case study profiles of ISP participants and their broader networks (where appropriate) to demonstrate impact; developing feedback materials for distribution in Town Camps; and, integrating data collected from a variety of sources to assist with people's own efforts to address the impact of alcohol in Aboriginal families and communities.

11. **Tangentyere should seek to understand the role of alcohol as a factor impacting on people's work readiness across the suite of programs Tangentyere delivers in this area.** This would allow the organisation to determine whether targeted alcohol initiatives would benefit people for who this is an issue. This work could be coordinated by the TCRH in association with the ISP and other programs.

Ongoing Evaluation – The Toolbox

1. What is this 'evaluation toolbox' and who is it for?

The purpose of this toolbox is the production of 'evidence' to support the ISP program. The aim of the evidence gathering includes:

- Monitoring the effects of the ISP practices in terms of its accountability around service provision, alcohol management and government-funded service delivery
- To improve policy and practice, both for the ISP and other programs within and outside Tangentyere Council
- To make the work of the ISP more publicly understood
- To develop an evidence base to support further funding applications

The toolbox is aimed at providing evidence relevant to:

- The Tangentyere Council Board of Directors and other people involved in TC service delivery
- The bodies which fund the ISP program and other TC work
- Elders and other authorities within the town camps
- Workers and managers within the other services which network with the ISP providers
- ISP clients

The evidence which these tools can produce include:

- A mapping of all the services which network together to enable integrated service provision across Alice Springs
- Public information about the work of the ISP with contact numbers for interested people
- Collated responses to questionnaire responses from members of the various interest groups listed above
- Brief case studies of individuals or of practices within the service provision

The 'Evaluation Tools

Questionnaires

A series of short questionnaires to be undertaken on a regular basis

- Questionnaire 1 – for ISP staff
- Questionnaire 2 – for ISP participants (ideally to be conducted by the TCRH)
- Questionnaire 3 – for Town Camp residents (e.g. family members, members of Housing Associations and Housing Reference Groups)
- Questionnaire 4 – for external Stakeholders (e.g. Alice Springs Hospital, CAAPU, Alice Springs Women's Shelter, Drug and Alcohol Services Australia, Congress, Alcohol and other Drugs Services Central Australia- final list to be determined in consultation with the ISP)

For staff and stakeholders, this questionnaire may be sent around as a monthly (or other interval) request by the ISP coordinator. For Town Camp residents, the questionnaire would ideally be administered by researchers from TCRH.

Responses from this questionnaire can be logged in a spreadsheet, enabling the tracking of data over the course of a given year, and providing information to be responded to at an annual/ semi-annual evaluation meeting (see below).

Case studies

Template for a ½ to 1 page case study document.

Each case study tells a brief story about a notable aspect of the ISP program and may include 4 key components:

- Title
- Photo
- Brief story as told by a participant, or recounted by a staff member/stakeholder
- Interpretation of this story identifying the 'take home' messages the story reveals

Case studies have been identified as a preferred form of reporting by Australian Government funders, and may include details of the work of particular staff members or community members, but are quite different from a case report on a particular client.

They provides an 'enriched picture' of notable moments and events within the life of the ISP, and do so by capturing more of the local and situated contingencies of these events than is often possible with numbers or questionnaires. Not all 'case studies' would need to take the same format, however, this is a suggested model. Where photos are included, permission would need to be sought at the outset and regarding storage and reproduction of any images.

Schedule analysis

This technique was initially developed as part of our evaluation project, and has the potential to be sustained as a regular practice initiated by management.

It involves revisiting the ISP 'contract schedule', assessing current practices against those that were identified as its original components. This activity should be undertaken, not to measure activity against the original goals, but to provide a process of tracking changes that arise along the way, and their relative value to the program. The outcomes of this process would feed in to the proposed annual/semi-annual evaluation workshops (see below).

Steps include:

- Timetabling regular intervals for the schedule analysis
- An individual or group meeting based assessment of current practices in relation to categories identified in the schedule
- Completion of a short record to be retained by the Social Services Manager
- Agreement upon changes which could be made to the schedule to make it more relevant to the changing work of the ISP

As opposed to other evaluation techniques, this is most appropriate to carry out in-house, and may become part of the ISP Coordinator's role, conducted at 6-month intervals.

Supportlink

There are considerable opportunities for the Supportlink database to be mobilised as an evaluation tool. Our recommendations include:

- Audit the categories used for recording information pertaining to ICW
- Review/ develop systems for coding activity to ensure uniformity across the team
- Review units of enumeration for each category to ensure they produce useful information
- Discuss how to record and store information relating to work done with groups and or communities
- Discuss how other data might be stored, e.g. case studies
- How information is made available for analysis- the role of stored data in reporting on the program as a whole

How data is collected, coded, stored and used is of paramount importance for the ISP as it seeks to create visibility. Showing the connections between practices and outcomes relies on good data of a variety of forms that can be analysed together to produce stories of the work of the ISP that can be shared widely. The evaluation shows that the ISP is extremely valuable to those who encounter it, however this value is unable to be communicated more broadly because the work to bring data and stories together has not been done. Supportlink is a key to the process to make information available more widely so that stories of its success can be communicated to a broad audience.

Posters/pamphlets/ newsletters

Templates for a poster and pamphlet promoting and describing the ISP should be developed with the ISP staff and retained for future use.

Posters and pamphlets are designed to support to ISP evaluation and program work by providing information to a range of stakeholders in simple form. The use of them aids in providing feedback, for raising the visibility of the service, and providing plain language descriptions of what the service offers and how.

Our recommendation is that at the bottom of each poster/pamphlet, there is an invitation to call the ISP if you have questions or stories to tell about its work. This provides a direct line for feedback to circulate between participants, families and other stakeholders and the ISP office. Any stories, comments and suggestions provided via this route should also be recorded (via Supportlink) and referred to relevant staff or managers and the evaluation meetings.

2. Putting the toolbox into action.

The evaluation toolbox is designed to be used by a range of people relevant to the ISP, however, not all its evaluation techniques are able to be administered in the same way, or by the same people.

Questionnaires

- Can be emailed to stakeholders as part of regular communication from the ISP director
- They can be filled in by staff at staff meetings or as part of routine Supportlink reporting
- Researchers at TCRH can be engaged to visit participants and other relevant people in the Town Camps on a semi-regular basis and complete questionnaires with participants and family members

Case Studies

- Can be developed by ISP staff, individually or as part of semi-regular group evaluation meetings

- Can also be developed by researchers at TCRH, independently or with ISP staff
- Details of short case studies can be housed in Supportlink

Schedule analysis

- A process to be conducted in-house by ISP managers, or ISP managers and staff
- We suggest that this happen on a semi-regular basis at 6 monthly or annual evaluation meetings

Supportlink

- People who use the Supportlink database should be encouraged to contribute evidence for policy and practice improvements.
- These contributions, as proposed above, have been designed to mesh with existing reporting requirements on Supportlink

Posters/pamphlets

- The posters/pamphlets are intended for use in stakeholder offices, government meetings and in Town Camps.
- Their form and content, where appropriate, will be developed in consultation with the TCRH and key stakeholders in Town Camps

3. Bringing it together- annual/ semi-annual evaluation workshops

Ongoing evaluation is focused on establishing formal feedback loops within the work of the ISP. It involves processes of information collection and distribution- finding things out and letting people know what has been found out. The importance of this process is based on two findings from the evaluation: firstly, that information does not flow across the ecology readily, and insights gleaned in one community of practice are not systematically being shared with others; and secondly that everyone desires more information about the program and what it is achieving.

The evaluation found that what is considered 'valuable' among the communities of practice that constitute the ISP varies. The ISP plays a key role in enabling the flow of information, however its ability to share relevant information relies on it being brought together, analysed, packaged and distributed in forms suitable for its intended audiences. Other groups involved in information collection and analysis, such as the TCRH (but may include others in Tangentyere) would also be involved.

The evaluation of the ISP showed that while evaluation work is valuable, it is time-consuming and requires coordination. For this reason, we recommend that ongoing evaluation be undertaken by a designated person or entity (for example an external consultant) whose role is to coordinate data collection, collate the information and convene and coordinate workshops for the ISP staff (with the potential involvement of other stakeholders). The purpose of the workshops will be threefold:

- Identify opportunities for changed practice and develop plans for implementation
- Produce information to share with others in the sector
- To produce evaluation reports for funding body and for building Tangentyere's Evidence Based Policy Practice credentials

We recommend that workshops be undertaken on a regular basis, at either 6 month or 12 month intervals.

4. Who will use the evidence the toolbox produces?

The evidence emerging out of the use of the toolbox will be used in a variety of ways. The first is for the iterative development of the program through acting on information received through the data collection process. Where change should be made, or action taken immediately in response to information coming in, it should be, as this will strengthen the feedback loops that ongoing evaluation seeks to embed in the workings of the ISP.

Data collected by the ISP will also be used to analyse long-term trends. Better data collection around alcohol support treatment has been recommended in the Riley Review, and processes should be established so that the ongoing evaluation support the development of longitudinal records of health management and other outcomes for participants as individuals, as well as for the program as a whole.

The regular workshops that form part of the ongoing evaluation process will not only consider and analyse the information that is collected, they will produce information so that what has been found can be shared. The involvement of the communities of practice identified in the evaluation will then receive feedback on their feedback, as well as receiving information about aspects of the ISP which hitherto they were unaware of. The resources produced will then be able to be reflected upon in future evaluation processes. In this way those receiving information produced by the ISP will be able to act on the information they receive and provide input as to what is useful for them.

With some adaptation, Supportlink could be used to retain questionnaire responses, case studies and schedule analysis reports. However, there may also be another archiving system more suitable for this work.

5. What are the desired outcomes of its use?

Through the use of this toolbox, there is the potential for practices of evaluation to be embedded within the operational life of the ISP enabling more informed and reflexive program development and reporting over time.

The ‘evaluation toolbox’ mobilises an approach to evaluation which recognises that evidence is most effective when generated within the real-life situations of the ISP itself, and the distributed ecology of alcohol management, Town Camp governance, law enforcement and public health service delivery in Alice Springs.

Conducting ongoing evaluation which shifts between the inside and the outside of the program, as well as between participants and other affected members of the Alice Springs community, allows both tensions and success stories to appear in data collection, with this data itself being responsively acted upon within its various context of use, as well as informing policy and practice within Tangentyere, and more broadly by governments and other agencies.

Having negotiated appropriate means for generating evidence in the course of the ISP evaluation project, it is these practices of evidence production that then continue to be mobilised and adapted as the ISP itself may continue to develop. Here evidence emerges within the practices through which service delivery and alcohol harm reduction also emerge, and responsively change.

Reporting to funding bodies is therefore not restricted to simple clarifications of good or bad service delivery as separate from poor or improving health outcomes. Rather reporting is on a responsive system of situated health management service delivery, in which program learning and health outcomes can be tracked and intervened in together.

APPENDICIES

- **Questionnaire - ISP staff**
- **Questionnaire - External stakeholders**
- **Questionnaire - ISP participants**
- **Questionnaire - Non-participants**
- **Schedule analysis template**

ISP Evaluation- Staff member

Date of this report: _____

Please answer questions for the time period since the last report. Dot points are fine.

1. Can you briefly detail the range of work activities you have undertaken?

2. Can you list all the external agencies you have interacted with and briefly detail the nature of these interactions and the communication method/s?

3. Can you list any areas within Tangentyere you have interacted with and the nature of these interactions and the communication method/s?

4. Can you outline one or two ‘success stories’ from you work?

5. Can you outline any challenges you have faced in your work?

6. Have you made any changes in the way you approach your work? If so what have you changed and why?

7. Can you tell a brief story about how your ISP work is making a difference?

ISP Evaluation - External stakeholder

Name and organisation: _____Date: _____

Please answer questions for the time period since the last report. Dot points are fine.

1. Can you briefly detail the services your organisation provides?

2. How do you communicate with the ISP (circle all that apply)?
   a. Supportlink (referrals)
   b. Email
   c. Interagency meetings
   d. Phone calls
   e. Face to face
   f. Other _____

3. What information do you currently get from the ISP?

4. Is the information you get useful in in assisting your organisation to work with the ISP? What else would help you to work productively with the ISP?

5. Is there information you would like to get from the ISP but don't?

6. Is the ISP a valuable addition to the alcohol support landscape in Alice Springs? Why?

ISP Evaluation - Participant

INDIVIDUAL INFORMATION

Name: _____(won't be published) Age:

Gender: ☐ Male ☐ Female

☐ Town Camp Resident (Y/N)

Camp: _____

☐ Urban Resident (Y/N)

Suburb: _____

No of Bedrooms: _____ No of Adults: _____ Children: _____

PART 1: EXPERIENCE WITH TANGENTYERE ISP PROGRAM

a) How did you hear about the Tangentyere ISP programme?

☐ Word of mouth ☐ Family ☐ Hospital ☐ Other (where)

_____

b) Who referred you to the ISP programme?

☐ ASH ☐ DASA ☐ Families ☐ Other (please specify)

_____

c) What problems did you have when you were referred to the ISP?

---

d) Have you ever been referred to another alcohol support program? If so which one?

PART 2: SUPPORT FROM THE ISP

1. What kind of support does the ISP give you?

---

2. Does the ISP support you in any of the following areas?

☐ Housing ☐ Alcohol ☐ Medical Assistance ☐ Doctors appointment;

☐ Other (specify) ----------

a) What areas have you got the most support from the ISP around? Why?

---

3. Can you tell us how the ISP supports you? What do they do to help you?

---

4. Do you think you get enough support from the ISP? If not what additional help do you need?

---

5. If you have been on other alcohol programs, can you tell us if the ISP different to other services? If so what does the ISP do differently?

---

7. Do you think the ISP workers do a good job? What do you like about what they do and what could they do differently?

PART 3: HARM REDUCTION; HEALTH, SAFETY, WELLBEING

1. Do you think that being an ISP participant has reduced the harm you have experienced from alcohol? If yes, how? If not, why not?

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2. Do you think that the ISP is helping to reduce harm to families and the community? If yes, how? If not, why not?

WOULD YOU BE ABLE TO TELL A STORY TO THE IPAD ABOUT THE SUPPORT THE ISP PROVIDES?

ISP Evaluation - Non-participant

INDIVIDUAL INFORMATION

Name: _____(won't be published) Age:

Gender: ☐ Male ☐ Female

☐ Town Camp Resident (Y/N)

Camp: _____

☐ Urban Resident (Y/N)

Suburb: _____

No of Bedrooms: _____ No of Adults: _____ Children: _____

Part 1: EXPERIENCE WITH TANGENTYERE ISP PROGRAM

1. Have you heard of the ISP?

   ☐ Yes ☐ No (if no go to Question 5)

2. If yes how do you know about the Tangentyere ISP?

   ☐ Word of mouth ☐ Families ☐ Hospital ☐ Other

   Can you please tell us what you think the ISP does?

   ---

3. Has the ISP helped you, your family or your community? If yes, how did it help?

   ---

4. Do you have any ideas about other ways the ISP could provide support to people and families?

   ---

5. Do you think the ISP workers do a good job? What are they good at and what could they do differently?

---

6. Do you know someone who is a participant the ISP?

☐ Yes ☐ No ☐ Not sure

i. If yes do you think the ISP has been helpful for them and if so in what way?

---

7. Are you aware of other alcohol support services you people can access?

☐ Yes ☐ No ☐ Not sure

If Yes …

a. Do you think the ISP different from these other services?

☐ Yes ☐ No ☐ Not sure

WOULD YOU BE ABLE TO TELL A STORY TO THE IPAD ABOUT THE SUPPORT THE ISP PROVIDES?

ISP Schedule Analysis

Completed by: _____

Date:_____

Component	Deliverable	Performance measure	Action/ Comment
MOUs	• Identification of key agencies • Development and execution of MOUs	• 50% of identified agencies with MOUs signed 12/2016 • 80% MOUs signed 03/17	
Referral process developed	• Service mapping • Referral procedures documented and disseminated • Process adhered to be stakeholder agencies	• Number and type of agencies involved matches the mapping • Number of incomplete referrals and identified barriers	
Early Intervention and Family Support	• Establishment of the team (12/2016) • 6 monthly reporting on activities	• No. clients supported • No. Families supported • No. support periods • % families retained in program for 12 weeks • % families who successfully transition out over 12 month period	
Assertive outreach and case management	• Service developed (12/2016) • 6 monthly reporting on key demographic and service data	• No. clients supported • Demographics of clients by gender, age and location • 10% decrease in 12-month period (commencing 01/2017) of incidents in town Camps/ hotpots	
Return to Country	• 6 monthly reporting on support provided to individuals and families • Identification of systemic transport barriers • Regular review f ration income/expenditure • Review and development of strategies for promotion and follow up of payments	• No. clients supported • Number of support periods • Type of assistance provided • 75% compliance with payment structures	

Component	Deliverable	Performance measure	Action/ Comment
Facilitation of self-help groups	• At least 12 groups to be held in each 6-month period • Groups are led by an experienced CBT practitioner	• Number of self-help groups sessions held • No. clients supported • Demographics of clients supported • 20% of clients attending groups have reduced dependence on other services	
Community information materials	• Resources are identified and modified in consultation with community relevant services • Publishing schedules developed (03/17) • Community members access resources	• Resources are evidence based • No. Community members involved in development • Publishing milestones met • Uptake by community members- number distributed by location	
Pre-employment Support and Training	• Pre-employment framework developed (03/2017) • Employment framework is understood and utilised by stakeholders obtaining and maintaining Centrelink Income support • Referrals to CDP • Referrals to Job Services Australia (JSA) • Ongoing collaboration with CDP providers	• Framework developed • No. of clients referred to Centrelink • No. clients referred to CDP or JSA • No. clients engaged in training as a result of the program • No. clients who return to ISP • No. clients who gain employment following ISP support	
Participatory Action Research Evaluation	• Program framework (02/17) • Integrated evaluation plan (05/17) incl. longitudinal, qualitative, quantitative, analysis	• Each element of component milestones met • Annual evaluation report prepared in Oct each year containing: client participation and feedback, client feedback report, community feedback	
Final Report	• Report will contain overall statistics and long-term benefits to seen in the community • Analysis of challenges and lessons learnt • Recommendations for future success	• Draft report by 03/18	

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