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20 December 2012

Alcohol Management Plan Minimum Standards Consultation Department of Families, Housing, Community Services and Indigenous Affairs PO Box 7576 Canberra Business Centre ACT 2610

Dear Sir/Madam

SUBMISSION ON DRAFT MINIMUM STANDARDS FOR ALCOHOL MANAGEMENT PLANS

The Foundation for Alcohol Research and Education (FARE) welcomes the opportunity to provide comment on the *draft Minimum Standards for Alcohol Management Plans (AMPs) in the Northern Territory* (the Standards).

AMPs have been found to be effective in reducing alcohol-related injuries, including serious injury. AMPs can enable communities to implement local initiatives that are focused on reducing alcohol-related harms. However, to be effective they need to be driven and led by Aboriginal communities and by Aboriginal agencies, with support from Governments to build the capacity locally to develop the plans. AMPs that are not controlled by Aboriginal and Torres Strait Islander communities and do not have culturally appropriate adaptation will not reduce alcohol and other drug related harm and will not succeed. 2

Aboriginal and Torres Strait Islander peoples face significant disadvantage in income, employment, educational attainment and health in Australia.³ Data from the 2010 National Drug Strategy Household Survey shows that Aboriginal and Torres Strait Islander people are 1.5 times more likely to drink at harmful levels (short or long-term) than non-Indigenous Australians.⁴ Alcohol use by Aboriginal and Torres Strait Islander people can be both as a consequence of and a contributor to continued social disadvantage³ and the importance of addressing this disadvantage cannot be minimised. Tailored community solutions such as AMPs can work alongside other Government regulation to increase the price and address the promotion and availability of alcohol in Australia.

The Standards produced by the Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA) attempt to achieve a difficult balance: that is to provide communities with the appropriate powers and authority to make necessary changes, while retaining statutory authority. Overall the standards are a good first step towards achieving this balance.

FARE strongly supports the Commonwealth's efforts, particularly given the threats posed by the approach of the newly elected government in the Northern Territory to reducing alcohol-related harm in the Territories Aboriginal communities.

Within this submission, FARE has made comment on five areas within the Standards where opportunities for improvement, strengthening or clarification have been identified. These are:

- 1. Strategic frameworks, including clear measurable goals, local evidence base and reporting mechanisms need to be established from the commencement of an AMP.
- 2. Effective local partnerships are required to oversee the development, implementation and evaluation of AMPs.
- 3. Consultation and engagement with the whole community is central to creating consensus support for an AMP.
- 4. Communities require sustained Government funding to be able to successfully develop and implement local AMPs, and
- 5. AMPs should be made publicly available to enable shared learning about the goals, objectives and implementation methods of different AMPs.

Each of these areas is elaborated upon below.

1. Strategic frameworks, including clear measurable goals, local evidence base and reporting mechanisms need to be established from the commencement of an AMP⁵

There is a need to build a local evidence base to be able to demonstrate change and reductions in harm over time. To do this, communities need to establish data collection and reporting mechanisms from the start. For example Police/Law Enforcement Authorities need to be tasked to collate and distribute information on alcohol-related crimes (such as assaults, disorder, vandalism and drink-driving), Health Authorities need to provide data on aspects such as service utilisation and alcohol-related hospitalisations and Local Authorities should provide information on numbers of licensed premises, breaches of licenses and alcohol sales data. Together this information should be collated and trends reported back to local coordinating groups (such as Alcohol Working Groups), FaHCSIA and the community. Alcohol working Groups)

Evaluations on the effectiveness of AMPs have remained limited partly due to a lack of clear measurable goals being established at the beginning and the ability for local communities to assess change over time.⁷

Currently the Standards lack clarity on what information should be collected and used; in addition there is no information in the Standards on potential repercussions if goals within an AMP are not met or if alcohol-related problems in a particular area worsen.

Recommendation

 The Standards should contain more information on the setting of measurable goals, building of the local evidence base, and the frequency which of evaluations are expected to take place and reported back to local Alcohol Working Groups, FaHCSIA and the community.

2. Effective local partnerships need to be established to oversee the development, implementation and evaluation of AMPs

Research by the National Drug Research Institute (NDRI) on alcohol restrictions has found that often reductions in harms as a result of alcohol restrictions being implemented are not sustained because of:

- the instability of local partnerships
- the setting of unrealistic goals
- a lack of data collection to enable comprehensive evaluation, and
- a lack of education and training for community members to be able to carry out and achieve realistic goals.⁷

Currently the Standards are unclear on who within the community should lead on the development and implementation of AMPs. Evaluations of AMPs in the Northern Territory by Menzies School of Health Research (Menzies) have recommended the establishment of Alcohol Working Groups to oversee AMPs. To be effective these Alcohol Working Groups require a diverse range of stakeholders. Members of the Alcohol Working Group should include local government, health and education authorities, relevant law enforcement and criminal justice agencies, alcohol and other drug service users and community representatives as well as representatives from local liquor outlets and licensees and businesses. ^{2,8,9} Clarity on the roles and responsibilities of these organisations within the Alcohol Working Group is also critical to the success of the AMP.⁸

Menzies also found that community development positions need to be created to coordinate the Alcohol Working Group and maintain relationships between different interest groups involved. The Menzies evaluation of the Alice Springs AMP found that these positions should be jointly funded by Commonwealth and Northern Territory Government for at least five years to ensure that the AMP is embedded into the community. 2

Recommendations

- The list of stakeholders in the Standards should be expanded to include local government, health and education authorities, relevant law enforcement and criminal justice agencies, alcohol and other drug service users and community representatives as well as representatives from local liquor outlets and licensees and businesses.
- 3. The Standards should articulate the need to establish Alcohol Working Groups (or governing partnership) to coordinate the development and implementation of the AMP.
- 4. The Standards should outline the need for community development positions to be created, to coordinate the work of the Alcohol Working Groups.

3. Consultation and engagement with the whole community is central to creating consensus support for an AMP²

Currently the Standards lack information on the mechanisms for local communities to be able to influence the development of AMPs in their area and what consultation processes will be undertaken. The Menzies evaluation of the Alice Springs AMP found that a lack of communication about the AMP led to a degree of hostility and opposition within the community to the plan. The community felt that the AMP was a Government imposed initiative, rather than community-led and therefore did not support it. This highlights the need for wide consultation and engagement with all members of the community to ensure adoption and support for the plans.²

Consultation with Aboriginal and Torres Strait Islander people should commence when AMPs are being conceptualised. It is critical that this consultation and engagement allows Aboriginal and Torres Strait Islander people to have decision-making capacity on all aspects of the AMP from the beginning. To be successful AMPs need to be driven and led by Indigenous communities and by Indigenous agencies. Aboriginal and Torres Strait Islander communities require Government support to help them build local capacity to develop and implement AMPs.¹⁰

However, community consultation can be difficult. The 2012 Social Justice report outlined that communities often feel that their opinions during consultations have not resulted in meaningful change or that they are sufficiently listened to will be resistance to change and engagement. This can be made more difficult due to the lack of local Indigenous representative structures such as Community Councils, who have legitimacy to speak on behalf of Aboriginal and Torres Strait Islander peoples.¹¹

Recommendation

5. The Standards require more detail, on the consultation and engagement of all community members on any proposed AMPs.

4. Communities require sustained Government funding to successfully develop and implement local AMPs.²

Research by NDRI and the Australian Institute of Health and Welfare (AIHW) shows that AMPs have limited effectiveness when there are insufficient financial resources and investment into communities by Governments, limiting the ability of communities to adequately implement AMPs. 12,13

The AIHW also outlines that interventions that are imposed without local Indigenous community control or culturally appropriate adaptation do not reduce alcohol and other drug related harm and will not succeed.¹³ Evaluations of the Alice Springs AMP over the last thirty years continued to find that to be successful the AMP needs to be locally led and controlled by Aboriginal and Torres Strait Islander communities from the outset. Also without financial support and resources to build capacity to train local workforce on developing and implementing AMPs they will not succeed.² Without this investment of funds and capacity building, communities will be forced to rely on staff from FaHCSIA or other government agencies in developing their AMP.¹⁴ This would result in community ownership being lost and the AMPs being ineffective.¹⁴

The Menzies's evaluation of the Alice Springs AMP found that Government funding is required for at least five years to enable communities to develop and imbed AMPs.

Recommendation

6. The Standards require more detail on how communities will be adequately resourced, for at least five years, to be able to undertake the development and implementation of AMPs and to build local capacity for this work.

5. AMPs should be made publicly available to enable shared learning about the goals, objectives and implementation methods of different AMPs.

The publication of AMPs is important for both neighbouring communities (to be aware of other AMPs or overlaps) and for the general public. This publication would allow for the sharing of goals, initiatives and implementation methods for communities to learn from each other. Geographical boundaries and maps should also be published. This would allow neighbouring communities to collaborate towards shared goals and understand if any areas are covered by multiple (potentially clashing) AMPs. This publication could take place on the FaHCSIA website.

Recommendation

7. The Standards should outline the need to publish AMPs on the FaHCSIA website, to enable shared learning on AMPs between communities.

In addition to the above comments and recommendations, it is vital that the Commonwealth Government commits to developing a new National Alcohol Strategy. The Strategy should recognise that the most effective solutions to reduce alcohol-related harms are population-based strategies that address the price, promotion and availability of alcohol. These measures are cost-effective, and have been recommended by countless reviews including the Preventative Health Taskforce. ^{15,16}

Thank you again for the opportunity to comment on the *draft Minimum Standards for Alcohol Management Plans in the Northern Territory*. If you require any further information please contact Sarah Ward, Senior Policy Officer on 02 6122 8600.

Yours sincerely

MICHAEL THORN

CHIEF EXECUTIVE

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