

# Grassroots Community Report

## *Tweed Heads Region*

### Summary

#### Vision for a health community

*“Strong hearts, Strong minds, Strong community”*

A healthy community is one where people are happy, living long and active lives, are informed and engaged with health supports they choose to use. A community where people take care of each other, where families feel supported and strong and are connected spiritually and culturally.

#### Top priorities

Mental health and wellbeing, alcohol and other drugs, and health education were priorities listed by Tweed respondents. Vital to addressing these priorities are community’s connection to culture and culturally appropriate programs and services.

#### What’s working well

Health programs and services from the Aboriginal Medical Services and other providers was highlighted, including those that support ongoing exercise classes in the community, dental health, chronic disease management, men’s groups, kids caring for country groups, breakfast programs at schools, playgroups and afterschool cultural programs.

#### Ideas that would have the biggest impact

Addressing the misuse of drugs and alcohol; improving mental health of the community; addressing violence with a focus on healing from trauma; improving access to appropriate housing; increasing availability of local employment; and higher levels of engagement in education and training.

#### Recommendations for Service Providers and Research Focus Areas

Improved communications between providers and community, provision of culturally appropriate services and forming more trusting relationships with community. Increasing supports for prevention and treatment of alcohol and other drug misuse; and improved mental wellbeing.

## Northern Rivers Regional Community Vision for a Healthy Future

Health from the Grassroots is an Aboriginal community-led research project to improve health and wellbeing across the Northern Rivers region of NSW. It was initiated by Aboriginal staff at the University Centre for Rural Health (UCRH) Lismore. We asked communities living throughout Bundjalung and Yaegl country about their health vision for the region and priorities to reach that vision. Through five yarning circles and surveys with 192 community members, this information was made into the infographic below (Figure 1). We subsequently used this at community events and gatherings, yarning with people about whether the depiction was accurate and if anything was missing. On the whole, there was broad support and positive comments about it representing the community story well.

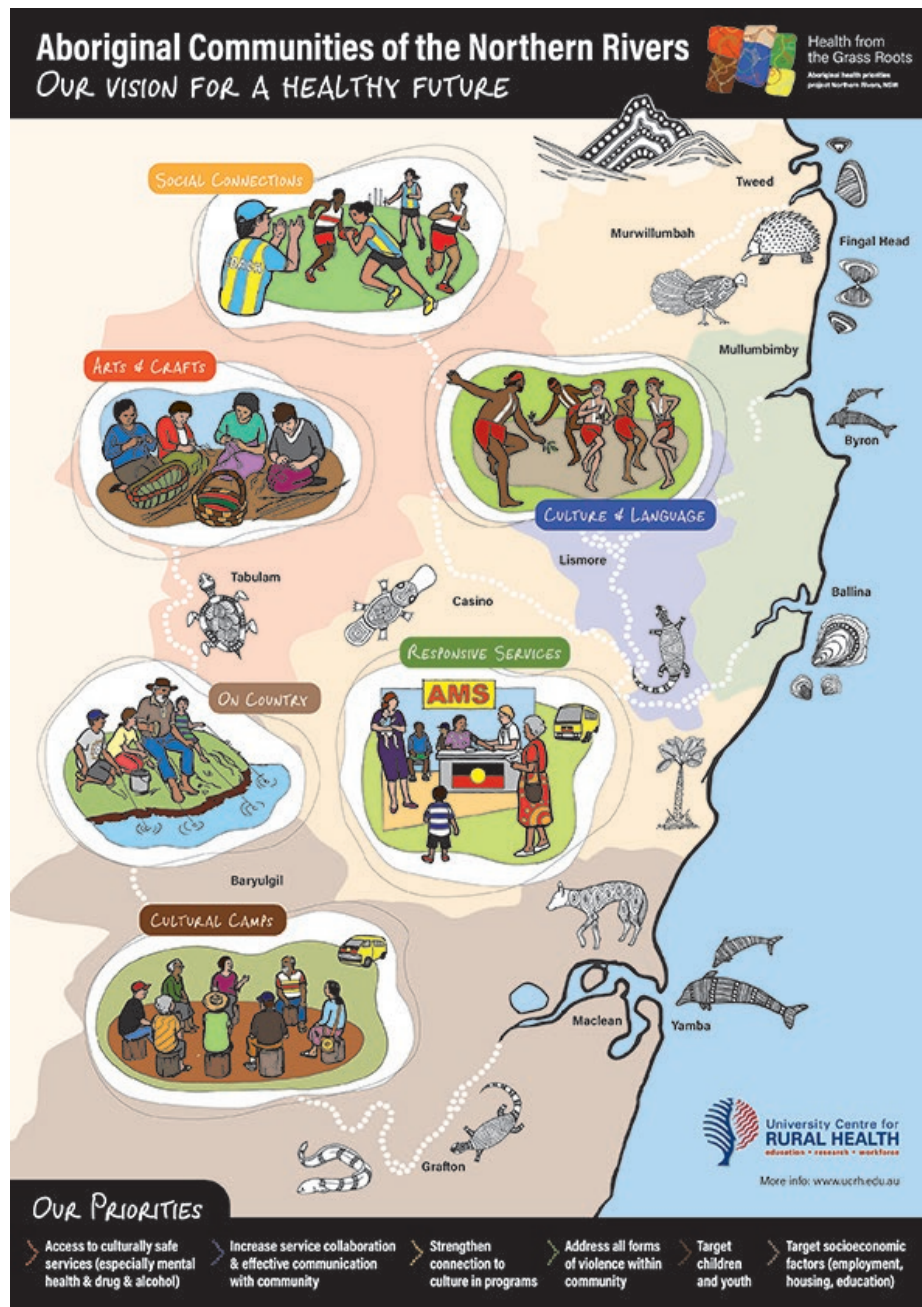


Figure 1: Vision and priorities for a healthy future – Bundjalung and Yaegl country.

## Tweed Region Community - Vision and Priorities

### Vision

Tweed Heads respondents revealed a shared vision of the region that has a strong and thriving culture at its core. A healthy community is where people are happy, where people take care of each other, where families feel supported and strong and are connected spiritually and culturally.

A community where people are informed and engaged with supports they chose to use, who are living long and healthy, active lives. Where culturally appropriate supports and resources are available to those who need it. A community where people are educated, employed, feel safe, have an affordable home, and are in control of their lives.

*“Supporting each other, determining own future, in control of our own services and living on our homelands with access to Country”*

*“Services that also cater for the individual and allow for creative outlets and healing to take place”*

*“Community members receiving appropriate timely care as their needs desire”*

*“Connection with culture and language”*

### Top Priorities

Respondents from the Tweed region highlighted that mental health and wellbeing, alcohol and other drugs, and greater health education were top priorities for their community. There were personal stories of someone close experiencing mental health challenges affecting their wellbeing and that of their immediate family and children. There were calls for more financial and social support for family members looking after children of others who for various reasons are unable to care for family. Alongside these issues were concerns around improving chronic disease care and prevention, poor dental health and increasing education and opportunities for leading more active lives and eating better food. Addressing these priorities through community's connection to culture, and through more culturally appropriate programs and services is vital, as is the nurturing of community mentors and role models for youth.

*“Culturally appropriate mental health responses and support - healing centres”*

*“Education and awareness of what programs exist and how to access them”*

*“Language and arts programs reinforcing culture and practises, and creating opportunities for intergenerational links”*

*“Living a healthy lifestyle eating right and exercising”*

*“Health programs with a focus on education and preventative behaviours”*

**Table 1: Health and wellbeing priorities raised by Tweed Region respondents (n=19) compared to broader regional survey responses.**

Health Topic	Tweed Region % respondents*	Northern Rivers % respondents *
Alcohol and other drugs	21	26
Mental and emotional health	21	26
Health Education	21	6
Chronic Disease	16	5
Incorporating culture into programs	16	6
Culturally appropriate services	16	4
Dental health	16	13
Diet	16	17
Physical activity	16	19

\*Number does not add to 100% as individual respondents provided multiple priorities

### What's working well?

Participants provided many examples of things that are working well to keep the Tweed community healthy. Health programs and services provided by the Aboriginal Medical Service were highlighted by those who participated in the survey and yarn. Programs mentioned included those that support ongoing exercise classes in the community, dental health, chronic disease management, men's groups, kids caring for country groups, Elders arts and crafts groups, breakfast programs at schools, playgroups and afterschool cultural programs. The affordability of some of these services, through funding subsidies, was also raised as an important aspect of community members being able to access and hence benefit from these supports.

Respondents made mention of the positive work that frontline community health care workers are providing, specifically noting the great work of community nurses, Aboriginal mental health workers, Aboriginal allied health workers, and liaison officers.

Strong leadership and acknowledgement of culture, not only coming from within the community itself, but also through respectful engagement by health services, was felt to be a very important part of the positive work in the region.

*"Exciting new programs and employment initiatives"*

*"Aboriginal playgroup and afterschool cultural program" ... "Men's group, exercise group" ...*

*"Health programs, Healing groups, Cultural programs, Cultural D&A programs"*

*"Strong families and communities working in partnership with culturally appropriate services"*

*"Practicing and acknowledging culture"*

Table 2: What is already working well in the Tweed Region from respondents (n=19).

Topic	% respondents*
Available health programs and services	26
Culturally appropriate programs	21
Affordability of services	21
Community culture	21
Services' engagement with community	16

### Improvement ideas that would make biggest impact

For majority of Tweed respondents, activities that addressed drug and alcohol abuse would have the biggest impact. Other suggestions included: improving accessibility of mental health services; addressing violence with a focus on healing from trauma; and improving access to appropriate housing. Other suggestions viewed as having high impact were availability of local employment and training opportunities and higher levels of engagement in education.

Generally, there was a call for more coordinated services and better communication of these services to the community. This included more regularity of services, increased availability to reduce specialist waiting lists, support for chronic disease management, more drug and alcohol support staff, and services that enable reconnection to culture.

*“Education and employment opportunities are crucial to community and individual empowerment”*

*“Healing from trauma and violence - mental health” ... “mental health support network”*

*“If regular and reliable service were around community would trust and improve compliance with all areas of health”*

*“More drug and alcohol councillors (Aboriginal)”*

*“Culturally safe trauma-informed services”*

Table 3: Improvements for the biggest impact as raised by Tweed Region survey respondents (n=19).

Topic	% respondents
Alcohol and other drugs	26
Mental and emotional health	16
Addressing violence	16
Housing	16
Employment	11
Education and Training	11
Availability of services and supports	11

## Potential Service Provider Actions and Research Focus Areas

Much of the consultation with community in both surveys and yarning circles focused on recommendations for action moving forward. These are summarised below. They vary in size and complexity but provide a useful guide for service provider actions and potential research topics that can be done in partnership with community.

### 1. Information and communication

- More publicly available information on what programs and services are available to the Aboriginal community throughout the region.
- Community education on specific health issues, such as FASD (foetal alcohol spectrum disorder).
- More information and support for community members, especially Elders, when navigating through the hospital system.
- Greater transparency and accountability from services to community members.
- More interagency networking meetings that move from information sharing onto delivering positive outcomes for communities.

*“Better communication with different services on what they provide”*

*“Aboriginal people feel more empowered and supported when Aboriginal hospital staff are involved with communication of Aboriginal patients, especially involving a discharge plan”*

*“Better access and knowledge and education on available resources”*

### 2. Quality of health services including the provision of culturally appropriate supports

- Improved collaboration between services and greater coordination across programs for a more holistic and stream-lined experience for community as the service users.
- Increased number of Aboriginal staff and better employment supports and opportunities for current Aboriginal health staff (supporting retention).
- Greater cultural acknowledgement from mainstream health services, as well as broader social supports such as justice.
- Permanent doctors at the Bugalwena medical service.

*“Increased identified positions, PDP, career advancement opportunities and staff support”*

*“A cultural safety audit for organisations that take money to work in our communities”*

*“Organisations working in a more coordinated way to make access to services and programs easier for community members”*



3. Forming trusting relationships with community

- Greater listening from services and stronger communications with community members, working together to develop or improve programs in the region.
- More cultural safety and awareness training for service staff to reduce judgement and help ensure greater engagement.
- Allowing the voice of the community to lead solutions through greater engagement and collaboration.
- More respect of culture and importance of extended families in medical services.

*“The discrimination needs to stop and more upskilling is required to teach young people how to manage discrimination”*

*“More respect of culture and extended families in medical services”*

4. Increase supports for alcohol and other drug misuse and mental wellbeing

- More alcohol-free community events for mob to connect with each other in a safe and healthy environment
- More training in mental health awareness and dementia support
- More drug and alcohol supports, specifically targeting youth
- Increase availability and accessibility of culturally appropriate counselling services

*“More awareness and support [for] mental health focusing on suicide prevention”*

*“Mental health support, more Aboriginal counsellors, psychologists and mental health programs run by our people”*

## Intersecting health and education in the Northern Rivers region: input from the Upper North Coast Aboriginal Education Consultative Group (AECG)

A regional yarning circle was held with the Upper North Coast Aboriginal Education Consultative Group (AECG) in November 2018 at the Lismore Workers Club, with 30 educators attending. Visions of a healthy future for the area closely aligned with data gathered from each of the regions. This included a community with more mental health supports led by an Aboriginal workforce, with access to culturally appropriate and holistic services, with children being kept safe and safe spaces available for youth; with drug and alcohol supports, more fitness programs, better ongoing partnerships between community and services delivering supports including staff engaging through community visits, improved transport, and increased training opportunities for youth. Acknowledgement was given to the great work that is already happening in communities, in particular the work of local AMSs. Priorities for service providers and research focus areas had a strong emphasis on youth. This included suggestions of: youth after-school activities, holiday programs and homework centres; TAFE courses on life skills and learning language; Aboriginal mental health services delivering school programs; AMS staff providing screenings and health education sessions at school; and strategies to increase recruitment of local community members to school positions.

### Where to next?

Respondents from the Tweed Heads region provided us with a roadmap for future research and service provision. This roadmap will be shared with service organisations across the region. Based on community priorities and ideas for what needs to change, UCRH are consistently seeking out funding opportunities to develop projects in partnership with service providers and community, facilitating local Aboriginal community-led action to improve health and wellbeing services across the Northern Rivers region. One avenue to continue this work is the medical and allied health students that rotate through UCRH on rural health placements. Working with communities and service providers is a valuable educational experience for them and will assist in the co-design of evidence-based actionable solutions to address one or more community identified priority health needs.

Further information will be provided to community as we commence projects. If you have a project idea or wish to get in touch with the Health from the Grassroots team, call UCRH on 6620 7570.



## Health from the Grassroots Project - background and methodology

Initiated by Aboriginal staff at the UCRH in Lismore, the *Health from the Grassroots* project adopted a 'bottom up' process of engagement, fostering community ownership and self-determination in guiding what topics health researchers investigate in partnership with community, health service providers and other relevant organisations.

Our objectives are to:

1. Document perspectives of Aboriginal and Torres Strait Islander people living in Bundjalung and Yaegl country on community health research priorities;
2. Hold community forums across the region (Grafton/Yamba/Maclean, Casino/Coraki, Lismore, Ballina/Cabbage Tree Island, Tweed Heads) to prioritise the top issues per region for action; and
3. Develop research ideas with community addressing the priority issues within and/or across the region.

Health from the Grassroots brings together culture and research. Centralising Indigenous perspectives in research processes, promoting a process of change, building on the limited evidence about how to develop processes for community-led systems change.

A community survey was distributed (paper-based and online) over November-December 2018 and five yarning circles were held across the Northern Rivers region (including the Home and Community Care Centre -South Tweed Heads). As a basis for discussion, we used the following questions:

1. What does a healthy community look like to you?
2. In your opinion, what are the top 3 priorities for the health and wellbeing of your community?
3. What things are working well to help keep our community healthy?
4. What things do you think need improvement to better support our community's health?
5. What issue, if improved, would have the biggest impact for your community?

During the project several community members were trained up to assist with facilitation of workshops and communicating with local participants. Overall, around 200 Aboriginal people participated in surveys and five workshops held across the region (Lismore, Grafton, Tweed Heads, Cabbage Tree/Ballina and the regional Aboriginal Education Consultative Group). The yarning circle at Casino was cancelled due to sorry business. A community project officer instead spoke with community members about visions of a healthy community within the Richmond Valley region and priorities for improved health and wellbeing. Community thoughts and ideas were gathered and summarised into a Northern Rivers community infographic (Figure 1, page 2).

### Ethics

This project received ethical approval by the AH&MRC Human Research Ethics Committee (reference 1457/18) as meeting the requirements of the *National Statement on Ethical Conduct in Human Research (2007)*.

## Demographics

### Survey respondents by region

Region	Number	%
Ballina/Cabbage Tree/Byron	67	35
Clarence Valley	26	14
Lismore	66	34
Richmond Valley	14	7
Tweed Heads	19	10
<b>Total</b>	<b>192</b>	

### Survey respondents by gender

	Ballina/ Cabbage Tree/ Byron	Clarence Valley	Lismore	Richmond Valley	Tweed Heads	Total (number & %)	
Male	18	8	18	5	4	<b>53</b>	<b>28</b>
Female	44	18	48	9	15	<b>134</b>	<b>70</b>
No response	5					<b>5</b>	<b>3</b>
<b>Total</b>	<b>67</b>	<b>26</b>	<b>66</b>	<b>14</b>	<b>19</b>	<b>192</b>	

### Survey respondents by age

	Ballina/ Cabbage Tree/ Byron	Clarence Valley	Lismore	Richmond Valley	Tweed Heads	Total (number & %)	
< 15 years	1		5			<b>6</b>	<b>3</b>
15-24	11	1	13	3		<b>28</b>	<b>15</b>
25-34	21	7	17	3	3	<b>51</b>	<b>27</b>
35-44	17	5	12	5	8	<b>47</b>	<b>24</b>
45-54	12	6	9	2	3	<b>32</b>	<b>17</b>
55-64	3	2	9	1	5	<b>20</b>	<b>10</b>
≥ 65 years	2	5	1			<b>8</b>	<b>4</b>
<b>Total</b>	<b>67</b>	<b>26</b>	<b>66</b>	<b>14</b>	<b>19</b>	<b>192</b>	

## Contact Details

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