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Rekindling the Spirit: preliminary database analyses

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REKINDLING THE SPIRIT: PRELIMINARY DATABASE ANALYSES

Early report summary by Dr Sallie Newell, Evaluator (February 2008)

FOR ALL REKINDLING THE SPIRIT (RTS) CLIENTS

TOTAL NUMBERS OF CLIENTS

As shown in the table below, based on the data in the RTS database for the period July 2004 to November 2007:

- 240 male and 96 female clients registered with RTS and received client numbers. However, a further 201 named men and 85 women received some services without formal casework registration with RTS, predominantly before 2007 – mainly attending groups, counselling sessions or camps.
- 68% of male and 35% of female clients were referred by DCS – at some point in their relationship with RTS.
- 26% of male and 41% of female clients had come to RTS only as self-referrals.
- 6% of male and 24% of female clients were referred to RTS by other agencies (eg: Department of Community Services, Mental Health agencies, Drug & Alcohol agencies, Sexual Assault agencies, Family Support agencies).

Client Referral Source	Male Clients		Female Clients	
	Numbers	%	Numbers	%
Ever referred by DCS	164	68%	34	35%
Self-referred only	62	26%	39	41%
Referred by other agencies only	14	6%	23	24%
TOTAL registered RTS clients	240		96	
Not formally registered with RTS	201		85	
TOTAL accessing RTS services	441		181	

Note: 2006 Census data indicate about 3680 persons (all ages) identifying as Aboriginal &/or Torres Strait Islander in the Lismore, Ballina, Casino, Kyogle and Byron Statistical Local Areas. However, local knowledge and experience indicate that the actual number of Aboriginal &/or Torres Strait Islander peoples is likely to be at least double any Census-based estimate.

FOR CLIENTS EVER REFERRED BY THE DEPARTMENT OF CORRECTIVE SERVICES

ISSUES TO CONSIDER IN REVIEWING THESE PRELIMINARY ANALYSES

- The figures presented below have been extracted from the RTS client database – as at the end of November 2007.
- The figures presented below represent information for clients referred to RTS by the Department of Corrective Services (DCS) between July 2004 and November 2007. Within this period, RTS staff also supported 424 other men and women (see table above for further details).
- Some of the DCS-referred clients discussed in the figures presented below had pre-established relationships with RTS – through previous self-referrals &/or referrals from other agencies.
- The figures presented below likely underestimate the actual number of contacts with RTS for many clients – due to limitations in how some client contacts are currently recorded, especially the more informal ones and those occurring outside their formal client registration periods.
- Dr Newell is also working with RTS staff to comprehensively review and enhance the overall RTS data management and evaluation processes – to overcome the already-identified limitations and to strengthen future evaluations of RTS services.

NUMBERS OF DCS-REFERRED CLIENTS

As shown in the table below, based on the data in the RTS database:

- The DCS has made a total of 189 male referrals and 35 female referrals to RTS between July 2004 and November 2007.
- These referrals involved 164 male DCS-referred clients – representing 68% of all men registered as RTS clients and 37% of all men accessing RTS services.
- These referrals involved 34 female DCS-referred clients – representing 35% of all women registered as RTS clients and 19% of all women accessing RTS services.
- 38 male and 9 female DCS-referred clients currently have active RTS files – representing about a quarter of clients ever referred by the DCS.
- 27 male and 5 female DCS-referred clients had a pre-existing relationship with RTS – representing 15-16% of the clients ever referred by the DCS.
- 23 male and 1 female clients had more than one DCS referral – representing 14% of the male and 3% of the female clients ever referred by the DCS.
- 51 male and 10 female clients continued attending RTS (as self-referrals) after the end of their DCS referral period – representing about 30% of the clients ever referred by the DCS.

Indicator		Male Clients		Female Clients	
		Numbers	%	Numbers	%
ALL DCS referrals, by date	July 04 – June 05	54	29% of ALL referrals	4	11% of ALL referrals
	July 05 – June 06	62	33% of ALL referrals	11	31% of ALL referrals
	July 06 – June 07	59	31% of ALL referrals	15	43% of ALL referrals
	July – Nov 07	14	7% of ALL referrals	5	14% of ALL referrals
	TOTAL	189		35	
FIRST DCS referrals, by date	July 04 – June 05	53	32% of FIRST referrals	4	12% of FIRST referrals
	July 05 – June 06	53	32% of FIRST referrals	11	32% of FIRST referrals
	July 06 – June 07	45	27% of FIRST referrals	15	44% of FIRST referrals
	July – Nov 07	13	8% of FIRST referrals	4	12% of FIRST referrals
	TOTAL	164		34	
DCS-referred CURRENT CLIENTS, by date of first referral	July 04 – June 05	5	9% of 04/05 clients	0	0% of 04/05 clients
	July 05 – June 06	5	9% of 05/06 clients	1	9% of 05/06 clients
	July 06 – June 07	16	36% of 06/07 clients	4	27% of 06/07 clients
	July – Nov 07	12	92% of Jul07+ clients	4	100% of Jul07+ clients
	TOTAL	38	23% of ALL clients	9	26% of ALL clients
Nature of DCS-referred clients' PRE-EXISTING RELATIONSHIP with RTS	None	137	84% of ALL clients	29	85% of ALL clients
	Self-referred	24	15% of ALL clients	4	12% of ALL clients
	Referred by other agency	3	2% of ALL clients	1	3% of ALL clients
	TOTAL with any	27	16% of ALL clients	5	15% of ALL clients
Clients with MULTIPLE DCS referrals	23	14% of ALL clients	1	3% of ALL clients	
Clients CONTINUING as self-referrals with RTS after the DCS referral period	51	31% of ALL clients	10	29% of ALL clients	

MAIN RTS SERVICES RECEIVED BY DCS-REFERRED CLIENTS

As shown in the table below, DCS-referred clients received a documented wide range of support services from RTS:

- 84% of male and 50% of female clients attended at least one group session – with attendees averaging 6-8 group sessions each.
- 64% of male and 71% of female clients attended at least one one-to-one counselling session – with attendees averaging 5-9 counselling sessions each.
- 36% of male and 21% of female clients attended at least one camp.
- 22% of male and 9% of female clients attended at least one activity / program (often using the gym or attending Koori Alcoholics Anonymous).
- 37% of male and 24% of female clients received help with transport as their primary service type (many to attend Koori Alcoholics Anonymous) – with recipients averaging 3-4 PRIMARY transports each.
- 71% of male and 65% of female clients received help with transport as a secondary service type – with recipients averaging 6-10 SECONDARY transports each.

RTS Service Type		Male Clients (n=164)	Female Clients (n=34)
Group sessions	Number of clients attending at least one	137 (84%)	17 (50%)
	Total number of attendances	1136	99
	Number attended, per client	0 – 46	0 – 29
	Mean number attended, per client	6.9 (all clients) 8.3 (attendees only)	2.9 (all clients) 5.8 (attendees only)
One-to-One counselling sessions	Number of clients attending at least one	105 (64%)	24 (71%)
	Total number of attendances	577	207
	Number attended, per client	0 – 31	0 – 48
	Mean number attended, per client	3.5 (all clients) 5.5 (attendees only)	6.1 (all clients) 8.6 (attendees only)
Camp	Number of clients attending at least one	59 (36%)	7 (21%)
	Total number of attendances	101	9
	Number attended, per client	0 – 4	0 – 3
	Mean number attended, per client	0.6 (all clients) 1.7 (attendees only)	0.2 (all clients) 1.3 (attendees only)
Activity / Program	Number of clients attending at least one	36 (22%)	3 (9%)
	Total number of attendances	335	3
	Number attended, per client	0 – 58	0 – 1
	Mean number attended, per client	2.0 (all clients) 9.3 (attendees only)	0.1 (all clients) 1.0 (attendees only)
Transport – as PRIMARY service type	Number of clients transported at least once	60 (37%)	8 (24%)
	Total number of PRIMARY transports	217	31
	Number of PRIMARY transports, per client	0 – 42	0 – 11
	Mean number of PRIMARY transports, per client	1.3 (all clients) 3.6 (attendees only)	0.9 (all clients) 3.9 (attendees only)
Transport – as SECONDARY service type	Number of clients transported at least once	117 (71%)	22 (65%)
	Total number of SECONDARY transports	1148	136
	Number of SECONDARY transports, per client	0 – 63	0 – 46
	Mean number of SECONDARY transports, per client	7.0 (all clients) 9.8 (attendees only)	4.0 (all clients) 6.2 (attendees only)

OTHER RTS SERVICES RECEIVED BY DCS-REFERRED CLIENTS

Male DCS-referred clients also received a documented total of 413 other primary services and 285 other secondary services from RTS staff:

- **Intake assessments** – 180 as the primary service type and 13 as a secondary service.
- **Food vouchers** – 55 as the primary service type and 112 as a secondary service.
- **Advocacy** – 50 as the primary service type and 90 as a secondary service.
- **Home visits** – 20 as the primary service type and 0 as a secondary service.
- **Telephone follow-ups** – 16 as the primary service type and 0 as a secondary service.
- **Use of RTS facilities** (eg: phone) – 12 as the primary service type and 13 as a secondary service.
- **Family counselling** – 12 as the primary service type and 2 as a secondary service.
- **Referrals** – 5 as the primary service type and 13 as a secondary service.
- **Other miscellaneous supports** (eg: references, help with travel expenses, help with completing forms and applications, help with accommodation) – 63 as the primary service type and 42 as a secondary service.

Female DCS-referred clients also received a documented total of 161 other primary services and 105 other secondary services from RTS staff:

- **Intake assessments** – 36 as the primary service type and 2 as a secondary service.
- **Telephone follow-ups** – 30 as the primary service type and 2 as a secondary service.
- **Advocacy** – 18 as the primary service type and 27 as a secondary service.
- **Food vouchers** – 12 as the primary service type and 28 as a secondary service.
- **Home visits** – 8 as the primary service type and 1 as a secondary service.
- **Family counselling** – 7 as the primary service type and 5 as a secondary service.
- **Use of RTS facilities** (eg: phone) – 4 as the primary service type and 2 as a secondary service.
- **Referrals** – 3 as the primary service type and 12 as a secondary service.
- **Other miscellaneous supports** (eg: references, help with travel expenses, help with completing forms and applications, help with accommodation, child care) – 43 as the primary service type and 26 as a secondary service.

IMPACT OF RTS SERVICES ON DCS-REFERRED CLIENTS

The impact of attending RTS on DCS-referred clients' physical and emotional wellbeing and their behaviour, and on their family members, is not currently systematically, prospectively assessed and recorded in the RTS database – a limitation that will be explored in the upcoming review of RTS data management and evaluation processes.

To gain an interim understanding, RTS staff worked with the Evaluator to retrospectively review each DCS-referred client's perceived progress in five key areas – their overall self-awareness / self-determination and their drinking, drug-taking, violence / anger management and driving offences. Each client received a rating for each of the key areas relevant to their needs:

- 0 = no perceived progress
- 1 = a little perceived progress
- 2 = some perceived progress
- 3 = quite a bit of perceived progress
- 4 = lots of perceived progress

This was done for clients registered before September 2007 – to allow time for a progress assessment to be made.

As shown in the table below:

- About 75% of male and 50% of female DCS-referred clients were perceived to have made at least a little progress on each of the key areas.
- The highest levels of perceived progress were seen in clients' drinking and self-awareness/self-determination – with about a fifth of both male and female DCS-referred clients perceived to have made quite a bit/lots of progress.
- Perceived progress levels were consistently higher for both male and female DCS-referred clients having attended group sessions (regardless of which other services they received) – across all five key areas.
- Little progress was perceived for either male or female DCS-referred clients not attending any group sessions (regardless of which other services they received) – across all five key areas.

Perceived Progress Level		Male Clients	Female Clients
Self-awareness / Self-determination (Male: n = 146, Female: n = 31)	Rated 0 (None)	31 (21%)	15 (48%)
	Rated 1-2 (A little / Some)	88 (60%)	8 (26%)
	Rated 3-4 (Quite a bit / Lots)	27 (18%)	8 (26%)
	Mean rating	1.40 (overall) 0.61 (0 groups attended) 1.54 (1+ groups attended) 1.89 (5+ groups attended)	1.29 (overall) 0.63 (0 groups attended) 1.91 (1+ groups attended)
Drinking (Male: n = 144, Female: n = 30)	Rated 0 (None)	31 (22%)	16 (53%)
	Rated 1-2 (A little / Some)	83 (58%)	8 (27%)
	Rated 3-4 (Quite a bit / Lots)	30 (21%)	6 (20%)
	Mean rating	1.55 (overall) 0.57 (0 groups attended) 1.74 (1+ groups attended) 2.16 (5+ groups attended)	1.08 (overall) 0.25 (0 groups attended) 1.81 (1+ groups attended)
Drug-taking (Male: n = 135, Female: n = 31)	Rated 0 (None)	31 (23%)	16 (52%)
	Rated 1-2 (A little / Some)	88 (65%)	11 (35%)
	Rated 3-4 (Quite a bit / Lots)	16 (12%)	4 (13%)
	Mean rating	1.25 (overall) 0.41 (0 groups attended) 1.42 (1+ groups attended) 1.68 (5+ groups attended)	0.89 (overall) 0.30 (0 groups attended) 1.44 (1+ groups attended)
Violence / Anger Management (Male: n = 143, Female: n = 30)	Rated 0 (None)	31 (22%)	15 (50%)
	Rated 1-2 (A little / Some)	96 (67%)	13 (43%)
	Rated 3-4 (Quite a bit / Lots)	16 (11%)	2 (7%)
	Mean rating	1.22 (overall) 0.39 (0 groups attended) 1.38 (1+ groups attended) 1.67 (5+ groups attended)	0.92 (overall) 0.50 (0 groups attended) 1.33 (1+ groups attended)
Driving Offences (Male: n = 95, Female: n = 21)	Rated 0 (None)	30 (32%)	16 (76%)
	Rated 1-2 (A little / Some)	57 (60%)	4 (19%)
	Rated 3-4 (Quite a bit / Lots)	8 (8%)	1 (5%)
	Mean rating	1.01 (overall) 0.30 (0 groups attended) 1.20 (1+ groups attended) 1.62 (5+ groups attended)	0.43 (overall) 0.15 (0 groups attended) 0.88 (1+ groups attended)

POTENTIAL CIRCLE OF INFLUENCE OF DCS-REFERRED CLIENTS

Any impact attending RTS has on the DCS-referred clients is likely to have a knock-on impact on the lives of those clients' immediate and extended family members – providing an opportunity to break, or at least reduce, the ongoing and inter-generational cycle of violence and substance abuse experienced within many of these families.

As a preliminary indication of this potential, the number of RTS clients' partners (or ex-partners) and children named in the RTS database was reviewed. As shown in the table below:

- 47% of male and 56% of female DCS-referred clients named a partner or ex-partner.
- 33% of male and 56% of female DCS-referred clients named at least one child living with them – with a total of 141 children living with male clients and 51 children living with female clients.
- 27% of male and 50% of female DCS-referred clients named at least one child living in the care of others – with a total of 98 children of male clients and 30 children of female clients currently living with others.

Immediate Family Members Named in the RTS Database		Male Clients (n=164)		Female Clients (n=34)	
		Numbers	%	Numbers	%
Partners or ex-partners		77	47%	19	56%
Children – in clients' own care	0	110	67%	15	44%
	1-2	33	20%	12	35%
	3-4	14	9%	5	15%
	5+	7	4%	2	6%
	TOTAL with any	54	33%	19	56%
	TOTAL children	141		51	
Children – in others' care	0	120	73%	17	50%
	1-2	33	20%	14	41%
	3-4	8	5%	3	9%
	5+	3	2%	0	0%
	TOTAL with any	44	27%	17	50%
	TOTAL children	98		30	

ABOUT THE EVALUATOR

Dr Sallie Newell was appointed as Rekindling The Spirit's evaluator in late 2007. She has an honours degree in Psychology, a PhD in behavioural science and over 12 years postgraduate research and evaluation experience across a wide range of fields. Dr Newell has overseen the preparation, implementation and reporting of many project planning and evaluation consultancies for academic, government and community organisations. She uses a capacity-building approach to enhance organisations' systems, skills and confidence in using research evidence and practical, commonsense evaluation techniques – to better plan, develop and continuously monitor & improve their services, ensuring that internal policy-driven measures are met.

Dr Newell's main research interest is the psychosocial determinants of health and wellbeing across the lifespan, with a particular emphasis on the crucial role of early childhood experiences and relationships on individuals' developmental, educational, psychosocial, health and wellbeing outcomes throughout their lives – with positive childhoods ultimately leading to improved participation and success within the education system, the workforce, personal relationships and the community.