



**MARRIN WEEJALI ABORIGINAL CORPORATION**

**“KNOWLEDGE FROM HERE IS LIFE-CHANGING”:  
AN EVALUATION OF  
MARRIN WEEJALI ABORIGINAL CORPORATION**

**FINAL REPORT**

**NOVEMBER 2023**



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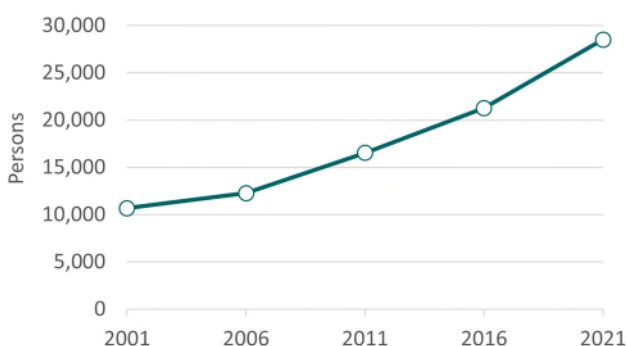




## “KNOWLEDGE FROM HERE IS LIFE CHANGING”

### AN EVALUATION OF MARRIN WEEJALI ABORIGINAL CORPORATION

**M**arrin Weejali has established itself as a culturally safe, effective alcohol and other drug and SEWB/non-clinical mental service to the Aboriginal community of western Sydney since its inception in 1995. During this time, the organisation has embedded its commitment to evidence-based practice and continual quality improvement. Marrin Weejali is due to prepare its next five-year strategic plan in the coming twelve months and has sought community input to guide its deliberations and shape future services. Service demand has created unsustainable pressures which Marrin Weejali will address in the course of plan preparation. The estimated resident Aboriginal population of Marrin’s main catchment (Blacktown and Penrith LGAs, which generate about 85% of its clients) increased by 167% between 2001 (10,684) and 2021 (28,502) as shown below; this area has the largest Aboriginal population concentration in Australia. The Aboriginal population of this region experiences the mental health impacts of dispossession, marginalisation and poverty at an immense scale; culturally safe services are limited and often geographically inaccessible. The extent to which the lives of Aboriginal people are disintegrating and the capacity of services to respond make this a pressing policy and resourcing issue.



The last major infrastructure upgrade occurred in 2010 with the building of the Jersey Road Counselling Centre since which time the Aboriginal population has increased by 73%.

The Evaluation Report, “*Knowledge from here is life-changing*”, presents the findings of a mixed methods evaluation of Marrin Weejali and its services. It provides client, funding body, partner and community perspectives obtained through face-to-face consultation on the organisation’s strengths and how these could be leveraged to enhance future service delivery. The report also captures the thoughts of the Marrin Board, management and staff.

Stakeholders universally see Marrin Weejali as a highly valued, consistently positive presence in the community. Its governance is beyond reproach; its stated values are reproduced and amplified at each level within the organisation. Management and staff approaches to meeting community need for AoD and SEWB services are shaped by Aboriginal cultural ways of knowing and relating and reflect a strong focus on continuous quality improvement. Partners characterise their relationships with Marrin, similarly, as culturally informed and spiritually elevating, and this generates great respect among the organisations and agencies with which Marrin collaborates. Marrin’s approach to going above and beyond reasonable expectations, each staff member’s welcoming and non-judgmental approach, and the organisation’s commitment to working at the scales of individual, family and community are all strengths which cement Marrin’s place at the centre of community. The mutual support Marrin is able to generate among clients and their families adds to service quality and effectiveness.

Marrin Weejali saves lives and changes lives. There is a clear consensus among stakeholders that without Marrin, the community would experience far higher levels of chaos, crisis and misery; clients repeatedly indicated that their intensely supportive therapeutic relationships with their counsellors have saved their lives, kept them with their families and diverted them from custody. Comments of partner organisations, particularly in the community justice sector, reinforce

these insights.

The contribution to improved health and wellbeing deriving from Marrin's services is clear and measurable but the organisation may justifiably claim broader positive effects from its service approach such as diversion of Aboriginal men and women from custody, a safer community, and helping to address a range of Closing the Gap targets. Stakeholders see the enabling factors for Marrin's impact as a combination of:

- The organisation's all-encompassing approach to cultural safety;
- Staff members' empathy born, often, of personal experience; and
- The professional skills of Marrin's counsellors.

Marrin's unique approach to partnership provides clients and community with access to wrap-around services while allowing Marrin to focus on its core business and, conversely, facilitates the ability of partner organisations to engage with community.

Stakeholders unanimously identified the single most pressing need that Marrin could meet as ownership and operation of a residential rehabilitation or cultural healing centre on the western Sydney peri-urban fringe. Lack of such a facility was identified over twenty years ago but a source of investment has proved elusive to date. With a continually growing Aboriginal population, changing policy towards drug use and greater demands on Marrin's resources, need has become acute, with long wait times experienced by clients for admission to residential facilities which often are as far distant as Orana Haven, eight hours' drive away.

Detox services, similarly, are in short supply and culturally safe services are said not to exist. Women are particularly disadvantaged. Stakeholders also identified needs for:

- Expansion of day services on the current site in the form of additional groups and collaborations; and
- Of particular interest because of its impact potential, a proposal for Marrin to provide a court advocacy service as a vehicle for early intervention and diversion of clients from the criminal justice system.

Because of Marrin's strengths, partners tend to project a broader range of aspirations onto the organisation; most of which are neither consistent with Marrin's core business, nor with culturally safe service provision. In the case of requests for additional Marrin outreach to

geographically widespread locations, there is an inherent risk to Marrin of spreading itself too thinly to be able to preserve its reputation for quality service delivery.

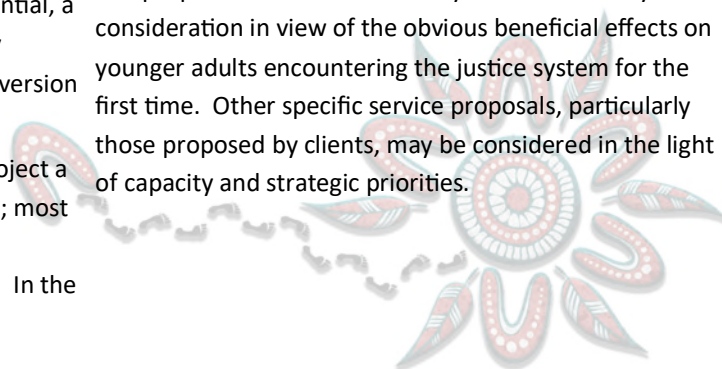
Marrin faces a number of challenges in serving its community. Infrastructure is the most pressing of these; Marrin's existing centre is bursting at the seams and meeting spaces are fully allocated. Others include:

- An ever-increasing workload, partly due to the exploitative nature of some relationships;
- Inequities in Marrin's funding model and lack of long-term security of funding; and
- An increasingly difficult environment around partnering with values-aligned providers arising, partly, as a result of COVID-related disruptions and partly from transactional contestability approaches to procurement of services.

The evaluation identifies a number of suggestions for Marrin Weejali to consider in strategic planning. Of principal importance are those relating to capital works investment and concomitant commitments to recurrent funding. In this regard, Marrin Weejali is encouraged to continue to pursue capital works investment to permit the development of a residential rehabilitation centre, including a detox facility, and consider advocating for funding for and conducting an enabling study of options for expanding Marrin's services at the current location, including through purchase of surrounding properties. It is also suggested that Marrin:

- Work towards broadening its funding base so that funding sources are more equitably matched to origins of service demand and to reduce operational risk;
- Be cautious in relation to proposals which would increase staff workload; and
- Continue to negotiate and foster partnerships with values-aligned partners but with a high degree of caution around the risks of exploitation and threats to cultural safe service delivery.

The proposal for a court advocacy service is worthy of consideration in view of the obvious beneficial effects on younger adults encountering the justice system for the first time. Other specific service proposals, particularly those proposed by clients, may be considered in the light of capacity and strategic priorities.









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## GLOSSARY

AA	Alcoholics Anonymous
ACCHO	Aboriginal community-controlled health organisation
AI	Appreciative Inquiry
AoD	Alcohol and Other Drug(s)
ATS	Amphetamine-type stimulants
CCO	Community Corrections Officer
DBT	Dialectical behaviour therapy
DCJ	NSW Department of Communities and Justice
DFV	Domestic and family violence
DoHA	Commonwealth Department of Health and Aged Care
GWAHS	Greater Western Aboriginal Health Service
LGA	Local Government Area
MoU	Memorandum of Understanding
NA	Narcotics Anonymous
NIAA	National Indigenous Australians Agency
NGO	Non-Government Organisation
OATSIH	Office for Aboriginal and Torres Strait Islander Health
OATSIHS	Office of Aboriginal and Torres Strait Islander Health Services
PHN	Primary Health Network
QIC	Quality Improvement Council
SEWB	Social and Emotional Wellbeing
TAFE	Technical and Further Education NSW
WSLHD	Western Sydney Local Health District
WSSHC	Western Sydney Sexual Health Centre



## 1. INTRODUCTION

### Background to the evaluation

Marrin Weejali Aboriginal Corporation has now been serving the Aboriginal community of western Sydney and beyond, and many non-Aboriginal people too, for twenty-eight years. The history of the organisation is well known within the community: established in 1995, Marrin Weejali has responded to the needs of the community for alcohol and other drug (AoD) addiction services, social and emotional wellbeing (SEWB) support and related human services, firstly from a three-bedroom cottage in Emerton and then, since 2009, from purpose-built premises at Blackett. The organisation has become, by default, a hub for the community.

In 2012, an evaluation of Marrin Weejali was carried out using the Appreciative Inquiry (AI) methodology with two main aims: to underpin continuing quality improvement through identifying the organisation's strengths and envisaging ways in which those strengths might be built on to meet the needs of the community; and to provide evidence-based input for the *Marrin Weejali Strategic Plan 2012-2017*.

From a strategic point of view, 2023 is a 'sandwich' year for Marrin Weejali. In 2022, Marrin Weejali successfully renewed its Quality Improvement Council (QIC) accreditation for a further three years. The rigorous audit process was passed, again, with flying colours. In 2024, Marrin Weejali will prepare its next five-year strategic plan. Marrin Weejali's board and management resolved to undertake the evaluation at this point, as with the 2012 evaluation, as a further step in the process of continuing quality improvement, and as a source of evidence for future strategic planning. At the time of conducting the evaluation, other strategic tasks are also progressing. Most importantly, Marrin Weejali is continuing to advocate for the 'missing link' for which a pressing need was first documented in the *Western Sydney Aboriginal Substance Misuse Regional Plan 2000*: construction

and operation of an Aboriginal community controlled Aboriginal residential rehabilitation centre and in-patient detoxification service on the western Sydney peri-urban fringe.

The 2012 evaluation was undertaken using the Appreciative Inquiry methodology; a qualitative approach to evaluation which focuses upon mobilising the assets and strengths of an organisation through a focus on peak experiences, values, and vision, as the basis for organisational development. The current evaluation, while not replicating the entire four step AI process, takes a strengths-based approach to elicit views towards a desired future for Marrin Weejali, in line with the AI dictum: that 'what we focus on becomes our reality'. Interview questions posed to Marrin Weejali's board, management, staff, clients, funding bodies and partner organisations were designed to draw out insights about what is working well in the organisation; criticisms and challenges which emerged in the process could then be explored as the basis for positive suggestions, consistent with Marrin Weejali's culture of service learning.

### Evaluation Purpose Statement

The Evaluation Purpose Statement which emerged from discussions with the Marrin Weejali board and management is as follows:

*The purpose of the evaluation is to inquire into, identify and develop the best characteristics of Marrin Weejali to guide future development. We will explore the aspects of Marrin Weejali which are working particularly well and focus on how to extend these aspects to shape and implement the change desired by our organisation and, to the extent possible with the resources available, by our stakeholders. We will reflect the findings in our Strategic Plan 2024-2029.*

## 2. METHODOLOGY

### Approach to Marrin Weejali's evaluation

Development of the approach was informed by Marrin Weejali board and management's previous experience with evaluation processes, and the desire to be as inclusive as possible of the perspectives of a wide variety of stakeholders. The evaluation thus incorporates the perspectives and aspirations of Marrin Weejali's board, management and staff, clients, the organisation's funding and partner service organisations, and justice bodies. The approach has combined qualitative, semi-structured interviews with stakeholders, focussed group interviews with Marrin Weejali clients and some partner agencies, and analysis of Marrin Weejali's client and partner surveys from 2018 to 2023. The consultation programme adopted has consisted of:

- Initial meetings (2nd May and 31st May 2023) with Tony and Melinda to set the direction for the evaluation;
- Workshop (31st May) with Board to focus evaluation and obtain insights;
- A series of qualitative interviews (May-August 2023) with key informants identified by Tony and Melinda (see Appendix A);
- Focus group interviews (May-June 2023) with selected groups of Marrin Weejali clients;
- Workshop with management and staff (1<sup>st</sup> August 2023).

Discussions in the course of the focussing workshops guided the framing of the key evaluation questions as follows:

How do Marrin Weejali's clients, board members, staff, funding agencies and partner organisations characterise their interaction with Marrin Weejali? What form do these relationships take? What is Marrin Weejali's broader role in the community? What are their aspirations for Marrin Weejali's future development, and for their own part in Marrin Weejali's future?

What positive difference does Marrin Weejali make to the lives of clients and the broader community, and what are the enabling factors that make this possible? Are there aspects of partner organisations' practice which would be more difficult without Marrin Weejali's support? What are Marrin Weejali's strengths? How can Marrin Weejali build on the relationships it has in place and the things it does well to facilitate more positive change in the lives of individuals, families and community?

What currently unmet needs within the community could Marrin Weejali meet or help to meet, either through direct engagement where these needs are relevant to core business, or through brokerage or collaboration with other providers?

The interview and focus group guides respond to the key questions. Interviews were conducted with Marrin Weejali's funding bodies: the National Indigenous Australians Agency (NIAA) and WentWest Primary Health Network (PHN), and with twenty-two representatives of partner agencies and organisations either by individual interview or, where participants preferred, group interviews. The partners invited to participate in the evaluation represent a broad cross-section of the various portfolio areas from which Marrin Weejali's partners are drawn: health, justice, education and other human services. Focus group interviews were conducted with Marrin Weejali board members and two client groups (see Appendix A).

Service user and partner perspectives were also identified through analysis of client surveys and agency surveys, respectively. Survey data collected over the period 2018 to 2023 were analysed, and findings have been used to supplement service user and partner views expressed in the interviews and focus groups. Services represented are listed in Appendix A. Again, the respondents are broadly representative of the various types of human services which partner with Marrin Weejali, and changes in composition of the survey sample over

time are reflective of those service providers who enter and leave Marrin Weejali's orbit.

### **Data analysis and reporting**

The outcomes of workshops with the board, management and staff have been used to identify the organisation's own aspirations for future development and to explore ways in which the service environment has changed, and is continuing to change, since the previous evaluation nine years ago. Analysis of interviews and focus group data has proceeded by use of a standard process of open, axial and selective coding to allow themes to be identified and developed. Chapters 4, 5 and 6 present the thematic analysis of the data collected during the consultation process, and are structured to respond to the evaluation key questions (see above). A further workshop was then convened at which the outcomes of the consultation process were reported and considered. The outputs of this third workshop form the basis for Chapter 7 of this report, and will be used to develop the new Strategic Plan.

### **Limitations of the evaluation**

Achievement of the Evaluation Purpose Statement (see Section 1) is best served through a qualitative approach which is capable of eliciting expansive, nuanced responses to the evaluation key questions. This evaluation has thus been based largely on qualitative methods, but with some quantitative data from client and service provider surveys also analysed and presented. No analysis of numerical client data has been undertaken, nor has the evaluation considered objective quantitative measures (other than the client perspectives represented in the surveys) of the success of Marrin Weejali in assisting its clients to achieve their goals in relation to their use of AoD and their SEWB. Quantitative service data are reported to, and regularly monitored by Marrin Weejali's funding agency, and levels of activity and service effectiveness are periodically analysed within Marrin Weejali.

### 3. MARRIN WEEJALI: A BRIEF HISTORY

Marrin Weejali has its origins in 1995 in a cultural healing group established by Tony Hunter that met on the banks of the Hawkesbury River at Windsor. Soon, Tony was conducting weekly AoD awareness group meetings at the Holy Family Church, in Emerton and providing counselling, advocacy and support to individuals and their families dealing with substance misuse. Tony had himself been severely impacted by displacement from Country, grief, loss and, as a consequence, had had to contend with alcohol addiction. His personal experiences led to an intense personal conviction about the fundamental importance of culturally safe approaches to supporting Aboriginal people to address addiction and social and emotional wellbeing issues. The collective commitment of Marrin to “healing the shattered spirit” is born of Tony’s life experience.

In 1996, the fledgling Marrin Weejali applied for and, in October of that year, was granted funding by the recently established Commonwealth Office of Aboriginal and Torres Strait Islander Health Services (OATSIS). This permitted an initial contingent of staff to be employed. In the same year, the NSW Department of Housing recognised Marrin Weejali’s potential to assist in addressing social issues which impacted upon the delivery of public housing, and provided a three-bedroom house in Emerton as a centre for the service.

By 1999, it had become apparent that a more systemic approach was needed to meet the needs of Aboriginal individuals, families and communities affected by AoD misuse. Marrin Weejali obtained funding from OATSIS to enable the *Western Sydney Aboriginal Substance Misuse Regional Plan* to be researched and prepared. This document described and quantified need for substance misuse services for Aboriginal and Torres Strait Islander people in greater western Sydney as a whole, and called for a holistic response based around specific, co-ordinated actions on the part of the then Area Health Services, Aboriginal Community Controlled

health service providers (ACCHOs), Divisions of General Practice, and Human Services agencies and non-government organisations (NGOs). Some *Regional Plan* recommendations related to programmes, services and facilities were acted upon in the period after publication. A Memorandum of Understanding (MoU) aimed at achieving a co-ordinated response to AoD issues within the Aboriginal community was negotiated with the then Area Health Services and ACCHOs. Funding provided by the Office for Aboriginal and Torres Strait Islander Health (OATSIS), within the Commonwealth Department of Health and Ageing (DoHA), allowed additional staff to be employed, and expanded programmes to be developed and delivered. However, some critical recommendations, including provision of culturally safe detoxification services and development of a residential rehabilitation centre, have, more than twenty years later, not eventuated.

Capital works funding was committed in the mid-1990s by OATSIS for construction of a purpose-built centre, and a site at Blackett was purchased and developed. Marrin Weejali occupied its new centre in December 2009. Since that time, Marrin Weejali has continued to grow. Additional staff deliver new AoD and SEWB programmes; partnerships have been leveraged to deliver wrap-around services to clients and their families.

Marrin Weejali first achieved Quality Improvement Council accreditation in 2011 and has maintained accreditation through each subsequent audit. Continuous quality improvement has become part of Marrin’s DNA; a service evaluation undertaken in 2012 using the Appreciative Inquiry methodology identified this as one of the organisation’s defining characteristics.

In the period since the previous evaluation, Marrin has continued to develop its services and its partnerships while advocating for the remaining *Regional Plan* recommendations to be implemented. Current partnership arrangements



are shown at Appendix B. Improvements have been made on an ongoing basis to the client database; opportunities to fund additional services and programmes have been taken advantage of where these have been in alignment with Marrin's core business of AoD and SEWB counselling, advocacy and referral. Changes have taken place in the way partnerships form and are nurtured; some aspects of practice have become far more difficult. Chief among these is increasing difficulty in being able to maintain successful referral pathways for clients severely impacted by AoD use to residential rehabilitation services. At the same time, client numbers have increased steadily, with increasing dependence on Marrin Weejali by the justice sector resulting in ever-growing demand for Marrin to intervene to address the root causes of offending.

The COVID-19 pandemic was a particularly challenging time for Marrin Weejali. The organisation's flexibility enabled a rapid response to lockdowns, with counselling services moving to electronic delivery by phone or online. Later, when vaccines became available, Marrin Weejali threw open its doors to allow a mass vaccination programme to be delivered to Aboriginal community members in a culturally safe environment. Around 60 vaccine doses per day were being delivered by visiting service providers.

Since the pandemic, Marrin has continued to focus on its core business. With funding from the Commonwealth Government through NIAA and WentWest PHN, in the 2021-2022 financial year alone, Marrin delivered episodes of care to 923 clients who completed the intake process, 621 of whom completed an initial assessment and commenced treatment and counselling programmes which included 18,085 individual counselling sessions and 157 group therapy sessions. Interventions in the court process to divert people from custody occurred 265 times across the year, and 143 referrals were made to detoxification and residential rehabilitation services, supported by 364 episodes of advocacy to assist with the requirements of admission.

Most recently, a renewed impetus to seek resources to develop a residential rehabilitation service in western Sydney has resulted in preparation of a case for investment, and direct approaches to funding agencies and parliamentarians. A benefit cost analysis demonstrated positive return on investment but Marrin is finding it frustratingly difficult to generate interest in government circles for a project which will bring significant benefit to the largest Aboriginal population in the nation.

Marrin's five-year strategic plan is due for renewal next year, for the period from 2024 to 2029. This evaluation is intended to provide intelligence to support planning in accordance with the Evaluation Purpose Statement in Chapter 1.

## 4. MARRIN'S PLACE IN THE COMMUNITY

### Introduction

Focused group interviews undertaken with Marrin Weejali board, management and staff produced insights which are particularly interesting when compared with the 2012 Evaluation. There is a remarkable degree of consistency over time in the way that Marrin Weejali sees itself. At the same time, changes in the external environment have brought into sharp focus the differences between Marrin Weejali and other agencies and organisations, and the increasingly fraught process of negotiating and nurturing external partnerships.

### The values of Marrin Weejali

Marrin Weejali's Strategic Plan 2019-2024 identifies eight values which shape the organisation's strategic agenda. In summary, these values are about respect for community and for the dignity of clients and their families, observance of Aboriginal spirituality and culture, commitment to client wellbeing, recognition of colleagues, compassion, and leadership and innovation. The values articulated by Marrin Weejali board, management and staff are the stated values of the organisation, and the organisational values perceived by clients and partner organisations in the course of their interactions with Marrin, too, are completely consistent. One funding provider noted that Marrin's values are concrete, not abstract, and are founded in community needs:

*The fundamental thing is that community interests underpin Marrin Weejali's drive and values.*

Accountability is a high priority for the board: processes are described as being 100% above board, and "what you see is what you get". The importance placed upon accountability, transparency and professionalism is well received by funding organisations:

*They are responsive to new requirements – especially new reporting requirements.*

### Marrin Weejali's role at a community scale

Marrin Weejali is not funded to undertake community development; nevertheless, as board members indicate, the organisation does make a substantial contribution to empowering community members and creating stronger and more connected community. Respondents from partner organisations variously described Marrin as "a pillar in the community", "a stalwart organisation in western Sydney – in the whole Blacktown-Penrith area", "a community, not just a service", and perceived Marrin's broader role as:

*To help our community to be the best that it can be.*

Stakeholders acknowledge Marrin's policy of stepping in to meet identified needs in a timely way. For example, the decision to establish an emergency vaccination clinic at Marrin in the depths of the COVID-19 crisis, at a time when it was impossible to provide face-to-face counselling, was vital in ensuring that the Aboriginal community had the best possible access to immunisation services. Upwards of 60 people per day accessed the service over a period of several months:

*Marrin was a one-stop shop for support around COVID. Marrin opened its doors and met the need. The community was very vulnerable – people felt safe to go to Marrin.*

### Service scope: the view from the Board

While recognising Marrin's broader significance across western Sydney, the board retains a consistent focus on the organisation's core business: addictions and SEWB counselling, rehabilitation, advocacy and referral. SEWB is interpreted broadly as encompassing family support, relationships, domestic and family violence (DFV), empowerment, guidance and respect; it does not incorporate clinical mental health services. Directors expressed no appetite for expanding Marrin's scope of practice to include mental health

services but noted that mainstream mental health services “don’t do their job”:

*People come here and stay for hours; the workers calm them down and then they take them to hospital and they just get sent home – they find a train [to jump underneath] or go home and damage their family. The ice, the mental health damage – there’s no support for family.*

Marrin’s view is that the service landscape is so structured that service provision at an individual level is not adequate to meet the needs of clients, particularly Aboriginal clients. In consequence, Marrin Weejali has adopted a strong, client-centred approach to the design and delivery of its core services, very much guided by the unadulterated principles of cultural safety:

*It’s a holistic service – the whole person, the whole family needs a service.*

Wrap-around services beyond Marrin’s core business are provided through partnerships. The board acknowledges that ability to increase the breadth of involvement through negotiating more partnerships is constrained by space and resource limitations:

*Staff have big caseloads and the premises are too small. We need a bigger building. We could host more partnerships with larger premises.*

The enthusiasm of the board for Marrin’s approach to meeting community needs in collaboration with funded stakeholders is tempered with frustration born of almost three decades of struggle with inadequate resources, lack of a concrete response from governments to organisational priorities for service development, and adverse experience with exploitative partnerships:

*We need a rehab. How many times? How many hoops do you need to jump through?*

*They make partnerships with you and you do the work – getting used and abused. We needed to be stronger partners with DCJ but they weren’t there. They all want to save us but*

*don’t want to do anything. From a community perspective, young men and women know they will get the help here. DCJ will help, or offer to help, if they relinquish their kids.*

Directors are weary of partner service providers using their relationships with Marrin as a vehicle to obtain additional resources for themselves, on occasions not affording Marrin of the courtesy of informing of their intent to use Marrin’s good name to support funding applications.

## 5. SERVICE USER PERSPECTIVES: THE CLIENT SURVEY AND USER FOCUS GROUPS

### Client survey

#### Introduction

Marrin Weejali conducted Client Surveys in 2018-2019, 2020-2022 and 2022-2023. In addition, a Transition Survey with clients exiting to maintenance was conducted in 2020-2022, and a Group Work Evaluation, in 2022-2023.

Respondents to the 2020-2022 Client Survey were impacted by COVID-19 lockdowns. Questions posed to clients varied from survey to survey; the 2019 and 2022 surveys collected responses to questions about experiences with service provision in the form of yes/no answers; the 2023 survey invited participants to respond to a Likert scale. As well as collecting numerical data, the surveys also obtained qualitative responses to questions directly relevant to this evaluation, and these have been woven into the text later in this chapter. A total of 132 client surveys were analysed for this Evaluation Report.

#### Client surveys: characteristics of participants

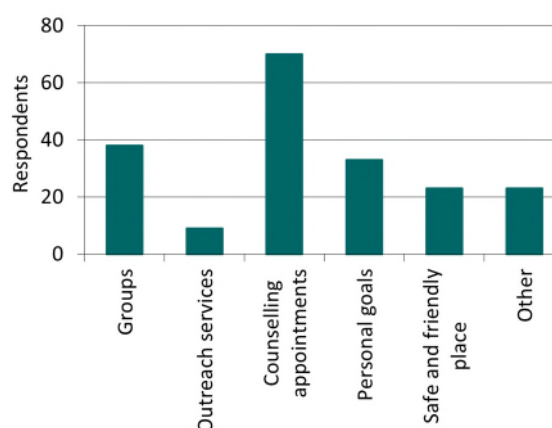
The 2019 and 2023 surveys sought information on referral sources. Of the total respondents across the two surveys, over 80% of participants came from three referral sources: self-referral (36%), referral from the justice system (32%) and referral by family or friends (13%). Other referral sources included health service providers, NSW Department of Communities and Justice (DCJ) in its various forms, employment services providers and housing agencies.

Only the 2023 survey asked clients to identify their gender and age cohort. Of 39 respondents, 72% identified as men and 28% as women. Respondents were predominantly aged between 25 and 54 years, with smaller numbers in the 18-24 and 55+ cohorts.

#### Client status and services used

Only the 2019 survey invited respondents to indicate their motivation for continuing to attend Marrin. Figure 5.1 shows the responses.

Figure 5.1: Motivation to continue, 2018-2019 (n=93)



Each of the surveys asked, in some form, for clients to respond to questions about their experience of Marrin Weejali's services. Table 5.1 provides a digest of questions asked and responses across the three Client Surveys. Where the question sought a Likert scale response, Strongly Agree and Agree categories have been collapsed to a Yes response and Disagree and Strongly Disagree categories have been collapsed to a No response. This applied only in the 2023 survey.

Proposition		2019	2022	2023
Happy with assessment	Y	92	203	
	N	0	1	
Enough say in care plan	Y	93	183	
	N	0	2	
Care plan elements met needs	Y	92	185	
	N	0	3	
Enough support with care plan goals	Y	93	190	38
	N	0	1	0

Proposition		2019	2022	2023
Satisfaction with referral services	Y	66	166	
	N	1	6	
Worker communicated effectively	Y		204	
	N		0	
Treated you respectfully as a client	Y	93	204	
	N	0	0	
Made it easier for you to get better	Y	93	204	
	N	0	0	
Were flexible in meeting your needs	Y	93	204	
	N	0	0	
Were culturally respectful	Y	93	204	37
	N	0	0	1
Treated you without discrimination	Y	85	186	
	N	8	5	
Protected your privacy	Y	92	203	
	N	0	1	
Were polite and courteous	Y	93	204	38
	N	0	0	0
Were accessible	Y	93	202	
	N	0	1	
Were professional in providing our services	Y	93	204	
	N	0	0	
Were open and honest	Y	93	204	
	N	0	0	
Listened to your opinions about us	Y	77	199	
	N	0	1	
Dealt with a complaint well enough	Y	35	42	
	N	0	7	
Considerate and respectful of religious beliefs	Y			36
	N			0
Family and friends have seen positive changes	Y			38
	N			0
Feel confident to seek help	Y			38
	N			0
Would recommend Marrin	Y			38
	N			0
Would rate Marrin overall as very good	Y			38
	N			0

The 2020-2022 Transition Survey was a short survey seeking responses from 185 clients exiting the programme to maintenance. Clients were asked to respond to six propositions:

- My experience with Marrin Weejali was culturally appropriate for me;
- My counsellor was flexible in scheduling appointments;
- Marrin Weejali staff treated me with respect;
- My drug and alcohol treatment has helped me;
- I have been able to achieve my goals through my treatment at Marrin Weejali; and
- I am confident about seeking help in the future if needed.

Responses to each question were overwhelmingly positive, with Strongly Agree response category obtaining more than 80% of responses in each instance where the question was applicable, and the Agree category obtaining the balance of responses.

The 2022-2023 Group Work Evaluation survey asked 129 participants who had been involved in group work to provide tick box responses across several possible options for three outcomes-focused questions. Results are summarised in Table 5.2.

Question	% of respondents
What did you find helpful about this programme?	
Engaging in a group setting	61
Relating to other people's experiences	55
The content	50
My thoughts were challenged	39
Social support and encouragement	54
Being able to tackle complex problems better than I could on my own	47
Gaining tools I can apply in my day-to-day life	54
Other	20
Since completing the group program, what changes have others said they have noticed in you?	
More confident	51

Table 5.2: Responses to Group Work Evaluation survey

Question	% of respondents
Better understanding of myself and my addictions	50
Taking responsibility for my actions	54
Investing more in my relationships	36
Improved communication skills	49
My spirit is hopeful for the future	41
Take pride in my appearance	42
Other	32
Since completing the group program, what changes have you noticed in yourself?	
More confident	48
Better understanding of myself and my addictions	51
Taking responsibility for my actions	51
Investing more in my relationships	47
Improved communication skills	48
My spirit is hopeful for the future	41
Take pride in my appearance	34
Other	30

Participants were also asked to respond to closed questions about feelings of safety, ability to contribute, and understanding of discussions in their group; responses were almost universally positive, only two of 123 respondents to the question about ability to contribute had felt unable to do so.

The surveys also captured qualitative insights from participants. These are discussed in conjunction with feedback from focussed group interviews in the next section.

## Qualitative evidence

### Introduction

Focus group interviews were conducted with two service user groups, on 31st May and 2nd June 2023, respectively as follows:

- Men from the Better Man (men's domestic and family violence), Men's Health, Narcotics Anonymous, DBT Mental Health Skills, and Alcoholics Anonymous groups; and

- Women and men from the Social and Emotional Wellbeing, Anger Management, Narcotics Anonymous, Alcoholics Anonymous, Women's Domestic and Family Violence, Better Man, DBT Mental Health, and Living with Addictions Groups.

Themes emerging from the groups are highly consistent with qualitative evidence from the client surveys discussed in the previous section. Key discussion points raised by participants included:

- Safe, accepting, empathic and non-judgmental qualities of Marrin, consistent throughout the organisation;
- The importance of a sense of mutual support and collective commitment among the client body;
- Marrin Weejali as a life-changing and life-saving organisation
- Client understanding of Marrin as, foremost, a teaching and learning community which offers challenge as well as support and leads to increase self-awareness and decreased isolation;
- The impact of service gaps and how these should be addressed.

### *Marrin Weejali is a safe place to recover and grow*

Marrin Weejali's impact on the lives of clients, their families and their community is the direct result of a very consistent set of characteristics which, in turn, are strongly aligned with Marrin's stated values. Marrin is seen by clients as effective, non-judgmental, empathic, always available, generous, non-discriminatory, forgiving, welcoming, comfortable, encouraging, supportive, loving, spiritually elevating, challenging, real, grounded, consistent, secure and above all safe. Clients speak about being 'loved back to life':

*You need to feel safe to be able to rehabilitate. It's safe, welcoming, comfortable. You always walk out of here with a smile on your face, a weight lifted off your shoulders. Recognition and respect bring people back.*

*The biggest thing is Marrin's here to support us. We're not being judged. The only service people can come to without being judged, be happy.*

*The connection's not just spiritual for Aboriginal clients, it's for everyone.*

*Since Marrin has come into my life I know that Marrin has my back and I know that I'm culturally included.*

*Having someone on call means a lot to me when in difficult times. I was able to pick up the phone and talk to Shannon without an appointment.*

Even during the COVID-19 pandemic lockdown periods, the overwhelming majority of clients felt that they were well supported by Marrin. Very few participants in the 2020-2022 survey felt that communication issues born of isolation made it difficult to have their needs met:

*Not much that [you] can do over the phone.*

Of the 204 participants, only two provided negative feedback. The remaining ninety-nine percent of participants expressed positive responses:

*Marrin Weejali is a great place and I feel I have been helped well considering with COVID impacting the service. I feel there needs to be more places like Marrin.*

*I'm pretty happy with where I'm at.*

*I love the Marrin services and never had any worries or complaints.*

*Everything has been good even under the circumstances of COVID-19.*

*Marrin Weejali is a great place and has supported me very well and I feel spiritually connected.*

#### *Client experience with counselling*

Group participation and individual counselling are seen as having their own benefits, but also as inseparable elements of the process of recovery and lapse and relapse prevention. The lived experience of counsellors is fundamental to their relatability and is strongly respected by clients:

*One-on-one counselling is helpful for relapse prevention. Counsellors have similar experiences. We build a relationship with counsellors – what they know is not learned from a book.*

*You can only connect with counsellors who have been there – empathy.*

Clients feel comfortable to speak with any of Marrin's workers but form a strong bond with their own counsellor. They recognise that different workers have differing approaches to intervention, and appreciate that therapeutic relationships are built flexibly to meet the needs of individual clients:

*They challenge your thoughts in a positive way. They challenge to get answers to questions. Each counsellor is unique in their own delivery – not textbook, not robot – human. They work in different ways. There's no pressure – they love watching people grow.*

*I've been sober for two years and three months. I've been working with 90% of the staff here. You can talk to anyone. No other organisations have that care and compassion.*

*You can come here whenever you want – talk to anyone; don't need an appointment, drop in, have a cup of tea. They're generous.*

*My counsellor has different ways of looking at life – very inspirational.*

*I can be myself around Khoa. Empathy 100%.*

*I feel that I'm a more confident person. I know my worth. Especially knowing that people have genuine care about how life has been treating you. Personally, people like Dave who has always been there through thick and thin, providing positive feedback and support. The knowledge and his own experiences have helped me develop into a more confident individual morally, ethically and spiritually. I highly recommend Dave. To me, he is Marrin.*

Each of the clients who expressed a view about their experience at Marrin saw their counsellor in the same light as Khoa and Dave. The way in which Marrin's values permeate the organisation, in combination with the skills, experience and commitment of each staff member, make Marrin unique in the way it meets client needs, and clients perceive it as such.

### *Mutual support and collective commitment is vital*

Members of the Men's Health Group stressed the importance of a collective commitment to support each other in the Group, and the benefits they obtain from inspiring each other and making a commitment to participate together:

*We're not isolated – it's like a family.*

*In the Men's Group we can be in the group and be men. There's no stigma.*

*There's no judgment – we learn off each other. We're like brothers – you can pour your heart out. There's nothing like this outside – it's a safe place.*

*We're honouring everybody. If you can't love everybody ... we're all human. We all relate in groups – it's the easiest way to connect. No power imbalance here – we should treat everyone in the world like this – accept each other.*

*In this group, you have to come every week. It's a commitment we all agree to; you let yourself down, you let the whole group down.*

### *Marrin Weejali changes and saves lives*

Because of Marrin Weejali's open-door policy, and its success in concentrating a wide variety of complementary services at its premises, clients with multiple issues are able to take advantage of the relationship with Marrin to be directed to such other services as may be required to address ancillary needs. Clients in the focus groups included one Elder who had come to Marrin for free legal advice in relation to a \$3,000 traffic infringement and stayed to access other services, and a client who had come to address serious issues with gambling which had arisen after the death of a close relative, stayed for help with unravelling complex health issues including obesity and diabetes, returned to study and, on the basis of her achievements, was now working in a community services role for another organisation. Such stories are encountered frequently. Survey participants recounted experiences with rebuilding of relationships, diversion from criminal behaviour, and restoration of children in Out of Home Care as a

result of the changes they have experienced in their lives:

*Marrin Weejali has changed my life for the better. Marrin Weejali has brought my family back together.*

*The Understanding the FACtS Group has helped me a lot in my journey of losing my kids and trying to get them back. It has given me hope and faith and a better understanding of DCJ and the Care and Protection legal system. The Living with Additions Group is really good for someone beginning their recovery journey.*

*My whole living has improved. I didn't give a shit before. I didn't think I'd have a licence or have a job like I do now. I thought I'd always be a criminal.*

*They got me off the drugs and keep my two younger children in my care, helped me get my life back on track.*

Several survey participants stated categorically that Marrin Weejali saved their life.

*Yes, Marrin Weejali has saved my life. I would not be here today if I did not walk through Marrin Weejali's doors.*

*It made me more stable – I gained education with alcohol abuse. I love attending Marrin Weejali; it saved my life.*

### *Marrin Weejali as a 'school' for life*

A number of clients who participated in the focus groups or who responded to the surveys characterised Marrin Weejali as a teaching and learning organisation rather than a service where clients were simply a passive recipient of therapeutic intervention. The emphasis on clients as active partners in learning and understanding about the ways in which their own behaviours work against them, and about ways to change those behaviours, was a frequently recurring theme. Education as a means of behavioural change appeared to be particularly important to clients with anger management and domestic and family violence issues. Learning opportunities appeared to be provided equally through individual counselling services and within groups:



*Knowledge from here is life changing.*

*They're teaching me skills towards maintaining abstinence from alcohol, learning skills to keep me from gambling; good education.*

*I'm currently involved with a programme called 'Better Man'. Even though I have only been involved in one class it has helped me tremendously. Just knowing there is so much to know about domestic violence. To acknowledge no matter what walk of life or upbringing we have had. There is so much in common. The teachers involved with the boys do an amazing job, making everyone feel comfortable and willing to learn.*

*Gaining education – people were friendly; I have gained insights and different perspectives on my difficult emotions.*

*They gave me tools for my toolbox, to manage my anger better.*

For a number of participants in this evaluation, the education received through participation in Marrin Weejali programmes has led to a desire for further knowledge, expressed through progression to formal training in counselling, community development and related disciplines in the TAFE system. On completion of formal qualifications, participants have variously returned to Marrin as counselling staff, gone on to work for other NGOs in community service roles, been employed to teach at TAFE, and taken on other roles in the community.

#### *Client aspirations for Marrin's future*

Above all else, Marrin Weejali's clients wish Marrin Weejali to continue to provide the services and programmes it currently delivers, in the way that it does now:

*I'm happy and grateful that Marrin exists. It has helped keep a lot of people including myself on the right path making positive changes within the community I've seen throughout Mt Druitt.*

Clients value the broad scope of service they access through Marrin Weejali. In addition to individual counselling and group work, participants have benefited greatly from programmes and services

such as Health Outreach Hubs, the Ray Kelly *Too Deadly for Diabetes* programme, chronic care co-ordination support, Work Development Orders and legal advice. Where programmes and services have fallen away because of COVID-19 or of partner organisations withdrawing interest, clients expressed a desire for these initiatives to be reinstated. The return of Health Outreach Hubs, supported by the Mootang Tarimi bus, would be a popular development. Participants voiced several aspirations related to service needs. Foremost among these is the universally articulated desire for a residential rehabilitation service, to be owned and operated by Marrin Weejali on the Sydney peri-urban fringe. Aspects of the service mentioned by clients included:

- Location of the centre close enough for families to visit but “away from the drug area – close to services”;
- A through care model for support, with a return to Marrin Weejali in Blackett for maintenance care on completion of the residential programme;
- Inclusive eligibility criteria for admission; and
- Inclusion in the programme of individual counselling, groups and education, but also living skills such as cooking, cleaning and managing finances, hobbies and sport and exercise options, and TAFE employment skills training.

The location is critical. Clients emphasised the importance of the positive support of families and friends for clients using residential services. Instances were recounted of clients waiting for lengthy periods to be admitted to Orana Haven, then feeling “stuck”, and leaving after two weeks because they miss their families, and are concerned for them.

Clients also raised the problem of increasingly stringent rules for admission to residential rehabilitation services, and the barriers posed by eligibility criteria excluding those with criminal records:

*Everyone needs help. Instead of blanket bans on people with criminal histories, they should base the eligibility criteria more on risks to safety.*

In addition to demand for a residential rehabilitation service, clients also voiced a need for the existing Marrin Weejali centre to expand. Additional facilities are seen as important to allow expansion of group availability. At present, Marrin is at its practical limit in timetabling groups. The group timetable shows 17 meetings provided directly by Marrin schedules across the week; five of these scheduled meetings run in succession on a Wednesday. Relapse Prevention and Too Deadly for Diabetes (provided by the Ray Kelly Foundation) were said to overlap. Purchase of adjoining properties and extension of the centre is seen as necessary to allow groups to expand. Clients aspirations are for Marrin group sessions to include an Al-Anon group, a support group for families, and a Gamblers Anonymous group in the offering. Related to this is a desire for after-hours counselling and groups to be offered to meet the needs of clients who are employed. Clients also asked for services to be expanded to young people aged 15 to 18 years, who are seen as having no treatment options at present despite being vulnerable to negative influences. In addition, provision to clients of transport to Marrin Weejali was seen as an unmet need.

These aspirations are discussed in greater detail in conjunction with desired futures for Marrin Weejali expressed by board members, management, staff and partner organisations, in Chapters 7 and 8.

### *Consensus view*

Client surveys and focussed group interviews indicate unanimous appreciation for almost every aspect of Marrin Weejali's people and programmes. Looking back to Marrin's previous evaluation conducted 11 years ago, it is clear that the themes are very consistent. The generosity, expertise, love and commitment with which Marrin engages with its clients have not changed over time. Client expectations of Marrin's ability to add to their

already extensive portfolio of supports have, perhaps, been tempered by the experience of COVID-19 but the one consistent priority aspiration for the future is the residential rehabilitation service. Two things are clear from client feedback: Marrin Weejali is a unique organisation, and Marrin Weejali saves lives.

## 6. WORKING IN PARTNERSHIP: SURVEYS AND INTERVIEWS

### Introduction

Consultation with collaborating organisations and agencies and with funding bodies focussed on the form of relationships and the services facilitated; the nature of partnerships, Marrin's roles and strengths, and aspirations for further development of partnerships and of Marrin Weejali's own development. Findings from the consultation process are augmented by data from agency surveys conducted by Marrin Weejali in 2018, 2021 and 2022-2023.

Consultations with partner organisations at the time of the 2012 Evaluation captured insights from a broad spectrum of human service providers working across sectors including family services, policing and justice, employment, social security, health, youth services and financial services. The collaborators interviewed for the current evaluation were, similarly, situated across the health, education, family services and justice sectors but with a greater proportion of participants from the justice sector (see Appendix A). It is likely that this mirrors an increased proportion of clients who are referred or mandated to become clients of Marrin by the courts or by Community Corrections, and constantly rising expectations within the justice sector about the capacity of Marrin Weejali to respond to the needs of offenders.

### Agency survey

#### *Characteristics of partnerships*

Marrin Weejali surveyed agency partners in 2018, 2021 and 2022-2023. Questions tended to be consistent, or to deliver comparable responses, from survey to survey; the later two surveys were more comprehensive than the 2018 survey. A total of 74 responses were analysed for this Evaluation. Responses are collated in Tables 6.1 and 6.2.

Characteristic	2018	2021	2023
n=	25	30	19
Service sector:			
Government	44%	67%	47%
NGO	48%	20%	32%
Other community service	0%	10%	5%
Medical practice	8%	0%	0%
NHMRC funded research project	0%	3%	0%
Education/TAFE	0%	0%	16%
Formal or informal partnership:			
Yes	96%	90%	74%
No	4%	10%	26%
Partnership evaluated?			
Yes	91%	77%	
No	9%	23%	
Occasions of contact with Marrin (12 months prior):			
No occasions		3%	0%
1-3		30%	37%
4-6		7%	16%
7-9		7%	5%
10+		53%	42%
Attended event at Marrin Weejali			
Yes			73%
No			27%

Proposition	2018	2021	2023
Contact professional and response times reasonable:			
Yes			100%
Service delivery:			
Adequate info/ understanding about Marrin?			
Yes	96%		100%
No	4%		0%
Access promotional material?			
Yes	92%	93%	
No	8%	7%	
Believe Marrin is providing quality service?			
Yes	100%	100%	100%
Experience with Marrin:			
Don't know	4%	0%	0%
Poor	0%	0%	0%
Fair	9%	7%	0%

Table 6.2: Responses to propositions			
Proposition	2018	2021	2023
Good	4%	7%	0%
Very Good	17%	36%	7%
Excellent	65%	50%	93%
Partnership enhanced service delivery:			
Yes		80%	
No		10%	
N/A		10%	
Relationship of mutual trust:			
Agree		83%	91%
Neutral		17%	9%
Recommendations respected by Marrin:			
Agree		86%	91%
Neutral		10%	9%
Disagree		3%	0%
Comfortable contacting Marrin:			
Agree		93%	100%
Neutral		3%	0%
Disagree		3%	0%
Satisfied with relationship:			
Agree		83%	
Neutral		13%	
Disagree		3%	
Plan to continue relationship:			
Agree		93%	100%
Neutral		3%	0%
N/A		3%	0%
Likely to recommend Marrin partnership to others:			
Agree		97%	100%
Neutral		3%	0%
Marrin COVID accessibility:			
Extremely accessible		30%	
Accessible		60%	
Not accessible		10%	

A telling finding from longitudinal comparison of survey responses is the decline over time in the proportion of relationships between collaborators and Marrin Weejali that are characterised by a formal (e.g. MoU) or informal partnership arrangement. This is consistent with board and management perceptions of change in the way collaborations are conducted:

*We no longer have MoUs – partnership models are no longer formalised. NGOs are more*

*commercial so relationships are less relational, more transactional than previously. Marrin is not partnering with large NGOs.*

Data for occasions of contact suggest that partner organisations predominantly either interact with Marrin Weejali on a small number of occasions – perhaps for a brief period of time around the needs of a particular client – or are in frequent contact, perhaps as a routine element of their practice model.

#### *Agency responses to Marrin Weejali: survey findings*

Agency representatives uniformly regarded Marrin’s performance as professional and timely, and believed Marrin provides a quality service. The vast majority had sufficient information of and understanding about Marrin, and could access promotional material. The proportion of agency representatives whose experience has been very good or excellent has increased consistently over time from 86% to 100%. This may reflect Marrin’s approach to Continuous Quality Improvement or may signal the attrition of partner agencies and organisations that are not values-aligned with Marrin, or whose purpose is tangential to the services that Marrin provides (the latter possibility tends to be supported by responses to the ‘Plan to continue...’ question).

Most survey participants trust Marrin Weejali, feel that Marrin respects their judgment, are comfortable contacting Marrin (mirroring the comfort expressed by clients), are satisfied with the relationship, and are likely to recommend working in partnership with Marrin to others. Positive scores against all of these variables have increased over time. Particularly interesting is the response to the question about Marrin’s accessibility during the COVID-19 pandemic and lockdown periods: 90% of partners found Marrin to be accessible or extremely accessible, notwithstanding its physical closure and transition to electronic service provision. As discussion of qualitative data from interviews below will indicate, funding bodies and partner organisations were grateful for the agility of

Marrin during this period, particularly with regard to providing a culturally safe venue for immunisations and promoting the service.

### Insights from interviews with Marrin Weejali's funders, partners and management

#### *The nature of partnerships*

Marrin's experience in negotiating and nurturing partnerships has changed since the time of the previous evaluation. Marrin management note that the COVID-19 pandemic was disruptive to collaboration initiatives, and that they are starting to build relationships again, although it appears that the work of doing so is resting largely on Marrin's shoulders: "Government workers are staying in their cocoons."

The 2012 Evaluation Report raised the likelihood that Marrin, owing to its practice of going to extraordinary lengths to meet the needs of clients and of partner organisations too, was bearing an unfair share of the responsibility for collaborative service delivery. This situation has, to some extent, been resolved through a re-focussing of Marrin's choices in relation to the organisations and agencies it partners with.

Perhaps more significantly, changes to the way in which governments procure human services are impacting on the appetite of organisations for working collaboratively. Whereas previously the partnership model was predominantly based upon formal memoranda of understanding (MoUs) which, although not legal contracts, set out the parameters for collaboration, partnerships are now more informal and, frequently, less relational and more transactional. Marrin no longer partners with large NGOs which now have a more commercial focus due largely to contestability-based approaches to procurement and which, in Marrin's eyes at least, are more inclined towards prioritising revenue rather than service quality and commitment.

At the same time, it has become more difficult to work with some government agencies in the health and human services sector because of

characteristics of agency culture which are inimical to collaboration around culturally safe service provision. The demands of diplomacy placed upon Marrin to deal with preciousness and petty jealousy within and between agencies waste valuable time and energy and contribute to unnecessary stress, so Marrin has tended to step back from these partnerships:

*Marrin Weejali is very mindful – we choose to do something with one group, be respectful of other groups so as not to be on the outer. Not to burn bridges. It's like a tightrope – when you consider the benefit of the community, it's crap. It takes lot of human resources. Pettiness requires a lot of diplomacy; people are missing out on services. People are on stress leave; their positions are not backfilled. Preciousness is on the increase.*

More pragmatic issues such as failure on the part of agencies to backfill vacant positions or positions where the incumbent is on stress leave is also having an impact. For example, there is, at the time of writing, no Police ACLO at Blacktown, Mt Druitt or Penrith, and continuing vacancies exist within Centrelink and Housing NSW local offices. Stressed workers from partner agencies and organisations are coming to Marrin to debrief; as well as supporting its own clients:

*Marrin provides a safety net for workers to vent. Melinda grounds me.*

In this way, Marrin is, to an extent, providing de facto clinical supervision to workers from partner organisations; however, management and staff do not see this as a burden; rather, as part of the total package of caring for community.

Apart from its funding agreements, the only formal agreement or MoU Marrin has now is for participation in Circle Sentencing. Collaborating agency personnel have no appetite for formal agreements; interviews, particularly with justice sector personnel, elicited active push-back against the idea of MoUs and service agreements which are seen as a White expectation:

*Mainstream way is about MoUs and service agreements.*

*A MoU limits scope – it's a White expectation. When government comes into it there's a world of trouble. It has to be based on relationships or the culturalness is lost, because it gets caught up in red tape. What benefits would it add? The relationship is largely person to person. You don't get lost in the midst of government cliché. We trust the work that gets done there.*

*Just a friendship – there's added pressure from a MoU.*

Of course, formal agreements are in place with funding bodies: the National Indigenous Australians Agency and WentWest PHN, and interviews indicated that compliance by Marrin with the obligations placed on the organisation by its funding agreements present no issue:

*Marrin Weejali always hit their targets – in the community that needs it most. They are transparent and accountable to funding bodies and the community.*

Marrin is seen by funding bodies as an essential service provider:

*They are a key stakeholder in working with PHN needs for Aboriginal people in western Sydney.*

This strategic importance, along with Marrin's dependability and willingness to embrace creative approaches to supporting community, produces a range of expectations and aspirations which may or may not be well aligned with Marrin Weejali's own strategic direction; this is canvassed in more detail later in this chapter.

Personnel from partner organisations indicated that their collaborations with Marrin are built upon enduring personal relationships with Marrin in general, but with Tony and Melinda in particular.

*We have long-term personal relationships – their key staff remain consistent, [Community Corrections] officers build on the relationship. They always welcome new officers to come to Marrin.*

*There's no formal service agreement but the door is always open – there's always room for collaboration. It's a key portal in referrals.*

*It's very organic – finding areas to help.*

Stakeholders indicated that they collaborate with Marrin Weejali around outcomes for clients, and that these collaborations are based upon shared values.

Marrin is seen as having a high degree of flexibility around the types of initiatives they are prepared to collaborate on; as being open-minded and entrepreneurial, and as bringing tact and good judgment to partnerships:

*TAFE has a long-term relationship with Tony and Melinda. Home-grown employment pathways: we always run them through Marrin. What TAFE wants to do – what Marrin wants to do. There's never been a 'no' from Marrin – it's a partnership made in heaven.*

*They don't take over like so many organisations – they're good at co-case management. We've had forthright, open communications over the years. They're a trusted organisation – issues with clients have never got in the way.*

Professional relationships between Marrin staff and workers within partner organisations are valued.

#### *Characteristics: organisational attributes*

As an organisation, Marrin has been described by funding bodies and other stakeholders as a 'stalwart organisation', a 'pillar of the community', and a 'hub'. While other organisations come and (mostly) go, Marrin is seen as a constant; reliably and consistently supporting the community in the long term:

*Marrin is a total Mt Druitt hub. They have taken over since the loss of CDEP in Mt Druitt – they have taken over from the AMS. Lots of community groups use their premises. With their clientele, they have a very wide remit. They refer clients to services they can't supply.*

*Marrin's well respected. Working with Tony at a high level, it's a cut-through organisation. A key stakeholder, well respected, well known.*

*The fundamental thing is that community interest underpins their drive and their values. Consistency – Marrin is there no matter what. They will find a way to do it if it's important.*

Marrin's approach to values alignment throughout the organisation is regarded as a means of securing its future:

*Tony's drive filters down through the organisation – it's his legacy.*

*Personnel versus the institution – Marrin is responsible for choosing its personnel in recruitment, so they embed Marrin Weejali's vision and practices. The process never fails. You need diversity but one vision.*

An element of consistency and commitment greatly valued by stakeholders is Marrin's refusal to define its intervention solely through delivery of a service to an individual:

*They're investing in the community long-term, not just for the duration of a programme.*

*Marrin has a long-term approach – people remain engaged. It could be intergenerational. Positive influence – limited by size.*

*It has a positive impact on community that goes beyond an AoD service – it's a meaningful service, social and economic.*

Stakeholders note that it is "hard to pigeonhole Marrin Weejali into a practice model"; it is infinitely adaptable to the needs of clients and the broader community:

*Working differently is supported – lived experience, knowledge and understanding.*

*There's a leadership quality – a hidden curriculum – stuff that goes unnoticed. Staff see Tony and Melinda's practice and absorb it. It's role modelling. You see it in the works – it is transferrable.*

The 'hidden curriculum' is about modelling community leadership at all levels in the organisation. Marrin is also seen as an organisation with a focus on continuous improvement:

*The door is always open – there's always room for collaboration, improving practice. They're a key partner in referral; open to discussion. It's a learning culture; it's meaningful. Working differently is supported.*

*They're continually growing knowledge and understanding.*

One service provider observed that Marrin Weejali does not promote its successes:

*They're not good at spruiking their successes – they don't necessarily make the most of opportunities for promotion. They don't talk about success – they roll up their sleeves and do the job.*

#### *Characteristics: service attributes*

The consensus view among stakeholders in relation to factors for success in service provision are very similar to those expressed by clients. Successful delivery of effective, culturally safe interventions depends upon several factors: the relatability of the counsellors' personal experience; a non-judgmental approach; a welcoming environment, truth-telling at all levels; commitment, trust, transparency, competence, availability, reliability, open communication and respect. Service provision is viewed as highly integrative, with a strong capacity to bring services together around the needs and preferences of a specific client. In the main, clients and service providers alike feel safe with Marrin:

*Aboriginal workers feel safe to refer clients here; to bring themselves and their staff.*

*I feel confident in referring to Marrin Weejali – they're familiar faces, they employ community people.*

*Marrin Weejali provides Aboriginal workers – they're hard to find!*

*Social and emotional wellbeing factors – Marrin doesn't have a clinical approach. It's a safe and secure environment. It steps away from clinical SEWB – the cultural net is more accommodating.*

*Our clients feel lost, shame – Marrin staff have been through it; our clients are welcomed, not judged. Relationships – people who work at*

*Marrin have been through addiction – they get better results than other services.*

*Marrin provides support for communities and families. You can come in for any issue – pop in and talk to someone.*

*You can just drop in and there's someone who can talk to you. The don't demarcate specific roles.*

*It's a one-stop shop. Clients know about Marrin, they feel comfortable.*

Marrin's ability to retain staff, the quality of internal communications, and the long-standing working relationships between Marrin personnel and workers in partner organisations are a factor for success as clients are not required to explain their background and their issues repeatedly:

*Workers know each other – they understand the need for clients not repeating themselves.*

Marrin's practice of growing its own workforce is seen as a factor for success. One stakeholder observed:

*We see people coming in, improving and then volunteering. We call it "Marrinating" – they go on to bigger and better things.*

The "bigger and better things" can and do include completing a TAFE Certificate IV in Alcohol and Other Drugs, then progressing to Diploma-level studies in Alcohol and Other Drugs, Counselling or Community Services and obtaining employment either at Marrin or in partner organisations or other providers of community services.

Stakeholder perceptions of the effectiveness of Marrin's services compared with those delivered by mainstream providers (where these exist) tend to be qualitative, and this is neither problematic nor surprising given the narrative nature of Aboriginal ways of knowing. Some interview participants did, however, give some thought to ways in which impact might be measured. Marrin's effectiveness could, for example, be explored through the lens of Closing the Gap targets. One provider made the

point that Marrin's work is making a difference across many targets:

*#14 – SEWB – was core business well before CTG. #13 – families and households are safe. #10 – criminal justice sector.*

Perceptions of partners in the justice sector vary but there is a generally held view that Marrin's services impact on offending and reoffending:

*We gauge impact through feedback from offenders. Offending isn't escalating. They may still offend but there is no escalation. We need to ask if offending is escalating or de-escalating – if it's de-escalating we're getting wins.*

*Reoffending – it would be interesting to look at the data. Responsivity – if a client goes to a mainstream service, there are so many barriers, and responsivity goes down. We send them to Marrin – the impact is so different. How to measure? Culture is an invisible bond. If we look at different models in terms of outcomes, Marrin would come under the spotlight more.*

TAFE, too, is interested in the idea of research into service impact, in terms of which interventions work and why, but also expressed a desire to look closer at Marrin Weejali as a model for leadership.

#### *A particular collaboration: Marrin Weejali and the justice sector*

Consultation for this evaluation incorporated a strong focus on gathering the experiences, insights and aspirations of partners in the justice sector, including Community Corrections Officers (CCOs) and Judicial Officers. Magistrate's and District Court and Community Corrections referrals make up a significant proportion of Marrin Weejali's incoming clients (about one third of clients who participated in Client Surveys were referred by the justice system). Referral to Marrin is seen both by clients and by the Courts and Community Corrections as an alternative to custody. For some clients, contact with the court is seen to be the only way to get help.



A network of linkages exists between Marrin and justice system referrers. Magistrates come to know Marrin Weejali senior staff through their participation in Circle Sentencing, often as the Community Elder. Community Corrections personnel tend to have long-standing working relationships with Marrin Weejali; referral to Marrin Weejali is often a condition of an offender being referred to Circle Sentencing.

The relationship is built on recognition of and respect for Marrin's professionalism and reliability in delivering services which meet client needs while maintaining public safety. Collaboration is largely structured around client referrals, generally as a condition of bail, bond or parole, or around Circle Sentencing.

Justice sector stakeholders seek to refer clients to Marrin Weejali to address their criminogenic issues: substance misuse, anger and compromised SEWB. Clients may be referred under orders of either the Court or Community Corrections or may self-refer; either way, referrals originating in the criminal justice system make up a substantial proportion of Marrin's client base. CCOs indicated that clients, including those from suburbs outside of Marrin's main catchment (Blacktown and Penrith Local Government Areas (LGAs)), ask to be referred to Marrin Weejali. CCOs also refer non-Aboriginal clients to Marrin:

*Some non-Aboriginal clients are comfortable to come to Marrin, some not – but that also applies to Aboriginal clients.*

Offenders are frequently people with family violence issues or drug offences; predominantly young – aged in their 20s, 30s and 40s; and predominantly male. Stakeholders indicate that offending behaviour tends to continue as people age, and that lack of resources and continued immersion in unsafe environments tends to perpetuate offending behaviour. It was observed that a lot of young people are coming through the justice system; the desire is to refer them to Marrin Weejali rather than into custody.

Stakeholders suggested that court practice is being shaped to some extent around availability of support at Marrin Weejali: that magistrates, for example, are prepared to adjourn proceedings for six to eight weeks, if necessary, to secure offenders a place at Marrin Weejali and for offenders to begin to work through their issues. Marrin's expertise, the quality and reliability of communication, and Marrin's commitment to setting and maintaining boundaries are all critical factors in the relationship of trust that exists between Marrin and justice sector collaborators:

*It's about accountability to the Court.*

*It's the officers' duty of care to refer to services that work. Officers quickly assess bad services and don't refer. Truth in referral processes leads to safety.*

*Marrin will give honest, professional judgment about any client offender. At a professional level, we know what each other need. We refer people – it destigmatises Probation and Parole, it helps clients to understand what Community Corrections' role is. Marrin Weejali takes up the role – takes up the role of family.*

*Communications between Marrin and Community Corrections personnel are different from other organisations.*

*Marrin is respectful of conditions of supervision – for example, around AVOs, technology restrictions. Marrin is transparent. The primary focus is on rehabilitation to reduce risks. Marrin will communicate risk – it's two-way communication. We trust the work that gets done there.*

*They are experts – we rely on them to make choices for the Court. It's a comforting safety net. If you put them on a bond, I don't find much comfort referring to Community Corrections. I'd feel comfort in Marrin Weejali, who will find them anywhere.*

*I understand Marrin Weejali as being part of the solution to the problems that exist.*

*At a personal level, we can get guidance with respect to clients. We relate as colleagues – the go-to people are Melinda and Tony – they know all the clients, can discuss issues with the counsellors; they are a sounding board.*

The respectful, long-term associations between clients and counsellors and between clients and Marrin itself are another aspect of the service that justice sector personnel value, as the relationships deliver greater confidence that clients will be less likely to reoffend or that their offending has a lower risk of escalating over time:

*We only see clients for the duration of their order but they still connect with Marrin – they can keep going.*

*Clients want to keep in touch – “Let my counsellor know” if anything goes wrong.*

### *Organisational culture and Aboriginal Culture*

Marrin Weejali is widely recognised by stakeholders, and especially Aboriginal service providers, for its approach to cultural safety. Culture is widely understood to permeate everything that the organisation is and does: it is present in the welcome that clients and non-clients alike receive when they visit, in the ‘yarning’ aspect of one-on-one counselling and group work, the ethos of exceeding reasonable expectations, and the way in which the organisation mirrors traditional family structures and relationships:

*The staff go beyond cultural competency – programmes are culturally led – it’s not just a cultural voice. It captures, family, impacts of racism, government policy. They always do self-reflection – past-present-future, knowing-being-doing. Be present and reflect. It flows into their work.*

*It makes a difference to have Aboriginal counsellors – the personal experience, they’re non-judgmental.*

*Counselling one-on-one – yarning – is crucial; it has a profound effect. Engagement with a specific counsellor is important – they talk about their counsellor. With the Men’s Group – in some respects, participants are doing their work for them – it makes a big difference. It’s their mob, not government.*

*The clients trust in the staff – the personal experience is relatable. It would be hard to refer to a white service when what they need is a culturally appropriate service.*

*Young men need to listen to their elders – come to meetings as a first step.*

*There’s always coffee and tea, someone to talk to – it’s a symbolic part of culture, to have a yarn.*

Organisational culture at Marrin Weejali is modelled throughout the organisation. Stakeholder observations throughout the consultation phase for this evaluation demonstrate that the organisational values discussed in Chapter 4 consistently inform everything that Marrin Weejali does; all of the organisation’s interaction with clients, community and collaborators.

### *Without Marrin Weejali, we couldn’t ...*

Marrin Weejali is an essential service for stakeholders wishing to make connections with the Aboriginal community. Because the Marrin Weejali centre is a culturally safe space, and because of the seamless way in which Marrin brokers wrap-around services for its clients, community members are comfortable interacting with a variety of service providers that would otherwise have difficulty in engaging:

*Connecting with community the way Marrin does – we couldn’t do it with any other organisation.*

*The cultural support would be difficult to find elsewhere. It meets what community needs at the time.*

*Marrin is the only organisation that provides broadly based service provision and brokerage.*

*Only Marrin provides wrap-around services for women, and referral pathways.*

As with clients, whose most fervent wish for Marrin was that it would continue to exist and to provide a service, partner stakeholders contemplated the challenges of supporting the community in the absence of Marrin. If Marrin Weejali weren’t there:

*There would be no culturally safe service to refer clients to.*

*It wouldn’t be as easy without Marrin Weejali – it helps a lot.*

*There would be more people incarcerated, more kids in out of home care, deaths, domestic violence, crises, hospitalisations, community issues that affect everyone – non-Indigenous and Indigenous.*

### *Community issues, gaps and barriers*

Views on service gaps varied. One funding agency representative opined that there are no gaps; just demand. Other providers, however, identified a number of substantive gaps, the most pressing of which is lack of an accessible, culturally safe residential rehabilitation centre. A further collaborator made the very valid point that:

*It is hard to identify gaps because Marrin Weejali always says “We’ll see what we can do”.*

Stakeholders identified several persistent and emerging issues which they would like to see addressed either in partnership with, or with intervention by, Marrin Weejali. These generally relate to specific substance-related issues, geographical availability of services, withdrawal of services previously available, and the needs of groups not currently supported.

Access to and use of e-cigarettes (‘vaping’) is an emerging issue of concern to stakeholders not only since the health impacts are not yet well understood but also because of its appeal to children and young people. It is seen as having the potential to become a ‘gateway’ drug which leads to use of other substances.

At the time of the previous evaluation, crystal methamphetamine (‘ice’) and other amphetamine-type stimulants (ATS) were increasingly an issue of concern. In the intervening period, Marrin has contributed to the Special Commission of Inquiry into the Drug Ice (Tony Hunter served as a member of the First Nations Advisory Committee), which reported to the NSW Parliament at the beginning of 2020. Stakeholders, including Marrin Weejali directors, note that ice is still problematic in the community, and creates challenges because there are few services available which can successfully

address the mental health issues ice causes, or support the families of ATS users.

Availability of culturally safe AoD and SEWB services to people living in areas other than Blacktown and Penrith LGAs was identified by stakeholders as problematic:

*We need more of Marrin across the Sydney metro area. It’s the only culturally appropriate organisation but not everyone can get there – Maroubra, the south-west ...*

Service providers and clients also identified a need for services for younger age cohorts: either 15 years and older or, as one participant suggested, 9 years and older.

### *Everybody wants more Marrin*

*There’s not enough Marrin for the Aboriginal community in western Sydney; there just isn’t enough.*

Stakeholders were asked to consider ways in which Marrin Weejali could build on its strengths to assist partner organisations to work more effectively, to identify ways in which the collaborative relationship could be further developed, and to articulate their own hopes for Marrin’s future development. These questions elicited a variety of responses but one aspiration was consistent across almost all participants: a residential alcohol and other drug rehabilitation service for western Sydney, to be owned and operated by Marrin Weejali.

Interview participants are remarkably consistent in relation to what a residential rehabilitation centre should look like. It should:

- Include detox facilities;
- Operate in the context of a through-care model which would involve clients progressing to a maintenance service at Marrin after completing the residential programme;
- Operate within more flexible risk management parameters which do not apply blanket exclusion on the basis of prior offending;

- Be situated on the western Sydney peri-urban fringe;
- Integrate health services, education and work and living skills into the programme; and
- Deliver continuity of care by existing Marrin Weejali staff.

Detox facilities in western Sydney are manifestly inadequate:

*There are 12 beds for detox at Nepean – that’s all. It’s never grown. Where’s the logic? We’d like to see detox at Marrin but they need capital works funding. We need more detox – one at Blacktown, one at Blue Mountains.*

The geographical location of the rehabilitation centre is fundamental:

*They’re struggling to find rehab places for clients – having to drive clients to Brewarrina. It’s such a desperately needed service.*

*They’re running to Orana Haven – they get clients to Orana, then they wait for their families; they worry about their families because they’re so far away.*

*A residential rehab is needed – it’s a massive trip to visit family at The Glen, The Buttery – you must have family involved. Because of shame initially, family aren’t involved but after a month, they need to reengage. Then the rehab works with the family too.*

*The issue with referrals to distant rehabs is that the client gets a new CCO and has to tell their whole story again. We need a rehab in western Sydney. Otherwise they come back into the same environment – it’s unfair on the clients.*

Access to rehabilitation places is not limited solely by space constraints and geographical remoteness. Existing services increasingly require applicants to provide criminal histories; this has time and cost implications for clients. Services generally have blanket exclusions for potential clients who have been convicted for serious offences thereby discriminating against Aboriginal clients.

Strong demand also exists for expansion of service capacity supported by a larger centre on the

existing site with outreach to other locations. Stakeholders recognise that space constraints at Marrin Weejali limit the extent of services that can be provided; at the same time, recognition that Marrin provides the only culturally safe space for service delivery is driving a variety of aspirations for incorporation of a wider variety of services, including:

- Outreach for primary prevention services for children from 9 years upwards;
- Mental health outreach service to Emu Plains;
- Provision of a case manager for women at Dubai Gunyah;
- Outreach either by Marrin to Community Corrections or by CCOs to Marrin;
- Extension of Marrin Weejali outreach services to other locales including Maroubra, south-western Sydney, and Community Corrections offices at Blacktown and Parramatta;
- A Marrin Weejali court advocacy service at the Mt Druitt Local Court on a regular or semi-regular basis to facilitate engagement of offenders as early as possible before criminal behaviour is established;
- Outreach services into regional areas to support men leaving Sydney;
- Reinstatement of health outreach services along the lines of the Health Outreach Hub, including restoration or duplication of the Mootang Tarimi bus to WSLHD;
- Involvement in establishment and operation of Head to Health in Parramatta;
- Transition to an ACCHO as a research hub for chronic disease;
- Clinical supervision for LinkUp counsellors;
- Support for DVLOs including clinical supervision for workers, perpetrator support, victim support and help with application processes;
- Either participation on Community Corrections Aboriginal Advisory Committee or leadership by Marrin of a new governance and advisory body to develop a cultural safety model for Community Corrections services to clients;
- Additional collaborative initiatives with the Emerton Amcal + Pharmacy, including Marrin staff presenting to pharmacy staff; and

- Expansion of current relationships with general practice.

Aspirations of justice sector partners vary.

Community Corrections personnel seek closer ties with Marrin either through Marrin providing outreach services at Community Corrections premises or, as one CCO suggested, through placing Community Corrections personnel at Marrin:

*I would like to see a couple of CCOs in Marrin – it would normalise supervision, people come to Marrin and see it as safe. They come to Community Corrections; it's not seen as safe – there's a trust issue. Two officers in Marrin – they would participate in everything that happens and clients wouldn't breach.*

This CCO's view was that keeping Marrin and Community Corrections separate is contributing to the recidivism rate. An alternative view was expressed by a judicial officer who considered it important to keep Marrin Weejali at arm's length from the bureaucracy.

As one stakeholder pointed out:

*When you're helpful, people ask you to do more.*

Because Marrin Weejali is one of very few stable, highly effective Aboriginal community-controlled organisations accessible to the western Sydney communities, stakeholders tend to project onto Marrin their aspirations for service expansions, future collaborations and even structural re-organisation, regardless of whether these are consistent with Marrin's strategic agenda or service footprint. Desires such as those expressed by the WentWest PHN in relation to Marrin becoming a research hub and an ACCHO, and by Community Corrections in relation to embedding personnel and provision of outreach services in unsafe spaces, are clear examples. Yet Marrin has achieved its success by staying true to its core business. It is also worth noting that not one organisation or agency which refers clients to Marrin raised the matter of financing the things they want Marrin to do.

Representatives of funding bodies are aware of Marrin's priorities for future development. NIAA personnel have escalated the residential rehabilitation service investment case to their Regional Manager with a view to taking it forward. WentWest PHN contract managers recognise that capacity constraints limit Marrin's ability to expand services but indicated that they would be supportive of Marrin's growth:

*There are number of challenges – finding the right people. We would support growth – not too fast but we would support them. We may need to look at structure – restructure to accommodate growth. They would need to find a larger location ... The focus with WentWest for Marrin Weejali is for Aboriginal people. They already provide a venue for Ray Kelly – Tony is interested. We would be happy to support Marrin to transition to an ACCHO.*

These comments suggest that Marrin may need to be cautious in relation to any aspirations for service expansion: the changes envisaged by funders may undermine the very characteristics which make Marrin such as successful organisation.

Only one long-term partner expressed a degree of recognition that the assumption that Marrin is infinitely stretchable, bendable and adaptable can be a burden:

*It's a heavy weight for them – being everything to everyone in the community.*

## 7. RISKS, ISSUES, BARRIERS AND CHALLENGES

### Introduction

The experience of COVID-19 has been challenging for Marrin Weejali as an organisation, for its management and staff and, not least, for its clients. Marrin has risen to the challenge but the experience has also brought into sharp focus some of the obstacles to doing what Marrin has always tried to do: to ensure that the holistic needs of clients and community are met in a seamless and timely way.

For an organisation whose core purpose is to work with clients whose lives are falling apart, Marrin appears to face very few internal issues and those which do arise are dealt with promptly and effectively. COVID has demonstrated that the Marrin board, management and staff are able to respond creatively and with great agility to ensure that service provision to their own clients can proceed in as normal a way as possible, and that the less routine needs of the broader community can also be met in a way that is safe, innovative and collaborative.

The consultation process for this evaluation has identified a short list of interrelated issues which are worthy of consideration; these can be grouped as follows:

- Infrastructure;
- Workload;
- Funding and resourcing;
- Partnerships; and
- Succession.

### Infrastructure

Over the two intercensal periods from 2011 to 2021, the approximate time period between the previous evaluation and the current one, the combined Aboriginal and Torres Strait Islander Estimated Resident Population of Blacktown and Penrith LGAs increased by 73% from 16,520 to 28,502. During that period and to date, no additional capital works funding commitment has

been forthcoming to allow for expansion of Aboriginal community controlled AoD and SEWB services. There is broad recognition that Marrin is bursting at the seams, and that ability to employ extra staff, provide additional groups and negotiate more partner-delivered services is restricted by the space available onsite. The 2012 Evaluation projected that the rapid growth in service demand since opening of the new facility would require Marrin Weejali to consider options for extending its centre. The situation, over the intervening period, has become critical. The challenge for the organisation is how to carve out time, in the face of ever-expanding service demand, to learn the skills required to negotiate the labyrinthine political processes necessary to secure investment, in competition with the major NGOs which have made an art-form of playing the funding game.

In an ideal world, and subject to planning controls, Marrin Weejali directors and management would be looking to purchase neighbouring properties as they become available to enable the current centre to be extended, and complementary facilities to be developed. The two properties at the rear of the site would be ideal in that development flows as a natural and logical extension of the existing building. The contentious issue of car parking could also be overcome with the construction of an underground car park. Both properties to the rear are privately held.

In addition to expansion of the existing centre, Marrin Weejali is actively pursuing the widely acknowledged need for a residential rehabilitation centre on the western Sydney peri-urban fringe. An investment case has been prepared and is being vigorously promoted to funding decision-makers. The first recorded recommendation for provision of a residential rehabilitation centre was made in the *Western Sydney Aboriginal Substance Misuse Regional Plan*, in 2000. Twenty-three years later, this is surely a proposal whose time has come.

### *Workload*

Marrin Weejali directors, while strongly supportive of the organisation's approach to going to any lengths possible to serve the community, are concerned about the impact on staff of the ever-increasing service demand. The absence of a residential rehabilitation centre in western Sydney is taking its toll on day clients as well as those who require residential rehabilitation because of the opportunity cost of having two staff members out of the office for two days taking clients to and from Orana Haven south of Brewarrina and other destinations. The board is also conscious that space limitations and resource constraints make it impossible to take on additional staff. Partner organisations generally aspire to staffing increases for Marrin Weejali, as do Marrin Weejali's management and staff themselves, and this needs to be pursued. It is remarkable that Marrin is able to do what it does within the physical constraints of its existing building. Staff numbers and client load are well in excess of the numbers envisaged at the time of planning the Jersey Road centre.

Extension of services at an expanded Marrin Weejali, and provision of residential rehabilitation, will involve a larger workforce. Marrin's practice of developing a 'grow-your-own' workforce, together with the strong and productive partnership with TAFE, means that Marrin is well placed to increase its staff complement as required. If the workforce is drawn from past clients and other people already in Marrin's orbit, as discussed in Chapter 6, then prospects are positive for ensuring the 'hidden curriculum' endures.

An additional issue related to workload is a tendency on the part of some agencies to exploit Marrin's approach to 'bending over backwards' to meet client needs. Marrin needs to be conscious of the risk of non-negotiated mission creep in partnerships where no formal agreement or MoU exists. More problematic is the practice of agencies with which Marrin has no working relationship covertly foisting their responsibilities onto Marrin; for example, by dropping clients with urgent

problems, not necessarily AoD- or SEWB-related, around the corner from Marrin and instructing them to present themselves. Incidents of exploitation referenced by Marrin management and staff included referral of:

- An offender under an eight-week supervision order three weeks before their order expired;
- A patient with highly complex acute mental health issues directly from hospital where the person had been stabilised but not treated; and
- A patient with a developmental disorder which made the person unable to socialise (when Marrin's programme is all about therapeutic interaction with counsellors and other clients).

### *Funding and resourcing*

Marrin Weejali is funded by the Commonwealth Government through NIAA and through WentWest PHN. No NSW Government agency has provided funding to Marrin Weejali. The NSW Government budget bottom line derives tremendous benefit from Marrin's activities through reduction in offending which leads to reduction in the number of people in custody, improvements in clients' and the community's physical and mental health, reduced incidence of family breakdown, provision of informal employee assistance to agency staff, and various community development outcomes. Yet during consultations for this evaluation, not one among all the agency personnel interviewed raised the financing of the things that they want Marrin to do. Not for one minute would Marrin entertain the idea of declining services to, for example, Court or Community Corrections referrals; however, deployment of personnel to advocacy roles in the Local Court and outreach to Emu Plains and Dubai Gunyah comes at a cost. It is time that the equities of provision of recurrent funding, bearing in mind the benefits derived, were given serious consideration by governments. Allied to this issue is the continuing stress caused by short-term funding contracts. To be able to plan and deliver services to support the community in the long term, Marrin Weejali would benefit greatly from longer-term security of funding.

### *Partnerships*

Marrin's continuing partnerships are long-standing, respectful and productive. As the interview data demonstrated, the proportion of Marrin's partnerships that are defined by a MoU or other form of agreement has declined. This is not of itself a problem; the view that MoUs are culturally inappropriate or irrelevant, and that they introduce bureaucratic impedimenta, are legitimate (although the resourcing question is possibly less amenable to resolution in the absence of some formal form of agreement). Cultural aspects of decisions not to enter into MoUs and Service Agreements may need to be forcefully articulated and re-articulated in the context of Marrin's periodic quality audits; assumptions within accreditation standards related to the desirability of formalising agreements tend to be very White.

As Chapter 6 indicated, because of Marrin's consistency, effectiveness and reliability and, in particular, the cultural safety it offers to clients and community, partners tend to project aspirations onto Marrin that are not necessarily consistent with core business or, more fundamentally, with Marrin's values. The partnership with Community Corrections raises potential problems in this regard. Aspirations for outreach by Marrin staff to Community Corrections offices or for embedding of CCOs within Marrin present a fundamental threat to cultural safety. There is no culturally safe way of having Marrin and Community Corrections personnel co-located. Moreover, as the mission of Community Corrections is surveillance and discipline, by definition, it can never be a culturally safe institution while ever a power imbalance is inherent in everything the agency is and does. The suggestion of Marrin undertaking Court advocacy, on the other hand, is of potential interest because it presents a means to triage offenders to break patterns of offending before they escalate, and to provide support to families. This could be seen as an extension of Marrin's involvement in Circle Sentencing.

More broadly, Marrin Weejali should be conscious of expectations that, to put it bluntly, equate to rescuing organisations that wish to use Marrin Weejali as a shortcut to cultural safety within their own organisations through outreach instead of doing the hard intellectual and emotional work of cultural safety themselves.

### *Succession planning*

At the time of the previous evaluation, succession was an aspect of Marrin Weejali which interviewees did not particularly want to discuss. Since that time, progress has been made in setting Marrin up for longevity.

In addition to expansion of services through extension to the existing Marrin complex and the addition of a residential rehabilitation service, the Board indicated a desire to ensure succession within Marrin by "training the right people" and mentioned the need for anyone associated with Marrin to "have respect for the community". Marrin Weejali is a unique organisation. One of the insights obtained from interviews with clients, partners and staff is the way in which values and practices are unvarying throughout the organisation. The "grow your own" approach in combination with the partnership arrangements in place with TAFE are conducive to training a future Marrin Weejali workforce which has the same characteristics as those which underpin existing approaches to culturally safe service provision. Ideally, succession to leadership positions will be from within the organisation. At the time of the previous evaluation, the view was expressed that some formal succession planning was needed, but the approach needed further consideration. It appears that, since then, the matter has taken care of itself, in that Marrin appears to have grown its own cohort of future leaders. It may be worthwhile considering some formal training in management and administration for staff identified for leadership roles but it is very apparent that the organisation is well set up to take its spirit into the future.



## 8. CONCLUSIONS AND SUGGESTIONS

### Introduction

This chapter responds to the evaluation questions articulated in Chapter 2, and distils the aspirations expressed in relation to Marrin Weejali's future into a series of specific suggestions which may then be considered as Marrin Weejali prepares its *Strategic Plan 2024-2029*.

### Conclusions

How do Marrin Weejali's clients, board members, staff, funding agencies and partner organisations characterise their interaction with Marrin Weejali? What form do these relationships take? What is Marrin Weejali's broader role in the community? What are their aspirations for Marrin Weejali's future development, and for their own part in Marrin Weejali's future?

Stakeholders consulted for this evaluation tell a remarkably consistent story about their interaction with Marrin Weejali. In addition, the themes and opinions emerging from the current evaluation process are remarkably consistent with the findings from the 2012 Evaluation. Interactions with Marrin Weejali are culturally safe, spiritually elevating and make a massive practical difference to everyone who encounters the organisation.

For clients, the interaction is life-changing and, in cases, life saving. The intense relationships between clients and their counsellors, between clients and other Marrin staff, and within the client cohort are the basis for personal change and growth, and for rebuilding the fabric of families and community.

For the board, the commitment directors feel to Marrin is a subset of their intense dedication to the community. Directors recognise the value that Marrin provides to the Aboriginal community of western Sydney and beyond as the only culturally safe option for AoD and SEWB services, and wholeheartedly support the above-and-beyond

approach of management and staff to meeting community needs but also have a clear-sighted appreciation of the challenges Marrin faces both as a consequence of under-investment and owing to the often exploitative nature of partnerships.

For funding agencies and partner organisations, Marrin provides an entrée to the Aboriginal community which would otherwise be unavailable. Partners see Marrin variously as professional, effective, trustworthy, transparent, accountable, consistent, obliging, creative, empowering, relational, empathic, non-judgmental, and welcoming. Marrin goes beyond delivery of client services to providing informal support for the mental wellbeing of partner personnel. Partnerships with Marrin are of great strategic importance to collaborating agencies and organisations in bolstering their ability to meet their targets. Nowhere is this more apparent than in the justice sector.

Arrangements for the establishment and maintenance of partnerships has changed markedly since the previous evaluation. Formal service agreements and MoUs have fallen away; partners regard these as unnecessarily bureaucratic, and impediments to doing the work. The range of Marrin's collaborations has contracted over time; in some cases, services formerly provided in-house are now dealt with on an external referral basis. Some partners simply are not around any more. A contributing factor to change has been growth in application of a contestability model for government procurement of services which has led to a less collaborative, more transactional ethos among large-scale NGOs; Marrin no longer works in partnership with these organisations. Some partnerships have strengthened over time – for example, the TAFE connection; some new partnerships, such as that with Emerton Amcal +, are proving transformative.

Marrin is not funded to undertake community development activities yet, owing to its emphasis

on supporting not only individual clients but their families and others in their circles, its impact is felt communitywide. When community support and advocacy initiatives such as the COVID-19 immunisation clinics and involvement in aid of restoration of ACCHO services are added into the mix, Marrin's acknowledged place at the heart of the western Sydney Aboriginal community is easy to fathom.

As noted in the previous evaluation, the high regard for Marrin's capacity among funding agencies and partner organisations seems to translate to a tendency to project onto Marrin Weejali any unmet health and human service needs which are exercising them at the time. Some of these are well out of scope of Marrin's core business, at variance with Marrin's target clientele, or present unacceptable cultural risks. At the same time, though, there is a high degree of consensus across all stakeholder groups about particular aspirations for Marrin's future development. Chief among these is a unanimous call for Marrin to develop and operate a residential rehabilitation centre, and a strong demand for the existing centre to be extended, and service provision expanded, with additional staff trained and employed to work with clients within the same cultural framework as currently drives Marrin's service ethos. Partner organisations interviewed value their partnership with Marrin and seek to continue to develop their collaboration in the long term.

What positive difference does Marrin Weejali make to the lives of clients and the broader community, and what are the enabling factors that make this possible? Are there aspects of partner organisations' practice which would be more difficult without Marrin Weejali's support? What are Marrin Weejali's strengths? How can Marrin Weejali build on the relationships it has in place and the things it does well to facilitate more positive change in the lives of individuals, families and community?

The difference Marrin makes to the lives of clients is clear-cut: Marrin Weejali saves lives, and it changes

lives. This is clear from client focus groups and, expressed in the corresponding negative form, it is clear from stakeholder interviews: without Marrin, there would be more people incarcerated, more children in out of home care, more domestic violence, crises, hospitalisations and deaths.

At the scale of individuals and families, Marrin delivers obvious health benefits that derive from addressing addictions, social and emotional wellbeing deficits and mental illness; so much is obvious from quantitative data. What is not quite so obvious is the improvement in day-to-day functioning and in sustaining respectful relationships that is derived from clients feeling safe to express their needs and their anguish, learning strategies to manage their anger and other negative emotions, and internalising the skills and values needed to relate in a healthy, positive way to other people in the family and community settings. The ripple effect across the community is difficult to measure but undoubtedly has a significant impact across a range of Closing the Gap targets, not least in relation to diversion of Aboriginal people from the criminal justice system.

The principal enabling factor for Marrin's community impact is its all-encompassing approach to cultural safety. This is manifest in the welcome that Marrin provides to clients, their families and the broader community; it is expressed in the accepting, non-judgmental, empathic way in which staff interact with clients; it is inherent in the mutual support among clients which enables each and every person who crosses Marrin's threshold to feel a valued and a contributing member of the Marrin Weejali family. This is not to diminish the importance of the formal training and credentialing that Marrin's professional staff undergo; however, the formally acquired skills are just one of the attributes that the clients see. Equally important, and perhaps more persuasive from the perspective of somebody whose world has fallen apart, is the life experience of the counsellor; the adaptability in identifying collaboratively with each client what goals are to be worked towards, and the love and respect which are central to the interaction.

There are clearly aspects of partner organisations' practice which would be more difficult without Marrin Weejali's support. The availability of Marrin as a referral destination is clearly important but Marrin is more than that; the organisation makes it possible for service providers to connect with the community. Through its ability to form and nurture partnerships and to broker assistance, Marrin offers service providers the opportunity to promote a spectrum of support services which can be wrapped around their clients. According to collaborating agencies and organisations, no other organisation can do this. Effectiveness and reach could be enhanced with additional infrastructure, and with expanded resources. Marrin has always made it a strategic priority to focus on its core business. The key to Marrin's ability to build on its successes is to continue with this focus, and to retain its emphasis on sound governance and on a consistent commitment throughout the organisation to traditional Aboriginal cultural values.

What currently unmet needs within the community could Marrin Weejali meet or help to meet, either through direct engagement where these needs are relevant to core business, or through brokerage or collaboration with other providers?

Evaluation participants were unanimous in relation to the single most pressing community need that Marrin could meet: a residential rehabilitation or cultural healing centre. Most stakeholders are aware that Marrin is prosecuting the case for funding with funding bodies and through political channels; NIAA project personnel are assisting by advocating at more senior levels within the agency.

The board, which is the principal strategic conduit for community needs and aspirations into Marrin, has identified as priorities a continuous focus on building existing AoD and SEWB services through training and employing more workers within an enlarged centre; supporting the provision of domestic violence and family services; breaking down geographical barriers to access to Marrin's services and, of course, the development of a residential rehabilitation centre. Resourcing

expansion of day services would make it possible for Marrin to meet some of the needs identified by clients, such as out-of-hours groups, additional groups such as Al-Anon, GA and additional non-clinical mental health services, as well as extending collaborations with partners such as the Emerton pharmacy.

Growth of demand for detoxification services has, because of lack of investment, completely outstripped the capacity of existing services. An in-patient detox service, supported by employment of a registered nurse, should be explored as an element of the proposed residential rehabilitation service.

Needs identified by partner agencies and organisations have been noted above. A number of these relate, too, to arrangements for access for a more geographically dispersed population through an increase in outreach service provision. In general, it is likely to be impractical for many of these needs (for example, outreach services to Maroubra, Parramatta and Emu Plains) to be met by Marrin because of resource constraints and, also, because of the need for Marrin's workers to be supported by colleagues within Marrin's centre. The suggestion of a Court advocacy service, though, is worthy of further consideration in that it is likely to provide an excellent opportunity for early intervention and diversion from the criminal justice system.

One thing Marrin will need to bear in mind is whether or not an appetite exists for expansion into areas which could be defined as provision of clinical services. Compliance requirements related to clinical governance have the potential to introduce excessively onerous demands on Marrin's workforce to the extent that it is not in Marrin's interests to offer clinical health services. Proposals for Marrin to become a research hub for chronic disease or transition to an ACCHO are likely to fall into this category, as well as diverting focus from core business.

It is important that external proposals for new services be interrogated against the Marrin's Strategic Plan and its primary business objectives. Specific strategic responses are recommended below. The suggestions which follow are, for the most part, intended to form the basis for reflection and discussion internally within Marrin in the lead-up to Strategic Plan preparation in 2024. A small section at the end lists recommendations for governments.

### Suggestions for Marrin Weejali

#### Investment

It is suggested that Marrin Weejali:

- Continue to pursue capital works investment to permit the development of a residential rehabilitation centre, including a detox facility, on the western Sydney peri-urban fringe, as proposed by the Burns Aldis report, *Regional service development: The case for an Aboriginal residential healing centre*, February 2018 and subsequent Hadron *Case for Investment*;
- Advocate for funding for and conduct a feasibility study of options for expanding Marrin's services on the current site, including through purchase of surrounding properties;
- Negotiate a NSW Government contribution to recurrent funding commensurate with the benefit that is derived through Marrin's providing services to referrals from DCJ (communities and justice) and other agencies including NSW Health; and
- Negotiate longer-term arrangements for operational funding to provide certainty around future service delivery.

#### Workforce

It is suggested that Marrin Weejali:

- Act with caution in forming any additional collaborative relationships which have the potential to increase staff workload, especially given that there is nowhere within Marrin for the time being to locate additional staff; and

- Continue to partner with TAFE to build a pipeline of values-aligned future personnel who have existing ties with Marrin.

#### Promotion and awareness

It is suggested that Marrin Weejali:

- Add a dashboard to the Marrin Weejali webpage which graphically presents service demand, response and performance.

#### Partnership

It is suggested that Marrin Weejali:

- Continue to foster existing and negotiate new partnerships with values-aligned health and human service providers where these support common core objectives and value-add to client AoD and non-acute mental health outcomes and to the health, social and economic status of clients' families and community;
- In the absence of MoUs and service agreements, carefully monitor partner expectations around workload taken on by Marrin to avoid 'mission creep' into areas which compromise Marrin's ability to meet client needs without causing additional stress to the organisation or dilute Marrin's cultural imperatives;
- Support partner organisations to deliver culturally safe services through collaborations which enhance cultural competence within the sector but be wary of collaborating with organisations which are unwilling to undertake the work of cultural safety themselves;
- Monitor demand from partner organisations in the justice sector with a view to ensuring that the needs of diverse cohorts of clients can be anticipated, planned for and met;
- Investigate and implement a regular court advocacy service at Mr Druitt Courthouse in consultation with the Magistrate; but
- Decline to outreach to Community Corrections offices or to have CCOs located within Marrin for reasons of cultural safety;

- Continue to raise awareness of Marrin Weejali services amongst health, allied health and human service providers but in an understated manner in view of internal service constraints; and
- Where it is politically prudent to do so and where client needs can be met in other ways, withdraw from relationships which are exploitative or which involve Marrin in jumping through hoops to satisfy egos.

#### *Specific service expansion*

It is suggested that Marrin Weejali:

- Consider whether it is possible given space and staffing constraints to provide additional groups suggested by clients;
- Consider the possible benefits, risks and additional staff training required for extending service provision to younger age cohorts; and
- Explore the feasibility, given staffing constraints, of additional programme offerings for intervention for tobacco addiction and use of e-cigarettes (vaping).

#### **Recommendations for the NSW Government**

It is **recommended** that the NSW Government:

- Implement the recommendations of the Special Commission of Inquiry into the Drug 'ice'; and
- Provide a funding stream to Marrin Weejali to assist in meeting the costs associated with service provision to Court, Community Corrections and DCJ referrals.

## APPENDIX A – CLIENT GROUPS, PARTNER ORGANISATION AND FUNDING AGENCY REPRESENTATIVES CONSULTED

### Agency survey, July 2018

25 respondents: agencies and organisations represented included:

- Lifestyle solutions
- Greater Western Aboriginal Health Service
- Catholic Care Parramatta
- Western Sydney University
- Western Sydney Local Health District (WSLHD)
- ARDAC Kidney Health Study
- Bidwill Family Practice
- Muru Mittigar
- Kildare Road Medical Centre
- Community Corrections

### Agency survey, January-February 2021

30 respondents: agencies and organisations represented included:

- Department of Communities and Justice – Housing, Mt Druitt
- Emerton Amcal Pharmacy
- TAFE Mt Druitt
- Department of Communities and Justice
- Western Sydney Local Health District
- WESTIR Ltd
- WSSHC
- Mt Druitt Community Health

### Agency survey, December 2022

19 respondents: agencies and organisations represented included:

- TAFE Mount Druitt
- WSLHD Needle & Syringe program
- Mission Australia Kingswood
- Mission Australia Western Sydney Homelessness Outreach Prevention and Rapid Rehousing Support Service
- Western Sydney Community Legal Centre

### Qualitative interviews

#### 31st May 2023

- Mandy Zaccazan, Penrith Community Corrections
- Bianca Radburn, Corrective Services NSW
- Storm Masters, Vickie Chan, Richard Moellmer and Shan, Mt Druitt Community Corrections
- Vicki Pannaye, Transforming Aboriginal Outcomes Division, Department of Justice
- Shirley Brown, Western Sydney Local Health District

#### 1st June 2023:

- Penny Lees and Kylie Wilson, Mt Druitt TAFE
- Carmon Corderoy, Declan, Sam, Danny, Cos and Dave, Blacktown Community Corrections
- Chris Planer, Mt Druitt TAFE

#### 2nd June 2023:

- Jelly Magirazi and Rowena Tagalao, WentWest Primary Health Network

#### 15th June 2023:

- Curtis Ruhnau, Amcal+ Pharmacy, Emerton

#### 26th June 2023:

- Bianca O’Hanlon, LinkUp

#### 17th June 2023:

- Jo Kerr and Judy Johnson, NIAA

#### 11th July 2023:

- Suzanne Donovan, GWAHS

#### 13th July 2023:

- Lizzie May, DCJ and LinkUp

#### 20th July 2023:

- Magistrate George Breton, Mt Druitt Local Court

### Focus groups

Marrin Weejali board members (31st May 2023)

Members of Men’s Health Group, NA, DBT Mental Health Skills Group, AA, and Better Man (31st May 2023)

Members of SEWB Group, Relapse Prevention, Anger Management, NA, AA, Domestic and Family Violence Groups (men and women) and DBT Mental Health Skills Group (2nd June 2023)

### Client surveys

93 anonymous respondents, Client Interview for Quality Improvement 2018-2019, various dates

204 anonymous respondents, Client Interview for Quality Improvement 2020-2022, various dates

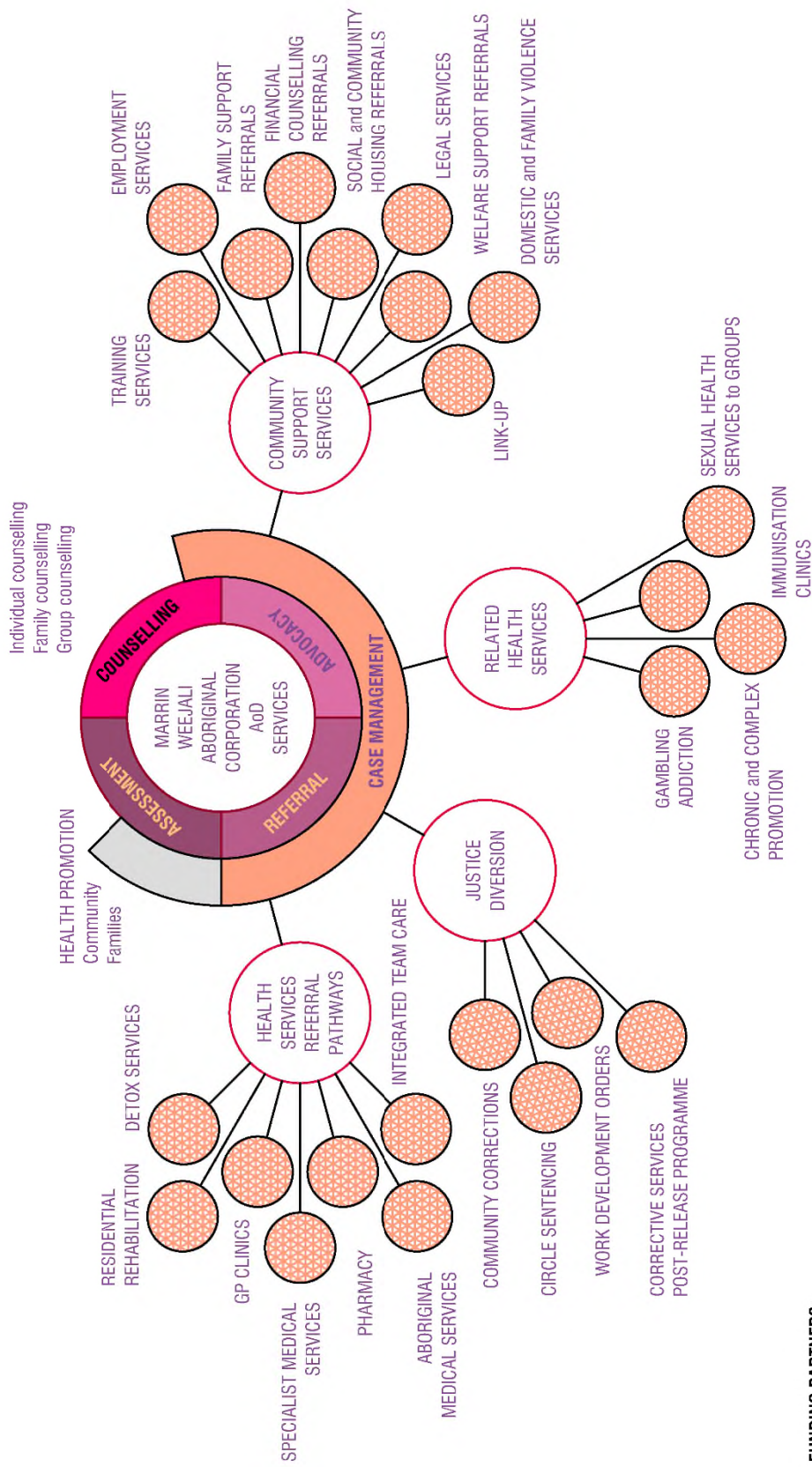
185 anonymous respondents, Transition Survey 2020-2022, various dates

39 anonymous respondents, Client Satisfaction Survey 2022-2023, various dates

129 anonymous respondents, Group Work Evaluation 2022-2023, various dates

MARRIN WEEJALI ABORIGINAL CORPORATION  
APPENDIX B: PARTNERSHIPS

The purpose of the evaluation is to inquire into, identify and develop the best characteristics of Marrin Weejali to guide future development. It explores the aspects of Marrin Weejali which are working particularly well and focuses on how to extend these aspects to shape and implement the change desired by the organisation and, to the extent possible with the resources available, by Marrin Weejali stakeholders.



**FUNDING PARTNERS:**

- NATIONAL INDIGENOUS AUSTRALIANS AGENCY
- WENTWEST PRIMARY HEALTH NETWORK

PLAY A GOVERNANCE AND/OR CULTURAL MENTORING ROLE IN EXTERNAL SERVICES WHERE IT IS STRATEGIC TO DO SO

