



Turning Point
Alcohol & Drug Centre

**PROJECT IMPLEMENTATION IN THE
ALCOHOL AND OTHER DRUG FIELD:
ENABLERS, BARRIERS AND
SUSTAINABILITY**

SUMMARY REPORT

Sarah MacLean, Lynda Berends, Barbara Hunter, Janette Mugavin and
Bridget Roberts

June 2010

Introduction

Since its inception in 2001 the Alcohol Education and Rehabilitation (AER) Foundation has funded more than 1,000 projects intended to reduce the burden of harm arising from alcohol and/or inhalant misuse in Australia. Projects have limited scope to achieve their intended impact on alcohol and other drug (AOD) use and misuse if they are poorly planned or implemented. While there is currently a strong emphasis on developing the evidence-base concerning the *outcomes* of various AOD interventions, little research systematically explores factors which enable or impede *project implementation* in the AOD field.

The AER Foundation commissioned Turning Point Alcohol and Drug Centre to identify *enabling* factors and *barriers* to successful project implementation and *determinants of sustainability* in projects. This is a summary of a detailed report exploring these issues. The study included three main activities:

- a brief literature review
- analysis of data stored at the AER concerning 127 completed projects (the overall study sample), including an assessment of the extent to which project objectives had been achieved, with successful implementation defined as meeting all project objectives.
- analysis of eight case study projects selected from the overall study sample to identify key themes associated with project implementation and sustainability.

Enablers and barriers are shown in Table 1, below. Each encompassed a number of related components; for instance the enabler 'external communication and relationships' included strong support from partners or community agencies, using established networks to access participants, political support and effective communications strategies.

This report is intended to be useful for people who are involved in the design, funding and implementation of projects. We summarise key findings and outline implications for project funding and development as follows:

1. Key enablers to project implementation
2. Key barriers to project implementation
3. Enablers and barriers encountered in different project types
4. Enablers and barriers encountered in projects targeting Indigenous people, young people and inhalant users
5. Enablers and barriers encountered by project location
6. Determinants of sustainability after project funding finishes.

Table 1: Enablers and barriers identified through literature review and document analysis¹

Enablers	Barriers
External communication and relationships <i>Strong support from partner agencies or from participating communities, utilised existing networks</i>	Engaging communities and partners <i>Lack of partner agency or community interest in or commitment to project, reluctance to address AOD issues</i>
Staffing and leadership <i>Employed suitable staff or contractors, staff or management provided leadership, staff training activities undertaken</i>	Identifying and retaining staff <i>Delay in staff recruitment, staff or management turnover, staff lacked required skills</i>
Project planning and design <i>Evidence-based model, good fit to needs, flexible design, appropriate scoping, rules, holistic approach, advice on implementation</i>	Project planning and design <i>Poor fit, inadequate scoping, poor timing, IT problems</i>
Organisational governance and capacity <i>Organisation already experienced in project work, good policies & procedures and suitable systems, effective reference group</i>	Governance <i>Lack of management involvement, project staff overloaded, reference group unrepresentative or ineffective</i>
Sensitivity to service users and settings <i>Model culturally appropriate, intensive support, employed culturally/gender appropriate staff</i>	Meeting cultural needs of specific demographic groups <i>Resources or approach not culturally appropriate, failed to engage specific demographic groups</i>
Staff team communication and relationships <i>Staff engaged and enthusiastic about project, inclusion of consultation mechanisms</i>	Workplace integration <i>Staff roles unclear, staff conflict, staff didn't prioritise involvement, placed additional stress on staff</i>
Participatory approach to service delivery <i>Target group involved in development, used role models or peer approaches, activity based approach</i>	Complexities of service users <i>Participation poor, difficulties in service users' lives interfered with attendance, challenging behaviours</i>
Funding and resourcing <i>Well funded, used existing resources, gained additional funding, partner agency contributed resources</i>	Funding and resourcing <i>Submissions for ongoing funding unsuccessful, other funding problems at organisation</i>
Research and data collection <i>Well documented, effective data collection, informed by ongoing research</i>	Research, evaluation and data collection <i>Poor data collection systems, low response to evaluation, datasets missing</i>
Service system issues not identified as an enabler by projects in the overall study sample	Wider service system challenges <i>Lack of other services, inter-professional problems, philosophical differences in addressing AOD</i>

¹ Enablers are listed in this table next to a corresponding barrier. They are presented here in order of most frequently mentioned enabler to implementation to least frequently mentioned enabler.

1. Key enablers to project implementation

Across all of the projects we reviewed the most frequently observed enabler was **effective partnerships with other agencies and with communities** that the project is designed to work with. Partner agencies for projects in the study sample included AOD or health and welfare organisations, local government, police, and training institutions. Communities were defined by geographical proximity, ethnicity, or Indigenous status. Project reports and evaluations consistently reiterated the importance of engaging other agencies in project activities and of maintaining harmonious relationships with these agencies. This was cited by 73% (n=93) of projects in the study sample as a key element in successful

We found that a partner agency's enthusiasm for the project and for the organisation conducting it was significantly correlated with achieving all project objectives. Community enthusiasm for the organisation and project (and, in the case of projects run in Indigenous contexts, commitment of community Elders) was also significantly correlated with successful project implementation.

project implementation. We also found that evidence of a partner agency's enthusiasm for the project and positive regard for the organisation conducting it was significantly correlated with the project achieving all funding objectives. Receiving offers of in-kind resources or services from partner agencies to contribute to the project was also found to be significantly correlated with successful project implementation, perhaps because this was an indication of partner agency commitment as well as capacity. Several case studies showed how successful partnerships between agencies hinged on commitment from partners, extensive consultation over project development and valuing the contributions of all agencies involved. This indicates that:

- agencies should cost time for the development and maintenance of relationships with partner agencies and communities into funding proposals
- expenses incurred through these activities should be recognised as legitimate costs by funding bodies
- funding bodies should consider whether agencies have built foundations for solid relationships with any partner agencies or community that is central to a project's implementation.

Project **leadership** was identified as enabling successful project implementation in relation to over half of projects in the study sample (61%, n=78). By 'leadership' we refer to staff and/or management taking responsibility for the project, generating enthusiasm, and ensuring activities are implemented. Employment of staff with appropriate skills and enthusiasm required to drive project activities was significantly associated with successful project implementation. Stakeholders interviewed in relation to successfully implemented case study projects praised staff highly for their initiative and energy. This indicates that:

- alongside ensuring staff competency, workforce training activities should incorporate measures to generate enthusiasm and energy within the workforce

- it is important that workplaces recognise and acknowledge staff who display particular energy, capacity to engage others and commitment to their work.

Effective **project planning and design** was also reported as enabling implementation in around half of all projects (61%, n=78). This entailed both the development of a project design likely to have desired impacts on AOD use, and planning and scoping activities appropriately. Interestingly, evidence of involving the project's target group (e.g., young people attending treatment activities, or professional staff engaged in training activities) in development of resources and approaches was also significantly correlated with successful project implementation. Again this finding was borne out in case studies, particularly those involving Indigenous or culturally and linguistically diverse communities. This indicates that:

Involving the project's target group in development of resources and approaches was also significantly correlated with successful project implementation

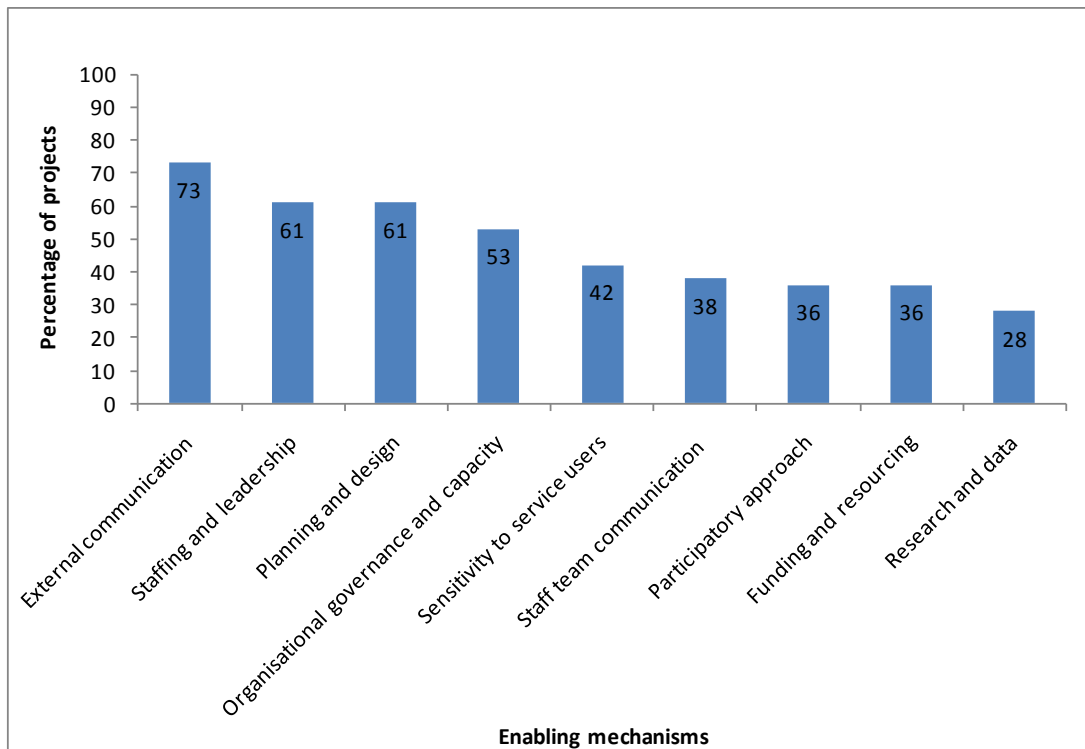
- good practice project models should be available to guide agencies in project development
- agencies should allocate time and resources to project

planning

- it makes good sense to involve target groups in project planning and development.

Figure 1 below shows enablers to successful project implementation in order of frequency observed across the overall study sample.

Figure 1: Enablers for all projects



2. Key barriers to successful project implementation

The study also identified a range of barriers to successful project implementation, as shown in Figure 2 below. The most frequently mentioned barrier was difficulties related to **project planning and design**, recorded for just under half of all projects (49%, n=62). These problems frequently related to developing accurate timeframes for activities. We found that:

- particular care should be taken in assessing appropriate timeframes for project activities
- some degree of flexibility from funding bodies with regards to adjusting project plans and timelines can be constructive in assisting agencies to meet agreed project objectives.

Recruiting and retaining staff was the next most frequently identified major barrier to successful project implementation within the study sample (39%, n=50). Employment of staff who lacked required skills was not identified as a significant barrier in statistical terms, however there appears to be some relationship with failure to meet project objectives. In one case study project implementation was seriously compromised when a staff member who had brokered the relationship with a key partner agency moved on unexpectedly. This indicates that:

- succession planning should be implemented, particularly where staff leaving will present significant difficulty to project implementation
- staff should be supported to minimise resignation due to workplace dissatisfaction.

Just as **relationships with external agencies and communities** proved critical in enhancing program implementation, they also led to difficulties for 32% of projects (n=40). Breakdown of partner agency relationships throughout the course of the project was found to be significantly associated with failure to achieve all funding objectives. This indicates that:

- disagreements that emerge in relationships between agencies should be addressed as a matter of priority to avoid compromising project implementation.

Just under half of all projects encountered barriers related to project planning and design, particularly costing projects and developing realistic timeframes for activities.

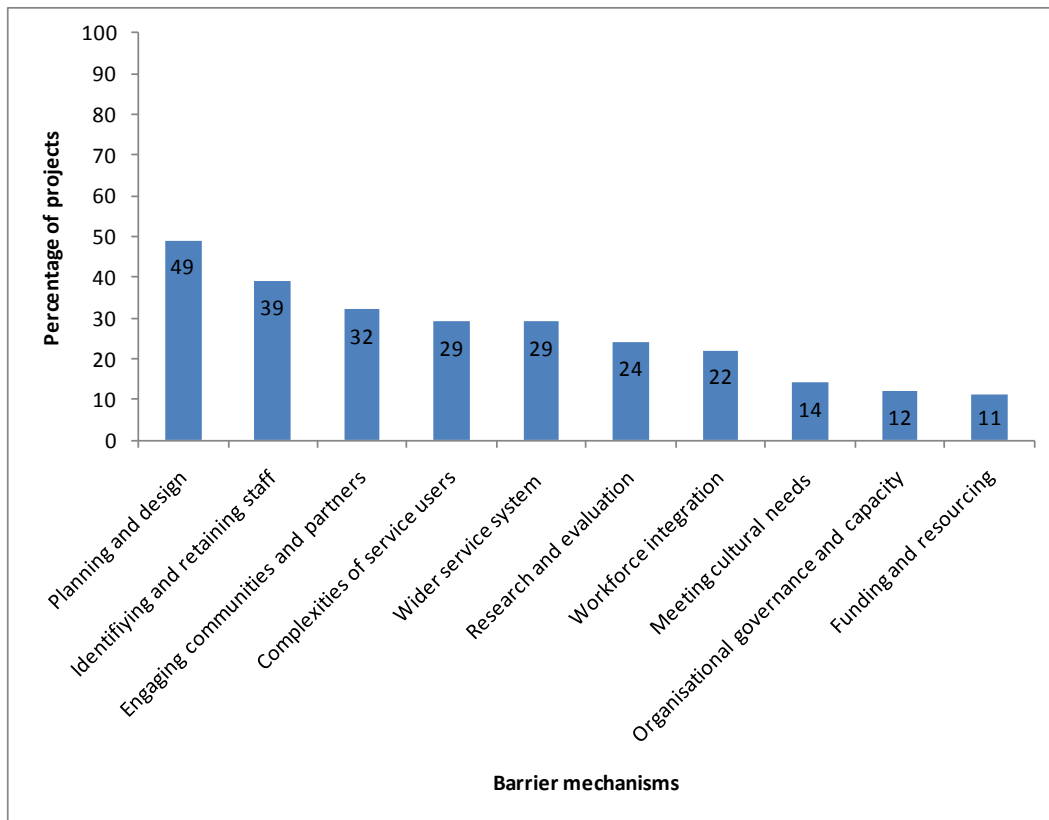
Dealing with the **complexities of working with service users** (reported in relation to 29%, n=37) of projects) was another barrier to service implementation. This included a range of issues such as adverse events in service users' lives impacting on treatment retention, challenging behaviours (i.e. being disruptive or attending treatment while intoxicated) and reluctance by service users to address AOD issues. While **research and evaluation** was not one of the most frequently cited barriers, one element in

this category emerged as important. Almost a third of projects in the overall study sample encountered difficulties relating to designing or implementing evaluations, for instance in some projects service staff were required to record program statistics and this did not eventuate. In turn, this means a lack of evidence regarding project processes and effectiveness and highly variable reporting standards. These findings indicate that:

- where service staff are expected to collect and collate service data, time efficient systems should be developed and data collection should be monitored throughout the project
- funding agencies should consider engaging an external evaluator to assess a range of similar interventions, thus supporting the development of a rigorous evidence base on what works.

Figure 2 below shows identified barriers to successful project implementation, listed in order of frequency across the overall study sample.

Figure 2: Barriers for all projects



3. Enablers and barriers encountered in different types of projects

To identify different sets of factors which support and impede successful implementation across varying project types, four project types were identified within the overall study sample. Projects were each categorised within one project type according to their main activities, as shown in Table 2 below. A particular range of barriers and enablers was identified for projects in each project type.

Table 2: Project types: inclusion criteria and number of projects

Project type	Inclusion criterion	Number of projects
Enhancing organisational systems and processes	Projects which primarily aim to improve organisational responses to AOD through introducing enhanced systems and processes.	39
AOD training and workforce development	Projects which primarily aim to improve AOD service delivery or awareness through provision of training to the AOD workforce or to other service providers, for instance teachers or pharmacists	18
Community education and prevention	Projects that attempt to raise AOD awareness or effect policy change by influencing the population or a large group within the population, or through local community development and planning interventions.	37
Engagement and treatment	Projects designed primarily to engage and influence individuals and groups who misuse AOD or who are at risk of doing so, or to provide treatment and aftercare	33

Projects aimed at enhancing organisational systems and processes

Strong **project leadership** featured prominently as an enabler for 'enhancing organisational systems and processes' projects. This may be because many of these projects entailed employing specialist consultants or contracting an agency to undertake activities which were not within the skill set of existing staff. Staff team communication and the organisation's own capacity and governance structures were also considered to enable successful implementation for these projects.

Project planning and design was the primary barrier identified from our analysis of 'enhancing organisational systems and processes' projects. Scoping these projects (identifying appropriate timeframes for activities and budgets) clearly posed challenges for agencies. **Workplace integration** and communication was the second most frequently recorded barrier. Worker resistance to engaging in projects to develop new systems and processes was an important barrier for these projects. Problematic relationships with other agencies were far less frequently identified as barriers to implementation than in other project types. These findings indicate that:

- there is a clear role for employing external consultants or experts to implement workplace improvements as this is a specialist skill set which is likely to be unavailable in many small AOD agencies
- projects which aim to enhance organisational systems and processes should be carefully assessed by funding bodies to ensure a viable plan has been developed
- any project that will entail substantial change to processes and procedures at agencies should be accompanied by mechanisms to consult staff views on what is required and to support staff through the process of implementing new initiatives.

AOD workforce development projects

External communication and relationships emerged as the most commonly reported enabler to program implementation. **Leadership** by management and/or staff, and **planning and design** were also critical enablers.

As in the previous category, **project planning and design** emerged as an important barrier mechanism for workforce development and training projects. In these projects, however, it was not primarily the scope of the project that was the issue, but designing a training package or program that would suit the needs of those who were anticipated to be involved. Difficulties involving staffing was the second most frequently identified barrier. Many projects experienced serious trouble attracting and retaining suitably qualified staff. This finding reinforces that:

- both the content and styles of AOD training must be tailored to the specific needs of participants
- recruitment and retention of qualified staff remains a major issue in the AOD sector.

Community education and prevention projects

External communication and relationships was the most frequently recorded enabler to successful implementation for community education and prevention projects, followed by project **planning and design** and the organisation's **governance and capacity**. This suggests that:

- community education and prevention activities require careful design to fit cultural sensitivities and should be grounded in strong relationships with any external partner agencies and communities involved in project implementation.

Engagement and treatment projects

Many of these projects involved partnering with other agencies to refer service users and share delivery of programs. Not surprisingly then, **partnerships and relationships with external agencies** was the most frequently cited enabler for these projects. **Sensitivity to service users and settings** also emerged as a key enabler. Within this mechanism over half the projects cited use of a culturally appropriate project model as supporting implementation. Adopting a **participatory approach** emerged as important in engaging service users.

Difficulties encountered in relation to meeting the **complex needs of service users** was the most frequent barrier identified in engagement and treatment projects, viewed as constituting a barrier for a quarter of projects. **Project planning and design** was the second most common barrier for 'engagement and treatment projects'. This frequently entailed concern that the program did not suit the needs of service users and thus required some form of adjustment. This indicates that:

- dealing with the complexities of service users may require flexibility to adjust program design
- participatory approaches to project planning and implementation are most likely to be effective, especially in the context of allied findings in this report that involving stakeholders in project design is an important enabler to successful implementation.

4. Enablers and barriers in projects targeting Indigenous people, young people and inhalant users

Criteria we used to identify projects within the overall study sample as targeting Indigenous people, young people and inhalant users are shown in Table 3, below. Some projects were included in two or more of these categories.

Table 3: Projects targeting Indigenous people, young people and inhalant users: inclusion criteria and number of projects

Project population group	Inclusion criterion	Number of projects
Projects targeting young people	Projects which target participants aged 24 years or younger	66
Projects targeting Indigenous people	Projects designed to target a significant proportion of Indigenous clients or located in an Indigenous-managed organisation	36
Projects targeting inhalant users	Projects designed to address inhalant use	18

Strong similarities in enablers and barriers emerged from the analysis of projects targeting Indigenous people, young people and inhalant users. This may be the result of the overlap across categories of projects and it may also indicate the universal nature of these enablers for implementation.

External communication and relationships was the most frequently cited enabler for projects targeting young people, Indigenous peoples and inhalant users. It is to be expected that this would be particularly critical for projects targeting Indigenous clients, as many of these projects required participation by community members, often elders. **Participatory approaches to service delivery** were particularly important for projects targeting inhalant users and youth and this enabler emerged as only slightly less important for projects targeting Indigenous people. Of interest was that **project planning and design** emerged as particularly important in projects targeting young people, suggesting that these projects may be particularly difficult to accurately scope and cost.

As with enablers, the differences between barriers identified by context were relatively minor. The most frequently cited barrier for all of these project contexts was **project planning and design**, followed by **complexities of service users**. Managing challenges posed by service user behaviour presented difficulties for more projects targeting inhalant users or young people than for projects targeting Indigenous service users. **Communication and relationships** with partner agencies and with participating communities was viewed most frequently as a barrier for projects targeting young and Indigenous peoples. This factor is repeatedly cited as critical in relation to implementing any activities involving Indigenous people. **Participatory approaches to service delivery** were particularly important for projects targeting inhalant users, probably because inhalant users are frequently relatively chaotic and disengaged from mainstream social institutions. These findings indicate that:

- projects implemented within Indigenous agencies or which include a substantial component of service delivery for Indigenous people require extensive time committed to relationship building and staff who are willing to work across agencies and to engage sensitively with communities

- projects targeting inhalant users are reliant on external communication and relationships for effective implementation as involvement of a range of agencies may be necessary to achieve a holistic service response
- projects targeting young people and inhalant users particularly benefit from a participatory approach to service delivery and strategies to manage challenging behaviours are frequently required.

5. Enablers and barriers by location

All projects in the overall study sample were classified according to whether or not they were based in an agency with a capital city postcode, as shown in Table 4 below:

Projects based outside capital cities reported barriers relating to organisational governance almost six times as frequently as those based in capital cities. Communication and relationships with external partners and communities was observed almost twice as frequently as a barrier in projects in non-capital city settings compared with projects in capital cities.

Table 4: Projects located in capital cities and outside capital cities: inclusion criteria and number of projects

Project location	Inclusion criterion	Number of projects
Based in agencies located in capital cities	Agency capital city postcode according to ABS classifications	92
Based in agencies located outside capital cities	Agency non-capital city postcode according to ABS classifications	35

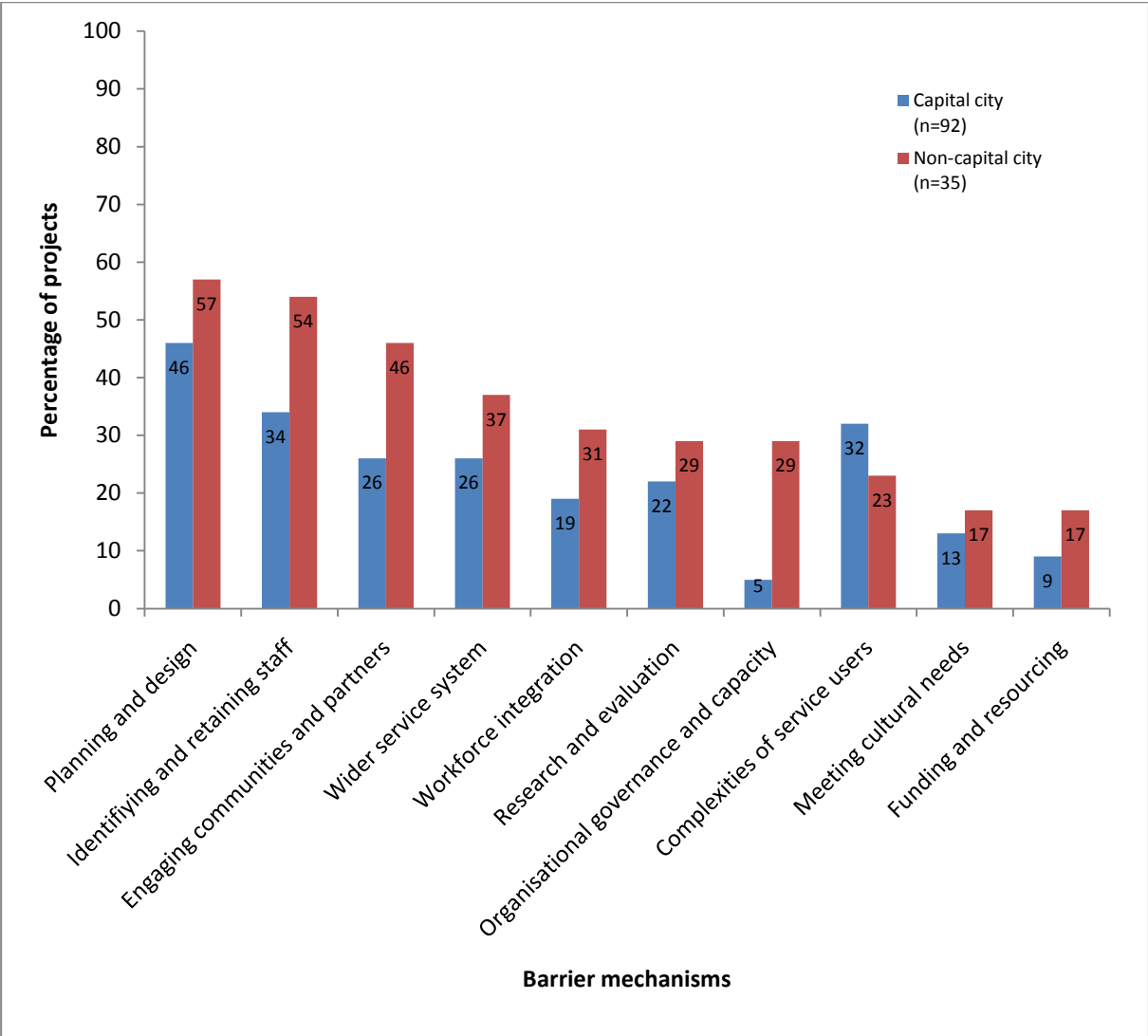
Useful differentiations emerged when comparing projects according to whether they were located in agencies based in capital cities or outside capital cities. These differences are shown in Figure 3 below. **Communication and relationships** with external agencies and communities was more frequently viewed as an enabling factor in projects based in agencies located outside capital cities. In contrast, **organisational capacity and governance** was more frequently mentioned as enabling project implementation in relation to projects located in capital cities.

All barriers except that pertaining to coping with challenging behaviours of clients were more frequently cited in relation to projects in non-capital cities than in capital cities. The greatest differences between capital city and non capital-city projects emerged in relation to attracting and retaining staff, relations with community agencies and project partners, and organisational governance. Projects based outside capital cities reported barriers pertaining to organisational governance almost six times as frequently as those based in capital cities, indicating an important role for enhancing organisational capacity in the AOD sector outside capital cities. Communication and relationships with external partners and communities was observed almost twice as frequently as a

barrier in relation to projects in non-capital city settings than in relation to projects located in capital cities. This suggests that:

- particularly in rural and remote locations without an available skilled AOD workforce it is important to provide incentives to retain staff and support staff
- strategies to enhance cooperation and collegiality between agencies in small communities such as regular meetings where difficulties and grievances can be aired may also support the implementation of cross-agency activities
- funding allocations for services outside capital cities or other major metropolitan areas should reflect the added challenges faced by these agencies.

Figure 3: Barriers for projects according to location



6. Determinants of project sustainability after funding finishes

In our analysis of eight case studies we asked which project elements had actually proved sustainable after the expiration of project funding, enabling us to identify four determinants of project sustainability. These were:

Integrating the project into the operations of the agency

Sustainability was relatively easy to achieve in projects that entailed integrating new systems into the ongoing operations of the agency. Case study projects illustrated the importance of organisational commitment to sustaining new systems, implementing new plans or continuing to use resources developed through the project.

'[Before the project] alcohol just wasn't seen as the business of the AOD workers... [but now it is] seen to be the business of every worker ... and so that is different.' [stakeholder interview]

Developing an intervention or resource which fills a critical gap in the sector and thus is taken up by various agencies

The second determinant of sustainability identified from case studies is somewhat more difficult to plan for than the first. One case study entailed such a useful and high profile intervention as to be adopted internationally, with a stakeholder commenting that *'It's so popular because there's so little of this type of thing out there'*. Another case study used an approach to service delivery that did not prove effective and thus was not continued after funding ceased.

Building support from key individuals and agencies through the life of the project

Project sustainability was enhanced by gaining support through the duration of the project from key individuals who could encourage implementation of activities in an ongoing way. This was apparent from stakeholder comments on several case study projects, where influential supporters had advocated for the ongoing operation of components of AER funded projects, as the following stakeholder comment illustrates:

'Without a doubt this course would never have happened without this funding, and it has been immensely important to our students and I think the University's understanding of Aboriginal health. We now have a lot of people who now understand the issues, who didn't have much understanding before and a lot of them are quite senior with a lot of influence, high powered professors.'

Planning realistically for future community ownership of activities

Some projects adopting a community development approach aimed to foster community ownership of activities. This approach required a realistic appraisal of community members' capacity to sustain project activities in a voluntary capacity after funding ceased. For example one case study involved training peer educators who could inform their community about alcohol on an ongoing basis, as a stakeholder explained:

'The peer educators have been able to have really good conversations with people about alcohol and that is not just on the impact of mixing it with their illicit drugs and like the risk of overdose but it's also just around general alcohol information and education and they're a great tool...'

This indicates that:

- where projects involve new systems or development of new approaches that will guide an agency's ongoing work, funding bodies should request evidence at project application stage of how the project will be integrated into the agency's ongoing operations
- a vibrant and well-resourced AOD sector will continue to produce innovative solutions to problems. Funding such as that offered by the AER should be available on a continuous basis to support creative responses to AOD misuse
- while time spent networking and promoting projects can be difficult to justify in a busy workload, developing strategic relationships can improve project sustainability
- strategies to devolve activities addressing AOD to community members after projects finish should entail realistic assessments of community capacity.

Conclusion

The study highlights the importance to AOD project implementation of maintaining positive relationships with partner agencies and communities, of employing staff with appropriate expertise and of careful project planning and design. These issues should be given priority attention in planning for successful implementation. The study is unique in demonstrating how enablers and barriers vary between types of projects, in projects located in different geographical settings and in relation to projects targeting different populations. It also provides recommendations for improving project sustainability. These findings could be used in a range of ways to enhance project implementation in the AOD field, for instance as the basis for development of checklists to guide the planning of new projects, project performance indicators and project development training.

Study findings on the overall sample have been synthesised from service reports and evaluations. The quality of reporting on projects varies widely and this has limited the confidence with which we are able to draw conclusions. We recommend that, in so far as is possible, funding bodies commission consistently designed evaluations of like interventions to allow pooling of results across individual services. This would enable conclusions to be drawn on the effects of various interventions, as well as the performance of individual agencies and would contribute substantially to the AOD intervention evidence base.

Reflecting on all of the projects included in this research, the most valuable information appears to have come from projects that were less rather than more successfully implemented. Projects are rarely initiated or implemented without enormous goodwill and energy and even those which do not meet funding objectives may result in other positive outcomes. When projects do not work as hoped it is important that they too are documented so we can learn from both success and challenges in implementation.

Acknowledgements

This project was commissioned by the AER Foundation. Particular thanks to the research steering group, AER staff, authors of reports and evaluations written to the AER, and interview participants.