"I feel a sense of belonging here"
An investigation into the experiences of Community Centre users in South Australia

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Picture on front cover

Photo of mosaic with thanks from Murray Bridge Community Centre, supplied by Community Centres SA.

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You get to interact with people from all age groups and all backgrounds. And they come in here and it's like well the barrier's gone.

…it helps you realise that you're not alone, so something I might think I'm the only person in the world suffering or feeling or going through, having connections like this makes you realise you're not the only one.

I'm actually doing something. What I've gotten out of it is that I now have a part time job, I'm part of a youth leadership program and I will be continuing my studies.

I lost my job and I went to Centrelink and they said … we can organise for you to do volunteer work and you don't have to worry about looking for a job … they said to me, "At your age no-one's going to employ you anyway." I've been here ever since. I've enjoyed every bit of it.

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Executive Summary

Community centres and neighbourhood houses have a long history in South Australia as being place-based and adopting community development-informed practices to work with and provide avenues for community members to increase community connections, develop skills and move toward active citizenship. Community centres and neighbourhood houses (hereafter 'community centres') provide avenues for community engagement and development that are place-based and embedded within the communities that they serve. The Department of Human Services (SA) commissioned this research project to investigate the experiences of people accessing South Australian community centres.

The study explored community centre user outcomes resulting from their engagement with South Australian community centres from their own perspectives. Six focus groups were conducted in May and June 2019 at five community centres with 65 community centre users. Findings will contribute to the future directions of South Australian government funded programs and activities operated by community centres. The study set out to answer the following **research questions:**

- What are clients' perspectives on the appropriateness and effectiveness of community centres in South Australia?
- What would enable community centres to optimise their contribution to positive user outcomes?

Key findings

A powerful thread intersecting across the **five key themes** outlined below was that participants' engagement with their community centres contributed positively to their **mental well-being**. Overwhelmingly, participants viewed their community centres as vital to their own lives and to their communities and they shared a wide range of reasons for accessing them. They described many ways in which their community centre participation fostered a sense of belonging and connectedness which countered the effects of social isolation, social exclusion and loneliness. Several participants described ways in which being involved with their community centres was a major contributor to their mental well-being, to the extent that some described their community centre participation as a lifeline. The following five themes emerged that contribute to answering the project research questions:

1. **Making connections: 'A sense of belonging'**
   The most compelling theme that emerged across all focus groups was the importance of community centres as places for developing a sense of belonging. At every focus group, the effects of social exclusion and isolation on mental wellbeing were discussed at length. Community centres were unanimously viewed as places that bring people together and not only reduce social isolation, but actively promote inclusion. Users identified ways in which community centres support the development of social connections by providing the space for them to engage in place-based activities and programs.

2. **A safe place: 'I felt comfortable and safe enough to come here'**
   The importance of safety was identified as being paramount to community centre users. For people to be enabled to seek support, make connections, and link with the broader community and services, they need to be able to do so safely. 'Safety' in this context included physical, psychological and cultural safety. Users described their personal experiences of safety and the many ways in which workers appropriately and effectively ensured that their community centre was a safe place.

3. **Community oriented, not service oriented: 'you can just be'**
Community centre users viewed their community centres as places that are person- and community-oriented rather than service-oriented, which means that people can be in control of what happens next when they first enter a community centre. At the same time, participants considered their community centre as a place to seek information about any service or assistance they may require and as a safe conduit to services if needed.

4. **Pathways to participation: 'it gives me a meaning in life'**
Participants described many ways in which being involved in a community centre (e.g. as a volunteer, to attend a craft group, for work experience or for a study placement) increased their feelings of self-worth. Their stories suggest that community centre users derive benefits from their participation, whether or not their participation becomes a pathway to paid employment. Benefits they described included increased community connectedness, increased confidence and a sense of being a productive and valuable member of society.

5. **Presence and profile: 'don't be scared to come in'**
The main ways that users felt community centres could optimise positive user outcomes related to enhancing the public presence and profile of community centres. Ways that participants suggested this could occur included: promoting their purpose as place-based and community driven; presenting as being for the community, not a government service; and, by working with local communities to further promote physical, psychological and cultural safety. Participants expressed concern that there were many people in their communities who may not be aware of their community centre's existence or purpose.

From the voices of community centre users who participated in this study, community centres are vital to the people who access them. Being place-based and utilising strength-based community development approaches are at the core of their success regarding user outcomes. Moreover, community centres represent a bastion – of which there are few remaining – of genuine coal face community connectedness and program delivery. Community centres are not just 'doing' or offering access to a program, they instil meaning and belonging as part of the community. Their ongoing connection to community and what they contribute should be celebrated.

Introduction

In South Australia, community or neighbourhood houses or centres are defined in the Community Centres SA Constitution as:

> *…an organisation that is open to all the community and that shall run community programs and activities, shall coordinate resources and facilities within the community, shall actively involve and encourage volunteers, shall attempt to meet community needs and encourage active community involvement in programming and decision making (CCSA 2014 p. 2).*

Community centres are integral to the fabric of South Australian communities. Being universal and place-based they serve all demographics, although they are especially important for facilitating social engagement among the most disadvantaged South Australians using a community development model (Milton, Attree et al. 2012). Across the 169 member organisations in South Australia, 35,000 people attend community centres and volunteers contribute 20,000 hours each week (CCSA 2018).

The community development literature emphasises the importance of community voice in community centre activities as an articulation of community development and empowerment. It is therefore crucial that people accessing community centres are provided with opportunities to express their views and discuss their experiences. Listening and acting on what users tell us ensures that programs and activities are person- and community-centred in a manner that respects community centre users as experts in their own lives (Popay 2007, Popay and MacDougall 2007, Milton, Attree et al. 2012).

This report is structured as follows. The literature review below provides a brief overview of the history of community centres and the use of community development models in South Australia. The methods section provides an outline of and rationale for the methods used, the results section outlines the emergent themes. The report concludes with a brief discussion of the findings against the literature and provides insights into ways in which the sector may optimise their contribution to positive user outcomes.

> 'Our members are not-for-profit organisations working with people and local communities to bring about positive social change through community development, health and wellbeing, social inclusion, education and life skills activities. Centres play a vital role in the wellbeing of South Australian communities with an estimated two million user contacts per annum and 20,000 volunteer hours contributed every week.'
>
> Community Centres SA Annual Report 2017-18

Literature Review

Community Centres and Neighbourhood Houses – history and context

The establishment of community centres in Australia coincided with the significant progressive social and political changes in the 1970s, particularly the women's movement (Rooney 2011). The emergence of community development approaches in Australia marked a move from benevolent, paternalistic or top-down self-improvement approaches to improve the lives of people struggling with poverty and disadvantage to working with people to foster their self-determination (Rooney 2011, Madsen 2016). As such, there was a marked shift from *power-over* to *power-sharing* and more participatory approaches (Rose and Thompson 2012). Although there were some community centres pre-dating the 1970s, with the earliest being established in 1949 in the Barossa, they pre-dated the emergence of community development approaches (Rooney 2011, O'Neil, Kaye et al. 2013). The concept of community development is explored further below.

Community centres established from the 1970s were at the outset place-based and sought to provide activities and programs that their community members identified as most likely to attend to the roots of their disadvantage, with many committing to 'visions of social justice' (Rooney 2011 p. 209). Establishment of community centres tended to be in response to a local community issue or need, identified by a community, for example social isolation, domestic violence, environmental concerns, racism or further education (O'Neil, Kaye et al. 2013). Community education, either informally via (for example) volunteering, or formally through classes or study placements, was and is one of the key avenues that community centres provide as an empowerment tool (O'Neil, Kaye et al. 2013, Thompson 2015, Ollis 2017, CCSA 2018).

> *…the resources we have put into supporting our centres to train community members have resulted in deep rooted benefits such as increased confidence and self-esteem, employment, entrance into further education and new pathways into volunteering (Kylie Fergusen, CEO Community Centres SA, CCSA 2018 p. 6).*

In South Australia, funding models for community centres have changed over the years and have included at different levels and times federal, state and local government funding, in addition to non-government organisations (e.g. charities) and independent, community-funded (O'Neil, Kaye et al. 2013). Nationally, partnerships fostered between community centres and the Adult Community Education (ACE) sector (now formally Adult Learning Australia) date back to the 1980s (O'Neil, Kaye et al. 2013). ACE programs are also funded by a combination of federal, state and local governments. Many community centres also receive funds from state or local government to employ a community development officer (CCSA 2018).

The Australian Neighbourhood Houses and Centres Association (ANHCA) is the national umbrella organisation for community centres, neighbourhood houses and community learning centres (Rooney 2011, O'Neil, Kaye et al. 2013). ANHCA was initially established in 1986 as National Link[i] to support the six state and territory associations and to promote knowledge-sharing (ANHCA 2019). ANHCA has strengthened its role over the years and is a strong supporter of and advocate for the community centre and neighbourhood house membership (O'Neil, Kaye et al. 2013).

The South Australian peak body for community centres is Community Centres SA, established in 1983 and gaining its current name in 2008 (O'Neil, Kaye et al. 2013). Community Centres SA is supported by the State Government and provides support to and advocates for South Australian community centres (O'Neil, Kaye et al. 2013, CCSA 2018).

Community development

The concept of community development emerged in Australia in the 1970s along with social movements such as the women's and Aboriginal health movements (Ollis, Ryan et al. 2018). Formal community development approaches informed by Freirean thought were used in the establishment of community centres, women's health centres, Aboriginal health centres and community health centres (Mitchell and Wright 1992, Aimers and Walker 2016). Community development approaches, following Freirean education principles which encourage critical thinking and personal empowerment, have the potential to disrupt social inequalities by fostering civic participation and collective action (e.g. see Jackson, Mitchell et al. 1989, Jackson 2007, Baum 2008, see figure 1.) The term 'community development' refers to a process by which:

> *…community members are supported by agencies to identify and take collective action on issues which are important to them. Community development empowers community members and creates stronger and more connected communities (Smart 2017).*

Community development in this context may be supported and funded by any source; for example by any tier of government or non-government organisation, but should be driven by local communities and occur in community settings. Community development approaches provide pathways to personal and community empowerment through place-based community engagement (Ollis, Ryan et al. 2018). Australian community development models historically focus on improving the conditions in which people live and in increasing the level of control individuals and communities have over their lives (Keleher 2007, Ollis, Ryan et al. 2018).

The ways in which community development has been operationalised in Australia has changed since it was first conceptualised 30 years ago, along with a shift from collectivist to individualist policies and practices, increasingly scarce resources and associated expectations of accountability and efficiency. In practice, this has meant that community centre workers have reduced access to discretionary funds available to provide programs or activities that their users may seek to engage in (CCSA 2018, Ollis, Ryan et al. 2018).

In South Australia, funding for community health services was considerably reduced following the McCann Review in 2012 which recommended to cut most of South Australia's non-hospital services, such as community health, community mental health, youth health and women's health centres (McCann 2012).

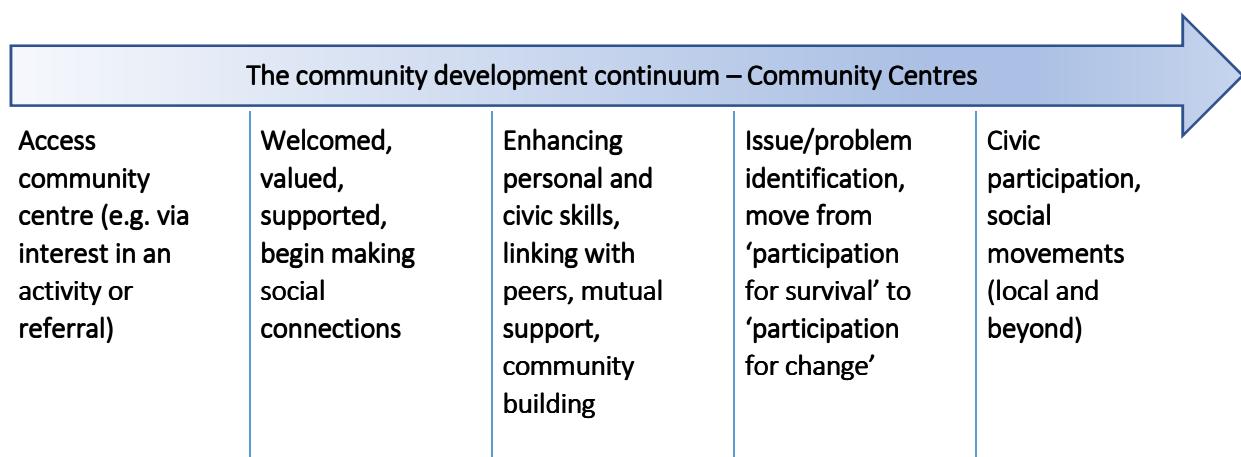| The community development continuum – Community Centres				
Access community centre (e.g. via interest in an activity or referral)	Welcomed, valued, supported, begin making social connections	Enhancing personal and civic skills, linking with peers, mutual support, community building	Issue/problem identification, move from 'participation for survival' to 'participation for change'	Civic participation, social movements (local and beyond)

Figure 1. The community development continuum. Adapted for community centre contexts from Jackson et al (1989). Community Health Studies.

One of the consequences has been increased pressure on community centres by people who would previously have sought services elsewhere. Put together, these changes have increased the workload of community centre workers in terms of being obligated to do more with fewer resources (Gibson-Pope 2017).

At a national level, those working in community health have consistently provided accounts of increased workloads to meet contractual reporting obligations for multiple small and short-term program grants. People working in Aboriginal and Torres Strait Islander communities have repeatedly voiced their concerns about increasing reporting obligations being especially burdensome, and that they have witnessed power being shifted from community control to that of funding bodies (Dwyer, O'Donnell et al. 2011). Moreover, there is a concern that community centres:

> *…have become an arm of their funding bodies, delivering programs and services in order to meet funding contracts and accountability requirements of governing structures and relying heavily on short-term funding for project-based activity. With staff members constantly working to meet the requirements of a particular funding body, key performance indicators and outcomes, they are not taking time out to reflect if they are meeting the needs of the whole of their community (Gibson-Pope 2017 p. 194).*

In the contemporary context of scarce resources, community centre members and workers are striving to find ways to ensure the sustainability of their community centres beyond reliance on external sources (Milton, Attree et al. 2012, CCSA 2018). Further, evidence of deepening intergenerational poverty and inequity has been identified by community workers as increasingly characterising the lives of their clients and community development is viewed as the most effective way to mitigate the effects of inequity (Das, O'Neill et al. 2016).

Community-based programs

Although there are tensions between the notion of community-controlled activities and program-directed activities, community centres have been offering many activities and programs that are available for communities to access and these may be tailored according to community centre user preferences. Community centre users are able to initiate activities ranging from creative activities (e.g. music, art, craft) through to job-specific accredited training through the ACE sector (Ollis, Ryan et al. 2018). Thus, access to ACE programs has supported many community centres to provide a range of adult education possibilities that foster personal development as a conduit to empowerment and community development. The types of adult education that may be provided by community centres through the ACE program include computer literacy, English literacy, English as a Second or Other Language, as well as placements (e.g. Diploma of Community Services or Community Development).

Other types of activities include exercise classes, cooking classes, women's groups, men's sheds, parenting programs, culture-specific groups, community gardens, and community centres often provide an associated crèche so that parents can engage with other adults (O'Neil, Kaye et al. 2013, Ollis, Ryan et al. 2018). There is a great deal of evidence that ACE provides far more than 'education'; it provides avenues for 'decreasing social isolation, fostering friendships and new networks, increased wellbeing, raising income capacity and further learning to improve employment prospects' (Ollis, Starr et al. 2017 p. 449).

Strengths-based practice

There is strong evidence that services and programs are more likely to be successful if the people who are supposed to use the services are involved in their development (Popay 2007, Milton, Attree et al. 2012). People are more likely to respond positively to strengths-based, person-centred models than they are to service/program-centred models.

Strengths-based practice is 'commonly seen as a perspective requiring a belief in client capacity and commitment to identify and build on client strengths' (Oliver and Charles 2015p. 136). Rapp, Saleeby and Sullivan (2005) characterise strengths-based practice as stemming from the emancipatory and empowerment literature. They identify 'six hallmarks of strengths-based practice' (2005 p. 81-82), which are, briefly:

> **The six hallmarks of strengths-based practice:**
>
> 1. Goal oriented
> 2. Systematic assessment of strengths
> 3. The environment is seen as rich in resources
> 4. Explicit methods are used for using client and environmental strengths for goal attainment
> 5. The relationship is hope-inducing
> 6. The provision of meaningful choices is central and the person has the authority to choose
>
> Rapp, Saleeby and Sullivan, 2005, p. 81-82

1. *Goal oriented* (person invited to set goal/s, possibly co-developed with worker's support)
2. *Systematic assessment of strengths* (e.g. assets mapping, identifying what already works)
3. *The environment is seen as rich in resources* (e.g. family, community supports and resources)
4. *Explicit methods are used for using client and environmental strengths for goal attainment* (e.g. i) goal-setting, ii) identification of current and potential resources, iii) short-term goal and task-setting etc.)
5. *The relationship is hope-inducing* (i.e. should increase the person's perceptions of their abilities, options and opportunities to take steps to meet their goals.)
6. *The provision of meaningful choices is central and the person has the authority to choose* (i.e. the worker supports person-directed process and pace).

To implement strengths-based practice, then, it is essential that people accessing community centres are provided with opportunities to express their views and discuss their experiences, and accordingly, to ensure that programs and services are person-centred in a manner that respects service users as experts in their own needs and lives (Popay 2007, Popay and MacDougall 2007, Milton, Attree et al. 2012). This project sought to hear the voices of community centre users.

> Community centres have a long history in South Australia as being place-based and adopting community development-informed practices to work with and provide avenues for community members to increase community connections, develop skills and move toward active citizenship. The literature review below informed this project, which set out to answer the following **research questions**:
>
> 1. **What are clients' perspectives on the appropriateness and effectiveness of community centres in South Australia?**
> 2. **What would enable community centres to optimise their contribution to positive user outcomes?**

Method

Focus groups

Focus groups were used to explore participants' experiences because it is a method that can elicit rich data and increase knowledge among participants while creating new knowledge to assist in answering research questions. Participants were asked to describe their experiences of using community centres in South Australia, what they are looking for in a community centre and what makes a great community centre. Focus group discussion explored their perspectives on the appropriateness and effectiveness of the community centre they access, to identify any everyday life outcomes from their involvement, what other activities/programs/services they might like to see introduced.

Recruitment

Potential participants were invited to take part in focus groups. Any community centre user (in the previous 12 months) aged over 18 years and able to speak and understand spoken English were eligible for participation. The researcher worked with community centre workers to identify ways to ensure that the sample across all participating community centres was as diverse as possible. Centres with large numbers of clients whose main language was a language other than English were encouraged to use interpreters, so that non-English speakers could give their informed consent and therefore not be excluded from the study. Six focus groups were held in five community centres and averaged 60 minutes in duration, ranging from 40 to 90 minutes (see table 1). Before recruitment commenced, the research team sought the permission and co-operation of community centre workers to assist with participant recruitment, schedule focus group times and to provide a space for focus groups.

Ethics

The research team obtained ethics approval from the University SA Ethics Committee (Project No. 202083). Focus groups were held in a room within the community centres and participants were provided with an information sheet and a consent form. The study was also verbally explained to them and consenting participants signed the consent form before proceeding. Focus group participants were provided with AUD$30 Coles/Myer gift cards in appreciation of their contributions and to reimburse them for their time. Each community centre was provided with an honorarium of a $150 gift voucher of their choice for their assistance in the research.

Analysis

A coding framework was developed based on a priori questions plus emergent themes. Focus group audio files were transcribed by a professional transcriber and coded using the qualitative data analysis software program NVivo 12. Data were analysed using Framework, a process for analysing qualitative data in a way that provides insights for theory and policy development (Ritchie, Spencer et al. 2003). Framework entails a process of familiarisation with the data, identifying a thematic framework, indexing, charting, mapping and interpretation.

Results

Sample description

Sixty-five people participated in six focus groups held at five South Australian community centres; 54 women and 11 men. The study sample was purposefully selected to achieve to greatest possible participant diversity across the five locations by discussing the community centres' demographic with community centre workers and arranging focus groups on days that would provide the greatest possible diversity of community-centre users. Consequently, the study sample comprises people from a broad range of cultural and demographic backgrounds and ages living in urban and country locations (see table 1.).

F.G. No.	Location	Focus group participant characteristics	No.	M	F
1	North-east metropolitan	Multicultural women's group mainly comprising Uyghur women from East Turkistan	13	0	13
2	Outer northern metropolitan	Diverse participants, attending craft group and Australia's Biggest Morning Tea	10	1	9
3	North-west metropolitan	Diverse participants, held before shared community lunch	12	3	9
4	Country	Mainly parenting group participants before shared community lunch	13	1	12
5	Outer southern metropolitan	Diverse participants, several community centre volunteers	9	2	7
6	Outer southern metropolitan	Aboriginal community members attending a Families Together program	8	4	4
TOTAL			65	11	54

Table 1. Focus group locations and participants by focus group characteristics and gender

Findings

Overwhelmingly, participants were keen to emphasise the importance of their community centre to their wellbeing. The majority had experienced some degree of social isolation before accessing their community centre. For many, their community centre was a safe, welcoming place that represented a refuge from an otherwise often unsafe and difficult everyday life.

Several participants described living with severe mental health challenges, with a few giving accounts of considering taking their own lives before becoming involved in their community centre. The community centre had literally been a lifeline for many participants for one reason or another. Participants described their community centres as being community- and person-oriented rather than service-oriented, although they were also viewed as places to seek information about or referrals to services.

Participants expressed extreme satisfaction with their community centres. However, those who had been attending their community centre for many years noted that there had been a marked reduction in programs and activities because of funding/program changes over the years. The most common examples included a reduction in funded programs and activities for youth, a reduction in the number of programs in general, and specific programs that had made a huge difference in their own lives that were no longer available for others. Participants also noted that some programs ceased because of new expectations that were too difficult for their community centre to meet, such as child protection regulations, and so were understanding and accepting of such changes.

The main areas for enhancement that participants identified revolved around increasing community awareness of the existence and purpose of community centres. Participants felt that community centres should place more emphasis on being for the whole community and that they are not service providers, despite being able to provide information and links to services. Nevertheless, some participants felt there needed to be improved linking between their community centre and local services, so that service providers referred people to the community centre and so that community centre users could more easily access information (e.g. locations of the nearest food hub or op shop).

Five key themes emerged in discussions about participants' experiences of and outcomes from being involved in their community centres and what they felt would enable community centres to optimise their contribution to positive user outcomes (see box insert). These themes are explored below.

Making connections: 'A sense of belonging'
The most compelling theme that emerged across all focus groups was the importance of community centres as places for developing a sense of belonging. At every focus group, the effects of social isolation on mental health and wellbeing were discussed at length. Community centres were unanimously viewed as places that bring people together and not only reduce social isolation, but actively promote inclusion.

The reasons people described feeling isolated were many, varied and often intersecting. Further, social isolation was expressed across demographics. No matter what caused their isolation, participants described their community centres as places where they felt welcome, supported and part of the community.

Mental health
Several participants described living with severe mental health challenges. One of the women who attended an English as a Second of Other Language program described struggling with depression and anxiety. She found that the social connections, in addition to her studies, had made an enormous difference to her life:

'A lot of us couldn't function without this place'

> When coming to **this community centre has changed my life dramatically**. *It gives me more positives in every angle of my life of this moment. Financially, like women's support and all that… I got me a second home. I get to sit there, that's it, I feel better. Sit for hours and hours, yeah. And every time I come here the ladies welcome me with* **the biggest smile ever** *(FG3).*

Similarly, a participant attending a craft program described her experience of attending the community centre for more than 20 years since experiencing post-natal depression. She felt that if it was not for

the connections she had made at her community centre, she would likely have taken her own life, if not for:

> … these ladies – if it wasn't for them I honestly don't even know if I'd be here. Because I know it's a safe place to vent… **A lot of us couldn't function without this place** (FG2).

Participants' accounts suggested that there was a clear link between struggling with social isolation and mental health and that attending their community centre, whether or not they also accessed formal mental health services, contributed a great deal to improving their mental health. Many participants described experiencing a sense of shared struggle with others at their community centre, reducing their feelings of being alone or isolated with their own personal, individual struggles, with the following account being typical:

> …it helps you realise that **you're not alone**, so something I might think I'm the only person in the world suffering or feeling or going through, having connections like this makes you realise you're not the only one that thinks like that. You're not the only one that's having those issues (FG4).

Community support

While mental health and the importance of social connectedness intersected with all of the study themes, there were specific groups of people who felt isolated because of their personal circumstances. Many of the women first accessed their community centre because they were struggling at home with young children and limited resources and support, with the following account being common:

'having connections like this makes you realise you're not the only one that thinks like that. You're not the only one that's having those issues'

> I'd recently moved to Adelaide from outback New South Wales and I'd just lost my husband. There's four young kids at home, didn't really know anyone so I just came here, a bit of a social outing and for some quality me-time. … It was good because I could come here, [worker] was here at the time - I could have a good chat to her and let things out and done the craft and things like that. She told me I was always welcome to come here for a cuppa and a chat at any time (FG2).

Women who brought their children to their community centre often described ways in which their involvement with the community centre fostered social connections for their children as well as for themselves, with the following participant's account of the effects of living in the country:

> And it's good for if you live in remote, rural areas and stuff like that as well, for your kids to interact with other kids that don't get a lot of the interaction time and yeah, so. That's part of the reason why I come here mainly (FG4).

Similarly, one of the women was a young mother with very limited access to support networks and struggling with personal and family challenges. She described initially attending a parenting course to assist her with dealing with struggling as a young parent and consequently found support from other parents and links to other forms of support through community centre workers, stating that:

> I started coming about three years ago and it was great support, especially being a young mum, coming into a group where they've all opened their arms and help support not only you but your children as well. So, I've found yeah, the girls here, they're just

so supporting and [support worker] has been great as well and I've also got her coming for home visits as well to help support with other family issues that we have going on with my son's dad (FG4).

Uyghur Women participants also expressed ways in which attending their community centre supported them to foster a sense of belonging for themselves and for their children, as noted in the following statement:

… some volunteers can look after our children and it's also a good chance for our children to meet with other children from different cultural backgrounds, so it's a good chance for them to communicate with other children. They also develop a sense of belonging to a certain community. So, a lot of benefit (FG1).

The Uyghur women, who had migrated to Australia from East Turkistan, described feeling isolated in many ways due to the oppression and persecution of their families remaining in East Turkistan. Adelaide has the largest Australian population of Uyghur people and this is partly because of the support provided by the community centre since 2007 (Hayes 2016). The women found that being able to attend their community centre meant that they were able to link with other Uyghur people who understood and shared their experiences of concern for their families, as described below:

If there is no community or women's group here what shall we do, where should we go? It's a good place, it's a link to each other. There's a kind of belonging, we feel that sense of belonging (FG1 – translated).

Further, the Uyghur women described experiencing challenges in understanding how to manage everyday life in Australia, often because they had limited access to resources in their own language. The women were keen to forge connections with their local Australian community and culture and to develop skills required for daily life. Examples of ways in which their community centre had supported the women to achieve this included providing an interpreter for driving lessons and help with understanding household utility bills, as well providing English as a Second or Other Language courses.

These findings suggest that community centres support the development social connections by providing the space for users to engage in place-based activities and programs that work towards:

- ensuring they are welcoming to all
- building social support networks
- fostering a sense of belonging
- enhancing skills for daily living (e.g. parenting, cooking, understanding and speaking English)

A safe, welcoming place: 'I felt comfortable and safe enough to come here'

Many participants spoke about their community centre as a safe place; as a place to go when they are feeling lonely, scared or worried about anything at all. Feeling safe was, for several participants, the most important part of the decision to access a community centre.

> *And I think within the Parenting Program, we do try to really instil the fact that it's a safe place. What happens in the four walls stays in the four walls, just so that everybody feels secure and able to share and able to expose themselves a little bit (FG4).*

The sentiment expressed in account above was reflected across all focus groups, whereby participants felt that they were safe to share their experiences or concerns, or to seek advice from peers or community centre workers:

> *It can be a good outlet. We can sit here and just talk about anything and everything, all our problems. No judgement, no anything else…. Leave the filter at the door (FG2).*

Several of the Aboriginal participants spoke about the importance of cultural safety and what that meant to them. While there are specific protocols to follow to provide cultural safety, participants spoke about cultural safety as being fostered by building relationships and respect, and building sustainability into programs, as it is about following protocols. The exchange with two participants below highlights the importance of these elements being at least as important as being able to 'tick boxes':

> *'All the systems […] are made to further colonise people. There's no decolonisation looking at that; an acceptance of indifference. So, when Indigenous people come into a space, there's all risk assessments in their heads. "Am I safe, are my children safe"'*

> *[P1] And people pick up that sense of realness, like you're one of them, you're not fake or anything, because people who have lived their life in the system know the system. And that's why here is a good place to connect. [P2] But they also tick the basic elements of a cup of tea and engagement. And it's belonging (FG6).*

One of the Aboriginal men explained this further in terms of the ways in which Aboriginal and Torres Strait Islander peoples have been colonised and how there is a general and very real and understandable mistrust of systems, described below:

> *All the systems […] are made to further colonise people. There's no decolonisation looking at that; an acceptance of indifference. So, when Indigenous people come into a space, there's all risk assessments in their heads. "Am I safe, are my children safe", because the amount of people that I've seen mandatory report, what is the story? […] When I say people live in a system, like with a lot of questioning, the genuineness, if it's not there they can see that, they'll just walk (FG6).*

Being able to recognise a community centre as safe and to feel safe after entering a community centre were crucial elements identified across the focus groups. As one of the Aboriginal women described, feeling safe was the most important contributor to a positive outcome from accessing her community centre while she was experiencing mental health distress:

> *I was having a panic attack because I suffer from depression now and it's really bad. I thought, I was in the court and I thought, "I have to drive myself home" and then was*

passing here, so I pulled in and I met [worker] and I said, "Look, I just want to sit down for a little while in a safe place." Which she allowed me to do. Made me coffee and whatever. About two hours I sat here [...]. Now I live very close to another community centre and I set foot in that community centre and didn't feel at all welcome. [...] that day I felt comfortable and safe enough to come here (FG3).

Several participants gave similar accounts of going to their community centre when they were struggling with feeling down or like they were not coping with their everyday life. Key to all of their accounts was that they did not seek a therapeutic response – they just wanted to spend time in a safe, supportive place. For them, a community centre was a place that is community and person-centred, not service-centred, which is explored further in the next section.

These findings demonstrate that the importance of safety is paramount to community centre users. For people to be enabled to feel welcome, seek support, make connections, and link with the broader community and services, they need to be able to do so safely. 'Safety' in this context includes:

- physical safety - free from violence, able to maintain personal space
- psychological safety – supportive of mental health, maintain privacy and confidentiality
- cultural safety – welcoming, genuine, free from institutional racism

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Community oriented, not service oriented: 'you can just be'

Participants unequivocally identified their community centre as being community-oriented rather than service-oriented. Several participants described feeling that they could go to their community centre and 'just be' without being asked personal questions or have any services pushed onto them. Nevertheless, they felt secure in the knowledge that if they wished to seek information about services they could, and that their community centre workers would be able to link them to whatever service they may require. Thus, their community centre was a place where they could be in control of what happened next. The following participant's account describes the perspective of many:

I just wanted to be out, and I thought what better place than a community centre, to be able to grab [a cuppa], where there was food services, or counselling services, or life's hard knock services. Without having to tell my story about it [...] you don't have to tell them your life stories, or give them your birthdate or your CRA number, or your status. There's lots of things here where you can just be (FG6).

Participants also identified their community centres as places where they can have a voice about the types of programs or activities may be offered. They expressed confidence in knowing that if they wanted information about something, a session could be arranged. Similarly, if they wanted to teach a class, they could negotiate to offer it (although out of their own pocket). There was a definite sense that participants could ask community centre workers about anything and if the worker did not know, they would find out, as noted below.

'You don't have to tell them your life stories, or give them your birthdate or your CRA number, or your status. There's lots of things here where you can just be'

If there's something I need to know, somebody here will have the answer, whether it's one of the other group members, whether it's one of the facilitators or one of the other workers. Somebody can always answer your question, regardless of whether it's child related, work related, disability related, NDIS related, somebody knows the answer here (FG4).

Further, participants often spoke about gaining information from other community centre users as much as they did from community centre workers, particularly once they had developed trust and social connections with others.

Not everyone knows what options are out there for them either. By coming here and talking about it people can – maybe you can put them on the right track. [second participant]. And you do – with this community house, they sort of become family. I mean, we console, we cheer [each other] (FG2).

Nevertheless, numerous participants who had been attending their community centre for many years commented on the ongoing strain brought about by short-term program-specific funding and programs or services that they used to access but were no longer provided.

It's kind of more sort of informal. […] We did have a counsellor for a while but the funding ran out. See, the thing is the whole thing runs on an absolute shoestring and it's just hard to keep things running. And of course, you see the thing is, the people who fund them think it's only small and da, da, da, but we probably get as many people through as some of the big centres […] I guess when you thought about how effective it was you've got to think about in terms of mental health support as well (FG2).

Participants described the range of programs and activities they had participated in and the ways in which these had affected their everyday lives at a personal and community level, which is described in the next section.

These findings suggest that community centre users view their community centres as places that are person- and community-oriented rather than service-oriented, which means:

- people can be in control of what happens next (e.g. not having to give CRN)
- a place to seek information about any service or assistance
- a safe conduit to services if needed
- activities/programs are tailored to community centre users' needs and preferences

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Pathways to participation: 'it gives me a meaning in life'

Several participants described ways in which their involvement with their community centre contributed to their own personal development in terms of their feelings of worth and being a productive member of their community. Again, recovery from mental illness featured highly in people's personal journeys, with the following account being common among participants:

I do suffer from a mental illness and I spend a lot of time – if I'm not here I'll spend a lot of time just in my room by myself, which isn't good for my health or the people

*around me. So, coming here gives me a focus and gives me just kind of like, I know this is really deep but, like, **it gives me a meaning in life**. Because I'm like, well I'm actually doing something. What I've gotten out of it is that I now have a part time job, I'm part of a youth leadership program and I will be continuing my studies. So, yeah, it's pretty good that **I did my placement here** because so many good things have happened since then (FG3).*

Participants also described ways in which they felt that volunteering at their community centre provided a pathway to paid employment through gaining skills such as customer service and money handling, for example by volunteering at the community service reception or op shop, as described by the participant below:

*I've been a home Mum for a long time, and now they're all in school and I said "okay, **I'm going to look for work**", but I've never been out there. Like I've never engaged with a lot of people. **And here will help me**, how to communicate with people and how to treat people. [With young children] you don't talk [to adults] a lot. And that's what I need now. So, I said **the volunteering will help me**, how to treat the customers and how to treat somebody who's working with you. Yes, so I ended up volunteering (FG5).*

Many of the participants had first attended their community centre to undertake a study placement (e.g. Certificates III or IV or Diplomas in Community Development or Community Services). Most participants described attending a broad range of vocational and life skills courses (e.g. food handling skills) which increased their capacity to engage in both volunteer and paid work and subsequently increased their confidence and feelings of self-worth. Further, a few of the men in particular first attended the community centre because they had been retrenched from their employment and they were unable to find other paid work, as described below:

*So, for me it was a terrific opportunity because I was retrenched from my job [after] 30 years [...] I found it very hard to find another job, so I came here to volunteer [...] which I really enjoyed and after a little while an actual **position became available here for me as a bus driver**, so I started driving the community bus and picking up children for a program that we did here called Breakfast Club; and I've been here ever since [...] about 14-15 years ago and **now I'm an employee of the centre** [...] so it was a real help for me as a step up (FG6).*

Such participants also described starting volunteering as part of the Centrelink requirement to undertake a minimum of 15 hours per week to access Newstart Allowance payments. Nevertheless, their community centre soon became a central part of their life, bringing fulfilment and a sense of purpose, described below by another male participant:

'Coming here gives me a focus and gives me just kind of like, I know this is really deep but, like, it gives me a meaning in life'

*I started here about four and a half odd years ago. I lost my job and I went to Centrelink and they said because of your age [...] we can organise for you to do volunteer work and you don't have to worry about looking for a job. It was like even they said to me, **"At your age no-one's going to employ you anyway."** I've been here ever since. I've enjoyed every bit of it. Yes, started off in the garden and sort of [...] get roped into odds and sods here and there. But yes, **I'm absolutely loving it**. I'm at a point now **I don't have to be here**. I've gone past the 65 [...]**I mean I could have quit but I'm having a ball.** [...] It's better than sitting at home every day doing nothing (FG5).*

Many of the participants who were from non-English speaking backgrounds described attending their community centre to study English as a Second or Other language. Consequently, the community centre became a place that assisted them to connect more with their local community and to undertake other skills which also led to being able to join the paid workforce.

> *I come here to the community for English, I study English… When I come here I meet the people here, they are very nice people who are helpful to me. I find out that also there's a computer course, so I come mostly for the computer course. And I still come in for the English course (FG3).*

These findings indicate that community centres support users to access pathways to participation, such as volunteering, work experience or study placements. These types of support increased people's feelings of self-worth. Further, the findings suggest that community centre users derive mental health benefits from their participation, whether or not their participation becomes a pathway to paid employment. This, in itself brings benefits such as:

- increased social connectedness

- increased confidence and

- a sense of being a productive member of society

Community centre presence and profile: 'don't be scared to come in'

The most important way in which participants felt their community centres could be enhanced was by marketing themselves better. Many felt that the public face of community centres should present more obviously as being for everyone. Moreover, participants felt that community centres should make it more apparent that they are not a social service, illuminated by the following:

> *I also didn't know it was a community centre. The signage was very, very small, **it spoke to me as a government building, service provider**. […] Because until I studied, I still thought it was a service provider, because the community centre, I thought things would look a bit more obvious. So that's actually why I came here [for my placement], to get a message out, that this is a community centre, not a government service provider (FG6).*

Further, participants explained that people from Aboriginal and Torres Strait Islander communities tend to seek to identify that a place is culturally safe by the physical markers in the landscape (e.g. external artwork) before they feel it is safe to enter. One of the Aboriginal participants described this below:

> *I would still like it recognised better that it's a community centre, and I think it's certainly getting there. I think with the artwork and the things [worker] has done, it's certainly starting to be a place where people walk past and go "hey, I want to go in there" […] it's changed a lot in the last couple of years and it looks great, all the colour now, it's much more welcoming (FG6).*

There was a strong sense among participants that they believed too few people in their communities were aware of their community centre, or of its purpose, with many making statements like the following:

[…] you can come here for a meal and tap in to counselling if you want, or craft groups, or a whole lot of those. That's one of the main reasons, is to let this demographic know, this is a community centre. Lots and lots and lots of things here, and don't be scared to come in (FG6).

Further, a few participants felt that if community centres appear homogenous, rather than community-specific, they can appear to be an arm of government, whether this be local or state government. Participants were very clear that they wanted their community centre to be managed by and for their communities, with the account below demonstrating the importance of all of the elements appearing in the themes above:

*So, having a centre that has that empathic approach to welcome and based on inclusion, you create that community. A lot of [people] don't realise [that] you seem to isolate too many people in society, **and sometimes we're [such] a branded organisation**, what we actually stand for is not reflective of what we are funded to do sometimes (FG6).*

Some of the participants also described people they know expressing a sense of stigma which acts as a barrier to becoming involved in their community centre, illustrated below:

*We're a low income family but we're not low enough to get the health care card. With the family community dinners and other activities that they present I'd say to my husband, "We're going to have a dinner. It's five dollars a family. We're going to come down" [but] he would have felt embarrassed... It was kind of like **a stigma thing**. He didn't want to be associated with being at one of those events (FG5).*

Several participants spoke about this phenomenon, although some felt that their community centre had already made changes to be 'more welcoming for everyone' (F4). Some participants gave examples of peer outcomes, whereby people who are struggling can see how far others have come as a consequence of their community centre participation. One participant described this as: 'not just using it as a crutch not to be better' but encouraging people to 'want to do these courses and want to be better' (F4).

'I also didn't know it was a community centre. The signage was very, very small, it spoke to me as a government building, service provider. […] Because until I studied, I still thought it was a service provider'

The findings in this section suggest that improvements that could be made in the community centre sector include:

- strengthening promotion activities so that communities are made aware of their existence

- promoting their purpose - place-based and community member-driven (not homogenous)

- presenting as being for the community, not a government service

- presenting as universal – inclusive places for the whole community

Discussion

The overwhelming story from community centre users was that participation in their community centres plays a crucial role in their lives. Our findings indicate that there are many ways in which community development approaches described above underpin the management and structure of community centre programs and activities. By being place-based, person-centred and strengths-based, community centre activities foster a sense of belonging and connectedness which counter the effects of social isolation, social exclusion and loneliness. Returning to the five key themes, participants' engagement with their community centres contributed to positive user outcomes.

1. Making connections: 'A sense of belonging'

The most compelling theme that emerged across all focus groups was the importance of community centres as places for developing a sense of belonging. We found that the effects of disadvantage, social exclusion and isolation on people's lives were somewhat mitigated by participants' involvement in their community centres. Set against evidence from other studies, we contend that these positive user experiences are outcomes of the community development approaches that community centres are applying. Community centres actively promote inclusion and facilitate and support the development of social connections by providing the space for users to engage in place-based activities and programs and meet like-minded people. These connections subsequently contribute to users' personal and community empowerment (Ollis, Ryan et al. 2018).

While programs such as those provided through ACE contribute to the development of pathways to both paid and unpaid work, our findings support the work of others that have found that ACE programs also contribute a great deal to reducing isolation and increasing a sense of wellbeing among program participants (Ollis 2017).

2. A safe place: 'I felt comfortable and safe enough to come here'

Participants' concept of safety included physical, psychological and cultural safety. In many ways, safety was the most important element of community centres identified by study participants as a prerequisite for developing a sense of belonging. For people to be enabled to seek support, make connections and link with the broader community and services, they need to be able to do so safely.

To implement strengths-based practice it is essential that people accessing community centres are provided with a safe place in which to express their views and discuss their experiences. Ensuring that programs and services are person-centred in a manner that respects service users as experts in their own needs and lives should involve understanding and appropriately responding to their perceptions of what constitutes safety (Popay 2007, Popay and MacDougall 2007, Milton, Attree et al. 2012).

Understanding and practising cultural safety is crucial for community centres to engage people from Aboriginal and Torres Strait Islander communities. Cultural safety differs from cultural awareness, cultural competence and cultural sensitivity because it is 'defined by recipients of care or services' (Australian Human Rights Commission 2018, p. 4). The concept of cultural safety initially emerged from New Zealand and has been promoted widely in Australia, particularly in health service (Williams 1999, Ramsden 2002).

> 'While cultural competence contributes to a service recipient's experiences, cultural safety is an outcome'
>
> (Walker, Shultz, Sonn 2014 p. 201)

There are formal avenues to ensure centres follow specific protocols to ensure that Aboriginal and Torres Strait Islander peoples, cultures and deep connections to Country are formally recognised, respected and valued, including the Community Centres SA Reconciliation Action Plan (CCSA 2016) and the Aboriginal Cultural Protocols document (CCSA 2018). The Aboriginal participants in this study emphasised, however, that such protocols must be accompanied by a genuine commitment towards reconciliation through decolonisation processes to promote cultural safety.

The concept of cultural safety marks a shift from limiting organisations and workers to simply attending cultural awareness or cultural competence training, but continually striving to 'enhance rather than diminish individual and collective cultural identifies, and empower and promote individual, family and community wellbeing' (Walker, Shultz et al. 2014 p. 201). Most importantly, cultural safety is experienced by people rather than something that is provided, which is why ongoing critical reflection, listening and collaborating is crucial - and without which there is a risk of reproducing colonising practices (Walker, Shultz et al. 2014). As articulated by Walker and colleagues (2014 p. 201):

> *While cultural competence contributes to a service recipient's experiences, cultural safety is an outcome. Cultural safety requires us to ask the client or service recipient whether they felt they were treated with respect, and had their culture, values and preferences taken into account—whether they felt safe.*

Australian studies have found that cultural safety is strongly tied to power relationships in the use of space. For example, Steen, Sparrow et al. (2007, p. 22) found that factors that encouraged Aboriginal and Torres Strait Islander people's use of spaces in their study included:

- *Knowing the entire layout of that space*
- *Having a sense of connectivity to that space*
- *Knowing one can feel secure and operate safely within that space*
- *Knowing when to use that space*
- *Having found a space, assist in setting the scene to create a zone of comfort.*

Our findings support the literature on cultural safety in this context, as a genuine commitment to deep listening to and continually collaborating with Aboriginal and Torres Strait Islander communities to ensure that community centres are culturally safe places (Williams 1999, Steen, Sparrow et al. 2007, Bennett, Zubrzycki et al. 2011).

3. Community oriented, not service oriented: 'you can just be'

Users did not seek a therapeutic response from community centre workers – they just wanted to spend time in a safe, supportive environment. For them, a community centre was a place that is community- and person-centred, not service-centred. Nevertheless, participants considered their community centre as a place to seek information about any service or assistance they may require and as a safe conduit to services if needed. The crucial point here is that, with a person-centred informed perspective, there is an assumption that users are experts regarding how and when they engage with their community centre activities or programs. These findings align with evidence that there is a strong link between agency, involvement and service uptake (Popay 2007, Milton, Attree et al. 2012).

To users, community centres are more than a building (or group of buildings), property or garden. They are social spaces that are a product of community interaction where everyday life is supported away from the pressures of modern life and the isolation that many participants reported experiencing (see Lefebvre 1991). Yet, participants were acutely aware that the extent to which their community centre would remain 'their place' is at the discretion of funding bodies. Their fears were founded on past

experiences of witnessing the demise of community health and mental health services, as well as a range of youth services. The higher than expected demand to participate in focus groups was a telling example of community development leading to civic participation whereby the participants were keen to have their voices heard regarding the importance to them of their community centres (Jackson 2007).

4. Pathways to participation: 'it gives me a meaning in life'

Our findings support evidence that community centres provide multiple, person-centred avenues for participation. Community centre users derive benefits from their participation, whether or not their participation becomes a pathway to paid employment (Rooney 2011, Ollis, Ryan et al. 2018). Benefits they described included increased community connectedness, increased confidence and a sense of being a productive and valuable member of society. Those whose participation had led to paid employment described their new employment as contributing to feeling worthwhile and enjoying their work in terms of personal fulfilment and 'giving back'. These findings are aligned with the literature regarding the importance of adult learning and the ways in which education contributes to community development (Jackson 2007, Rooney 2011, Ollis 2017, Ollis, Ryan et al. 2018).

The findings provide evidence that well-funded community centres are better positioned to respond effectively to community need. Participants referred to specific programs that had made a huge difference in their own lives that were no longer available for others. Their concerns demonstrated a desire for reciprocity and empathy for others who may benefit from programs and activities offered at community centres. This evidences the fact that community centres enable care as a community resource. This is further evidenced by the many stories of users initially entering the community centre because of a particular need or challenge and consequently volunteering or engaging in other forms of giving back. More support for community centre programs and activities has the potential to tap into users' desire to reciprocate, while limiting access to programs is more likely to produce the inverse – that is, reduced social capital (Kay 2006). Drawing on internationally recognised work on social capital and community development, a commitment to community centres extends beyond simple economic investment and can be utilised as a deliberate strategy to improve the social capital of groups and individuals, which in turn will have positive benefits that may translate to a range of improvements beyond social connectedness (Kay, 2006).

5. Presence and profile: 'don't be scared to come in'

The findings indicate that community centres could optimise positive user outcomes by enhancing the public presence and profile of community centres. Ways that this could occur include promoting the purpose of community centres as being place-based and community driven; presenting centres as being for the community, not a government service; and working with local communities to further promote physical, psychological and cultural safety.

Participants expressed concern that there were many people in their communities who may not be aware of their community centre's existence or purpose. The findings also suggested that more could be done to foster linkages with local services to increase awareness of community centres and thus increase referrals. These findings align with 'wayfinding' in the urban planning literature, which promotes the use of signs and symbols in landscapes that assist people to find and recognise places (Golledge 1992). In the context of community centres, this would mean ensuring that community centres can be more easily recognised rather than being viewed as service centres. Further, 'social wayfinding' has been used by those working in community development roles to assist people to identify and find the services that best suit their needs (Skinner, Tually et al. 2018). Social wayfinding in this sense would require the range of social and community services enhancing their connections with their local community centres and vice versa.

Conclusion

From the voices of community centre users who participated in this study, it can be concluded that community centres are vital to the people who access them. The findings suggest that community centre users are supported in ways that provide person-centred pathways to participation. Place-based and strengths-based community development approaches are at the core of their success in generating positive user outcomes. Moreover, community centres represent a bastion of genuine coal face community connectedness and program delivery. Community centres are not just 'doing' or offering access to a program, they instil meaning and belonging as part of the community. Their ongoing connection to community and what they continue to contribute, particularly in the context of limited resources, should be celebrated.

The key elements of what makes a great community centre included being welcoming and inclusive, providing physical, psychological and cultural safety, being community-driven and place-based. Community centres are not just gathering spots or a locus for program delivery. For users, staff and volunteers they are *of* the community and are a formative space that promotes inclusiveness and a sense of belonging. Unassuming as they are, community centres need to be celebrated as critical to the health and well-being of the communities they serve.

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[i] National Link is the commonly shortened version of the Collective of the National Link of Neighbourhood Houses and Community Learning Centres ANHCA (2019). History of ANHCA. Melbourne, The Australian Neighbourhood Houses and Centres Association..