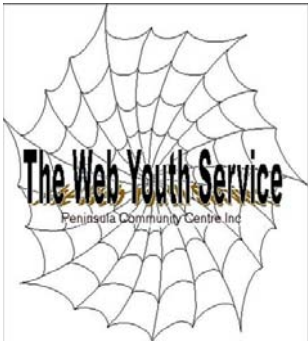


**The Ripple Effect**  
**An Evaluation Report**  
**The Web ATS Project**



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Community  
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# The Ripple Effect

## An Evaluation Report of the Web ATS Project

### Evaluation Highlights

The Web Youth Service Amphetamine Type Stimulants project was highly successful. All funded products were developed and delivered on time and within budget. All project objectives were met. All of the intended outcomes of the project were achieved.

The project managed to walk a fine line between early intervention/ and prevention activity while maintaining the necessary level of focus on ATS use, But because of the service delivery model of the Web and the nature of its client group, the strong orientation in the project was towards prevention/early intervention. This was highly appropriate.

Apart from meeting all objectives, the ATS project produced a ripple effect and hence achieved some unintended but highly positive outcomes. Included among the ripples were:

- The training component of the project meant that web staff are seen by other stakeholders as an effective training broker
- The project started conversations about ATS – among workers and web clients, among workers and clients of other agencies. It caused substantial communication at the Cottage, between residents who were also Web clients.
- The project also prompted conversations between staff about policy issues and security systems; about worker and client safety; and about community views about the service.
- A policy spins off - staff from other agencies have expressed the desire to receive copies of the Web ATS policies.

The project produced some excellent and long lasting educational material – for example, the mural.

Most importantly, the project resulted in young people indicating that their behavioural intent was not to use ATS. This is a significant outcome for a minimally funded project.



## Table of Contents

Evaluation Highlights	Page 2
Acknowledgements	Page 3
Introduction	Page 4
Context, Aims and Objectives of Project	Page 4
Methodology	Page 5
Findings	Page 6
Recommendations	Page 15
Appendices	Page 16

## Acknowledgements

The evaluation of every project is an exercise that requires a great deal of time and input from a variety of people. Often the vital data is contained in people's minds and hearts rather than in formal project records. Time and thought and perspective have been provided with good grace and enthusiasm through this evaluation process by:

Aidan Devine and Sandy King – Web Youth Service. Sandy King deserves special acknowledgement. She took on the role of Web AOD worker half way through the project, but through her efforts the project has been successfully completed.

Veronica McKibbin – former AOD worker Web Youth Service

Anda Patrapsch - artist

Kimberley Williams - Manager, The Cottage

Holly Egan – Family Support and Outreach Worker

Dr Keith Evershed and Sr Helen Tizard - Web Youth Service clinical service providers

Young people including Brooke, Mikey, Matt, Kirra, Jake, and Adam in a focus group and a number of others who provided one-on-one input in a more ad hoc way.- *whatcha doin' here...?*

The mural depicted in the photos throughout this report was painted by Anda Patrapsch with input from the young people at the Web Youth Service. The line drawings in the report were done by Merri Collier.

The evaluator thanks all of these people for their contribution to this report and to the Web ATS project in general.

Note all direct quotes are written in *italics* throughout the report. Exclamation marks are not used.

# The Ripple Effect

## An Evaluation Report of the Web ATS Project

### Introduction

This report evaluates the Amphetamine Type Stimulants [ATS] Project conducted by the Web Youth Service in 2008/09 with funding from the Amphetamine-Type Stimulants Grants Program within the Commonwealth Department of Health and Aging. It documents the findings and recommendations of an external program evaluator, Grahame Collier from T Issues Consulting. Grahame is an experienced evaluator, a member of the Australasian Evaluation Society and he has a long history working in public health. Further information about the evaluator can be found at [www.tissues.com.au](http://www.tissues.com.au).

The purpose of this report is to satisfy the requirements of the funding body concerning the extent to which the project has achieved its objectives. Furthermore, and perhaps more importantly, it is to provide evaluative information to the staff of the Web Youth Service and other stakeholders about the impact of the project and some suggestions for future activity in this area. The nature of the evaluation is both summative – it reviews the extent to which objectives have been achieved - and formative, it provides some recommendations for future activity.

### Context, Aims and Objectives of Project

The Web Youth Service has provided a drop in centre for young people to access mainstream services and seek welfare help since 1989. In order to do this the service has:

- provided appropriately trained staff to meet the needs of thousands of young people
- maintained resources such as an eight seat minivan that is used to transport young people for outings, and computers with internet access for staff and clients
- provided a well equipped facility with play stations, Daytona machines, computer games, pool tables an indoor sporting arena on occasions and much more to make it youth friendly and welcoming. This has enhanced the capacity of the service to access young people
- provided a range of clinical, counselling, recreational and support services for the young people of the area for many years.

In particular, the Web Alcohol & Other Drugs Project (Web AOD) provides counselling to adolescents aged between 12 to 18 years who experience problems due to the misuse of alcohol and other drugs. WEB AOD provides AOD education, early intervention education and an assessment service in a local youth facility. It supports drug education and counselling in two local high schools, located within the Central Coast region of NSW, specifically in the areas of Woy Woy, Umina Beach and Ettalong. Currently 2502 young people aged between 12 and 17 years reside in the Peninsula district, which are the areas bordered by Umina Beach, Woy Woy, Blackwell and Booker Bay (Gosford City Council from the Australian Bureau of Statistics). The WEB AOD Project provides the only youth specific early intervention AOD counselling and education in the Peninsula district of the Central Coast.

The Amphetamine Type Stimulants [ATS] Project was conducted during the 2008/09 year and had the following objectives:

- 1) Development of policies and procedures within the youth centre regarding how to best manage clients using Amphetamine Type Stimulants.
- 2) Undertake a service review and training specifically in issues surrounding ATS use to enable workers to better manage challenging behaviours, provide support and case management.
- 3) Promotion of the service specifically to users of ATS
- 4) Attract and retain ATS users through minor capital works focussing on improving safety.

The following describes the drivers for the project:

- Increased use of ATS across the Australian community. [for Central Coast data, see below]
- The need to grow the capacity of allied health professionals and other stakeholders beyond AOD counsellors, about the nature and use of, and preventive approaches for ATS.
- The need to put in place management policies for dealing with ATS clients into the Web's policy mix.
- The need to improve safety and security functions at the Web, because of the risk of assault from people using ATS.

## Methodology

A range of mechanisms were undertaken to collect the data upon which the findings for this report are based. These were:

1. Desk review of documentation that provides evidence of the effectiveness and efficiency of the project. This includes:

- Policies and procedures developed
- Reports on training delivered under the project
- Media or other publicly available documentation about the project
- Correspondence from other agencies or stakeholders about the project
- Progress reports to the funding body and other reports developed about the project
- Products of the project, including signage, infrastructure, print material, artwork etc.
- Any other material deemed relevant.

2. Face-to-face interviews with key informants as follows – note two interviews were conducted on the telephone as indicated:

- The Project Manager – Sandy King and the Web Youth Service Manager – Aidan Devine.
- Six one-on-one key informant interviews with the following people.
  - Veronica McKibbin – former AOD worker Web Youth Service. Phone interview
  - Anda Patrapsch - artist
  - Kimberley Williams - Manager, The Cottage
  - Holly Egan – Family Support and Outreach Worker. Phone interview
  - Dr Keith Evershed and Sr Helen Tizard - Web Youth Service clinical service providers
- A focus group of young people who access the service – six young people
- Ad hoc discussion with drop-in Web clients as they could occur.

3. A brief review of the statistics available on the use of ATS in Australia and on the Central Coast of NSW.

### *Collating, analysing and reporting on the data*

All data obtained was collated and analysed against the relevant project objectives and more broadly. Through this means a picture about the extent to which the objective has been met has been drawn together and this forms the basis of this report. The report structure provides Findings, Highlights and some brief Recommendations.

## Findings

The following findings are drawn from the data generated in the evaluation process.

### **Finding 1. *There is a need for an ATS program for young people in the area serviced by the Web.***

According to data from the 2004 National Drug Strategy Household Survey 29.3 % of young people aged 14-19 had used an illicit drug, and 21.3 % had used in the previous twelve months. Statistics on the prevalence of ATS use in young people (14 – 19 range between 6.6% and 8% (National Drug Strategy Household Survey, 2004). Anecdotally a much higher percentage of young people report using amphetamines type stimulants than are currently presenting for counselling

While no specific data is available for those on the peninsula or for clients of the Web, ATS is certainly out there. The following quotes from both adults and young people support this finding

*In clinical consultations we hear about people using speed.* [key informant].

*Drugs are a big deal - alcohol, marijuana, XTC – speed, gas – pure speed, ice and cocaine* [young person]

*Yes we know it is out there* [reference to ATS] *but we are not sure how much* [key informant.

*Not with Web clients, I don't think – but yes with others, especially 19 to 23 year olds* [key informant].

These figures and this information highlight the need for early intervention and education about the health and mental health risks of using amphetamine type substances.

### **Finding 2. *The ATS Project met all of its stated objectives to a high degree***

It is noted that the Web Youth Service has provided excellent progress reports to the funding body about activity in this project. These provide extensive detail about the manner in which the objectives have been met. A summary is provided below.

Objective 1. Development of policies and procedures within the youth centre regarding how to best manage clients using Amphetamine Type Stimulants

The Web Youth Service has developed new procedures for responding to any AOD affected clients with particular reference to psycho-stimulant users. These are:

*Procedures for Management of Amphetamine Type Stimulants Policy – sighted*

*Procedures for Management of High Levels of Intoxication – sighted*

In the development of these policies the following steps were undertaken:

- Review of current Web policy
- Review of treatment and intervention guides from other services and nationally
- Discussion with external colleagues and web staff about policy needs and issues
- Adaptation of related Web policy documents where necessary due to incorporating ATS issues. For example the document Orientation to the Web AOD Project, now incorporates ATS and ATS issues.
- Review of current policy to ensure it covers any issue that might be raised by ATS, for example:  
*Management plan of acute behavioural disturbances –AOD.*

In general, feedback from the Web Coordinator made the point that policy is only as good as the extent to which professional development and performance review occurs to bring it to the attention of all staff. There is no point in having a policy if it sits on a shelf. At the Web, staff do work hard on turning policy into action. Staff are involved in role plays on 'what would you do if... ' as part of staff meetings etc.

Note new policy documents have been made available to other services by the Web staff.

Objective met in full.

Objective 2. Undertake a service review and training specifically in issues surrounding ATS use to enable workers to better manage challenging behaviours, provide support and case management.

A range of highly effective training has been developed and conducted as a part of this project. All training has been based on needs assessment carried out with Web staff and staff in other stakeholder agencies. The training schedule for increasing knowledge, response and outcomes for AOD use, specifically ATS use is as follows:

***Working with Young People with Challenging Behaviours*** (delivered 02/10/2008 by Phil Nunn P&P Training and Consultancy). This program explored challenging behaviours exhibited by young people and provided a range of strategies for assessing and managing these behaviours. A specific section of the program focused on ATS use and its effects. Anecdotal data from key informants who attended was that the training was very useful, but no hard evaluation data is available.

**Rock and Water Training** (24, 25, & 26 October 2008). This training was conducted out of the University of Newcastle and was presented by Brian Haynes. It is a training program about working with boys and young men about challenging behaviour. Support was provided through the ATS grant for Web staff and those from related local agencies to attend this training. Anecdotal evidence indicated that this was highly valuable but no evaluation data is available.

In regard to the Rock and Water training completed in October 2008, a 208 page Training Manual has been provided for the trainers and is a useful document

Counselling Skills [6 & 7 April 2009] - **Random Acts of Counselling'** was attended by 28 staff representing 16 services on the Central Coast. This workshop was developed and delivered by Phil Nunn. The course provided workers with basic counselling skills, varying ways of engaging youth and provided information about drug use and effects – including ATS use. Workers undertook many tasks in an experiential learning mode. A comprehensive set of training notes and activity sheets are available.

Objective met but only limited evaluation of training undertaken.

Objective 3. Promotion of the service specifically to users of ATS

This objective was met to a level that was appropriate. The findings, 3 and 4 below, shed some light on why this is the case. The nature of the Web service model is such that direct marketing to users of ATS would almost certainly be counter productive. Certainly many of them would be older than the maximum age for Web clients, and some might be on the margins of the core target group for the Service, hence direct marketing is not appropriate.

It is of note that there have been very few referrals to the AOD worker for ATS related issues. In contrast though here was a high number of casual contacts with young people and/or caregivers requiring information on ATS. This is because the ATS program is preventive in nature. *Early intervention is the key and the strength of the work* [Key informant].

A number of key informants indicated that there does need to be more services offered to the people, especially young men in the 19 to 23 age bracket about ATS issues.

Objective met to the relevant level.

Objective 4. Attract and retain ATS users through a minor capital works focussing on improving safety.

Advice has been provided to the funding body in the May 2009 Progress Report that indicates that this objective has been fully met. Lights and security cameras have been installed and walkie talkers are available.

Almost all key informants and the young people consulted provided positive feedback about this new infrastructure, *I do feel much safer*, said one. *Even my mum thinks it is good*, said another Web client.

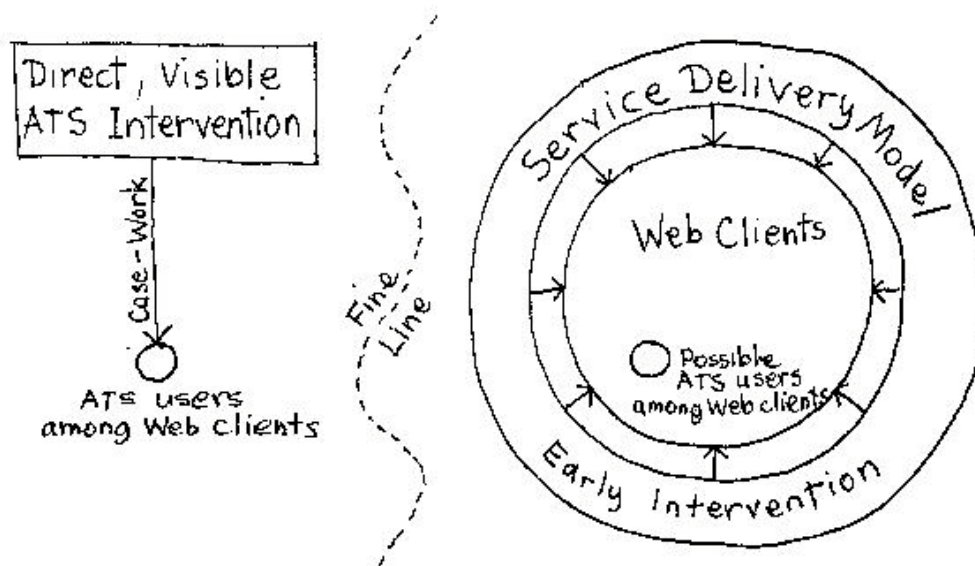
In a wonderfully telling quote one key informant said: *It is so beyond vital for the Web to have good policy and safety infrastructure.*

It was also noted that: *Staff are willing to go the extra mile when they feel safe; they will ask the challenging question and get more involved with kids* [key informant].

There were two negative comments about security issues. One from a key informant about the location of the duress button: *the duress button does seem a long way away*. The other from a young person who did not like the directive by Web staff that clients should use the outside area closer to the centre now that the security lights are in place. They are encouraged not to congregate near the road in the evenings. This comment seemed to be more about the issue of 'being told what to do' than about the lights themselves.

### **Finding 3. The ATS project has successfully walked 'a fine line' in the mix of services provided by the Web for its clients**

Once it had received funding for this project the Web was forced to look at how it integrates ATS work into the mix of services and education directed at its client group, as well as how and whether it took on an enhanced leadership role across other agencies – through brokering training. There is a fine line between a treatment and counselling service/project for ATS users, and an early intervention process for possible users and their peers.



The issues that had to be considered by Web staff included:

- Making the Web more ATS user friendly and a conduit or referral point, rather than necessarily a direct service provider to people who use ATS.



- Getting referral pathways sorted and establishing relationships with AOD treatment services.
- Working with key stakeholders – for example The Cottage about ATS issues.
- Maximising safety systems – policy and infrastructure.
- Determining ‘when is enough information too much – and planning in detail the early intervention approaches.
- Dealing with diverse attitudes and frameworks about ATS and the nature of the Web

The AOD worker had to walk the fine line between overtly targeting ATS users, or only running early intervention.

Most key informants said that the Web walked this line very well and that they should not have marketed the project to ATS users in an overt way. The following quotes exemplify this view:

*We rarely see kids off their faces here – not much evidence of ATS use among those who come to the Web.*

*In clinical consultations, if we hear about drug use we’ll strongly refer the young person to talk with the AOD worker.*

*Walking the fine line within ATS project was stressful [Key Informant] I am not sure that the Web should be marketing itself to ATS users.*

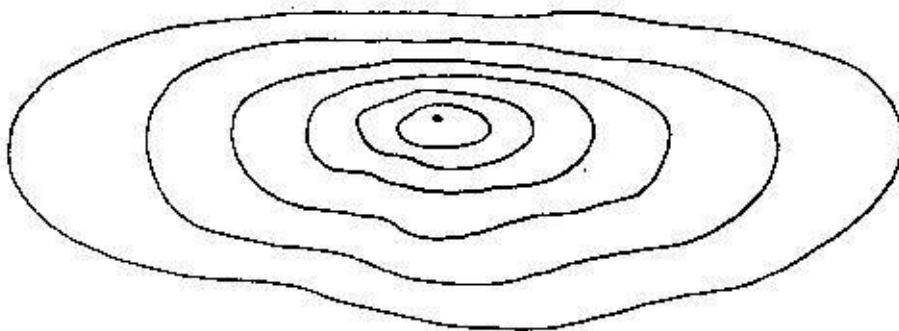
One key informant was in no doubt: *This project is about early intervention.....prevention.*

All key informants were a little worried at the outset of the project that overt ATS activity would skew the Web in an unfortunate direction and place the broader activities of the service at risk. This did not occur.

When taken overall Web staff straddled the line in exemplary fashion.

**Finding 4. *There has been a noticeable ripple effect as a result of the ATS project***

Apart from walking the fine line and meeting all of its objectives well, this project has produced a ripple effect resulting in a number of other important outcomes. In some ways these are almost as important as the direct outcomes achieved by meeting the objectives.



The significant ripples were:

- The Web AOD worker indicated that she had learnt *different ways of working with kids through this project*. In particular these related to the use of client focused approaches to developing the mural and the information boards and the poster. These were processes that really focused on helping client understand ATS and the impact of their use; but in a softer more involving way than by other face-to-face alternative approaches.
- *The project has driven a dialogue within the Cottage about ATS* [key informant]. This quote is an example of the way in which this project has caused a ripple effect. Some residents at the Cottage – a youth refuge in Woy Woy and a significant stakeholder of the Web- are also Web clients. Because the issue of ATS and early intervention was being discussed at the youth service, it opened communication elsewhere.
- The ATS project also opened dialogue among workers:: *... because of the stuff about speed in the training, we are talking about it more among staff in my agency.*
- Young people felt the ripples too. *The Web helps people who don't have a safe home.....* was a key theme emerging from the kids who use the service. In some cases this was followed up with a solid vote of confidence about whether they would bring a friend to the Web who was using ATS; for example: *If I thought it [ATS] was really f---ing them up I would tell them to come here.*
- There were ripples for the clinicians too; *I am just a bit more watchful for ATS.*[ Key informant]
- The development process used to plan and paint the mural was a ripple too – see below.

#### **Finding 5. High quality educational materials have been developed**

A feature of the project was the development of some high quality and highly effective education materials to carry the ATS prevention messages forward with the young clients of the Web. Both the resources themselves and the processes used to develop them are of the highest quality. The three project resources were:

##### ***The mural***

This was painted by Anda Patrapsch and is to be found inside the Web. There are photos of the mural throughout this report. The story of the development of the mural is central to the project. Anda is a local artist with youth worker experience and an orientation towards community art/education work. She worked in the centre to develop the mural over a number of Friday nights. This is the time when the centre is at its busiest with a lot of young people dropping in. While Anda was working on the roughs there was lots of informal interaction with young people about the art – how do you do it, what are you doing etc? Kids were very interested about the intent of the mural. They got heavily involved in discussion about the consequences of choosing to use ATS or another drug. What's it do to you etc" The focus of these discussions was on the choice and not necessarily on the drug. It helped that the artist was also a community development facilitator who could cover both program intentions and content, and the process of developing a mural. Work happened on two levels with kids as a part of the project:

- The art itself, colour, design, engagement messages.
- The decisions process that drove the person to choose or not to choose ATS. Choices about other drugs and alcohol were also considered.

##### **The ATS information boards**

The information boards were produced and are updated in a similar manner. The kids have input into the content and the layout. Sandy King, the AOD project officer works with them to update the boards. Kids bring in relevant articles and include them. These generate much discussion about AOD issues and what it is and what it does.



According to the young people who were interviewed for this report, the most telling images are the 'before and after' ATS addiction photos, see below.





- One young person, commenting on the importance of the preventive aspects of the program said: *Now I know I'll never touch it [an ATS].* When prompted as to why she said: *Did you see the before and after photos on the board over there?*
- The issue of peer influence was a problem but the ATS program helped them to deal with that. As one young person said: *Some kids are forced into it [drug use generally but with a reference to using speed]. But I know I can say 'No' if I don't want it.*
- A number of young people liked the: *This is what it can do approach* to the ATS discussions.

It should be noted that a number of comments were made about men in their early 20s who were coming past the Web in cars and hassling the kids sitting outside and pushing drugs [ATS], increasingly. There were reports of lots of verbal abuse.



**Finding 7. *The Web is the ideal location for an early intervention ATS project and is well placed to be involved in a project targeted at older ATS users***

Clients and adults identified the Web as the ideal location for a project of this type. A number of reasons were quoted:

- *Very confidential, treated like an adult. Staff really know us kids.*
- *When I turned 12 I came straight here on my birthday. It is a good place. People care about you.*
- *It's safe – you don't get hassled here.*
- *Free medical help is great.*
- *Someone to talk to about drugs.*
- *A safe place to be to chill with friends.*

But it is important to state that the young people were very aware of the funding difficulties that the Web is experiencing and know that this is having an effect, as evidenced by the following quotes:

- *I think it is so sad because they can't stay open long enough.*
- *Some people have stopped coming because it is not open long enough.*

To counter this as one key informant argued that it was really important for the Web to *get on the front foot*: *You can't over-expose the web. The community needs to know that kids are safe there and that it will help them.*



It is important that the Web continues to provide high quality and effective services with young people on the peninsula. Without it projects such as the ATS have co home, no cut- through and no impact.

## Recommendations

The following recommendations are made as a result of this project.

### *Delivery of project of this type*

1. When training is conducted/facilitated by the Web, it is recommended that it is fully evaluated and that a brief evaluation report is developed on every occasion.
2. When Web staff attend training as a part of their role, it is recommended that they write a one page [maximum] evaluation report and share it with their colleagues.
3. It is recommended that the Web AOD worker continues to update ATS information boards etc after the project is completed.
4. It is recommended that community education materials developed by the Web continue to heavily involve clients of the service.
5. It is recommended that the Web continues to seek funding for specific interventions. They are well placed to deliver effective programs.

### Future activity - ATS

6. It is recommended that the Web seeks follow-up ATS funding to develop a resource pack for youth service staff and a resource pack for parents about ATS. Once completed, these could be broadly distributed by the funding body.
7. It is recommended that the Web, coordinates a funding application and if successful, works with other stakeholders on the Central Coast to develop a specific young adults and ATS prevention and support project.
8. It is recommended that the Web plays a part in facilitating more training for other allied health service providers about ATS and related issues – Rock and Water training or a variation on this should be rolled out further in the future. Also training and support could be offered to secondary school teachers and General Practitioners and Practice Clinical Nurse Consultants through an ongoing ATS program.
9. General AOD information and prevention programs [including the ATS program] need to be ongoing and reinforced. It is recommended that the Web seek ways in which these can occur.

### About the Web itself

10. The Web proved again through this project that it is a highly credible service. It is recommended that it continues to be significantly involved in developing and delivering worker training and capacity building initiatives.
11. It is recommended that the Web undertakes a PR campaign to lift its profile about the AOD services it is offering – especially the early intervention focus.
12. More generally there is a need to give the Web a media face and more focus on gaining positive media is recommended.
13. It is recommended that the Web continues to seek ongoing funding to extend services and opening hours. If the Web is not functioning more fully then there is no capacity to deliver ATS projects.
14. It is recommended that the Web seeks funding for an external evaluation of all of its services in order to demonstrate impact and effectiveness to its community, stakeholders and partners.



## Appendix 1. Data Collection forms

### Web Youth Service ATS Evaluation Staff/adult informant interviews

Introduction: Overview of evaluation; Confidentiality. What is happening with the results?

Name.....

Role.....

1. *What is your involvement with the Web? With ATS program*
2. *To what extent is working with clients in relation to Amphetamine Type Stimulants [ATS] a part of the core business of the Web?*
3. *To what extent does it have a preventive compared to a direct service role?*
4. *Are you aware that that the Web Youth Service has policies and procedures regarding how to best manage clients using Amphetamine Type Stimulants [ATS].*
  - *How effective are these policies?*
  - *How visible are they?*
5. *To what extent are workers able to better manage challenging behaviours, provide support and case management to people using or at risk of using ATS, because of this project?*
6. *Do you have comments on the worker training provided by the project?*
7. *To what extent to young people who are using, or at risk of using ATS see the Web as a service that might be able to assist them directly or through referral?*
8. *To what extent does the Web need to promote its services to those using or at risk of using ATS?*
9. *To what extent does the web provide a safe environment for clients and staff? Has this been impacted upon through this project?*





## Web Youth Service ATS Evaluation: Young people's focus group

**Introduction:** Overview of evaluation; Confidentiality. What is happening with the results?

### How Many and Who?

- I. *What is the best thing about coming to the Web*
- II. *How do you think the Web helps kids around this area? What else might it do?*
- III. *Do you remember working on projects that told people about the Web and what it did? What were the best parts of these projects?*
- IV. *Do you reckon drug use is a big deal for kids in this area? If so what drugs?*
- V. *If you had a friend who you thought might be into using ATS [what is the central Coast colloquial expression] what would you do? Would you talk to people at the Web?*
- VI. *To what extent to young people who are using, or at risk of using ATS see the Web as somewhere that might be able to help them directly or through referral?*
- VII. *To what extent does the Web need to promote its services to those using or at risk of using ATS? How might it do this*
- VIII. *To what extent does the web provide a safe environment for clients and staff? Has this been impacted upon through this project?*



## Web Youth Service ATS Evaluation Sandy and Aidan

**Introduction:** Overview of evaluation; Confidentiality. What is happening with the results?

**Name....**

**Role.....**

1. *To what extent is working with clients in relation to Amphetamine Type Stimulants [ATS] a part of the core business of the Web? Should it be?*
2. *If not, why was this proposal put in?*
3. *To what extent does the Web have a preventive compared to a direct service role? Where does this project fit on that spectrum?*
4. *Are you aware that that the Web Youth Service has policies and procedures regarding how to best manage clients using Amphetamine Type Stimulants [ATS].*
  - *How effective are these policies?*
  - *How visible are they?*
  - *Has this project helped to develop them?*
  - *Are there spin offs to other policies or issues?*
5. *To what extent are workers able to better manage challenging behaviours, provide support and case management to people using or at risk of using ATS, because of this project?*
6. *Do you have comments on the worker training provided by the project? What worker training evaluation has occurred?*
7. *To what extent do young people who are using, or at risk of using ATS see the Web as a service that might be able to assist them directly or through referral?*
8. *To what extent does the Web need to promote its services to those using or at risk of using ATS? Should it?*
9. *To what extent does the web provide a safe environment for clients and staff? Has this been impacted upon through this project?*
10. *Other issues that add weight to the merit of the project?*

