

## **A multi-component programme approach to tackle alcohol-related harm in communities**

### **Summary of Research Findings and Lessons from the Fife Alcohol Partnership Project**

**Cathy Sharp and Mark Bitel**

***Research for Real***

**September 2012**

The Fife Alcohol Partnership Project (FAPP) brought together a number of key national and local stakeholders to design, develop and implement a series of interventions, using a multi-component approach, to tackle alcohol-related harm. The partnership operated between 2008-2012, ultimately focusing on two designated pilot areas, Rosyth and Touch in Dunfermline.

Multi-agency partnership working on this complex and important issue is challenging and requires attention to the development of sound partnership structures and processes, an agreed outcomes framework and effective engagement, both with practitioners responsible for implementation and with wider communities. The interim report in May 2010 documented the early difficulties of the partnership process, but also heralded a watershed marked by new understandings and better working relationships amongst FAPP members. Since then the work of FAPP proceeded in a significantly different manner, acknowledging the importance of outcomes and a *programme* approach and based on better working relationships and new governance arrangements.

The final evaluation report focuses on the outcomes and broader lessons learned from the overall approach. It is written primarily for those stakeholders and communities facing similar challenges across Scotland and the wider UK. It is likely to be of particular interest to members of *Alcohol and Drug Partnerships*, *Community Planning Partnerships* and those with an interest in the public service reform agenda. This document summarises the main immediate outcomes and some lessons, with fuller details in the main report.

#### **What outcomes did FAPP achieve?**

Alcohol-related harm is now more broadly '*on the agenda*' in both areas. The inter-professional relationships and those with local people developed as part of the work of FAPP have been highly valued by many partners and are seen as one of the major successes of the work. Both areas show promising early signs that a *programme approach*, combining intensive connected interventions which address enforcement *and* engagement, can:

- make inroads into ways of thinking about alcohol-related harm and who should define it
- promote growing engagement amongst professionals and with local people, including young people and create more positive relationships amongst local stakeholders, and
- begin to affect individual and group behaviours, at least in the short-term.

The two local partnership groups, the *Rosyth Community Alcohol Partnership* and the *Touch Tasking Team* have supported relationship building and inter-professional dialogue and helped to tie various strands of work together in ways that would not have happened before. The relationships developed are the glue that makes the work a programme, rather than a disconnected or scattered series of interventions; they enable 'new' work to be tied into existing programmes and approaches, knowledge to be shared and progress sustained.

### ***Outcomes of the programme in Rosyth***

Partners agree that the most successful interventions in Rosyth have been those that have either involved multi-agency delivery or good operational links with other elements of the programme, so that successful implementation has relied on the input of a range of partners on the ground and the maintenance of positive working relationships. The work has shown young people's interest and capacities to take on more responsibility and have greater involvement in the design and delivery of programmes, if they are asked to do so, and supported appropriately. Continued engagement and work with young people would appear to be vital to sustain the emerging benefits.

Specific outcomes are:

- The direct sale of alcohol to those aged under-18 years old has reduced, although this has not necessarily reduced availability of alcohol for young people as proxy purchase remains an issue.

There is some evidence that demand for alcohol by young people has begun to be affected by this programme:

- Young people who are drinking in the community in Rosyth are now more aware of their personal safety and some young people have reported changes in their own behaviours in relation to drinking, including reduced consumption.
- Alcohol Brief Interventions delivered in community settings to young people, which are treated as a *starting point* of a further process of engagement and tailored support in school settings, show promise as a way of providing young people with the information, skills and support to reduce their alcohol consumption and reduce the risks associated with it.

Anti-social behaviour (ASB) offences have fallen in all areas of Fife between 2008 and 2011. Fewer detected ASB offences are now committed by those aged under 21 years old in all areas of Fife, although this proportion remains slightly higher in Rosyth.

The focus on an area, especially such a small area, can *contribute* to a positive impact (rather than be attributed directly to it), although there may be some displacement of crime to neighbouring areas.

Informal feedback to the Police suggests that residents have been positive about the impact of focused interventions on ASB-related activity. FAPP partners believe that their efforts have made a contribution to these changes.

### ***Outcomes of the programme in Touch***

In Touch the focus on alcohol-related harm was useful and positive, particularly in galvanising local professionals to consider the needs of an area with little existing voluntary and community group infrastructure. The programme was less developed than in Rosyth and relied on the mobilisation of a wide number of mainstream agencies as well as some 'new' interventions and highlights the challenges of community engagement and of building '*connectivity*' across a programme.

Specific outcomes are:

- Rates of ASB offences for all the areas of direct interest to FAPP have all fallen between 2008-11: the most dramatic changes have been in Touch and Woodmill North, notably from 70.34 (per 1000) in 2009 to 19.35 in 2011.
- Local partners and community members suggest that Touch feels like a safer, more confident community, with less fear of crime. Whilst some issues remain, this success is widely attributed to the multiple strands of work of the *Touch Tasking Team*, in particular the *Touch Tastic* events and the developing trust between the agencies, particularly the Police and residents.

## Definition of a multi-component programme

The adoption of a multi-component programme approach to tackling alcohol-related harm was based on research that suggested it would be helpful both in defining the nature of problems and designing appropriate local strategies. Whilst evidence for the effectiveness of such programmes was mixed, a growing international consensus was noted that they have a greater chance of success than stand-alone projects.

Research suggested that a multi-component programme approach should have the following features:<sup>1</sup>

- a strategic framework with a theoretical basis for action
- the identification of problems defined at local levels
- a programme of co-ordinated projects to address the problem based on an integrated programme design, where single interventions run in combination with each other and/or sequentially together over time
- identification, mobilisation and co-ordination of appropriate agencies, stakeholders and local communities
- clearly defined outcomes and activities with measurable indicators and identified data sources to assess effectiveness for the programme as a whole and for individual projects or activities, and
- evaluation as an integral part of the programme from the start.

## Summary of lessons

Whilst there is only limited evidence of the achievement of the outcomes sought by FAPP, there are many lessons arising from the pilot of a multi-component programme approach in Fife that may be valuable for others seeking to tackle alcohol-related harm.

Whilst not offered as a 'blue-print' for how to tackle alcohol-related harm, the Scottish Government, Local Authorities, the Police, the NHS and Health Boards, ADPs and the third

sector should find valuable insights to inform their own thinking and action.

### **Consult with communities to understand the problems and shape the solutions**

The original way in which FAPP defined the problem of alcohol-related harm was significantly altered by the community consultation in Touch: the concerns of local people about safety and security within the home and community influenced the way the problems were both defined and tackled. Their contributions to the safety and security elements of the Touch programme were one of the most successful elements of the programme. In Rosyth FAPP found that it was important to approach young people in the spirit of asking for their help and advice and seeking their involvement in the solutions, rather than appearing to be trying to tell them not to drink.

- ✓ It is important to address alcohol-related harm through a *measured response* that does not either under or over-play the significance of the issue in the community or for any sub-group, nor confine it to the territory of any specific professional group.
- ✓ Scoping of a programme should be a continual, collaborative and asset-focused process. It should identify *provisional* appropriate target areas as a starting point, based on statistical evidence and local intelligence, but be a consultative process that builds relationships and motivation to become involved in the development and delivery of the work.
- ✓ Community consultation should play a significant role in developing understandings of alcohol-related harm, devising shared solutions and mobilising local people, including young people, in influencing the service response. This should be built into the approach from the very start.
- ✓ Evaluation partners should also play a role from the *very start* of a programme. They can provide support for analysis of evidence and facilitate consultative processes.
- ✓ Recognising alcohol-related harm as a 'community safety' issue rather than necessarily a personal or family issue may be a productive, sensitive and non-stigmatising way to begin individual and community engagement.

---

<sup>1</sup> Thom, B. and Bayley, M (2007) *A new approach to prevent and reduce alcohol-related harm*, JRF Findings, March.

- ✓ A non-judgemental approach which neither scolds nor celebrates young people's stories is appreciated and helps them and others to be honest.

***Co-develop a shared strategic, evidence-informed outcomes framework***

The development of a strategic, evidence-informed framework is a crucial underpinning of a multi-component programme which sets out the desired outcomes. FAPP's ambition in Fife was to be '*additional and complementary*' to existing activities and services.

- ✓ Early collaboration with existing services and stakeholders is vital to understand their work and enable engagement with agencies and communities to *co-design* interventions that will enhance and complement their activities for shared outcomes.
- ✓ A clear lesson is that the way that the outcomes framework is developed and used is crucial to the effective implementation of the programme. Outcomes should not be imposed as if they were targets. Consideration of impact *and* implementation go hand in hand.
- ✓ Outcomes should be linked to existing frameworks and service agreements, including Single Outcome Agreements and the wider work of the ADP.

***Recognise that a multi-component programme approach is a different way of working***

A multi-component programme approach explicitly seeks *connectivity* between interventions that are *designed* to fit together or build on each other in some way, so that both successes and lessons can be built-on. Interventions might operate alongside each other or existing services *concurrently*, they could be developed *sequentially* built on what had gone before or *thematically*, developing an interest that could be shared across a number of different interventions.

- ✓ Connectivity and coordination can develop where there is local buy-in to overarching goals and a motivated and collaborative culture that mobilises agencies and resources in support of locally-generated outcomes and shared solutions. This is not about being 'top-down' or 'bottom-up' but

taking a balanced approach that has a sense of purpose, but remains open to different perspectives and solutions.

- ✓ It is important not to be prescriptive or rush to initiate activities or interventions. Time and effort are needed to build and develop trust so that people can work together towards tackling a problem, rather than defending or protecting their own organisational territory, boundaries and budgets.
- ✓ A multi-component programme approach is an emergent way of working. It requires a high degree of trust, flexibility, adaptability and deftness of response. This is not business as usual: both individuals and their organisations need to be prepared to alter their approach, to try something different, to accept 'failure' and distil the lessons into the on-going programme.
- ✓ An explicit, permissive approach to *organisational learning* is likely to support the delivery of agency goals, rather than reliance on goodwill, individual compliance or personal flexibility, as well as generating lessons of wider relevance.

***Use funding wisely for greatest effect and sustainability***

The cost of the FAPP programme over three years was £0.405m. Just under a third of funding was spent on formal interventions with some receiving relatively small amounts of funding.

- ✓ Using money wisely to enhance existing programmes could have a greater and more sustainable effect by building on existing work, structures and relationships.
- ✓ An outcomes framework should be linked to a clear *programme* (rather than project) commissioning and management strategy.
- ✓ In a strong *programmatic* approach, commissioning should be the last resort. It could also be devolved to local partners to encourage their buy-in and promote greater transparency.

**Consider the role and anticipated contribution of all partners including the drinks industry and the ADP**

The involvement of the drinks industry in FAPP was clearly a new dimension to partnership working for some partners. Initial ambivalence and negative attitudes towards their involvement were part of some of the early difficulties of the partnership. Partners acknowledge that the industry brought commitment, energy and funding and noted that young people welcomed the opportunity to talk to people from the industry, as part of the consultation.

- ✓ The FAPP Steering Group proposes that it is likely to be beneficial to involve the industry in future responses to alcohol misuse, for example, through more formal involvement in the Fife ADP. The drinks industry is keen to be part of the solutions to alcohol-related harm.
- ✓ Clarity of roles is necessary across the board and a general lesson is that it is important to discuss the role and specific anticipated contribution of *all* partners openly from the earliest days of the partnership.

**Talk to schools and link school and community interventions wherever possible**

Alcohol-related harm is already addressed within schools in a number of ways, both within and outwith the classroom.

- ✓ Interventions may be most effective if they are able to build on the existing approach within the school. Schools should be consulted to enable appropriate responses to be designed.
- ✓ Attention should be paid to the prospects of enhancing school-based learning with community interventions and vice-versa as part of a programme approach.

**Be strategic and intelligent in your choice of interventions**

Combining intensive connected interventions which address enforcement *and* engagement is likely to be most effective. The most successful interventions were those that either involved multi-agency delivery so that successful implementation relies on the input of a range of partners on the ground and the maintenance of positive working relationships, or which were

tied into a programme approach through good operational links with other elements of the programme.

Positive examples in Rosyth were joint training in *ABIs*, the *Safer Neighbourhoods Team* and on-going enforcement and engagement activities by Fife Constabulary, the *Mobile Alcohol Intervention Team* and *Space Unlimited*. *Teach-It Alcohol Awareness* and *Space Unlimited* both illustrated young people's interest and capacities to take on more responsibility and have greater involvement in the design and delivery of programmes.

The *Community Alcohol Partnership* model that formed the original basis of the work in Rosyth has value if all elements of the approach (education, enforcement and public perceptions) are tackled together, bringing together mainstream services and additional interventions and including the perceptions and ideas of young people: as one partner commented '*It's bairns is the problem and bairns is the answer!*'

In Touch, the most highly valued interventions have been the two *Touch Tastic* events and the programme of community safety and security measures. The *Touch Action Group*, instigated by *Clued Up* and *Fife Council Community Learning & Development* was also seen to be positive building on work within Woodmill High School. *Home Start* also demonstrated some valuable lessons in relation to engaging with families and raising alcohol-related issues. Annex 1 of the final report includes details of all interventions in each of the two programmes.

- ✓ When developing a programme, there may be no clear evidence of effectiveness for any particular intervention; given this, it is important to establish an agreed framework for clear decision-making to avoid arbitrariness and support intelligent choices of interventions. Good decisions can then be made '*in good faith*' drawing on available evidence, plausible theory, the views of local professionals and crucially, communities themselves.
- ✓ Even the most 'evidence-based' intervention will only work if factors related to implementation are considered.

- ✓ Interventions should be deployed that build on existing work, rather than adopting a 'pick and mix' approach.
- ✓ Interventions need not be 'new' or experimental: there can be new value in combining interventions in a programme approach.
- ✓ Training in Alcohol Brief Interventions or a similar course may assist a wide range of community-based and non-clinical staff to raise the subject of alcohol with others in a fair and skilful manner.
- ✓ Any training provision should have a clear outcome focus. Multi-agency training, in preparation for co-delivery is particularly valuable.
- ✓ The most effective engagement with alcohol retailers is that which provides support to meet their statutory responsibilities and is delivered on their premises.
- ✓ Approaches to 'evaluation' must include mainstream services as well as any newly-funded interventions.
- ✓ Use existing structures or establish new ones where multi-agency partners and communities can reflect on and learn from experience in 'real-time'. It may be useful to continue to ask: *how are we working together to tackle alcohol-related harm?* Such an approach to dialogue and reflection could transform the way that partnership meetings are run.
- ✓ Criteria for the judgement of 'success' should be developed in collaboration and include implementation milestones and outcome indicators. The report describes the use of 'success factors' to support better dialogue.
- ✓ 'Evaluation' partners or specialists are a key resource in the development of an outcomes framework, on-going scoping of the programme by all stakeholders and gathering evidence of effectiveness of both processes and outcomes.

***Build evaluation into the programme process, commissioning and organisational learning***

A positive 'evaluation' culture should be an integral part of an organisational learning approach to a multi-component programme from the start. It can help to drive the programme and build the necessary trust, working relationships and openness to challenge and having professional assumptions questioned.

- ✓ All stakeholders need to be involved so that they have an understanding of what the on-going use and generation of evidence brings to the immediate and practical problems of developing shared solutions to complex problems of this nature.
- ✓ With sufficient local ownership and buy-in to overarching aims of a programme, an *embedded* approach to evaluation should be built on an action research approach. This involves trying things out and, together, reflecting, adapting and re-testing, all in an intelligent, inclusive and systematic way.
- ✓ Given the novelty of such an approach and attitudinal barriers to 'evaluation' using the language of action research, participation, continuous improvement, peer and self-review or reflective practice may be more productive and engaging.
- ✓ Wherever possible, local partners should be engaged in the design and commissioning of the approach to evaluation and the choice of any external specialist support for the process.
- ✓ The programme commissioning should link into the evaluation process so that decisions can be informed by evidence; commissioning authority might also be devolved to local partners to enhance this aspect of the approach.

***A multi-component approach to tackle alcohol-related harm in communities: lessons from the Fife Alcohol Partnership Project,***  
Cathy Sharp and Mark Bitel

**September 2012**

[www.fassaction.org.uk](http://www.fassaction.org.uk)

