

Mitchell Street Community Centre Needs Assessment

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Geraldton Sporting
Aboriginal Corporation



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The Mitchell Street Community Centre needs assessment was a collaborative community consultation partnership between Desert Blue Connect and the Western Australia Centre for Rural Health (WACRH), utilising the learning goals of Social Work Student, Lenny Papertalk whilst on placement at Desert Blue Connect. The needs assessment sought to give voice to residents of the Spalding community, the parent group at Bluff Point Primary School, current users of the Mitchell Street Community Centre (MSCC) and other interested stakeholders to ascertain the needs and wishes of the local community for services and programs to be provided from the Mitchell Street Community Centre. The intention of the needs assessment was to build an evidence base for more targeted planning and provision of services to this community.

TERMINOLOGY

In this document the term ‘Aboriginal’ respectfully refers to Aboriginal and Torres Strait Islander people. We respectfully acknowledge the traditional owners of the City of Greater Geraldton region; the Southern Yamaji peoples of Western Australia on which this needs assessment was conducted.

ACRONYMS

BPPS	Bluff Point Primary School
COGG	City of Greater Geraldton
DBC	Desert Blue Connect
GRAMS	Geraldton Regional Aboriginal Medical Service
GSAC	Geraldton Sporting Aboriginal Corporation
MSCC	Mitchell Street Community Centre
MTT	More than talk project
WACRH	Western Australian Centre for Rural Health

1 INTRODUCTION

1.1. Background to the Mitchell Street Community Centre (MSCC) and community partnerships

More Than Talk (MTT) was a collaborative health promotion project between the Midwest Aboriginal Organisational Alliance (MAOA) and the Western Australian Centre for Rural Health (WACRH), established to support the delivery of better health and wellbeing for Aboriginal people living in the Midwest region of Western Australia. Since 2011, MTT researchers have worked closely with key stakeholders including Aboriginal corporations, local and government organisations and community members to address areas of community concern, and to identify and strengthen Aboriginal and non-Aboriginal partnerships.

In accordance with the MTT initiative, in late 2015, WACRH commenced a five-year lease from the City of Greater Geraldton (COGG) of the Mitchell Street Community Centre (MSCC) located at 75 Mitchell Street, Spalding. At the time of commencing this lease three user groups were operating weekly services at the centre; the “Chat and Do” Senior Women’s groups, the Child Health Nurse and the Seventh Day Adventist Church group. WACRH also developed a partnership with the Geraldton Sporting Aboriginal Corporation (GSAC) who relocated to the MSCC to run community safety and wellbeing programs from this base, including after school and holiday programs. In collaboration with staff and students at WACRH other community organisations have become important partners and contributors to programs operating from the MSCC.

In 2017 researchers at WACRH undertook a snapshot study of a particular area of disadvantage and concern within the Spalding community. The *‘Reality Street Snapshot’* utilised structured interviewing of residents to capture their lived experience of their neighbourhood and how it impacts on their lives (Green, Papertalk, Bentink & Thompson (2016).

The Mitchell Street Community Centre Needs Assessment aligns with the sentiments of the *More Than Talk* initiative and the *‘Reality Street Snapshot’* study in seeking to further understand the needs of the community that it serves.

On the 24th April 2018, local service providers met at WACRH to discuss interest and capacity in providing services and programs within the MSCC. Representatives from WACRH, GSAC, GRAMS, Community Drug Services, Ngala, the Rural Clinical School, 360 Health and DBC participated in this meeting. A prevailing theme identified from this meeting was the need for further community consultation to ascertain the priorities and interest of the community for the MSCC (as detailed in meeting minutes, Appendix 4).

Prior to the needs assessment survey process occurring, the Spalding community had been invited to write suggestions on paper shaped as green leaves and to place these onto the tree of life mural painted in the front foyer of MSCC. Feedback from these leaves has been collated into 4 themes; Adults, Youth, Culture and Community (as listed in Appendix 2). This additional source of community feedback has been included in this report to further inform the overall needs assessment.

DBC is a local non-profit organisation that provides services including women's health, rural support services, primary prevention, family violence response and crisis accommodation for women and children and is located centrally within the Geraldton city. DBC assumed primary responsibility for undertaking the Mitchell Street Needs Assessment utilising the learning goals of Lenny Papertalk, a local Aboriginal Social Work Student on a 13 week, first year practical placement with DBC.

1.2. Spalding neighbourhood and Mitchell Street description

Spalding is a suburb of Geraldton located 5 kilometres northeast of the city centre. According to the Australian Bureau of Statistics (ABS) Socio-economic Indexes for areas (ABS 2011; CGG 2016), Spalding is considered one of the most disadvantaged suburbs in the Geraldton area, with significant unemployment, drug use and antisocial behaviour.

In the 2016 census data the population of Spalding was 2,075 people;

Male:	1,040	(50.1%)
Female:	1,036	(49.9%)
Aboriginal &/or Torres strait islander people:	538	(25.9%)

The MSCC is located centrally within the Spalding suburb beside natural bushland and a park.

The Bluff Point School (BPPS), located two kilometres from the MSCC, is the local primary school for the Spalding catchment.

A bulkbilling GP service, chemist, local newsagency/post office, Hotel and fast food outlets are located in Bluff Point, a neighbouring suburb within walking distance from the Spalding area. The Geraldton Aboriginal Medical Service (GRAMS) is located in a suburb some distance from Spalding. All other key services are located in the Geraldton city centre. Transportation within the Spalding suburb and access to services within the Geraldton city centre is difficult as many households are reliant on public transport (ABS 2016). Furthermore, the transport company servicing the Spalding area has limited its service to the area as a result of anti-social behaviour as cited in the *Reality Street Snapshot*. (Green, Papertalk, Bentink, Schrader, Thompson, 2016).



Street view of the Mitchell Street Community Centre

1.3. Project background and context

Through the use of structured surveys and community focus group meetings, this study sought to provide an opportunity for Spalding residents, BPPS community, current user groups and other interested stakeholders to have a voice about what services and supports they would like to see operate from the MSCC.

1.4. Aim of project/objectives

- To consult with the Spalding community about their priorities for services to be delivered from the MSCC.
- Provide feedback to stakeholders about the outcome of this community consultation process.
- Explore the capacity of Geraldton service providers to meet the identified community needs.

2 SURVEY DESIGN AND DATA COLLECTION

2.1. Design of the survey

Social Work Student, Lenny Papertalk, on placement with DBC, undertook a mixed method survey process using both qualitative and quantitative survey methods with residents of the Spalding area.

Survey development occurred in discussions between Lenny Papertalk (student), Daphne White (Executive Management Operations), Alison Adam (Chief Executive Officer) and Kris Dwyer (Field Placement Supervisor, WACRH). The survey was developed using the documented minutes from the Local Service Providers meeting held on the 24th April 2018, and the questionnaire was designed to meet the intended outcomes that were discussed from that meeting.

Survey Monkey was used to compose a nine-question survey questionnaire which included basic demographic information, multiple choice health and community service lists and open response questions. The questionnaire was distributed in both paper and electronic mediums.

2.3. Data Collection

Data collection occurred by way of several different forums to ensure broad representation

of the age, gender and cultural profile of the Spalding community. Data collection included:

Six separate focus group meetings with the following user groups that currently utilise services/programs from the MSCC;

- The 'Chat and Do' Senior Women's group
- The Community Health Nurse clientele
- GSAC
- Ngala Play Group
- I-Care Drug and Alcohol Program
- The Seventh Day Adventist Church.

Focus groups were held at the MSCC, which is a neutral and comfortable location where participants could complete the survey. Interactive conversations with survey participants also provided more flexible discussion of topics of interest to participants.

Survey Questionnaires were posted on a range of Social Media Facebook pages; DBC, BPPS, WACRH, GSAC and MSCC to enable broad community access to the survey.

Two community stakeholder forums were held to invite interested community members and stakeholders to provide feedback about the community centre in a more formal, structured group context. The first forum invited community members to attend a food and feedback forum with invites posted at the local Deli's, at Mitchell street and advertised on the local radio and Facebook pages. The second forum specifically invited six interested stakeholders for a morning tea discussion at Mitchell Street. Three people representing the COGG, John Wilcock Senior High School and Radio Mama attended this forum.

Finally, working in collaboration with the local Bluff Point primary school, direct contact was made with parents during two key school events for completion of the surveys. Surveys were also posted on the school Facebook page and in the school newsletter.

Paper copies of surveys were left at the MSCC, and two local Deli's.

Participation in the survey was completely voluntary and all personal information remained confidential and de-identified.

2.3. Limitations of Data Collection

Overall, the survey process has provided a strong response rate for this community and a engaged a good cross section of respondents using the various methods applied.

Facilitator of this community consultation, Lenny Papertalk, is an Aboriginal woman originating from the wider Geraldton community, who lives and has personal and professional connections to the MSCC and BBPS. Whilst this may be viewed as a limitation of the study it more than likely resulted in a far greater facilitation of the research process through culturally safe community purchase.

Interestingly, the old-fashioned method of directly approaching people for their views worked better during this consultation process than any generalised distribution of the survey electronically on social media or in hard copy at local facilities. It would appear that people valued the opportunity to not only complete the survey but to discuss their responses in person. Working in collaboration with the local primary school and approaching parents directly produced the greatest response to the survey and provided a far greater cross section of respondents than other methods.

An invitation to the general community via flyers, Facebook and radio advertising did not yield any interest from Spalding residents to attend morning tea to complete surveys. Unfortunately, the date set for this community forum coincided with the local primary school sports carnival which may have prevented many people from attending.

Similarly, only half of the invitees attended a second community forum for specific community stakeholders. Again, the timing of this forum coincided with the death of a notable community member. It was generous of those participants to still attend despite this loss.

Item 8 of the questionnaire listed a range of potential services that respondents could indicate they would like at the MSCC. This question should have included a scaled rating 1-5 of preferred services so that data reflected respondent's priority needs. In particular, a scaling format would have enabled a differentiation between whether respondents want a generalised medical service at the centre or an aboriginal specific medical service, as the data for these identified needs is not as specific as it could have been.

3 DATA ANALYSIS

3.1. Descriptive Data

A total of 150 surveys were completed over a period of 8 weeks. 80 surveys were completed from BBPS and 70 from the Spalding community.

Gender

There were significantly more female respondents than male respondents.

Male: 23.75%

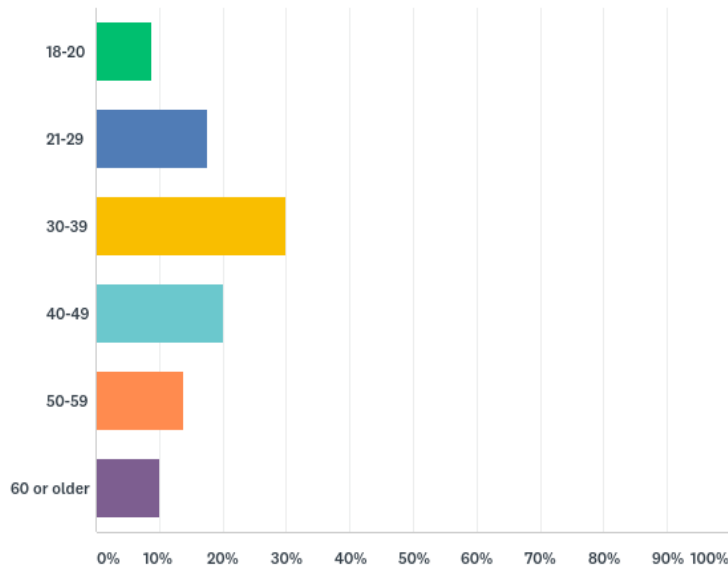
Female: 76.25%

In the 2016 Census, there were 2,075 people living in Spalding. Of these 50.1% were male and 49.9% were female (ABS, 2016). Male respondents were difficult to capture in this cohort as they are not big users of the centre nor primary carers within the school community. However, of those men who completed surveys valuable feedback was provided about the desire for male specific services.

Age

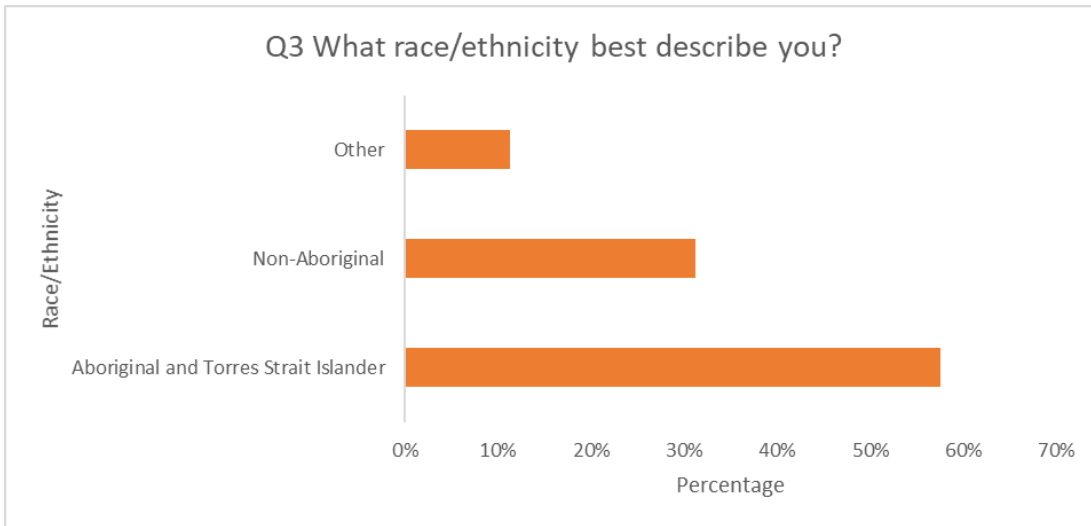
The median age of people in Spalding was 39 years (23 years for Aboriginal people). Children aged 0 - 14 years made up 21.1% of the population and people aged 65 years and over made up 16.5% of the population (ABS, 2016). Based on this population data a good cross section of age groups completed the survey representative of the Spalding population as shown in the graph below.

Q2 What is your age?



Ethnicity

In the 2016 Census Data, Aboriginal and/or Torres Strait Islander people made up 25.9% of the Spalding population (in comparison with 3.1% for WA) (ABS, 2016). 57.5% of respondents to this needs assessment survey identified as Aboriginal or Torres Strait Islander, a higher representation than the Aboriginal population of the area. 31.25% of respondents identified as Non-Aboriginal and a small proportion of people identified as 'other' ethnicities, including Fijian, Coco Malay, Colombian, Malay, Maori and Aboriginal/Non-Aboriginal parentage. All respondents noted themselves as English speaking.

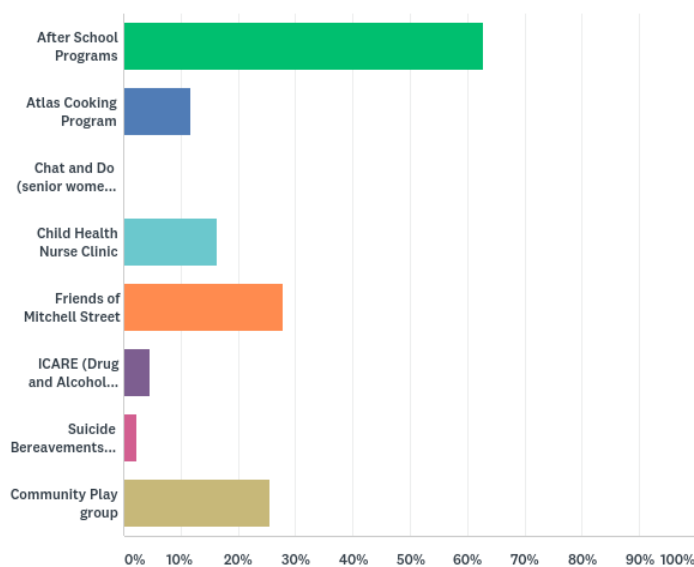


Overall, survey respondents represented a good cross section of the overall Spalding population for age, ethnicity and gender.

3.2. Text Data

A little more than half of the survey respondents have previously been involved in programs or services provided at the MSCC. Those who have previously been involved with the Centre noted their involvement in the following programs or services:

Q6 The Mitchell Street Community Centre in Spalding offers a range of programs and services. What activities have you participated in

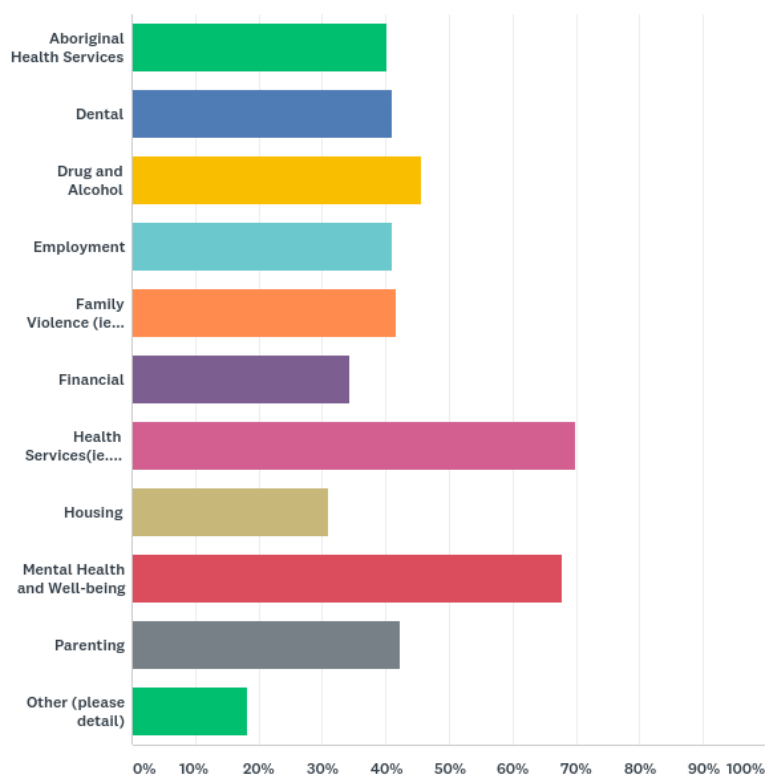


After school programs, Friends of Mitchell Street, Play Group and the Community Health Nurse were the predominant programs or services with which respondents engaged.

Reasons given by respondents for not participating in centre activities predominantly related to a lack of awareness about the centre or what activities occur at the centre. Several suggested better advertisement of the Centre and its programs is required. Three respondents advised that they were new to the area and would be interested in activities occurring at the centre.

Survey respondents were given the option of noting a list of services that they might be interested in attending at MSCC if the programs were available. Their responses are as follows:

Q8 What types of program or services would you participate in if they were available at the Mitchell Street Community Centre ?



A generalised medical service/clinic was ranked by 67% of respondents as the greatest identified need by survey participants. This is in comparison to 48% of respondents identifying the need for an Aboriginal specific health service. However, as noted previously, it is difficult to

ascertain from this data whether respondents want a specific type of health service available at the centre or whether they simply want a medical service of any orientation provided locally. However, qualitative responses indicate that respondents want a medical service available locally that meets the needs of all people, not just Aboriginal people. Both Aboriginal and non-Aboriginal respondents made comments to this effect.

The second highest identified need by 65% of respondents was for the provision of mental health and wellbeing supports and services to be available at the centre. This is strongly supported by anecdotal comments summarised in Appendix 3.

Parenting support services and groups also ranked highly by 57% of respondents followed by

Employment support (48%), Drug and alcohol specific services (47%), Dental (46%) and Family Violence services (44%) all ranked equally highly by respondents as being needed at the MSCC.

Responses to 'other' supports (6%) reflected programs that had been already noted in the given list.

4 THEMATIC ANALYSIS

36% of respondents provided written and anecdotal responses to the final question of whether they had any other suggestions for programs or services that might be offered at the MSCC. A summary of these responses is listed in Appendix 3. Responses have been grouped into the following themes;

4.1 Cultural programs and activities

Many respondents wanted to conduct Aboriginal cultural activities at the centre, including art, music, dance and trips back to country. A strong theme from respondents was the desire for Aboriginal cultural education of language, bush tucker and bush medicine. Several suggested the centre play host to significant cultural celebrations, both Aboriginal and multicultural. A number of respondents made suggestions about community elders being involved in establishing social and cultural groups specifically for seniors but also being involved in

activities with other groups, especially guiding youth in cultural activities like basket weaving and art. A suggestion was made about the centre employing an elder coordinator &/or having an elders' advisory group that can develop programs that are culturally appropriate for senior members of the community. Feedback from senior respondents strongly emphasised increased engagement of senior community members as both participants and educators. As a result of the needs analysis process a small seniors advisory group has already formed and met to discuss future plans.

4.2 Sporting and Physical activities

Respondents noted a number of sporting or fitness programs that they thought could be provided at the Centre, including after school basketball games, Yoga, Pilates, mums exercise group, men's sports program, dance, karate and aerobics for people with limited movement. Weight loss programs were also mentioned. Programs such as these might be brokered with existing services in Geraldton &/or utilise physiotherapy, exercise physiologist and OT students from WACRH.

4.3 Social events

Many respondents expressed a desire to have social events and opportunities provided at the centre that would bring the community together or meet the social support needs of specific groups within the community (such as seniors, parents, people with disabilities). Some suggestions included morning teas, yarning circles, a monthly community lunch or dinner, card games and social clubs.

The Green leaves feedback supported survey comments about utilising the MSCC for community functions with the addition of holding community BBQ's/events in the local park and having fun activities such as bouncy castles, community sports carnivals and movie nights.

4.4 Education & Life skills programs

Requests for a diverse range of life skills activities and programs to meet the needs of different age groups and needs within the community was noted by many respondents. Some of the suggestions included parenting programs, men's groups, cooking and nutrition education, homework classes, programs to empower women, men and youth to become leaders within the community and employment preparation assistance.

The Green leaves feedback also provided suggestions for parenting and family support activities and programs to be available at the centre.

4.5 Art & Craft Activities

Respondents requested the provision of arts and craft type activities within the centre, both Aboriginal and general, including a sewing group, painting, pottery, basket weaving, wreath making and gardening and suggested that such groups be advertised publicly and within the centre.

4.6 Health

As previously noted a range of health services were requested by many respondents, particularly that the centre have a medical clinic operating weekly and accessible by all within the community, Aboriginal and non-aboriginal. Counselling support for a range of needs, including mental health and grief and loss was also strongly requested. Support for families managing disabilities was also noted by a number of respondents in addition to healthy eating programs, needle exchange, condom availability and advocacy services.

The Green leaves feedback also highlighted the desire for medical and dental services to be provided on a regular basis at the centre.

5 DISCUSSION / CONCLUSION

The Mitchell Street Community Centre needs analysis occurred in response to key community service providers request for more evidence about the Spalding community's future needs and wants for the centre. The data collected from this survey will enable service providers to investigate possible outreach service provision to MSCC, built on identified need.

Service provider's knowledge and experience of the Spalding community anticipated that more accessible medical services, mental health counselling support, drug and alcohol services and family violence support might be identified as areas of high need by the community. The centre has already demonstrated a good uptake of after school/holiday programs being provided by GSAC and WACRH and plans are in place for this to continue.

This needs assessment verified that the community would like a locally accessible medical health service. The data is mixed about whether this is an Aboriginal specific health service or a generalised health service. However, a number of respondents commented that they wanted a health service that meets everybody's needs not just for Aboriginal people. Interestingly, these comments were made by both Aboriginal and non-aboriginal respondents.

Respondents to the survey highlighted the need for some sort of counselling provision across different population groups. Several respondents mentioned the need for grief and loss support, mental health and wellness counselling and child and youth counselling support. A range of agencies in Geraldton already provide specialised counselling support to specific population groups or target areas (drug & alcohol, family violence, mental health, youth). It would be difficult to provide such a range of counselling services at the MSCC to meet all areas of need. However, a more generalised individual counselling support (such as that offered by Ngala and Centacare) might better suit the range of counselling needs of the Spalding community with the added consideration of different agencies running group support sessions from the centre to meet specific populations (such as youth mental health, family violence, grief and loss, drug and alcohol).

The desire for locally provided dental services ranked highly amongst respondents at 46%. Dental services are heavily reliant on equipment and resources. Careful exploration would need to occur with potential service providers about the logistics of providing a dental service from the MSCC or, as one Green leaf feedback suggested, consideration could be given to the availability of a low-cost mobile service being able to periodically co-locate from the centre. Earlier in the year GRAMS facilitated a dental bus located outside the MSCC. Further discussion and consideration could be given to making this a regular ongoing arrangement between WACRH and GRAMS.

Education/employment, alcohol and drug and family violence support services were equally rated as being high areas of need by respondents, ranking at 44-48%. Housing and financial support were not as highly rated as might have been expected at around 35%, although this is not to suggest that services to meet these needs would not be valuable to the community.

Free condoms and the provision of needle exchange facilities were noted by a few respondents as being wanted. Providing this service within a centre that caters for children and youth would require careful consideration and consultation but may be worth exploring.

Many comments were made about assisting people attending the centre with homework, preparation of resume's, completion of job applications and some life skills development related to budgeting, healthy eating and cooking. These are very practical supports that could be readily introduced at the centre with the potential for significant benefit to the community. They are also a means of engaging the community in valuable non-threatening, generalised supports.

Parenting support by way of after school and holiday programs have been operational from the centre for several years. Uptake of these programs has been consistently good. Respondents ranked parenting support programs highly and want these services to be continued at the centre. However, in addition to the current program's respondents requested more specific parenting sessions that focus on parent's needs (parent education), include parenting support groups for dads, post-natal groups for mums and play groups that cater for all people, including children with disabilities.

Senior respondents strongly voiced their desire to be more involved in establishing programs or activities that meet their specific needs for social support, improve their sense of community belonging, meet cultural needs and give back to the younger generation. They were particularly keen to form an advisory group &/or have a senior member engaged to coordinate activities involving seniors and elders within the community. Requests were also made by respondents from both Aboriginal and other cultural groups for the centre to host the provision and sharing of cultural ways and traditions and to celebrate key cultural days (such as Fijian Day, Harmony Day, Multicultural Day). Encouragingly, during the process of discussing needs with senior members as part of this community consultation an elders' advisory group has formed and met to plan future roles and activities within the centre. Further encouragement and support of this group might reap valuable progress and engagement for other supports the centre may provide.

Several respondents commented on transportation difficulties within the community and how this hinders people's access to centralised services in Geraldton but also to attendance at the MSCC. Options for transportation to and from programs at the MSCC might need to be

canvassed as a means of improving uptake of key services and programs. Exploration of the viability of utilising the GSAC bus may be one avenue of improving access for some participants.

In conclusion, this needs assessment has clearly identified key services and supports the Spalding community would like to see provided at the Mitchell Street Community Centre. It has also raised some surprising considerations about making the centre more available for cultural and social activities and events. In addition, it has raised important considerations about improved engagement of senior community members in planning and facilitating activities and seeking ways to meet the needs of men and people with disabilities within the community. Key services, such as a medical clinic, could be introduced gradually to assess uptake. However, several activities or events could simultaneously be planned such as those related to community social gatherings at the centre or neighbourhood park, fitness classes and art and craft sessions. Equipped with this comprehensive community feedback, further discussion and planning now needs to occur between interested stakeholders and service providers about interest and capacity to best meet identified needs and for more effective promotion of the centre and its activities moving into 2019.

6 KEY RECOMMENDATIONS

1. Establish a regular medical service from the Mitchell Street Community Centre.
 - Investigate possible partnerships and collaborations with other service providers
 - Develop a viable health model
 - Commence a trial period and evaluate
2. Provide a culturally safe mental health and wellbeing services that includes individual mental health counselling and specific group programs or specialised counselling.
3. Explore the possibility of a regular mobile Dental Service being co-located at the MSCC. Discussions between GRAMS and WACRH for a partnership to deliver a dental service at MSCC as occurred through the School Holiday Program early in 2018.
4. Explore the possibilities of providing a range of parenting and education support services and activities.
 - Ante-Natal/Post Natal education and support groups.

- Parenting workshops.
 - Continuation and possible expansion of after school and holiday programs and activities.
 - Homework support sessions.
 - Provision of periodic job preparation support sessions.
 - Play groups both Aboriginal and general.
5. Increased involvement of senior community members in specific seniors' programs as well as across other programs.
- Establishment and support of a senior's advisory group.
 - Consideration of engaging a senior community member to coordinate seniors' activities.
 - Engagement of volunteer seniors to assist with specific school holiday or after school programs, particularly concerning cultural activities.

7 ADDITIONAL RECOMMENDATIONS

1. Increased utilisation of the centre for community social gatherings and multi-cultural events. Perhaps introduce an events calendar at the start of the year to plan significant community and cultural events throughout the year.

2. Increased/improved advertisement and promotion of the centre and the activities occurring at the centre through a range of different and targeted mediums. Consider the engagement or guidance of a promotions agency to assist with this.

3. Transportation assistance for people to access key services and programs at the centre. Explore the potential use of the 14-seater bus accessible through GSAC and WACRH.

4. Brokerage of one or two physical health classes to operate from MSCC for a trial period to ascertain commitment and uptake of such activities.

5. Consideration around ways the centre might better support male members of the community and people living with disabilities.

8 REFERENCES

Australian Bureau of Statistics. (2016). Retrieved at http://quickstats.censusdata.abs.gov.au/census_services/getproduct/census/2016/quickstat/SSC51384?opendocument

Green C., Papertalk L., Bentinck S.J., Thompson S.C., (2016) *Reality Street Snapshot. Report One: More than Talk: partnership to improve Aboriginal education outcomes*. Western Australia Centre for Rural Health, University of Western Australia, Geraldton, December 2016.

9 Appendices

APPENDIX 1:

Mitchell Street Community Centre Needs Assessment – Program Themes

CULTURAL PROGRAMS/ACTIVITIES
Aboriginal cultural activities, programs, education: <ul style="list-style-type: none"> • Learning languages & culture • Aboriginal Arts & Crafts (Learning to do dot painting) • Cultural trips back to country (Elders, Men’s) • Aboriginal Dance • Cultural learning (such as bush tucker, bush medicines) • Aboriginal Men’s Shed • Involving more Aboriginal people to share skills and knowledge with existing groups.
Multicultural activities, programs, education
Cultural celebrations (Fiji day of celebration) - sharing foods, dance etc.
Cultural aspiration dance, art and healing careers
SPORTING/ PHYSICAL ACTIVITIES
Exercise/fitness programmes/classes <ul style="list-style-type: none"> • Yoga • Pilates • Mums exercise group • Karate • Dance classes • Chair aerobics for people with limited movement
Sporting activities <ul style="list-style-type: none"> • After school basketball games • Young men’s sports program
Weight loss program
SOCIAL EVENTS
Social groups for people with disabilities
Social events and activities to bring the community together (including cards, disco, workshops, morning teas, social clubs, craft groups).
Social yarning morning tea and music program
A quiet and safe place for people to calm down
Community lunch or dinner monthly with gold coin donation
EDUCATION / LIFESKILLS
Family & Parenting Programs
Continue holidays programs
Men’s Programs / dads groups
Play Groups (for everyone)
Mums and Bubs group
Cooking & healthy eating classes

Life skills workshops (including budgeting)
Adult education
Homework classes
Men's programs to empower men to be leaders and role models within our families and community
Aboriginal men's group / program involving youth.
Young men's program empowering young leaders to step up.
Dads group
Leadership program for Aboriginal Women
Neighbourhood watch / Safety House
Youth services with Streeties
Children's First Aid
Computer / IT Classes
Employment preparation programs (writing resume's, writing job applications etc.)
Police education sessions about personal and property safety
Life Skills for youth and young adults
Fun brain games - stimulate brain activity card game afternoon
Car detailing
Street Radio Program
Interested in learning AUSLAN (Sign Language)
Access to the phone and computer at the centre for contacting Centrelink or other agencies for support/services
ART & CRAFT
Arts and crafts programs/ events – would like to see a timetable of events on the centre board.
Aboriginal Art and Craft
Painting
Sewing group
Pottery
Basket weaving sessions
Mosaics
Cake Decorating
Gardening
Wreath making
Woodwork
HEALTH
A medical clinic running weekly from the centre
Child Health Nurse
Mental health programs & counselling, including child mental health
Grief and loss counselling / programs
Support for families with disabilities
Healthy eating program
More services providing outreach programs (counselling and health)
Needle exchange
Free condoms
Advocacy services where people can access referrals to other agencies in Geraldton
OTHER
Employ a male coordinator to coordinate men's programs
Employ a senior member to coordinate seniors' activities and link with elders in the community.

APPENDIX 2:

Community Green Leaves feedback

Adults
Nana Program
Cooking Programs
Parenting programs on sleep and settling behaviour management
Programs for young mums
Programs for families to participate in
Leadership programs
Youth
Activities for youth
Cooking programs
Treasure Hunt
Sporting activities
School holiday programs
Have a bouncy castle
Regular after school activities
Breakfast club
Health education programs
Regular activities to keep the kids off the street
Leadership programs
Cultural
Multi-cultural day
Harmony Day
Cultural dancing, sharing and learning amongst the community
Sharing different cultures
Community
Creating new friends
Fun activities
Better play ground
Venue to feel safe and a sense of belonging
A place for families to connect
Play group sessions
Regular community BBQ's in the park
Regular community events in the park in partnership with the City of Geraldton
Medical and health services provided from the centre
Community carnivals (basketball, football or cricket)
Movie nights for families
Coming together to close the gap in health, education and wellbeing services being delivered from the centre every day

Working with the grassroots and early intervention programs
GRAMS Dental Van delivering services from the centre once a month
GRAMS running clinics at the centre
Medical and health services that provide bulk billing for community and regular services
Be available for community functions
Community events on social media and regular updates
Venue to be available for community groups to hire for a fee