

4 Program logic for the evaluation of NCPIC

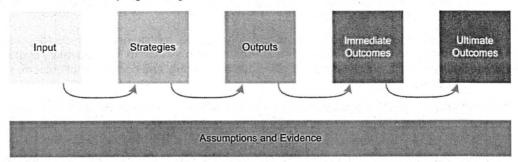
This section sets out the program logic developed for this evaluation of NCPIC. Following a brief description of what program logic is, the NCPIC program logic is presented.

The program logic links the objectives of NCPIC with the objectives of the evaluation and allows for a clear conceptual framework to review the activities of NCPIC and the findings of the evaluation. The program logic provides a structure for the reporting of evaluation findings in subsequent chapters of this report.

4.1 What is program logic?

The overreaching approach to this evaluation is based on program logic. The program logic sets out the logic of how NCPIC is intended to operate to achieve its stated objectives. As demonstrated in the diagram below, the program logic model seeks to evaluate the assumptions or evidence that have been used to design NCPIC, its functions, aims and activities.

Figure 4 - Basic model of program logic



The program logic is operationalised through a hierarchy of outcomes. The hierarchy of outcomes is a framework for measurement and analysis which sets out the intended outcomes of NCPIC, from broad overarching outcomes down to the short-term outputs. The hierarchy of outcomes is structured as set out in Figure 5.

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Figure 5 – Hierarchy of outcomes



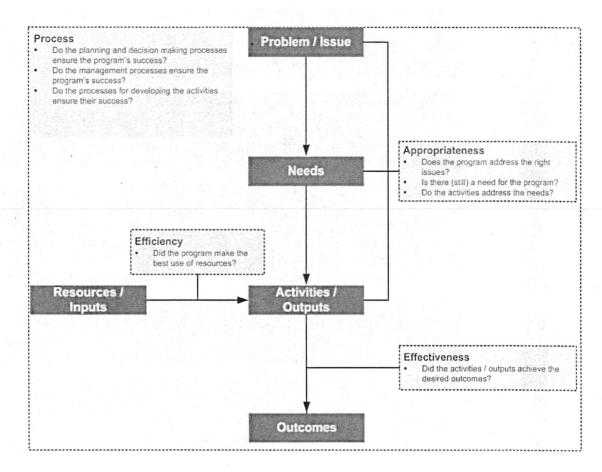
- (a) Ultimate outcomes impact on overall issue and ultimate goals progress towards or away from articulated goals
 e.g. a reduction in the use of, demand for and harms associated with cannabis.
- (b) Intermediate outcomes impacts, outcome and achievements across strategic and organisational frameworks e.g. (1) increase community awareness, (2) prevent cannabis use, and (3) respond to cannabis problems.
- (c) Immediate outcomes impacts, outcomes and achievements in specific program areas
 e.g. (1) provide the Australian community with high quality evidence based information on risks and harms, (2) specifically engage young people to increase their knowledge and understanding, (3) support the drug and alcohol sector to respond to people experiencing problems.
- (d) Outputs/activities models of service delivery and provision, and how these have been implemented e.g. workforce training, social marketing, resource development, helpline, website and research.
- (e) Needs priority issues that the program must to respond to, the evidence base and conceptual underpinnings for the program e.g. increase community awareness/understanding, increase capacity of services, improve referral pathways/ access to treatment and specifically engage young people.

The program logic provides an underlying rationale that links the needs and aims of NCPIC with its various components (see Figure 6). These components include the activities undertaken, the outputs delivered and the outcomes achieved. These can be assessed in relation to:

- Process the extent to which the governance, planning and decision making processes contribute to the overall success of NCPIC
- Appropriateness the extent to which NCPICs design and activities address the underlying needs and issues.
- Effectiveness the extent to which NCPICs activities and outputs achieve the desired outcomes.
- Efficiency the extent to which the resources and inputs into the activities contribute to achieving the desired outcomes.



Figure 6 - Evaluation components



4.2 Program logic for the evaluation of NCPIC

A hierarchy of outcomes was developed for the evaluation of NCPIC to provide a conceptual framework to guide the evaluation methodology, design of consultation instruments and analysis and reporting of data.

The hierarchy of outcomes for this evaluation was developed through a review of program documents. These documents included: the NCPIC Application for Funding, the Standard Funding Agreement between the Commonwealth of Australia and the University of New South Wales National Drug and Alcohol Research Centre (NDARC), the NCPIC Strategic Plan 2007-2011, NCPIC Annual Work Plans, and the NCPIC Communications Strategy 2008-2010. Input from , NCPIC and the Terms of Reference for this evaluation were also taken into consideration.

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Table 7 - Hierarchy of Outcomes for the Evaluation of NCPIC

Ultimate outcomes

- An overall reduction in the use of cannabis in Australia
- An overall reduction in the demand for cannabis in Australia
- An overall reduction in the harms associated with cannabis in Australia

Sources of information for this evaluation

- This evaluation is unable to assess outcomes at this level.
- NCPICs activities would not be expected to have achieved a demonstrated impact at this level within the timeframe it has been operating.

Intermediate outcomes



Increase community awareness

Increase community awareness of and access to evidence based information on cannabis related harms

Cannabis Prevention

Prevent the uptake and continuation of cannabis use

Responding to cannabis problems

- Increase access to treatment and referral pathways for cannabis users
- Support the drug and alcohol sector and other relevant service providers to respond to people experiencing cannabis related problems

Process outcomes

- Contribute to the goals of the NCS and NDS
- Deliver a service approach to reducing cannabis use that is appropriate, effective and resource efficient
- Ensure that the governance arrangements of NCPIC are appropriate and effective

- Document review
- Data review
- Quality assessment of information
- Fieldwork consultations

Immediate outcomes



Increase community awareness

- Provide the Australian community with high quality, evidence based information on the risks and harms associated with cannabis use
- Establish national reach for the Centre and ensure widespread community awareness of NCPIC, its mission, functions, aims and activities
- Maintain a high profile of NCPIC amongst a range of sectors and target audiences
- Establish NCPIC as the national reference point for cannabis related materials
- Ensure that NCPIC develops a strong media profile and becomes a major voice in Australian cannabis related media stories

Cannabis Prevention

- Specifically engage young people to increase their knowledge and understanding about cannabis, the law, the effects of the drug and how to access assistance
- Develop activities and resources that appropriately address the needs of identified target groups

- Document review
- Data review
- Quality assessment of information
- Fieldwork consultations



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Responding to cannabis problems

- Provide targeted information and support for those at risk of experiencing cannabis related harms
- Effectively engage with cannabis users and their families
- Provide access to treatment and referral pathways for cannabis users
- Specifically engage young people to increase their knowledge and understanding about cannabis, the law, the effects of the drug and how to access assistance
- Develop activities and resources that appropriately address the needs of identified target groups
- Support service providers through the provision of: frontline responses, supporting materials/resources, and evidence based interventions
- Build appropriate and effective networks and relationships with relevant sectors (ie AOD, health, education, community and legal)





Process outcomes

- The establishment of a consortium governance model to operate NCPIC
- Undertake activities that sufficiently address all the underlying needs of the Program
- Ensure that the relative balance and spread of activities and dedicated resources are appropriate for addressing the underlying needs of the Program
- Undertake effective strategic planning to ensure that goals are clearly articulated, appropriate actions and strategies are identified, and impacts/outcomes are measured effectively

Increasing community awareness

- The establishment of the Cannabis Information and Helpline to provide information, targeted advice, counselling and referrals to the general community, cannabis users and their families
- The establishment of the NCPIC website to provide reliable, evidence based information about cannabis channelled to meet the needs of a range of target groups
- Organising a national poster competition, short film competition and music competition
- Identifying and assessing cannabis related information in the Australian media and responding to inaccurate media reporting
- Using social marketing as the lead information dissemination method
- The development of cannabis resources including factsheets, booklets, cannabis and driving materials, posters, postcards etc

Cannabis prevention

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Responding to cannabis problems

- The establishment of the Cannabis Information and Helpline to provide information, targeted advice, counselling and referrals to the general community, cannabis users and their families
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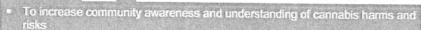
The range, extent, balance and progress of NCPIC activity and resource allocations will be confirmed through:

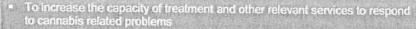
- Document review
 (funding agreements,
 implementation
 plans, progress
 reports,
 budget/finance
 information)
- Consultations with consortium members, NCPIC staff and key stakeholders
- Review of program data relating to activities and throughputs.



- Information, research and promotional materials including the E-Zines, factsheets, bulletin series, technical reports etc
- Development of resources to support relevant workforce sectors including clinician guidelines, assessment tools and Making the Link materials
- Delivering training courses and workshops to target audiences within the workforce
- Delivering presentations and workshops at conferences
- Identifying, developing and evaluating new intervention approaches (ie developing clinical guidelines, postal delivery of cannabis interventions, identifying community perspectives on barriers to the provision and uptake of cannabis intervention, web based brief intervention)
- Undertaking clinical studies to inform other activities (potency study, collaborative dissemination models, successful and unsuccessful quitters, brain and mind research etc)
- Creating a position at the AlCfor the dissemination of information to law enforcement organisations
- Development and implementation of TAFE certificate IV course on cannabis and mental health

Needs





- To improve referral pathways and access to treatment for cannabis users to prevent problem use and to respond to people experiencing cannabis related problems
- Specifically engage young people to increase their knowledge and understanding about cannabis, the law, the effects of the drug and how to access assistance

We have based the conceptual framework for the evaluation of NCPIC on a program logic and hierarchy of outcomes to enable the evaluation to:

- clearly identify the needs, activities/outputs and desired outcomes of the program
- understand the relationships between the originally intended activities and the actual outputs
- understand the link between the program activities and the underlying needs
- understand the link between the program activities and the desired outcomes
- distinguish between short-term outputs and progress towards longer term objectives.



5 Key achievements

This chapter sets out NCPIC's key achievements. These include NCPIC's outputs, and the achievements of the Centre in relation to the appropriateness, efficiency, effectiveness and process questions (as set out in the NCPIC program logic).

5.1 Outputs

NCPIC has undertaken a high volume of activity across a range of output areas. Some of the key activities delivered include, for example:

- Setting up a detailed website. The NCPIC website appears as the first result for 'cannabis information' internet search engine queries. From 21st April 2008 19th January 2010 the NCPIC website received a total of 138,195 site visits. The website receives approximately 216 visits per day, with users accessing an average of three to four pages per visit. Aside from the home page, the factsheet section and the Helpline were the most frequently visited pages.
- Establishing the Cannabis Information and Helpline. The Helpline was established in January 2008 and had received a total of 4248 calls up to the end of December 2009. Assuming a 24 hour operation, this represents an average of nine calls per day. The mean call duration was 15 minutes. A four session brief intervention has also been developed for the CIH staff to deliver and this is currently being evaluated.
- Publishing research. NCPIC has published work in a range of external sources including books/book chapters, journal articles, reports, bulletins and magazines. In 2008 and 2009, a total of 36 publications were accepted for publication.
- Delivering presentations and workshops. NCPIC staff have delivered many presentations and workshops relating to the activities undertaken by the Centre at a series of national and international conferences (the costs for international conferences were generally met by other parties). Specific conferences have been targeted by NCPIC, especially conferences that attract workers from the education, health, youth and Indigenous sectors. In total, 83 presentations and workshops were delivered in 2008 and 2009.
- Promotion at conferences. NCPIC has had a visible presence at a range of national and international conferences with the aim of ensuring awareness of the Centre's activities amongst identified workforce sectors (i.e. health, AOD, law enforcement, criminal justice and education).
- Media coverage. Media coverage has been sought by NCPIC most commonly through the use of press releases. NCPIC has issued five press releases. These include: Australia's suburbs breeding ground for the nation's cannabis, Girl's cannabis use catches up, but males still the heaviest casualties, GP's expertly positioned to tackle cannabis-related issues in the community, Helping someone with cannabis use: Mental Health First Aid Guidelines, and Smoke and drive and you're as good as drunk: Don't Dope and Drive. The media outlets which have covered these press releases have been national and included a range of communication channels such as Radio, online, print, and television. NCPIC has also been involved in responding to inaccurate media reporting regarding cannabis issues.
- Delivering training to workers on cannabis issues. Between December 2007 and December 2009 a
 total of 267 training sessions were delivered in all States and Territories. This includes 122 clinical
 training sessions, 123 community education sessions, and 22 youth training sessions.
- Developing an array of resources and materials on cannabis and related issues. Examples of materials include: Cannabis Factsheets (21 in total), 'What's the Deal' booklet series (4 in total), Clinician Series (4 resources in total), Fast Facts series (3 booklets in total), clinician assessment tools (8 in total), Cannabis It's Not Our Culture Factsheets (12 in total), bulletins (6 in total), E-Zine magazines (24 editions in total), AIC bulletins (5 in total), research briefs (7 in total), and materials specifically designed for teachers.
- Distributing resources to various workforce sectors nationally. Between 2008 and 2009 654,564 resources were distributed. Of these, 48% were distributed to the health sector, 31% were



distributed to the community sector, 18% were distributed to the education sector, 3% were distributed to the criminal justice sector. The *Fast Facts* series and the *What's the Deal Series* were the most widely distributed materials.

- Organising the first National Cannabis Conference. The Conference was held at the Powerhouse Museum, Sydney from 7th-8th September 2009. The Conference was viewed by some stakeholders consulted with as part of this evaluation as an effective mechanism for promoting and disseminating current research findings and best practice to inform the treatment of cannabis users. The evaluation of the National Conference conducted by NCPIC indicates that the majority of attendees thought the conference was either good or excellent. The quality of the presenters and the relevance of the topics were the most well received aspects of the conference.
- Developing nationally-accredited Unit of Competency for cannabis and mental health. This Unit provides competency-based training for cannabis and mental health issues for inclusion within Certificate IV training. This sustainable approach ensures that the assessment and management of cannabis and mental health issues across a range of health and other settings builds the competency of a broad workforce on an ongoing basis.
- Developing an early intervention program for cannabis and mental health issues within school settings MAKINGtheLINK. This program, piloted within a Victorian school, provides a curriculum and resources for teachers to explore barriers to help-seeking during adolescence, and to provide students with a range of strategies to help and support a friend seek professional help when they are struggling with cannabis or mental health problems.

5.2 Appropriateness

5.2.1 The need for a single focused cannabis centre

NCPIC provides a unique service approach through the delivery of a national initiative focused on a single substance. There was support for this type of approach among most NAC members and some external stakeholders. It was felt that a sole focus was appropriate for a range of reasons including:

Providing a specialist and focused attention on cannabis from a policy, practice, research and community education point of view. As one NAC member stated:

A single focus on tobacco and alcohol have really sharpened people's policies and approaches, a single focus on cannabis use is useful.

A single focused approach provides the opportunity to engage with some of the more complex and difficult issues relating to cannabis use and harms. For example, one external stakeholder indicated that:

In the past there hasn't been a great deal of research on cannabis in Indigenous communities, establishing an initiative with a sole focus provides an opportunity for that sort of research to be undertaken.

- The comparatively high prevalence of cannabis use in Australia. Informants (particularly NAC members, peak bodies and D&A treatment providers) felt that cannabis should be given priority status as both the general community and staff working with cannabis users generally do not consider it to be as dangerous or harmful as other illicit drugs. This view is supported by the research findings on community attitudes towards cannabis use as outlined in Section Three of this report.
- It was reported that organisations dealing with all drug and alcohol issues have historically not regarded cannabis as a major priority, and have tended to focus on other substances such as amphetamines and alcohol. Therefore cannabis is likely to get 'lost' as an issue if left to these more generic drug and alcohol organisations.
- Two external stakeholders felt that a single substance service delivery approach has the potential to attract clients who may not access general drug and alcohol services.



It should be noted that DoHA and other agencies have adopted an approach focused on a single substance in some other drug policy areas due to perceived differences in the particular issues and dynamics associated with use of that substance. Examples include the National Tobacco Strategy, the national Petrol Sniffing Strategy and the Club Drug education campaign aimed at young club-goers in NSW.

5.2.2 The appropriateness of the NCPIC activities for addressing the needs

Resource development

The development of resources by NCPIC was seen by those consulted to be appropriate for increasing the capacity of service providers to respond to cannabis related problems. According to some informants (including peak body, service provider and education representatives), NCPIC has effectively met needs and responded to existing gaps in regards to resource development to support service delivery. One NAC member stated that 'NCPIC has provided really important resources that have typically been neglected in the sector'. The clinical resources, the materials developed for the general healthcare workforce and materials aimed at the education sector were given as particular examples. An external stakeholder suggested that:

Clinical staff utilise resources in their day to day work as an information source and a tool to guide practices when dealing with cannabis.

The resources developed by NCPIC were also seen by some as appropriate for improving community understanding and awareness of cannabis harms. The Cannabis Resource Audit commissioned by NCPIC found that there is a considerable amount of inaccuracy in other materials in the field (Alcohol and Other Drug Council of Australia, May 2008). One external stakeholder indicated that 'there is a lot of misinformation regarding cannabis that NCPIC should focus on'. Materials developed for the general community, including factsheets, posters, the What's the Deal booklets and Fast Facts series, were seen to contribute towards addressing this need. An advisory committee member had:

Seen benefits of the materials, definitely increased awareness and they are a good tool for people wanting information.

Research activities

NCPIC staff, most Advisory Committee members and some external stakeholders (typically peak bodies, service providers and those in research roles themselves) felt that NCPIC's research activities are appropriate for increasing the capacity of service providers and improving referral pathways and access to treatment for cannabis users. It was felt that research activities which inform evidence based treatments, respond to the knowledge and research needs of the sector, and support prevention/early intervention approaches were justified. As the national centre on cannabis, NCPIC was seen by some to be best placed to provide leadership around these issues. According to one external stakeholder:

The background research they do, their research projects into web based interventions and those things, is really useful. Workers in the health care and sector would often like to spend more time undertaking research to inform intervention methods and best practice for treating patients but rarely have the time.

NCPIC website

It was felt by some stakeholders that the NCPIC website provides easy public access to cannabis related information. According to one stakeholder

The website appears to be readily found via a simple Google search providing the right key words are used.

Numerous informants indicated that the website was an appropriate mechanism for supporting workforce development. Stakeholders reported that they use the website to access cannabis related information and materials. Comments included:

The website is great in terms of addressing information needs of teachers, doctors etc.



The NCPIC website is used regularly to get information and evidence on cannabis harms.

[relating to law enforcement].

One external stakeholder suggested that the NCPIC website is potentially appropriate for supplying treatment options for cannabis users. It was felt that providing self-appraisal tools through an interactive web based program can be an effective treatment approach. Web based treatments provide further client benefits relating to confidentiality. NCPIC has developed such an intervention and has self appraisal and clinical tools available on their website.

The website was seen by a few external stakeholders as an appropriate channel for engaging with young people. One external stakeholder felt that the website was an 'ideal modality' for targeting young people and another stated that 'their internet based stuff is Gen-Y friendly'.

This view was supported by findings from the focus groups with young people. Participants strongly indicated that they were more likely to use a website to access cannabis information than other formats (such as a Helpline, chatroom or drop in centre/community organisation). Focus group participants suggested that the Young People's section of the website was easy to navigate, had appealing graphics and simple language. Participants generally liked the question and answer format and the use of personal testimonials. The Young People's section was seen by the young age group as most relevant to them.

Cannabis Information and Helpline

Consultations with CIH clients indicate that the service provides a number of functions. Clients contacted the Helpline for a number of reasons, including; to get assistance with quitting or reducing use, to get tips on how to deal with withdrawal symptoms, to get support with sustaining cessation, to get information for educational purposes (to assist with tertiary education assignments), to get support for a family member, and to get answers to specific cannabis related questions (ie the effects of second hand smoke and implications of cannabis use for drug testing).

According to data, the Helpline is most commonly accessed by females in their late 30's seeking counselling for family and relationship problems.

The CIH was seen by some informants as a potentially appropriate mechanism for improving access to treatment for cannabis users. The Helpline format has the potential to respond to client access barriers by providing confidential and timely treatment options. According to an advisory committee member 'a Helpline can be good in terms of confidentiality, people may mind less when talking to a faceless person'.

Interviews with NCPIC clients also revealed benefits of the Helpline service.

I really like the telephone format. I work a lot and it is practically impossible to get into treatment during work hours and then they are closed outside of work hours. I was able to talk on the phone during my one hour break at work — it is just so much easier. I was able to fit it in when it suited me.

I live in the country, not always easy, good there was a helpline as you can't always access services here.

I don't want to go to a program.... I don't want to be recognised as someone who goes to treatment; I don't want people to be like oh there goes that guy who has a problem with drugs.

Consultations with CIH clients also suggest some benefits of having a national Helpline dedicated to cannabis issues. A number of clients indicated they have had contact with other drug and alcohol helplines but expressed a preference for the NCPIC service. Consultations with some (but not all) clients who had not had contact with other helplines also indicated a perception that NCPIC would more suited to meeting their needs.

I have used one of those 24 hours ones. I found them to be absolutely useless. They didn't want to know about it, they didn't treat it like a serious problem... I felt like they were trying to palm me off.



I am glad there is a dedicated line, I have thought that a general drug and alcohol line might not have the information I was after.

More relevant than other helplines – much more specialist and knowledgeable.

Training

The training delivered by NCPIC was seen by some to be appropriate for increasing the capacity of the workforce to respond to people experiencing cannabis related problems. According to both the evaluations undertaken by NCPIC of the training workshops and the stakeholder consultations for this evaluation, this training is highly regarded by stakeholders. The strengths of the training include that it is interactive, free, utilises trainers who are very knowledgeable in the field and have strong credibility, provides new materials for professionals to use, and increases and reaffirms participants' knowledge and skills.

Evaluations by NCPIC of the community education workshops (provided to alcohol and other drug and allied health workers) reveal that the general cannabis knowledge of participants improved immediately post workshop. Participants considered the sessions to be well prepared and presenting a good cross section of information.

In regard to clinical training, pre and three-month post evaluations indicated that knowledge of cannabis dependence and associated problems and confidence in assisting people with cannabis dependence had increased post training. Participants considered the sessions to be well prepared and the presenter to be knowledgeable.

National cannabis conference

It was suggested by some external stakeholders that the two day National Cannabis Conference organised by NCPIC was an appropriate mechanism for disseminating relevant information, such as current research findings and best practice, to the sector.

5.2.3 The balance of activities undertaken

Some NAC members felt that NCPIC had achieved an appropriate balance across the various activity areas. One commented that 'NCPIC has achieved a good spread; they have undertaken a range and diversity of activities'.

5.2.4 The appropriateness of identified target audiences

As outlined in Chapter Two of this report, NCPIC have identified a number of priority audiences to target in order to achieve the aims and address the underlying needs of the program. Consultations undertaken for this evaluation indicate strong support for a national cannabis centre to give specific attention to young people, the workforce and indigenous communities. These groups were seen to be particularly seminal for achieving a reduction in the harms associated with cannabis use.

5.3 Efficiency

Consultations with DoHA, NAC members and NCPIC staff indicate that NCPIC has completed the great majority of activities as required. NCPIC has achieved a high volume of activity, implemented an array of initiatives, and developed a suite of materials within a limited timeframe. The day to day management of NCPIC was described by advisory committee members as being highly efficient. Consultations indicated that NCPIC have implemented a four year plan in two and a half years. One external stakeholder commented, 'they do not have a huge team, the amount of work they have done is very impressive'.

The majority of initiatives as outlined in the Strategic Plan and Annual Work Plans have generally been implemented as intended and on schedule. Where projects have not been completed within the intended timeframes, this has been due to factors largely beyond NCPIC's control, and with the awareness and signoff of DoHA.

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5.4 Effectiveness

5.4.1 Maintain a high profile of the NCPIC amongst a range of sectors and target audiences

Consultations with stakeholders indicate that awareness of NCPIC is greatest within the alcohol and other drugs sector. According to one stakeholder 'NCPIC has established a brand name that is becoming recognised by those in the AOD sector'. There is a sense that NCPIC has a good reputation among those who have an awareness of the Centre.

I think within the Drug and Alcohol sector NCPIC are well known and highly regarded.

(External stakeholder)

NCPIC has also sought to collaborate with external organisations on some activities. The postal interventions study is an example of this. According to NCPIC, the project officer for the study contacted every AOD service provider in NSW and some generalist services in rural/remote locations to obtain referrals to the study where on the ground services could not meet the needs of clients.

The NCPIC training sessions, the delivery of the National Cannabis Conference and NCPIC's promotion at other conferences were thought to be effective awareness raising devices amongst workforce sectors.

Staff felt that they have strengthened their understanding of NCPIC and ties with the organisation by attending NCPIC delivered training sessions and attendance at the National Cannabis Conference in Sydney. (External stakeholder)

The distribution of resources has also been a key mechanism through which awareness of NCPIC has been raised amongst workforce sectors. Between 2008 and 2009 NCPIC distributed a total of 654,564 resources to the following sectors:

- health (48% of resources distributed)
- community (31% of resources distributed)
- education (18% of resources distributed)
- criminal justice (3% of resources distributed).

Materials distributed included: the *What's the Deal* series, the *Fast Facts* series, clinician resources, posters (winning entries of the school competitions), and social marketing products.

NCPIC has undertaken a number of activities to raise the community profile of the Centre. The poster competition aimed to inform secondary schools and colleges across Australia of the services provided by NCPIC. A promotional flyer detailing the completion was distributed to 3,481 schools. The poster completion generated over 100 entries from 15 schools/colleges nationally in 2008 and 111 entries from 27 schools/colleges in 2009.

The short film completion was targeted at reaching young people at TAFE and University settings. In 2008 the short film completion generated 10 entries across five jurisdictions (NSW, Queensland, Tasmania, WA and Victoria) while 31 entries across six jurisdictions (NSW, Queensland, Tasmania, WA, Victoria and SA) were generated in 2009.

NCPIC have also distributed a number of resources aimed at the general public. The first Avant Card campaign took place in May 2008 and was used to launch the Centre to a young audience. 60,000 copies of the Avant Card were distributed at cafes, record shops and other outlets across the country.

The first 'cannabis and driving' Avant Card (U + cannabis + driving = An accident waiting to happen) was undertaken in January 2009. A total of 61,910 postcards were distributed to numerous venue types including advertising agencies, arts and culture, cafes and bars, festivals, regional hot spots, retail, tourism, and Universities. The 'card pick up rating' was classified as a 'medium mover'. Distribution comments indicate that the postcard performed best at student frequented venues.



The second 'cannabis and driving' resource ('Smoke and drive and you're as good as drunk') was launched in August 2009. In total 69,985 copies were distributed. This resource was classified as a 'fast to medium mover'. NCPIC have sought to gain a media presence.

One of the ways in which this has occurred is through the issuing of press releases. The media coverage achieved is demonstrated in Table 8 below.

Table 8 - NCPIC media coverage

Press Release	Radio	Online	Print	Television
Australian Suburbs Breeding Ground for the Nation's	6 radio programs	3 online features	8 print features	
Girls' Cannabis Use Catches Up, But Males Still the Heaviest Casualties	6 radio programs		17 print features	1 television program
GPs Expertly Positioned to Tackle Cannabis-Related Issues in the Community	6 radio programs		17 print features	1 television program
Comments regarding Malcolm Turnbull's cannabis use	7 radio programs	5 online features	12 print features	1 television program
Helping Someone with Problem Cannabis Use: Mental Health First Aid Guidelines	6 radio programs		3 print features	
Smoke and Drive and You're as Good as Drunk: Don't Dope and Drive	6 radio programs			
Media coverage for the NCPIC Cannabis Conference 2009	21 radio programs	1 online feature	1 print feature	1 television program
Total	58	9	58	4

5.4.2 Provide the Australian community with high quality, evidence based information

Overall, the materials and resources developed by NCPIC are regarded by the great majority of stakeholders consulted as high quality. The materials were regarded as balanced, evidence based, robust, well researched and supported, comprehensive, credible, accurate, relevant and up to date. One stakeholder commented that:

To date the resources we have accessed from NCPIC have been excellent. Our experience has been that all the resources are of a very high standard. We have particularly appreciated the format of presentation — concise, clear, evidence based information that can easily be incorporated into documents and briefings that we produce.



The high quality of materials was confirmed by the quality assessment. The quality assessment examined a number of NCPIC materials covering various publication types and format, and a range of topics and materials targeted at various audiences. The aim of the quality assessment was not to judge the materials in terms of content (ie academic rigour etc) but to get a sense of the design and construction of the materials.

The quality assessment indicated that the credibility and authority of NCPIC materials are clearly evident. For example:

- The NCPIC materials provide extensive statistics and research to support the assertions being made.
- The research methods for primary sources of information are described and the secondary sources of information are clearly referenced.
- An examination of the secondary sources of information referenced indicates that the materials are based on current and up to date research.
- The e-zines cover current cannabis related topics that are relevant for workforce sectors. For example, the Dec/Jan 2010 e-zine provides an extensive list of publications examining issues concerning cannabis that have been published in the previous month, commentary on recent cannabis related research, and an examination of recent cannabis-related stories that have been received media attention.
- The authors of materials (for example, in relation to the e-zines, bulletins, AIC bulletins, and research briefs) can be easily ascertained by the reader. For example, the bulletins identify the name of the author, their qualifications and their professional standing directly under the heading. This assists the reader to make an informed judgment about the credibility of the materials and the authority of the person responsible for the content.

Stakeholders have a high level of confidence when using or distributing NCPIC materials. Various examples have been provided by stakeholders of how they have used NCPIC materials to inform their activities or those of their organisations. Some examples include:

- Organisations displaying the materials on their premises to raise community awareness about cannabis issues.
- Treatment services distributing NCPIC materials (for example What's the Deal booklets) to supplement counselling sessions.
- State and Territory based drug and alcohol helplines distributing the print resources to clients.
- Organisations using NCPIC resources as evidence to inform organisational practices and policy directions. A law enforcement stakeholder in one jurisdiction indicated that the NCPIC research on cannabis potency has been used to advice and brief senior officials, shape policy approaches, and inform a community strategy in relation to this issue.
- A key informant from a clinical service within a correctional primary health care service in one jurisdiction reported that they use NCPIC tools to assess levels of dependence on cannabis among prison inmates.
- Teachers using the NCPIC materials as educational stimulus in their lessons.
- A child protection department circulating the resources to its front line child protection workers.

5.4.3 Establish national reach for the centre

The challenges of achieving national reach for NCPIC were acknowledged by those consulted. As demonstrated in Table 1 below, a number of key NCPIC activity areas, namely the Helpline, resource distribution and training initiatives, have achieved reasonable reach across the Australian States and Territories compared with overall population distribution.



Table 9 - NCPIC activity distribution

State/Territory	Helpline	Resource distribution	Training	Australia's population
New South Wales	45.9%	39.9%	42%	33%
Victoria	23.5%	15.8%	15%	25%
Queensland	15.3%	17.2%	17%	20%
South Australia	6.2%	10.2%	4%	7%
Western Australia	6.2%	5.2%	7%	10%
Australian Capital Territory	n/a	3.6%	6%	2%
Tasmania	2.3%	6.6%	5%	2%
Northern Territory	0.6%	1.5%	4%	1%

Source: NCPIC submission. Note: for resource dissemination percentages calculated from data provided by NCPIC.

Some qualitative reports from stakeholders also indicate that NCPIC has made efforts to achieve a national spread.

We did a rural health education show together and I know they have been doing some work with someone in the NT, and they work with Orygen in Victoria. So from what I can see, they have been making an effort to get a good geographical spread.

(External stakeholder)

This is supported by the proportion of workforce training workshops delivered in regional and rural areas, which accounts for over one third (37%).

Another stakeholder described the involvement they had with NCPIC in relation to the development of Indigenous resources. They commented:

I took them out bush to meet people and get involved in the local community.... They are making an effort to design initiatives to support different contexts. Where I took them was very remote.... This signals to me they are attempting to get a good reach and attempting to do work in rural and urban localities.

5.4.4 Establish NCPIC as the national reference point for cannabis related materials

Numerous stakeholders felt that NCPIC effectively provides a single reference point for cannabis related information. This was regarded as very beneficial in promoting ease of access to information for workers and community members. Comments from stakeholders included:

NCPIC is seen as a key driver for current and accurate cannabis related research – NCPIC are treated as the first point of contact for cannabis related information.

The perception is that NCPIC is a one stop shop for everything concerning cannabis. Our experience has been that we can access advice, information and resources.

People in the sector know they can go there to get the best information, they have provided a single access point to information on cannabis.

It has been extremely useful to have a clearly identified centre that AOD can relate to regarding all cannabis issues.



This single point of contact has assisted other agencies to promote NCPIC's work – for example, providing a link on their own website, and providing workers with NCPIC's contact details for any queries relating to cannabis.

5.4.5 Provide targeted information and support for those at risk

A few examples have been reported to demonstrate specific NCPIC activities aimed at providing information and support to at risk groups.

NCPIC has currently engaged Youth Off The Streets (an organisation in Sydney which works with very at risk young people) to develop a tailored version of the booklet 'What's the deal of quitting: a do-it-yourself guide to quitting cannabis'. This process draws on consultation with youth workers and targets at risk young people aged 14-24. It is intended that this tailored version will involve archetypes of four young people (from various socio demographic backgrounds, including an Arabic young person and an Indigenous young person) and their experience with cannabis use. It is envisioned that in the booklet two of these young people will be attempting to quit, one will be trying to reduce their use and will be considering quitting. The booklet will contain simpler language, illustrations and further harm minimisation tips.

NCPIC has recently developed a number of Indigenous specific materials. One informant commented that 'NCPIC have done well with Indigenous in the last six months, really ramped it up a lot'. Materials include clinical guidelines for use in Indigenous communities, Indigenous specific factsheets, the music competition, and the Indigenous artwork project, which involved consultations with Indigenous stakeholders and artists in various Indigenous communities developing the artwork themselves. An specific website (separate to the main NCPIC website) has been developed for some of NCPICs Indigenous specific initiatives, namely the factsheets and artwork project.

Some stakeholders felt that the music competition and artwork project were innovative responses that allowed for active involvement and a degree of Indigenous buy-in and ownership.

5.4.6 Effectively engage with cannabis users and their families

The Helpline is one of the key initiatives for engaging with cannabis users and their families. Nearly all of the Helpline clients interviewed provided positive feedback on their conversation with the Helpline staff, describing the staff as helpful, informative, empathetic, genuine, caring, knowledgeable and professional. The Helpline was attributed with providing clients with general information, referrals, advice and printed materials.

The lady was really terrific, couldn't have done much else. She referred us to the website and told us about the booklets we could download from there, she gave us names and phone numbers of other services in our area. This morning [my daughter] called the public hospital and made an appointment to see somebody. This is more than what she has done in five years. I am really pleased with the outcome, it has been really helpful and it feels like we are starting to make some progress.

I thought they were very helpful actually, they did everything they could, they really calmed me down and they talked me through it.

Since I have had contact with the helpline I have been able to go to other people, like my friends to get help and discuss my problems.

They are sympathetic, they don't necessarily talk about cannabis but listen to your problems, they try and understand the situation, asked me questions about my mental health and talked about that kind of thing.

Helpline clients also provided positive feedback in relation to other NCPIC resources. Clients thought the website seemed legitimate, was user friendly, easy to navigate, well designed and an effective means of disseminating information.



I thought the website was good, well designed – it is easy to use. It is a good way of disseminating information for someone like me.

I thought the website was good – it was user friendly, it was clear, easy. It seemed legitimate and credible. It prompted me to ring the Helpline.

I thought they were really fantastic. Wide range of information (on the website). Good, well researched information. Better than what I could ever have imagined... the information provided was high quality.

The website was simple, clear, easy to navigate – which is really saying something because I am not the most computer savvy person.

The 'What's the Deal on Quitting: A do it yourself guide to quitting cannabis' was described by one client as a helpful resource, which was easy to understand and involved good activities for individuals to complete.

I thought the booklet was really, really good – it was helpful, it was easy to understand. The tests and activities were good – it helped me to discuss my cannabis problems with others

Young people aged in their 20's who participated in a focus group also indicated that this resource contained useful strategies and tips, in particular the pros and cons list and the four D's of quitting (delay, distract, decatastrophise and distress). It was felt that this resource was useful for raising awareness of the ways in which cannabis dependence impacts on their lives (ie effects their friendships, physical fitness etc).

5.4.7 Contribute to the goals of the National Cannabis Strategy and the National Drug Strategy

The general perception among advisory committee members and external stakeholders is that NCPIC's activities are consistent with and aligned to the National Cannabis Strategy and the National Drug Strategy. According to one external stakeholder 'NCPIC fits well with the key strategic priorities and contributes to the goals of the NCS and the NDS'. It was felt that the NCPIC activities particularly support the priority areas of workforce development and increasing community understanding of cannabis. For example, one stakeholder commented that 'NCPIC has been a valuable contribution to the NDS goal around workforce development by providing practitioners with information and tools in their endeavours to reduce the use and harms of cannabis'.

5.5 Process

5.5.1 Process for the development of materials

A few reports were given of NCPIC collaborating with external organisations to inform the development of resources, for example, NCPIC networking with Indigenous stakeholders in the Northern Territory in relation to the development of Indigenous specific materials. This was seen as a beneficial process that strengthened the effectiveness of the materials developed. Positive feedback was provided by stakeholders in relation to NCPIC's work with Indigenous stakeholders and communities. Comments included:

They were willing to meet people and get involved in the local community. They were respectful, not tokenistic.

Willing to commit their time and energy, come out to remote places.

NCPIC take a really positive approach, not scare mongering but empowering.

They were really receptive, open to feedback... they listen to our staff and what we have to say.

Looking forward to working with them in the future.



Some of the NCPIC materials were focus tested to ensure the content and design were appropriate for the intended target groups. For example:

- The content, design, layout and images of the *What's the Deal Series* were tested with cannabis users and their families/concerned others before widespread distribution.
- The Clinicians Series was originally created by psychologists as part of a randomised controlled trials and their effectiveness was tested in a three month follow-up with those who attended the trainings. Minor changes were then made to the original series to make them more skills appropriate to AOD clinicians.
- The content and design of the young people's section of the NCPIC website was tested through consultations with State and Territory drug education officers and focus groups with eight school communities across four jurisdictions.
- A shortlist of taglines and images for the Cannabis and Driving poster were focus tested with external agencies and young people.

Advisory Committee members felt that the focus testing of materials enhanced their appropriateness and effectiveness.

5.6 Chapter Summary

A single focus centre

NCPIC provides a unique service approach through the delivery of a national initiative focused on a single substance. There was support for this approach by some of those consulted with due to the high prevalence of cannabis in Australia, the perception that cannabis is not as harmful as other drugs, the opportunity to engage with the more complex issues relating to cannabis use and the potential to attract clients who may not access generalist drug and alcohol services.

Efficiency

 NCPIC has undertaken a high volume of activity across a range of output areas. NCPIC have completed the great majority of activities required, within a limited timeframe. The Centre is considered to be highly efficient and well managed.

NCPIC activities

- The materials developed by NCPIC were seen to meet needs and respond to existing gaps in the sector. The materials were thought to be particularly important given the inaccuracy and misinformation of cannabis information in the public sphere.
- NCPIC materials are regarded as high quality and stakeholders indicate they have a high level of confidence when using of distributing the materials.
- Some informants thought it appropriate for NCPIC to undertake research activities which inform evidence based treatments, respond to the specific needs of the sector and support prevention/early intervention approaches. As the national centre for cannabis, NCPIC was seen to be well placed to provide leadership in these areas.
- The website was seen as particularly appropriate for supplying information and materials to support workforce development and engaging with young people.
- The Helpline provides a number of functions and is accessed for a variety of reasons by a range of audiences (those concerned with their own cannabis use, those concerned for a family member and members of the community seeking general information).
- The training was seen to be an appropriate activity for increasing the capacity of the workforce and is highly regarded by stakeholders.



Awareness and profile

- Awareness of NCPIC appears to be greatest amongst drug and alcohol peaks and service providers. Among those who have awareness, NCPIC seems to have a good reputation.
- Numerous stakeholders felt that NCPIC effectively provides a single access point for cannabis related information.

Community engagement

- Positive feedback was provided by clients on their experiences with the NCPIC Helpline.
- A few examples were given to demonstrate activities aimed at providing information and support to at risk groups (at risk young people and Indigenous communities).
- Collaborating with external organisations to inform the development of resources was seen to be a beneficial process.
- Focus testing materials with the target group was seen to enhance their appropriateness and effectiveness.

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