

Breaking the Cycle of Alcohol and Drug Abuse in Ceduna and Communities in the Far West Region of South Australia

Final Report produced for the Department of Prime Minister and Cabinet





Contributing author information Tammy Abbott, Senior Research Officer, Ninti One Steve Fisher, Technical Advisor, Ninti One

Citation

Ninti One Limited. 2014. Breaking the Cycle of Alcohol and Drug Abuse in Ceduna and Communities in the Far West Region of South Australia. A report produced for the Department of Prime Minister and Cabinet. Ninti One Research Report NR002. Ninti One Limited. Alice Springs.

Acknowledgement

We wish to acknowledge and thank the following people who have supported and assisted in the project:

- Lena Taylor and Peter Miller, Aboriginal Community Researchers
- Senior Traditional Owners of Ceduna region
- Community organisation representatives
- Staff of the local Department of Prime Minister and Cabinet
- Staff of Centacare Ceduna

For additional information please contact Ninti One Limited ABN: 28 106 610 833 PO Box 3971, Alice Springs, NT, 0871

General Manager Business Development Lyn Allen Telephone: 0401 116 894 Email: <u>lyn.allen@nintione.com.au</u> Fax +61 8 8959 6048

www.nintione.com.au

© Ninti One Limited 2014

Breaking the Cycle of Alcohol and Drug Abuse in Ceduna and Communities in the Far West Region of South Australia

Final Report produced for the Department of Prime Minister and Cabinet (PM&C)

October 2014



Ninti One Limited Research Report NR002

Contents

Executive summary	.iii
1. Introduction	1
2. Research objectives	1
3. Methodology	1
3.1 Ethical approval	1
3.2 Initial scoping	2
3.3 Research cycles	2
3.4 Research team	2
4. Presentation of data	3
4.1 Planning and preparatory work	3
4.2 Research Cycle 1: Interviews with selected individuals	4
4.3 Themes emerging from Research Cycle 1	9
4.4 Research Cycle 2: Focus groups and further interviews with people in Yalata and Oak Valley	. 9
5. Analysis and findings	14
5.1 Characteristics of the rough sleeper group	14
5.2 Influences on the lives of the rough sleeper group	15
5.3 Access to services	16
5.4 Interaction with service providers	18
5.5 Support for self-motivated change	19
5.6 Relationship of the study findings to the Alcohol Management Plan	19
6. Conclusion	21
Appendix 1: Semi-structured interview questions	23
Appendix 2: Alcohol Management Plan for the Far West Coast Region	24
Background to Ninti One	26
References	27

Tables

Understand the cohort: what is a typical week like for them? How do they live their lives?	5
Explore rough sleeping and any drinking patterns and behaviours	6
Interaction with service providers	. 7

Shortened forms

ACR	Aboriginal Community Researcher
A <u>n</u> angu	Pitjantjatjara word for Aboriginal person
MAP Bus	Mobile Assistance Patrol Bus
PAR	Participatory Action Research
SRO	Senior Research Officer

ii	Breaking the Cycle of Alcohol and Drug Abuse in Ceduna and
	Communities in the Far West Region of South Australia

Executive summary

Ninti One was engaged by the Department of Prime Minister and Cabinet through the Ceduna Indigenous Coordination Centre to conduct a study for the program Breaking the Cycle of Alcohol and Other Drug Abuse in the communities of Ceduna, Koonibba, Scotdesco, Yalata and Oak Valley. The objectives are:

- 1. To engage with communities in the Far West Region of South Australia (Ceduna, Koonibba, Yalata, Scotdesco and Oak Valley) to explore issues associated with alcohol misuse, with particular efforts to engage those currently not presenting at standard delivery services
- 2. To understand the cohort(s) of rough sleepers/heavy drinkers living in Ceduna and visiting the town, with a focus on the services they are using and their needs and the needs of their families
- 3. Where possible, identify key messages and effective mechanisms for reaching members of these cohorts and, through Ceduna, liaise with specialist service providers to link identified people with existing services and provide advice about modifying services to improve access by various groups.

In essence, the purpose of the study is to understand the influences on, and motivations and circumstances of, a specified group of people and to share the knowledge gained with service providers.

The project team consisted of a Senior Research Officer, two Aboriginal Community Researchers and a Technical Advisor. The method used the principles of participatory action research and involved two cycles of research using semi-structured interviews with rough sleepers and heavy drinkers followed by focus group sessions with service providers in Ceduna, Yalata and Oak Valley, plus additional interviews to add insights. The cohort in this study call themselves Anangu, the Pitjantjatjara term for Aboriginal people. The process enabled service providers and community members to contribute, providing information about the interactions they have with each other.

The findings of the research are that 80–90 people make up the group of rough sleepers and heavy drinkers in Ceduna. It appears that 75% of this group may live in Yalata and visit Ceduna for the purposes of being with family, using local services and drinking. However, a significant number of people who describe themselves as living in Yalata may originate from Oak Valley or Tjuntjuntjara. Among this group are people with a range of skills and talents, such as musicians, athletes and people with practical skills. They are individuals who have caring responsibilities due to their cultural obligations, and in many cases they are senior men and women in their community. There are aspects of culture that are relevant to people's movements in and out of Ceduna. Some are discussed in this report, but there are others that were too complex and/or private to be revealed.

A majority of the cohort wish to reduce or stop their drinking, and a small number described themselves as being able to if they chose to. A few have interests and aspirations that their current lifestyle is preventing. Although different people express contradictory views, the study found that people are usually not 'coming to Ceduna to drink'. They are in Ceduna for a variety of reasons, and the use of alcohol becomes part of the experience.

Rough sleepers in Ceduna are regular and often frequent users of a small number of services. Further discussions would be worthwhile between key service providers and individual Anangu to develop small interventions that assist them to reduce their drinking. Other ideas for new services or improvements to existing ones arose from the study, including diversionary activities, food, accommodation, transport, night patrol and mentoring.

The study heard few complaints from individual service users about existing services. However, some participants commented about feeling unsafe. There is scope for reviewing the current security arrangements in Ceduna and considering whether better options exist. There is also a question around whether the existing camping facilities meet suitable standards. Service providers have suggestions on ways to improve interactions between service users and service providers. They include the need for greater cross-cultural preparation of staff, changes in working hours to better suit times when needs are greatest and other suggestions. There is scope for working out how case management support could be achieved in places where rough sleepers gather, are comfortable and may be open to proactive support.

A factor in achieving change for the better in the lives of the rough sleeper group could be said to be their own 'agency': their capacity to change direction coupled with the opportunity to do so. The subject of agency or self-motivated change deserves attention, as it raises key questions whose answers could help in developing a fresh approach.

The study does not contradict any of the areas of action described in the Alcohol Management Plan. It provides further insights. The Plan would be improved by greater recognition of the cultural influences and obligations that are inherent to people moving around the region and to counter assumptions that they are only in Ceduna to drink.

1. Introduction

As part of the Breaking the Cycle Initiative, Ninti One engaged with communities in the Far West Region of South Australia (Ceduna, Koonibba, Yalata, Scotdesco and Oak Valley) to explore issues associated with rough sleeping and alcohol misuse. The emphasis of the work was to engage those people currently not presenting at standard delivery services (known in research terminology as the 'cohort'). The research project described in this report seeks to learn more about the reasons that people are sleeping rough and their behaviours, to help service providers engage those who are not making full use of the available services and support.

2. Research objectives

The objectives of the study are:

- 1. To engage with communities in the Far West Region of South Australia (Ceduna, Koonibba, Yalata, Scotdesco and Oak Valley) to explore issues associated with alcohol misuse, with particular efforts to engage those currently not presenting at standard delivery services, and to learn more about drinking patterns and behaviours to assist future service modelling towards engaging those most resistant
- 2. To understand the cohort(s) of rough sleepers/heavy drinkers living in Ceduna, potentially including:
 - a. People who reside permanently in Ceduna and are rough sleeping and/or drinking
 - b. People visiting Ceduna, sleeping rough and drinking
 - c. Other visitors sleeping rough
 - d. Understand what services they are using or are aware of and what their needs and the needs of their families are
 - e. Where possible identify key messages and effective mechanisms for reaching members of these cohorts.
- 3. To work closely with Centacare (Ceduna) to liaise with specialist service providers to link identified cohorts with existing services and provide advice about modifying services to improve access by various cohorts identified in step 2.

3. Methodology

3.1 Ethical approval

Ninti One submitted an application for ethics approval for the research to the Aboriginal Health Research Ethics Committee (AHREC) in January 2014. The Committee provided advice on aspects of the research methodology to ensure the highest standards of ethical research practice were achieved. This advice was incorporated in the final version of the research design.

Conditional approval was granted in February 2014, and full approval was provided for the research at the AHREC meeting of 6 March 2014.

3.2 Initial scoping

Through this early process of scoping the research and consulting with the service providers, the local residents and the traditional owners in the Ceduna area, it became clear that the majority of the cohort was likely to be made up of Yalata and Oak Valley residents. Mainly as a result of their displacement from traditional lands, Pitjantjatjara people (who call themselves Anangu, a Pitjantjatjara name for 'people' in their language) have moved into the Yalata and Oak Valley communities. Ninti One staff were also advised that other members of the cohort could potentially come from Tjuntjuntjara, a community over the border in Western Australia.

This initial insight into the population was valuable in designing the process and forming the research team, especially as it was expected that most people would be speakers of Pitjantjatjara as their first language.

3.3 Research cycles

A key principle in the design of the research was the use of two research cycles, which is common practice in social research of this nature and certainly in the participatory action research (PAR) methods Ninti One has used frequently in the past. The first cycle involved Ninti One staff working with Centacare and other service providers to identify a cohort of rough sleepers in Ceduna. The Ninti One research team then conducted individual interviews with 18 people, representing a range of ages and both genders.

The method used to survey this group was semi-structured and open-ended interviewing based on questions oriented towards the research objectives. The questions centred on three themes:

- 1. Understanding the cohort: what is a typical week like for them? how do they live their lives?
- 2. Exploring rough sleeping and any drinking patterns and behaviours
- 3. Interacting with service providers.

The themes that emerged from Research Cycle 1 were used to inform Research Cycle 2, which consisted of focus group sessions to which selected service providers and senior members of the community in Ceduna were invited. There are different methods available for the facilitation of focus groups. In this case, the Ninti One team used a 'group interview' method that encourages discussion of the group of key themes identified through Research Cycle 1.

Through the two cycles, the team collected qualitative, plus some quantitative, data relevant to the research objectives. These data were analysed, to give the preliminary findings presented in the earlier report submitted to the Department of Prime Minister and Cabinet. Further work during July and August 2014 led to the final draft report presented here.

3.4 Research team

For the first cycle, the Ninti One team was led by Tammy Abbott, Senior Research Officer (SRO), supported by Steve Fisher, Technical Advisor, plus two Aboriginal Community Researchers (ACRs), who are introduced below. The whole team conducted the engagement process and interviews in Ceduna. Ninti One staff also took the opportunity to introduce the project to the wider community and continue to work with service providers to identify the cohort of rough sleepers and where to locate them for further engagement.

One of the ACRs, Lena Taylor, was employed as an interpreter in Pitjantjatjara, which the majority of the cohort who were the research target for the first cycle spoke. Lena has been a resident of Oak Valley community throughout her life. She is a language speaker and family member to many of the cohort and was able to use her language skills to communicate with Pitjantjatjara speakers within the cohort and help them understand the objectives of the Breaking the Cycle Initiative and what it set out to achieve. Her language skills and connection to family and country also encouraged participation from the cohort. Her skill and knowledge were essential throughout this period.

Equally as important was Peter Miller, a Traditional Owner and a senior resident of Ceduna who has witnessed the movement of Anangu in the area over time and the changes in their situation. This collaboration brought a balanced combination of connection, knowledge and understanding of the issues facing Anangu.

4. Presentation of data

4.1 Planning and preparatory work

The purpose of the first cycle was to achieve a situational analysis on the subject of rough sleepers/heavy drinkers and their interaction with services in the five communities. An important emphasis in this cycle was to interview individual rough sleepers, as Ninti One believes the greatest research value comes from engaging with those people who are the main focus of the study.

Prior to the visit of Ninti One staff in April 2014, the Ninti One SRO conducted meetings over the phone and face to face during an earlier visit for the Income Management – Community Perspectives project. Through consulting with different people in Ceduna, she gained knowledge on the cohort of rough sleepers. She also spoke with service providers, especially those who are members of the West Coast Regional Alcohol and Substance Misuse Action Group. The information gained as a result helped the team work out the best approach to the first research cycle for the Breaking the Cycle study.

The SRO also spoke with Scotdesco and Koonibba community representatives during the visit. The Scotdesco Community Manager advised that the project was not needed in Scotdesco since the cohort of rough sleepers in Ceduna were not from Scotdesco. The research team discussed this point with staff of the Ceduna Indigenous Coordination Centre, and it was agreed that the study would focus on the other communities.

The research team spent time identifying members of the cohort at key gathering places in the area. These places have colloquial names that include 'Level Two past the Fruit Fly', 'the Esplanade', 'the Day Centre', '18 Tank' (which is bushland area on the outskirts of town where Anangu set up camp as a place to stay while they are in Ceduna) and specific locations on the streets of Ceduna. As a result of discussions with service providers in Ceduna that work closely with the identified group of rough sleepers, the research team estimated that there are around 20 regular people who are part of the group. However, at times there are more due to more Anangu coming to town for other reasons, who slip into a similar pattern of drinking and sleeping rough. The number fluctuates depending on family and community issues at the time or because of the choices that individuals make.

Taking into account the wider group, the research team estimated that around 80–90 people participate in patterns of heavy drinking and rough sleeping in Ceduna.

4.2 Research Cycle 1: Interviews with selected individuals

The Day Centre is a Drug and Alcohol Service SA (DASSA) facility that provides services for rough sleepers in Ceduna to have access to breakfast meals, shower facilities and washing machines to clean clothes. The Day Centre also has craft and other activities during the day that clients can participate in. Many Anangu have expressed that this is an important place for them when they are away from home; they feel this is where they get most support when visiting Ceduna. Anangu advised the research team that the Day Centre facility in Ceduna would be the most likely place to conduct the interviews. This was endorsed by the manager of the Day Centre, who advised of opening times and a suggested area within the Day Centre where the interviews could take place. Anangu were comfortable meeting at the facility in the mornings when it opened (from 7.30 am).

Once relationships had been established with the cohort, the research team began meeting at the Day Centre facility from 7.30 am to conduct interviews. This was, at times, somewhat emotional due to feelings of pain and despair that people felt when speaking with the research team. On the other hand, it was also a time when some Anangu were at their most happiest and full of life and wanted to enjoy themselves together, listening to and sometimes playing music and dancing.

The research team interviewed those people who presented in a sober state and were willing to participate, all of whom were Anangu. Eighteen interviews were conducted during that week, representing around 25% of the estimated total group of rough sleepers. The gender and origins of the people were:

- 12 men
- 6 women
- 3 from Oak Valley, now living in Ceduna
- 1 from Tjuntjuntjara, now living between Town Camp and Yalata
- 13 from Yalata, 9 of those still living in Yalata
- 1 from Ernabella, visiting Ceduna.

The current age demographic within the cohort is fairly even across the range of 20 to 50 years old. We understand that many senior Anangu, which we define as people over 50 years old, tend to reduce or stop their previous levels of drinking. Ill health may be part of the reason for some individuals. There are, however, a few individuals who are very senior and who continue to drinking heavily.

The interviews, which covered the topics described in the methodology section of the report, focused on understanding the people and their lives, their drinking patterns and behaviours and their interactions with services. A set of corresponding questions were designed and explored in semi-structured interviews (interview questions are included as Appendix 1).

The tables below present the results of the interviews, using, as far as possible while ensuring clarity, the words of the interviewees, with additional commentary on further insights or trends:

When they feel strong	Reasons for sleeping rough	Reasons for coming to Ceduna
When I'm sober	Arguments	100% to drink
Clean hygiene	Lack of town camps/accommodation	Shopping
With family	Drunk	Spend time with family
Music	Lack of options	Medical
On country	Visiting family	
Speaking up	Felt comfortable sleeping rough	
By myself	Following family	
Stopped drinking	Barred from town camp	
When I have caring responsibilities		
Taking medication		
When drinking grog		

Understand the cohort: what is a typical week like for them? How do they live their lives?

From these data, a few overall trends can be identified. One is that almost everyone coming to Ceduna is there to visit or to be with other people they know, mainly family members. Another is that other attractions in Ceduna motivate people to come, such as medical appointments and shopping, or simply to see people they would not see if they stayed in other communities like Yalata. A further trend is for people to stay in town for a few days, although a precise measure was difficult to obtain.

As shown in the table above, people gave diverse responses to questions about why they sleep rough. A significant number (25–30%) reported that they do not consider themselves as rough sleepers, as they stay at the town camp or sobering-up centre. One person stayed at his sister's house. Others described themselves as 'having nowhere to go', 'barred from the town camp' or that they were simply sleeping outside after a heavy drinking session and were not able to go anywhere else.

Questions in the study about the length of time that individuals had been following a pattern of drinking and rough sleeping generated various responses. Some people said they had been doing so for a long time, three measured this period as being between five and ten years, and one person said it had been more than ten years. Others said it had been around one or three to four years, or they could not estimate precisely.

Again, although precise answers were difficult to obtain, perhaps because patterns of behaviour vary from week to week, it was apparent that people visiting Ceduna tend to come for a few days every week. One person described himself as not being in town on weekends, and another said, 'I am here three to four days a week'.

Further analysis of the interviews – together with comments made to us informally by members of the group and insights we have gained by visiting locations in the area and talking to people – offers further insight into the lives of the group. An important starting point is the historical context. Prior to the settlement of Oak Valley and Yalata, Anangu came from a place called Ooldea, which was situated on Yalata country (not where Yalata is now). Some Anangu moved around regularly between places such as Colona station and Yalata tank. They set up camps all over the area.

Back during this period, Anangu moved around a lot due to sorry business, which was an obligation culturally. However, other reasons for their mobility were also important, such as work opportunities with farmers and a desire to be closer to resources such as wood for making artefacts. Movement also allowed fresh regrowth to the land during their absences.

As part of the education service, teachers would travel to these camps and set up tents that were called 'walkabout schools'. Staff of the store would travel to the camps with food for people staying there. Anangu would sell or exchange their artefacts for food. Many Anangu have very fond memories of this lifestyle and have shared their memories with younger generations. In this sense, stories of the wandering

lifestyle and basic needs being met while people camped in various places have become widely known as part of the accepted way of life of Anangu. It is therefore very important for outsiders seeking to understand the lives of rough sleepers to also understand the background.

Presently, the daily lives of Anangu within the cohort that is the focus of this research is one that often lack purpose. Many people wake up in the morning and head down to the main office to collect mail and to contact other family in other communities. They might go to the store and home again. Boredom sets in. Often by a Thursday or towards the end of the week, they will begin to make their way to a nearby town, mainly Ceduna or sometimes other towns. Other Anangu stay at community with the children and teach them about going to school and hunting for bush tucker.

One of the strongest insights we gained from the early part of the research, confirmed throughout all the work we did, is that Anangu are most happiest when they are with their families. Many Anangu are often bored and feel they do not have enough opportunity for recreational activities in their communities. This is one reason they tend to travel to places such as Ceduna to spend time with family, even if it involves drinking. On the other hand, many Anangu are very strong in their culture which also brings them together to share happy times. Children are a big part of this process, which helps them to learn and also prepares them for what will become their cultural obligations later in life. Children will travel with their families to places such as the Anangu Pitjantjatjara Yankunytjatjara Lands (APY), Tjuntjuntjara and Warburton.

When family members of Anangu pass away it becomes a very emotional and sad time for Anangu, and family have to move away for long periods at a time, sometimes up to a year. This can also be the cause of Anangu spending more time in places such as Ceduna.

Amount of alcohol consumed	Grieving	Worried	Do want to stop
100% drink more than one drink and some described sharing boxes of wine or cartons of beer in a way that makes a precise individual measure of consumption difficult.	Some people are drinking due to grieving the loss of family members, sometimes over extended periods.	At least 80% of the group report that they or their family (or both) are worried about their drinking patterns.	Over two-thirds of people interviewed wanted to stop or slow down their consumption of alcohol. The others reported that they like to drink or that they drink with their partner and so are not considering
Some people do not drink on some days.			stopping.

Explore rough sleeping and any drinking patterns and behaviours

Although some responses do not permit a precise measure, at least two-thirds of interviewees reported that they would like to stop or slow down their drinking, examples being:

I would like a time out from drinking. I gave up before.

I would like to stop. I like playing footy.

I want to stop drinking, go back to Yalata and attend programs there.

I would like to stop drinking and do a TAFE course.

I want to stop but I am not ready to stop yet as I need work.

A key point arising from this part of the study is that there is a high level of awareness of the negative effects of alcohol among the group as well as a desire among many people to stop. However, less than a quarter report that they have significant health problems. When asked about stopping their drinking, some

people describe personal aspirations that are being blocked by their current patterns of drinking. This information runs counter to the notion that individuals have blindly fallen into behaviours and are not aware of the potential negative consequences or that they have no other ideas for what they would like to do.

Some Anangu expressed that their responses to all the questions apply both when they are drinking and not drinking and that Anangu supporting each other is how it works, regardless of whether alcohol is involved. For example, feeling strong and caring for family can take place at any time when they are drunk or sober, in Ceduna and on country. They are much stronger when they can talk together about the broader issues and are empowered to do so.

Interaction with service providers

Services used	Likes	Suggested improvements
Day centre Town camp Step Down Sobering up Health Domestic violence house Yalata bus Pharmacy Sea View	Cups of tea Food Day Centre operation Chatting Women's group Fishing trip Gardening Showers Washing clothes	More activities Help to stop drinking Day Centre should have beds Accommodation Meals Night patrol

Members of the cohort tend to use services in the list above on a daily or weekly basis. When in town, some use the same services as part of a daily cycle (especially the Town Camp and Day Centre). The reasons people like certain services are shown in the middle column above. Comments that provide further insight on the views of interviewees are:

I like seeing family and having a chat.

Walking around the foreshore near the jetty is good.

I would like to see a meals service and a school for Yalata kids.

We need accommodation and an alcohol reduction service.

More housing support is needed, plus support for Yalata mob and for people with problems.

I want to see family helping each other to stop drinking.

Programs are needed to stop drinking.

Some members of the group remember better periods when they used their skills in a more purposeful way than at present. From our conversations, we noticed that changes in family situations have meant that times changed for these group members. These changes might have been family tragedy or loss, or they simply had to move for other reasons. At that point, it is hard for people to get back to what they were doing before. If they are grieving or unwell, they might start spending time with people who are already drinking heavily and this becomes their routine too.

Some of the group come into Ceduna because they feel less pressure there than in the place they live. We were not aware of which individuals, if any, had responsibility for children and this is not easy to define anyway, since childcare may be shared within families. The boredom people experience most days is often a reason for them to go somewhere else to talk, drink, have fun and forget about the worries of life. We

gained a sense of people wanting to take a break from where they are living and then coming into Ceduna from Yalata and Oak Valley, sometimes for extended periods of up to a month. They might become 'stuck' in town, meaning that they cannot find a way to get back to their community, despite best efforts of the Yalata bus service to encourage people to do so.

The research identified a clear trend for people to want some further assistance to reduce or stop alcohol consumption. The research team did not observe resistance to change or resentment of any previous efforts to reduce alcohol abuse. A significant number of people within the cohort want to see the problem addressed in some way, through services, programs or the actions of the community themselves.

Further discussions followed from the interviews and relate to questions about interactions with services and the movements of Anangu around Ceduna. Some participants used the opportunity to share their concerns about the Ceduna Community Safety and Security Patrol (K-9) service that operates in the Ceduna township. The K-9 service is contracted by Ceduna District Council to enforce local council by-laws. Anangu complained that the fines issued to them were unnecessary. They said that assaults and name-calling had been committed against them and that these acts were prejudiced and racist. They said it made them feel victimised.

One member of a small group of Anangu shared a story about a time when he woke up from sleep at Level Two to find a fine in the inner pocket of his coat. Other cohort members participating in the discussion advised that this is a common occurrence with K-9; they appear confused as to what is the role of the police. They stated that they do not mind the police doing their job, but they are worried about the damage K-9 is causing them, in this case, further despair. Anangu feel that because they are from community and not from Ceduna, they have no one to talk to and therefore no support.

Another key consideration relates to mental health. Data from the ABS indicate that of those who had been homeless at least once in their lives, more than half had experienced a mental disorder in the previous year, which is three times higher than among those who had never been homeless (Australian Bureau of Statistics 2008, cited in Mental Health Council of Australia 2009).

In the context of Ceduna, it is therefore important to recognise that the despair and poor emotional state in which some members of the group of rough sleepers exist could be another way of describing a mental health condition. An investigation of the subject of mental health and homelessness in Ceduna is beyond the scope of the research we conducted. It may be that some members of the group are receiving treatment for a mental health condition. We recognise that the cohort addressed by this research are not homeless in the sense that the term applies in other areas in Australia. However, given national statistics we consider that service development for the group in the future should include a mental health component.

Many people also commented about education for their children. An angu feel that there are no recreation opportunities for their children at Yalata and Oak Valley. They feel that children should be given opportunities to travel to Ceduna and other areas to interact in activities such as sports and music. These activities could get them thinking about other options in life rather than continuing the drinking patterns of some of their elders.

4.3 Themes emerging from Research Cycle 1

4.3.1 Origins

The majority of people interviewed described themselves as coming from Yalata. This implies a need for further research on services available in Yalata, which was followed up during visits there in July 2014.

4.3.2 Services in Ceduna

People interviewed are frequent users of a small number of services in Ceduna, notably the Day Centre, Town Camp, Sobering-Up Centre and the bus service to and from Yalata.

4.3.3 Safety

Some participants commented that they felt unsafe; this subject was introduced for further investigation through the focus group discussions.

4.3.4 Motivations for change

The interviews raised the need for examples of interventions that have been successful locally in achieving positive change for individuals and their potential for application more widely.

4.3.5 Service needs

Most participants could not respond to a question about how services might better meet their needs. A topic for further exploration is how services implemented in other locations could be relevant to the needs of rough sleepers in Ceduna and the objectives of the Breaking the Cycle Initiative.

4.4 Research Cycle 2: Focus groups and further interviews with people in Yalata and Oak Valley

4.4.1 Methods and participants

The themes set out in the section above are a guide and not a rigid framework. The intention was to enter into a combination of focus groups and further semi-structured interviews with key respondents in order to both pursue these topics and generate further insights of value to the overall research.

The second cycle of research therefore sought to build on the first cycle, enabling greater insight and analysis to be achieved. The Ninti One SRO worked with James Strivens-Coupe, the Centacare Service Coordinator for Breaking the Cycle, to plan the focus groups for Research Cycle 2. Invitations were sent out to service providers at the end of the week prior to the focus groups taking place, requesting their participation during the sessions. Despite relatively short notice, there was active participation and attendance by service providers in Ceduna, specifically through the representation of:

- Senior members of the Aboriginal community of Ceduna
- Families SA
- Drug and Alcohol Service SA
- Complete Personnel
- Medicare Local
- Ceduna Koonibba Aboriginal Health Service
- Red Cross

- Centacare
- Aboriginal Family Support Service
- Family Violence Legal Service Aboriginal Corporation (SA)
- Ceduna Aboriginal Corporation
- TAFE SA
- Oak Valley Health Service
- Oak Valley Aged Care

- Oak Valley Community Operations Manager
- Oak Valley Council Members and Community Members
- Driver for local community services
- SA Police

- County Health SA Ceduna Hospital
- Transitional Accommodation Centre
- Department of Human Services (Centrelink) - Ceduna.

Ninti One and Centacare liaised regularly with Yalata and Oak Valley communities in preparation for their contribution to the focus groups as part of the second cycle of research. A visit to these communities took place later, due to other commitments that included cultural business and unavailability of staff at the time. During this time, a further session also took place in Ceduna with other key service providers who were able to provide useful information that contributed to this study.

4.4.2 Data collected

Three focus groups were run on 14 and 15 May 2014, and further sessions took place at Yalata on 15 July 2014 and at Oak Valley on 6 August 2014, and with other key service providers on 11 August 2014. Although a rigid distinction is not desirable in this kind of wide-ranging discussion, comments tended to fall into three categories:

- 1. Observations on the pattern of drinking and rough sleeping that some people are following in Ceduna
- 2. Suggestions on ways in which agencies might better respond
- 3. Suggestions on new approaches or interventions.

The results of the focus groups are presented here in the form of a list of topics raised and discussed, whether in the form of suggestions or observations. Each one is followed by a narrative description and supported by any significant comments provided as quotations from the discussions.

Lack of opportunities for Anangu

Through interaction with Anangu, service providers are aware that lack of housing, loss of family, family fighting and no jobs are some of the reasons why some Anangu do not want to be in Yalata and so spend time in Ceduna. Anangu raised some of this throughout discussions in the first cycle.

Anangu would like to participate in annual events in Ceduna, such as the Oyster Fest and NAIDOC activities, as well as football. They also want to go to Ceduna for alcohol because there is no access to it in Yalata.

Transport issues

Oak Valley residents stated that transport is one of the main reasons people are not able to return to community and spend more time in Ceduna drinking. There is no bus service like the one Yalata has.

One focus group session commented that the Mobile Assistance Patrol (more commonly known as the MAP Bus) has recommenced service. However, it only operates from 4 pm to 10 pm. This service collects and removes people from unsafe places in the Ceduna area. This group also commented that it is a safety risk to move around within the township, particularly around the area near the Fruit Fly. The MAP Bus is seen as a vital service in the township to reduce the risk of accidents. However, the service needs to have its hours extended due to issues that arise later in the night and in the early hours of the morning.

Some participants expressed a view that the MAP Bus could also serve bush locations.

Connections with Tjuntjuntjara

Cultural connections are very strong between Tjuntjuntjara (in WA), Oak Valley and Yalata. Oak Valley members clarified this point during a focus group session in the second research cycle. They advised that Tjuntjuntjara people are a part of Maralinga and they are Pitjantjatjara people, connected with Oak Valley and Yalata. Anangu travel between four and six hours to visit family in Oak Valley, Tjuntjuntjara and Ceduna. They travel to visit family and attend cultural business at certain times of the year or when it arises.

Oak Valley residents have access to only one telephone to keep in contact with family, and this is only accessible during work hours. One of the key service providers in Ceduna stated that people from Tjuntjuntjara are only ever in Ceduna for less than three weeks at a time. They come and do their business and return to community.

We were also advised that A<u>n</u>angu from Tjuntjuntjara may be moving to Yalata to take advantage of new housing infrastructure, recreational opportunities (such as footy) and other services that are available there and in Ceduna. Other reasons that A<u>n</u>angu from Tjuntjuntjara may end up rough sleeping in Ceduna are that the Kakarrara Wilurrara Health Alliance may send clients to services in Adelaide, which entails a stopover in Ceduna on the way home, or that government responsibilities such as participation in South Australian land management and conservation activities are held in Ceduna as the most convenient regional centre.

Coordination and capacity of service providers

Given that most clients are Aboriginal and most service provider staff are non-Aboriginal, the subject of effective cross-cultural work arose. 'Service providers need to understand Aboriginal culture before going out and delivering the service' was one view expressed. Another was that service providers and staff need cross-cultural training. Also, on the question of capacity and skills, an opinion shared in one group was that housing and town camp staff need training on recognising alcohol-dependent clients.

Comments on specific service issues were that some services are 'doing the same thing over and over' without responding to circumstances and that 'some staff are not doing their job'. It was felt that there is a need to 'get a better model happening with service providers to community.' On the other hand, according to one view expressed during the groups, there is a 'reluctance from community organisations to work with service providers to change programs for the better'.

In one group, a comment was made that the ambulance service was only willing to go to 18 Tank when another service provider was there, and that some of their staff are fly-in, fly-out because locals are not willing to do the work. Regarding safety and security, the case was made in one group for a night patrol service in Ceduna.

Shortcomings in access to services

On the matter of alcohol-focused services, there was interest expressed by focus group participants in rehabilitation services for dependent clients. In general, Yalata is considered to have no suitable services for heavy drinkers and rough sleepers. The rehabilitation centre in Port Augusta is too far away for people to attend and family are unable to support. A view expressed by people in Yalata is that the community needs more support to provide services to people who are currently travelling to Ceduna. A Traditional Owner in Ceduna itself told the research team that a common view in the town is that some basic services provided in Ceduna ought to be accessible in Yalata itself. 'People go to the Day Centre in Ceduna for breakfast and a wash,' he said. 'They could do that in Yalata.'

Other comments were that 'service providers need to spend more time networking about the service they offer; it does not happen as much as it should' and that 'services need to rethink their structure in terms of service delivery hours. The Town Camp, Hospital and Police are the only providers that operate out of normal working hours'. Of course, two of these organisations provide an emergency service and so are open longer hours for that reason.

Participants thought that funding shortfalls do not necessarily have to be an issue in improving services, and that a collaborative approach will ensure current funding is well spent.

In the case of Oak Valley community, comments about services were made that included 'Services need to travel to Oak Valley and spend time with the community' and 'Oak Valley residents have to travel to Yalata to access training, health and other services'. This point relates to the shortfall in access to transport mentioned earlier in this report. Often, people do not have vehicles to travel in to Ceduna, or they have only restricted access to community vehicles to accommodate this service.

Another issue in Oak Valley was that local people do not have internet access: 'We are living in an information world; however, Oak Valley has no internet access. There's a training centre but no internet'. Internet access was also given as a reason that people travel around the region.

More education is required for the target group around housing, life skills and early childhood development

Long-term youth interventions and programs are part of the work that is required, building on the contribution of TAFE SA, which is having a big impact on changes towards a better life.

According to one focus group, 'Anangu are not aware of what current services offer, so there is a need to employ language speakers to help their understanding'.

One comment made was that professionals can make false assumptions about the effectiveness of information available to people. Even with high awareness and availability of Town Camp accommodation locally, some people are still sleeping outside and not using the Town Camp.

SA Police expressed concern that 'Police can't bail people back to community because they don't have a house of their own; they have no idea where they are going to end up'. For this reason, people are detained longer than they should be. Another interviewee suggested, 'A town camp should be set up at Yalata for homeless people, either short- or long-term component. Support on home and living skills could be incorporated into this set up and the community could manage it'.

More education for children to learn about the dangers and effects of alcohol was also mentioned as a possible way to address the issue for the next generation.

Work and diversionary activities

In considering the reasons why people are falling into a pattern of drinking, some participants pointed to the lack of alternatives. 'People are drinking because they're bored and don't want to work and there are no work opportunities.' The point was made that Anangu are not employed in any jobs in Ceduna and that there are few employment opportunities for them. One participant observed that hardly any Anangu in Ceduna have a job or house, and that it is hard to employ them if they have nowhere to live. Also, the waiting list for housing in Ceduna is very long. One participant argued that Ceduna Council would not want Anangu living in town either; another felt that nobody wants them in Ceduna.

As part of one discussion, the idea arose for Remote Jobs and Communities Program to help run activities, including a focus on 'clean communities and clean yards'. Another option is for service providers to offer hospitality training for Aboriginal people wishing to join the local tourism and hospitality industry.

Also on the subject of alternatives to drinking, one group discussed their knowledge that there had previously been recreational programs that took Yalata people out of town for weekend trips. 'Kids are crying out for something to do' was one comment. This reflects a view the research team heard more generally in Yalata: further support for the community would enable them to achieve more.

Investment needs to concentrate on early childhood and education

Some participants felt that to 'break the cycle' there needs to be focus on children, as they are the next generation. Children need to start seeing role models in their family; however, families also require support, especially to ensure their children attend school.

According to some participants, part of the problem is that there are no recreation programs in Ceduna for children during out of footy season and nothing for Anangu children. So an important question relates to what can be included in schools to build more learning opportunities for Anangu children. There is a need for teaching about Aboriginal culture in schools. There is a case for a cultural centre to be established so everybody can learn.

In some cases, children are being left with other families while parents or guardians go to Ceduna to drink, which puts pressure on other family members. Sometimes the behaviour of children is destructive, such as vandalism, with parents unwilling or unable to impose discipline. There are also instances of pressure coming from children for parents to change their lifestyles and a case for youth input into community council meetings.

Many of the negative influences on young people around the cycle of alcohol abuse start from the grieving process when people pass away, especially when children come to see heavy drinking as part of sorry business and grow up to think this is normal. Participants felt that although adults trapped in this cycle are difficult to help, it is important not to give up hope for those people suffering the effects of heavy drinking and rough sleeping.

Collaboration and inclusiveness of service providers

It was observed that service providers in the region are willing to take on a collaborative approach, ideally so that involvement in decision-making includes people from all levels – including grassroots, service providers, government and local-level governance bodies – working together. However, little direct involvement of the Aboriginal community currently takes place in discussions around services. Representatives of the pub and K-9 should also be included at relevant meetings.

An option suggested in one focus group is for some agencies to offer mentoring and ongoing individual support. This could take place in Yalata, for example, to try to address the issues directly with people coming to Ceduna to drink. Encouraging people to take greater responsibility for their actions and educating clients on the long-term effects of heavy drinking could be a useful step. Yalata Council is not currently involved in programs in Ceduna, and making this happen could also be a worthwhile step.

In the Oak Valley session, it was suggested that Centacare could be a link for community to help with the gaps in services; Centacare have advised that they are willing to help. An angu at Oak Valley are happy with the level of support provided by service providers based there.

Leadership skills and roles should be developed

Generally, the view of the focus groups was that quick fixes do not work and that long-term plans are required to address the problems associated with heavy drinking and rough sleeping in Ceduna. Greater efforts are needed to empower people to become stronger leaders in their communities. Basically, either the right leadership or leadership development is needed. Examples of effective leadership at Koonibba

Mission and Yalata were raised. Some participants feel that this type of leadership is vitally needed in other Aboriginal communities.

A common view, especially through the groups, was that Aboriginal people need more involvement in planning and program design to tackle the issues of heavy drinking and rough sleeping. At present 'participation is entirely non-Aboriginal and no Anangu are involved'. It is not clear why Aboriginal people do not attend. Similarly, the Ceduna Traditional Owners are not present at regular meetings that take place in Ceduna. One approach could be for service provider meetings to take place on country with their involvement. A suitable facility at Scotdesco was mentioned.

Issues specific to women deserve attention

Some participants in the groups believe that women need to be more involved in tackling issues like alcohol abuse and should be properly considered leaders in the community. An issue is that 'some younger women don't want to be engaged in traditional culture but want to be like other women and take on western culture, while others are abusing drugs and drinking alcohol'. Further comments were made in the group about dangerous behaviours by young women that the research team cannot substantiate; those issues have not been included here. Overall, there is certainly scope for leadership initiatives to work more with women.

Practical interventions

One group suggested that the 'Vulnerable Peoples Network' would be an ideal intervention worth considering for this cohort as it will focus on day-to-day case management, will help improve service coordination and is modelled on the family violence framework.

Another group stated that the BasicsCard was another intervention that has already commenced and may have a positive impact as it gives people less money to spend on alcohol and other unnecessary items.

Another comment was that the introduction of Income Management is considered a positive development by the majority of service providers, as they believe it serves to help people help themselves.

5. Analysis and findings

This section analyses the information collected from the focus groups and the interviews. The findings have been established to reflect the information provided from the two cycles of research included in this study.

5.1 Characteristics of the rough sleeper group

The research team estimated that 80–90 people make up the group of rough sleepers and heavy drinkers in Ceduna. It appears 75% of this group may live in Yalata and visit Ceduna for the purposes of being with family, using local services and drinking. However, a significant number of people who describe themselves as living in Yalata may originate from Oak Valley or Tjuntjuntjara.

Among this group are people with all sorts of talents, such as musicians, athletes and people with practical skills. They are individuals who have caring responsibilities due to their cultural obligations, and in many cases they are senior men and women in their community. They are acknowledged for these qualities within their home communities and could be well known in the wider region if there were opportunities.

A crucial cultural aspect of their lives, often not fully appreciated by outsiders, is that many people have a responsibility to be close to others even when they are drinking. An example is when a group of Anangu leave community together. They might travel to do shopping or banking, for example. However, when they arrive in Ceduna and one of them disappears to go drinking, the others have an obligation to wait for him or her. In some cases Anangu would not be willing to return to community without a person they travelled with, in case something bad happened. They would then become responsible and would need to prepare for customary laws, which take a hard line in situations like this. As a result, some people find themselves slipping into a pattern of drinking themselves.

The responses of interviewees to questions about where they live and where they come from were sometimes uncertain. Throughout the research Anangu and some of the service providers indicated that a significant number of Oak Valley residents were moving around and living in other parts of the region, even as far as Tjuntjuntjara. This was due to ongoing issues with the management of the community, loss of family members and concerns about contamination that have been apparent for some time. Certain service providers within the region are aware of this important influence on the movement of people in and out of Oak Valley.

During the visit to Oak Valley in August, 25 adults and 18 children had moved back to the community and are currently living there. This number compares to the usual population of 70–80 people. Others are still moving between communities and towns and have not returned yet. This knowledge builds up a picture of a group of people who are not settled in Oak Valley for a number of reasons. They regularly spend time in Ceduna.

As reported in section 4.2, questions in the study about the length of time that individuals had been following a pattern of drinking and rough sleeping generated various responses. Some people said they had been doing so for a long time, three measured this period as being between five and ten years, and one person said it had been more than ten years. Others said it had been around one or three to four years, or they could not estimate precisely. Again, although precise answers were difficult to obtain, perhaps because patterns of behaviour vary from week to week, it was apparent that people visiting Ceduna tend to come for a few days every week.

A majority of the cohort described themselves as wishing to reduce or stop their drinking and a small number described themselves as being able to if they chose to. A few have interests and aspirations that their current lifestyle is preventing, such as a desire to play football or take a TAFE course. There is interest among the group in more support for reducing problem drinking and focusing more on opportunities that showcase their talents and skills, enabling them to feel pride as individual people.

5.2 Influences on the lives of the rough sleeper group

There are many factors that affect the choices that the group make about their lives. At the most basic level of analysis, there are reasons why people wish to leave other communities ('push' factors) for a period and come to Ceduna. There are also factors that attract them ('pull' factors) to Ceduna.

As indicated by the data, people want to spend time away from their 'home' communities (although the notion of 'home' is a loose one, since many people do not associate themselves necessarily with a single place) for many reasons. These include the desire for a break from people with whom they are not getting along, lack of local services or facilities, problems with local community management, housing shortages and health concerns. Aspects that draw them away from their communities include cultural obligations, shopping opportunities, the need to use health, banking and other services in Ceduna, a wish to play music

with other people and a desire to visit friends and family. In making these comments, different people express contradictory views on the motivations of the group, both within service providers and among the rough sleepers themselves. On balance, the study found that people are usually not 'coming to Ceduna to drink': this is a simplification and is only part of the picture. People are in Ceduna for a variety of reasons, and the use of alcohol becomes part of the experience.

As described in the previous section's discussion about the movements of people from Oak Valley, a range of influences bring Anangu to Ceduna that do not necessarily involve alcohol. For example, Anangu prefer spending time with each other; for cultural reasons, people need to be together. This means that a visit of one or two people is less common that larger groups travelling between communities and spending time in Ceduna. People must also meet cultural obligations as they move between communities. During the research, Anangu frequently strongly expressed the need for them to be actively involved in 'supporting each other'. This is a profound part of their cultural responsibilities and identity that is central to the day-to-day lives of Anangu.

A valuable observation is when An angu said that they wanted support from each other, this often enabled them to 'slow down' their drinking. However, they were unable to say how this support could be achieved regularly to help them reduce their need to drink heavily. Further discussions would be worthwhile between key service providers and individual An angu to work on small interventions to help them achieve this outcome. Examples of interventions that could be effective include:

- social gatherings to make Anangu feel safe and part of the community where they can talk about their wellbeing to each other and trained workers. Gatherings could take place in settings that are less formal than offices, such as the Blue Dolphin Café, Foreshore Hotel and the local beach. They could be sponsored by local groups and organisations
- practical activities that include forms of occupation or employment and an element of education and training. Work experience, voluntary work and canvassing organisations for placements could be part of the mix
- working out individual pathways for people that they could follow with the support of mentors and counsellors.

Anangu are spiritual people, and connection to country is important to their lives. This connection is often based around their cultural and spiritual connection to land as traditional owners of a place that was occupied by earlier generations of their family. In this case, people living in Oak Valley and Yalata are a part of the Maralinga movement that happened when tests revealed radiation from atomic bombs. Anangu were then moved from Maralinga, and Oak Valley and Yalata were established; they are now the places to which many Anangu feel strongly connected and call home.

Having shared the insights in this section, it is important to emphasise that there are aspects of culture that can be discussed here and there are others that are just too complex and difficult for others to understand. These topics are not often discussed openly with outsiders, and Anangu are not able or willing to justify them.

5.3 Access to services

Rough sleepers in Ceduna are regular and often frequent users of four interlinked services: the Day Centre, Town Camp, Sobering-Up Centre and the bus service to and from Yalata. Although there is no inference that more services in Yalata would reduce the need for people to come to Ceduna, it may be the case that the limited access to similar services in Yalata may be influencing some of the lifestyle patterns that people are adopting. So the existence of the four inter-linked services described above makes the possibility of falling into a pattern of travel to town, drinking, town camp accommodation and drop-in centre much more feasible than it would be in other communities such as Yalata, not to mention the lack of alcohol outlets in other locations. Some people in Yalata argue that the community needs more support to provide services there, while there appears to be a view among people in Ceduna, including Traditional Owners, that people from Yalata using basic food and hygiene services in the town ought to have access to similar services in Yalata.

The bus service between Yalata and Ceduna provides insight on the problems facing rough sleepers and heavy drinkers coming to Ceduna, as well as the challenges of effective coordination between service providers more generally. Depending on the time of year and events taking place, such as carnivals and funerals, between 10 and 15 people a week may use the service, rising up to 30. In total, around 260 different clients have made use of the bus over the last eighteen months.

The bus driver has a strong commitment to the service helping to keep people away from the routines that amaging to their health and prospects. In practice, this means that he seeks people in Ceduna who want to return to Yalata and then tries to make it possible for them to do so. Boarding a bus might seem a simple process, but finding people who may be distracted and then making sure the departure for all passengers is not held up can be a demanding process. This applies especially to individuals who have fallen into a pattern of remaining in Ceduna for extended periods of up to a month.

In the other direction, the service is designed for people needing to travel for reasons including shopping in Ceduna, attending a funeral, attending for health-related appointment (especially renal care), reuniting with family members and other motives. But, as has been described in detail in previous sections of this report, a significant number of people, even if their reasons for travel are primarily as listed above, ultimately fall into a familiar pattern of drinking and stay in town for much longer than might have been intended. Passengers coming into town for the purposes of drinking is an inappropriate use of bus from Yalata and not its purpose.

A similar problem applies to people from Oak Valley, with the extra complication that there is no bus service between Oak Valley and Ceduna. This means that the potential for people to become 'stuck' in Ceduna is higher. The road to Oak Valley is not suitable for the current Yalata bus, and so one option that has been considered is for a 4WD vehicle to connect with the bus at a suitable point to take people the rest of the way. But this is a difficult operation to coordinate, given limited mobile coverage and the need to avoid leaving passengers waiting to be picked up in a location distant from both places.

As already mentioned in comments elsewhere in this report about the coordination of services, there is scope for closer coordination of some services with the bus. This means that more agencies and service providers would understand better how the bus could help them identify people and provide practical support to move them away from the source of some of their problems in Ceduna. Referral services to the bus could be strengthened, including during early morning periods when some offices are closed.

Similarly, if the bus driver has access to information on planned training and occupational activities in Yalata, the service would be able to encourage people to return to the community to participate. And if plans for individuals to leave Ceduna were known, based on case management plans, then the bus could play a positive role for other services and the people with whom they are working.

Many ideas for new services or improvements to existing ones arose from the study. These ideas include diversionary activities, food, accommodation, transport, night patrol, mentoring and other suggestions. Some members of the cohort would like more activities to be available, such as gardening or fishing trips.

This appears to serve their interest in doing more with their time than the current pattern of drinking, as well as the greater fulfilment and enjoyment they had when they previously participated. Connected with this suggestion is the interest among some providers in developing more and improved approaches to educating people on making best use of their housing, in basic life skills and in early childhood support and development. Individual mentoring of rough sleepers is another possibility, although some agencies might feel that these kinds of services are available and under-used at present. Better information, especially through language speakers, is required to help Anangu understand services.

One observation raised through focus groups and supported by the interviews with rough sleepers was that many Anangu are simply not aware of what current services offer. A member of another session commented that 'services need to do more networking' to enable an awareness of the services they offer. In particular, the comments provided in the next section on interactions with service providers are extended, and some recommendations are developed on ways to improve client awareness and use of services.

5.4 Interaction with service providers

Earlier observations about levels of use of services lead on to discussion about the interaction between service providers and rough sleepers in Ceduna. The research team heard few complaints from individual interviewees about existing services. The Day Centre is particularly appreciated by many of its clients, for example. The same applies to the bus service and the Town Camp.

On the other hand, the focus groups presented a range of suggestions on ways to improve interactions between service users and service providers. These comments warrant a summary here. They include the need for greater cross-cultural preparation of staff, changes in working hours to better suit times when needs are greatest, higher levels of participation of Aboriginal people in discussions on services and as staff of service providers, better coordination between services and closer appreciation of individual people and their backgrounds and needs.

Previous research conducted by Ninti One in Queensland, South Australia and the Northern Territory has indicated that the interface between Aboriginal users of services and the providers of those services tends to be more effective if it takes place in settings that are conducive to effective communication. These kinds of locations can be called 'Aboriginal service settings' (Memmott 2010). They are places where people can 'be themselves' and are more able to express a preference and make use of a service. Aspects of the PY Ku remote transaction centre program that Ninti One evaluated (Tedmanson et al. 2011) could be said to fit this description. It also applies to aspects of the more popular services in Ceduna, such as the Day Centre.

The question that arises is whether greater use could be made of these settings to encourage the lifestyle changes (the 'breaking of the cycle') that a significant number of interviewed heavy drinkers said they want to achieve. There is scope for working out how close case management support could be achieved in places where rough sleepers gather, are comfortable and may be open to proactive individual support in the way that they were open to participating in the interviews. Clearly, sitting down with the Ninti One team places fewer demands on an individual person than changing ingrained and destructive habits, but the options merit further discussion as part of service development.

Although the research team did not find reports of high levels of violence driven by alcohol consumption, as has been the case in some remote locations in Australia, some participants commented that they felt unsafe. There is scope for reviewing the current security arrangements in Ceduna and considering whether

better options exist. Night patrol services in some remote communities have been effective, and successful models could be examined and their usefulness for Ceduna considered.

There is also a question around whether the existing facilities offer suitable standards for camping, quality of toilets, water availability and so on. An angu state that they like to spend time at 18 Tank when they visit Ceduna. It is a spot that they are comfortable with and where they can be together with other family. The Ceduna District Council advised that the water tank (which is somewhat equivalent to a 44-gallon drum in size) located near one of the entrances of 18 tank is regularly filled with water for An angu to access. One An angu commented that this is not always the case, that there are times when there is no water in the tank. There are no toilet facilities at 18 Tank and people do not have shelter to protect them when it rains.

Ceduna is a stopover location for many different travellers passing through the region. They come for reasons of leisure and tourism, employment, to visit family and for other motives. All have some expectation that they will find suitable facilities to meet their needs. These expectations are only partly being met for Aboriginal people visiting the area.

5.5 Support for self-motivated change

As noted in section 4.2, a key point arising from this part of the study is that there is a high level of awareness of the negative effects of alcohol as well as a desire among many people to stop drinking. Some individuals have aspirations that are being blocked by their current patterns of drinking. This information runs counter to the notion that individuals have blindly fallen into behaviours and are not aware of the potential negative consequences. It contradicts the preconception that the drinkers have no other ideas for what they would like to do. A significant number of people within the cohort of rough sleepers and heavy drinkers say that they would welcome more support to address associated problems, both from services and from within their communities themselves.

A factor in achieving change for the better in the lives of the rough sleeper group could be said to be their own 'agency': their capacity to change direction coupled with the opportunity to do so. The subject of agency or self-motivated change would be central to any kind of case management approach developed for individuals in the group, but it also deserves attention more widely among services as it could help in developing a fresh approach. For example, what kind of capacity do individual drinkers need in order to make a change in their lives? Is it the capacity to cope with the despair that affects so many of them and, if so, how might this be supported? Is it the opportunity for employment or productive activity that is so elusive for many Anangu in the region? The notion that there is 'no reason not to drink' is a powerful one for many people in Ceduna.

The focus groups suggested the need for greater leadership from Anangu in the initiatives that have been taken to better manage alcohol. The empowerment of local residents through the work of Anangu and other organisations is another piece of this jigsaw. But conditions need to be right if Ceduna Traditional Owners and Anangu are to be present at regular agency meetings on the subject of alcohol management. Having some of these meetings on country could be one positive step, which brings to mind again the concept of the right 'service setting'. Inviting representatives of alcohol outlets and the K-9 service should also be considered.

5.6 Relationship of the study findings to the Alcohol Management Plan

A summary of the Alcohol Management Plan is provided in this report as Appendix 2. The priority areas of action within the plan are:

- 1. Decrease access to alcohol/volatile substances
- 2. Increase school retention
- 3. Increase access to structured community diversionary activities
- 4. Improve transport in Ceduna and to communities
- 5. Increase accommodation in Ceduna
- 6. Community/Government/Stakeholder coordination
- 7. Service coordination
- 8. An agreed monitoring system.

This study does not contradict any of the areas described above. It provides further insights through interviews with the target cohort themselves and suggestions, mainly from focus groups with service providers, although some from rough sleepers too.

Having a focus on services, the study provides support for the emphases included in the plan under objectives 3, 4, 6 and 7, which aim to increase diversionary activities and improve coordination between stakeholders and services. Under these headings, this study provides the following insights and suggestions:

- Many rough sleepers are interested in pursuing productive activities as a means of improving the quality of their current routines. Respondents to interviews often referred to their desire for more opportunities to do activities such as gardening, and a majority clearly want to reduce their drinking.
- According to service providers, there is an important need to engage a wider range of people in initiatives that tackle alcohol abuse in Ceduna. This includes both Aboriginal people in leadership positions, but also organisations not currently involved and which could make a valuable contribution. Shortcomings in community leadership are identified in the study as key issues requiring support as part of a long-term process to break the cycle.
- Transport also arises within this study as part of potential service improvement, within an overall set of comments around the subject of work and diversionary activities. The restoration of the MAP Bus is seen as a particularly welcome development.
- Improved coordination of services and closer alignment with the need of service users would be an important development. Of course, this is already taking place in the case of the Alcohol Management Plan itself, but the study discerned greater interest among service providers in ways to collaborate more effectively to increase access to interventions tailored to the needs of individual rough sleepers and heavy drinkers.

The cultural influences and obligations that are inherent to people moving around the region have been noted previously in this report. However, they are not reflected in the Alcohol Management Plan. Further information about the cultural aspects of mobility would be beneficial to this plan to increase understanding and reduce judgement of Anangu and assumptions that they are only in Ceduna to drink.

The study has much to contribute to the Alcohol Management Plan, especially through the insights gained on the views and experiences of heavy drinkers and rough sleepers themselves.

6. Conclusion

To reiterate, in summary form the objectives of this project are:

- 1. To engage with communities in the far West Region of South Australia (Ceduna, Koonibba, Yalata, Scotdesco and Oak Valley) to explore issues associated with alcohol misuse, with particular efforts to engage those currently not presenting at standard delivery services
- 2. To understand the cohort(s) of rough sleepers/heavy drinkers living in Ceduna and visiting the town, with a focus on the services they are using and their needs and the needs of their families
- 3. Where possible, identify key messages and effective mechanisms for reaching members of these cohorts and, through Ceduna, liaise with specialist service providers to link identified people with existing services, and provide advice about modifying services to improve access by various groups.

In essence, the purpose of the study is to understand the influences on and motivations and circumstances of a specified group of people and to share the knowledge gained with service providers. This knowledge will be a basis for improving access to those services by the group.

The brief for the study does not call for a set of recommendations. In any event, they would not be a suitable way of presenting the complexities of the insights gained. Instead, the concluding remarks are a set of messages drawn from the study and described more fully in the text of the report (with section references given):

- The research team estimated that 80–90 people make up the group of rough sleepers and heavy drinkers in Ceduna. It appears 75% of this group may live in Yalata and visit Ceduna for the purposes of being with family, using local services and drinking. However, a significant number of people who describe themselves as living in Yalata may originate from Oak Valley or Tjuntjuntjara (Section 5.1).
- 2. Among this group are people with a range of skills and talents such as musicians, athletes and people with practical skills. They are individuals that have caring responsibilities due to their cultural obligations and in many cases they are senior men and women in their community (Section 5.1).
- 3. A crucial cultural aspect of their lives, often not fully appreciated by outsiders, is that many people have a responsibility to be close to others even when they are drinking. There are aspects of culture that are relevant to people's movements in and out of Ceduna. Some can be discussed in this report and there are others that were too complex and/or private to be revealed (Sections 5.1 and 5.2).
- 4. A majority of the cohort described themselves as wishing to reduce or stop their drinking and a small number described themselves as being able to if they chose to. A few have interests and aspirations that their current lifestyle is preventing (Section 5.1).
- 5. There are many factors that affect the choices that the group makes about their lives. There are reasons why people wish to leave other communities for a period and come to Ceduna. There are also factors that attract them to Ceduna. Although different people express contradictory views on the motives of members of the group, on balance the study found that people are usually not 'coming to Ceduna to drink'; they are in Ceduna for a variety of reasons and the use of alcohol becomes part of the experience (Section 5.2).
- Further discussions would be worthwhile between key service providers and individual Anangu to develop small interventions that assist them to reduce their drinking. Suggestions are offered in Section 5.2. Many other ideas for new services or improvements to existing ones arose from the study,

including diversionary activities, food, accommodation, transport, night patrol, mentoring and other suggestions (Sections 5.2 and 5.3).

- 7. Rough sleepers in Ceduna are regular and often frequent users of a small number of services. These are the Day Centre, Town Camp, Sobering-Up Centre and bus service to and from Yalata. Limited access to similar services in other communities may be influencing some of the routines that people are adopting, not to mention the lack of alcohol outlets in other places (Section 5.3).
- 8. Better information, especially through language speakers, is required to help Anangu understand services (Section 5.3).
- 9. The study heard few complaints from individual service users about existing services. The Day Centre is particularly appreciated by many of its clients, for example. The same applies to the bus service and the Town Camp (Section 5.4).
- 10. However, some participants commented on feelings of poor safety. There is scope for reviewing the current security arrangements in Ceduna and considering whether better options exist. There is also a question around whether the existing camping facilities offer suitable standards for camping, quality of toilets, water availability and so on (Section 5.4).
- 11. The focus groups with service providers presented a range of suggestions on ways to improve interactions between service users and service providers. They include the need for greater cross-cultural preparation of staff, changes in working hours to better suit times when needs are greatest, higher levels of participation of Aboriginal people in discussions on services and as staff of service providers, better coordination between services and closer appreciation of individual people and their backgrounds and needs (Section 5.4).
- 12. Consideration should be given to settings that enable the interactions between users and providers of services to be more effective. These kinds of locations can be called 'Aboriginal service settings'. They are places where people can 'be themselves' and are more able to express a preference and make use of a service. There is scope for working out how case management support could be achieved in places where rough sleepers gather, are comfortable and may be open to proactive individual support (Section 5.4).
- 13. There is a high level of awareness of the negative effects of alcohol among the cohort as well as a desire among many people to stop. This information runs counter to the notion that individuals have blindly fallen into behaviours and are not aware of the potential negative consequences. It contradicts the preconception that the drinkers have no other ideas for what they would like to do. Similarly, a significant number of people within the cohort of rough sleepers and heavy drinkers say that they would welcome more support to address associated problems, both from services and from within their communities themselves (Section 5.5).
- 14. A factor in achieving change for the better in the lives of the rough sleeper group could be said to be their own 'agency', that is, their capacity to change direction coupled with the opportunity to do so. The subject of agency or self-motivated change would be central to any kind of case management approach for individuals, but it also deserves attention more widely among services as it raises key questions whose answers could help in developing a fresh approach (Section 5.5).
- 15. The study does not contradict any of the areas of action described in the Alcohol Management Plan. It provides further insights through interviews with the target cohort themselves and suggestions mainly from focus groups with service providers, although some from rough sleepers too. The Plan would be improved by greater recognition of the cultural influences and obligations that are inherent to people moving around the region and to counter assumptions that they are only in Ceduna to drink (Section 5.6).

Appendix 1: Semi-structured interview questions

Topics:

- 1. Understand the cohort: what is a typical week like for them? how do they live their life?
- 2. Engage with people and explore rough sleeping and any drinking patterns and behaviours
- 3. Working with service providers

Questions:

- 1.1 Where are you from?
- 1.2 Where are you living?
- 1.3 In a week, where do you spend most of your time?
- 1.4 Who do you spend time with?
- 1.5 What age group of people do you spend time with?
- 1.6 What makes you strong?
- 2.1 What are your reasons for rough sleeping?
- 2.2 Do you feel unsafe when you're sleeping rough, why?
- 2.3 What reasons do you come to town and do you have any place to stay?
- 2.4 Do you feel like you're in good health?
- 2.5 How long have you been sleeping rough and how often do you sleep rough?
- 2.6 How many drinks do you have a (day, week etc)?
- 2.7 How often do you have six or more standard drinks on one occasion?
- 2.8 Do you think you drink too much alcohol?
- 2.9 Do you or your family worry about your drinking?
- 2.10 Do you feel stressed out without alcohol?
- 2.11 Do you wish you could stop?
- 3.1 What services do you or your family use?
- 3.2 How much do you or your family use these services?
- 3.3 Is there anything you like about it and how could it be better?
- 3.4 Do you attend these services with your family?
- 3.5 What other services would you like to see in your area?

Appendix 2: Alcohol Management Plan for the Far West Coast Region

IDENTIFIED PRIORITY AREAS

The Plan has been developed to respond to current, pressing issues in the region, while taking a longterm approach to achieve and sustain a reduction in the harms associated with alcohol and other substance use.

Eight, broad priority areas for action have been determined, based on consultations. The eight priority areas for action are:

- 1. Decrease access to alcohol/volatile substances
- 2. Increase school retention
- 3. Increase access to structured community diversionary activities
- 4. Improve transport in Ceduna and to communities
- 5. Increase accommodation in Ceduna
- 6. Community/Government/Stakeholder coordination
- 7. Service Coordination

24

8. An agreed monitoring system

The rationale for these priorities is:

- 1. **Decreased access to alcohol and volatile substances** will reduce harm through a reduction in alcohol consumption and petrol inhalation. Restricting availability of alcohol and volatile substances will have short and long term reductions in harm. (Supply reduction)
- 2. Introducing and continuing a broad range of strategies to **increase school attendance and retention** will ensure that the current generation of children and young people are better educated and have greater opportunities for future employment and stability in their lives). Engaging with parents and community members is instrumental to achieving this. (Demand reduction)
- 3. **Increasing access to structured community diversionary activities** for both young people and for all community members encourages healthier choices and lifestyle options, both in the short term and long term. Diversionary activities that incorporate cultural elements enrich people's cultural connection and individual and community pride. (Demand reduction)
- 4. **Improving transport within Ceduna and to communities** will see a significant improvement in service delivery. Regular, subsidised transport to communities enables people to return to their communities safely and minimises the multiple health and social problems created when people are stranded in Ceduna. Transport within Ceduna allows for better service delivery and safety of clients. (Harm reduction)
- 5. The current chronic shortage of **accommodation options in Ceduna** creates ongoing health and social problems for visitors and the broader Ceduna community. Increasing the amount of short term and long term accommodation will have an immediate impact in reducing the problems associated with homelessness and chronic poor health. (Harm reduction)
- 6. Genuine and sustained **Community**, **Government and Stakeholder engagement and coordination** is essential to ensure a long term reduction in alcohol and other substance-related harm in the region.

The signatories to this Plan have pledged their commitment to support this community-led initiative and in so doing build community capacity. (Leadership and Service coordination)

- 7. Service Coordination is critical for working with Ceduna's most vulnerable clients, often referred to as the "rough sleepers" in Ceduna. Service coordination will ensure responsible case management and responsive models of care; as well as facilitate interagency networking and streamline a collaborative, community-based approach to services. (Leadership and Service coordination)
- 8. An external, **agreed monitoring system** will ensure that the key indicators on progress of the Plan are identified, regularly measured, evaluated and interpreted. (Leadership)

Background to Ninti One

Ninti One is a not-for-profit national company that builds opportunities for people living in remote areas through research, expertise and education. Ninti One manages the development, commercialisation and intellectual property of the Desert Knowledge CRC, the CRC for Remote Economic Participation, the former Australian Feral Camel Management Project and other programs.

Our mission is to provide the knowledge base essential to create thriving remote communities and economies through research, innovation, information and ideas. Our network of more than 60 partners spans the Australian continent.

Our aims are to:

- address social and economic disadvantage of people in remote regions of Australia
- find solutions to economic exclusion
- increase people's economic participation
- improve understanding of Australia's remote regions
- increase the skills and capacity of the people in remote regions
- enhance and protect the natural environment
- understand the impact of climate change on remote Australia.

One of the primary objectives of the organisation is to develop local Aboriginal research teams who conduct participatory action research, evaluation and monitoring in their own communities and deliver their research findings to the client and back to the community so that research recommendations are endorsed and considered at the local level, and the data may be used in making more informed local decisions. We seek to engender capacity-building through researcher mentoring, on-the-job skills development and skill-sharing. This is further developed through the researcher's participation in multi-skilled teams that plan, prepare and undertake research projects and analyse and report the findings back to the client. Ninti One strives to develop and support Aboriginal community researchers who are competent, skilled, confident and capable of working across a range of research settings using various appropriate research methods and techniques.

Ninti One researchers are selected on the basis of their extensive experience working with Aboriginal people from central and/or northern Australia. They are skilled in the fields of governance, resource management, anthropology, community-based planning, training, governance, participatory research and social analysis. All have long and positive experience and knowledge of the contemporary social, cultural and environmental contexts of Aboriginal communities.

References

- Memmott P. 2010. *Demand-responsive services and culturally sustainable enterprise in remote Aboriginal settings: A Case Study of the Myuma Group.* DKCRC Research Report 63. Ninti One Limited. Alice Springs.
- Mental Health Council of Australia. 2009. *Home Truths; Mental Health, Housing and Homelessness in Australia*.

http://mhaustralia.org/sites/default/files/imported/component/rsfiles/publications/MHCA_Home_Truth s_Layout_FINAL.pdf.

Tedmanson D, Muirhead M and Fisher S. 2011. 'Anangu serving Anangu – Plenty Ninti!' The PY Ku Network on the APY Lands. DKCRC Research Report 68. Ninti One Limited. Alice Springs.