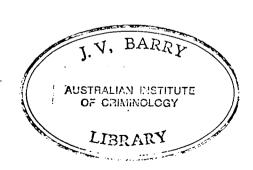
The Hindley Street Project Centre: an evaluation

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THE HINDLEY STREET PROJECT CENTRE: an evaluation

SECOND EDITION

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Chapter 1

INTRODUCTION

Cities often have their sections which have become famous (or notorious) not only for their superabundant nightlife, the bright lights and glitter, but also because they are dangerous. In Sydney it is Kings Cross. Although it may pale by comparison, in Adelaide it is Hindley Street (see Photograph 1).

For the youth of Adelaide, Hindley Street is particularly attractive. It is the most cosmopolitan and multicultural place in Adelaide. There are night clubs, cinemas, cafes, hotels, entertainment centres, and on Fridays and Saturday evenings throngs of people in the street, and the exciting whiff of danger.

The Hindley Street Youth Project Centre (HSYP) was conceived as a response to the needs of young people "at risk" in Hindley Street. It was established in March, 1981 as an information and referral service for young people in the inner city. As we shall see, it has evolved to encompass much wider functions, providing a "drop-in" service, recreational activities, a health service and street work with young people. It operates on Friday and Saturday nights when large numbers of youth come to Hindley Street where the action is.

Many of the youth are Aboriginals from the outer western and northern suburbs of Adelaide. Gradually the Project Centre became more and more concerned with the needs of Aboriginal people, because they were seen to be particularly at risk and in need of support.

In a report on inner city youth in Adelaide, McNeil (1987) described Aboriginal youth as being at greater risk of arrest than other young people in the city. They were described as more likely to be arrested for a wide range of offences, including loitering, alcohol and drug abuse, begging, assaulting behaviour, creating public disturbances, offences against property and activities associated with prostitution. Evidence has been accumulating that regardless of the offences that may be committed, Aboriginal youth are disadvantaged in relation to the Aboriginal Criminal Justice System. It has been argued that at every point where discretionary powers may be exercised in dealing with offenders, Aboriginal youth are likely to be treated more severely (Gale, Bailey-Harris and Wundersitz, 1990). Not surprisingly, support for Aboriginal youth has frequently been in the context of handling difficulties they have with the law and its administration.

A further issue relates to the health of Aboriginal people, which is, in general, at a considerably lower level than that of the non-Aboriginal population in Australia (Russell and Schofield, 1986). Urban Aboriginals in particular are known to suffer more frequently from conditions associated with alcohol dependence, hepatitis, diabetes and STDs. Hence, support for Aboriginal youth could not ignore their significant and pressing health needs. To assist in this way an outreach of the Aboriginal Medical Service was recently established at the HSYP Centre.

The HSYP has also sought to advance the social well-being of youth who go to the Centre by providing social and recreational activities. The aim is to engage the interest and energy of service-users to the exclusion of anti-social and at-risk activities.

Whilst the Centre has increasingly catered for Aboriginal youth, it has not excluded others. There is a small minority of other youth commonly referred to as "street kids" who also come to the Centre. These non-Aboriginal youth are frequently "homeless" and often appear to be alienated from other youth.

The purpose of this study is to evaluate the work of HSYP. This was done at the initiative of the Management of the Centre. We were fortunate in being able to build upon an analysis of the aims of the Centre undertaken by a joint working committee of members from the State Department of Family and Community Services and the HSYP Centre. This analysis is provided in an appendix to this report (Appendix 1), and although we have not followed it in precise detail, it has been of much assistance in undertaking this enquiry. It also provides proof, if such were needed, of the thoughtful and serious effort that had already gone into the evaluation of the Centre before the task was handed over to us.

We set ourselves a number of tasks. The first was to find out what the Hindley Street Youth Project Centre had been doing over the last 10 years, and to provide a brief history of its development. Secondly, we sought to discover what it was doing currently, that is how it operated. This involved making close observations of what was happening there. Thirdly, we gathered information from the people who were in some way connected with the Centre. Some were closely connected. These included the staff, both permanent and volunteers, and, of course, the users of the Centre. Casting the net wider, we interviewed a range of Aboriginal and other agencies particularly concerned with youth. We included also the Police and the Traders in Hindley Street. As we shall see, sometimes opinions pointed in different directions, and it was our task to identify areas where there was greatest consensus. At the same time, it was considered desirable to describe points of view that were held strongly by minority interests.

In the final analysis we focussed upon two issues: the effectiveness of the Centre in carrying out its work; and how its current role was viewed by others. We did not see our task as delivering a final verdict on either of these matters, but rather to enable readers to form a more reasoned judgement, based upon a range of information (and speculation) about how well the Hindley Street Project was doing.



Hindley Street at night

Chapter 2

HISTORY OF THE CENTRE

The Hindley Street Youth Project (or HSYP) has been operating for 10 years, from 1981 to 1991. This brief history of the Project documents the change in style from an information centre to a drop-in centre, providing a generic service for young people, particularly Nunga youth.

The Hindley Street Youth Project is known, and has been known, by a number of different names, and is rarely known by its official name or the accompanying initials, except in official documents. When the Project was located at 104 Hindley Street it was known as 'one-o-four', The Hole In The Wall (referring to the small size of the premises at 104 Hindley Street). The Nunga community referred to it as the Coffee Shop, as it was a place where free hot drinks were served. In 1986, when the Project moved to 61 Hindley Street, it was predictably referred to as 61 or Project 61. It continued to be called the Coffee Shop by the Nunga Community.

Historical information for this report was obtained from the Annual Reports (years 1983 to 1991), policy documents, and interviews with individuals who have had a long standing involvement with the Project, either as members of the Management Committee, members of staff, or as volunteers.

This paper outlines, firstly the changing role of the service, management structures, and secondly, aspects of service provision that have been of particular interest to the Project over the past ten years; that is, health, street-work and relations with the police.

Role Of Service

The HSYP has changed significantly in its mode of operation in the ten years that it has been operating. The original aim was to provide an information referral and advocacy contact point for young people at risk visiting Hindley Street. Today the HSYP is seen as a drop-in centre mainly for Nunga youth.

In 1981, when the Hindley Street Youth Project opened at 104 Hindley Street, the aim of the service was to provide information referral and advocacy to all young people between the ages of thirteen and twenty five years visiting Hindley Street. Individual service-user's visits were restricted to this end.

"[A] feature of the Project as an information centre, rather than a drop-in centre, is the attempt to keep resources available for everybody and not just one particular group. Take overs and groups adopting a centre as their territory are the inherent pitfalls of operating a service such as 104 Hindley Street by restricting individuals visits to two times per night. and by setting limits as to what can and can't be done in the Project, workers engender the spirit of being open for all visitors." (HSYP Annual Report 1983.)

When the Project opened, information and referral were seen to be the role of the service; the provision of a youth drop-in centre was something to be avoided for the reason that one group could begin to dominate.

Shortly after the Project opened, crisis intervention was seen to be an important role in its operation. This was because young people in Hindley Street were often coming to HYSP in crisis situations. In the 1987 Planning Proposal it was recommended that HSYP should have some full-time staff to be able to provide follow-up counselling and advocacy for young people who had come to the Project on a Friday and Saturday night requiring further assistance and support.

From the historical documents relating to HSYP, there is no evidence indicating any policy change to convert the Friday and Saturday night service into a drop-in oriented programme. Nevertheless, the change occurred. The phrase 'drop-in' was first used in the 1986 Annual Report.

In the years between 1981 and 1986, young Nungas were the main service-users, comprising 60-80 % of all service-users. The staff thought that the main needs of this group were social and recreational. The Otherway Centre in 1982 had a recreation programme for Nungas. This, however, ceased in 1984. It is worth noting that young Nungas were not accepted in youth oriented businesses in Hindley Street, such as the amusement and video game venues of Down Town, Kaleidoscope and Tilt - the latter two are now Timezone. Nungas were often precluded from entering such venues through strict dress rules being applied, and different youth groups had claimed the venue as their 'patch', for example, Down Town was seen to be in Italian youth territory.

In 1985 the HSYP closed the Centre and provided a street-work service. This was in response to criticisms made by members of the Aboriginal community that the Project was attracting young Nungas into Hindley Street. The staff of HSYP aimed to close the doors of the Centre to focus their energies on advocating that other agencies provide social and recreational services, thereby decreasing the number of young Nungas frequenting Hindley Street. Various services were approached to provide recreational services such as the Aboriginal Child Care Agency, CITY (Community Improvement Through Youth), and the Department of Sport and Recreation (Annual Report 1987).

Although no statistics were kept during the period in which the Centre was closed down, it is clear from the Log Book kept that the numbers of Nungas in and around Hindley Street did not decrease, but remained about the same as when the Centre was open.

When the Centre was opened again it was at the present site at 61 Hindley Street. Here the premises were larger and allowed for the development of a recreational service as there was enough space for such things as a pool table, video games, and a craft area.

In addition to the recreational facilities in the Centre, HSYP in 1985 started to provide alternative recreational camps for young Nungas. The first of these was an Aboriginal Youth Leadership Camp at Akara for a core group of older regulars. In 1986 a similar camp was held for younger Nungas. Both of the above camps were funded by CITY (Community Improvement Through Youth).

In 1989 a group of young Nungas went camping at Wadang Island. This camp included going to Point Pearce where a lot of the Nungas who frequent HSYP families come from. This camp was funded through funds from the Attorney General's Department's Crime Prevention Kit. All of the above camps were aimed at introducing young people to a range of recreational activities and improving interpersonal skills. Participants were encouraged to take part in discussion groups as well as undertaking cleaning duties. Annual Reports state that the camps were very successful.

The Project still remained consistent with its aim of providing information referral and advocacy, but also provided a recreational facility. In a number of Annual Reports, staff stated that providing information was complex, and should be provided actively in a variety of ways, such as through informal conversation and recreation programmes.

It would appear that a recreational, drop-in service developed in response to the needs of young Nungas who were frequenting Hindley Street and had few recreational options. In addition, the Centre received donations in the way of various recreational equipment, such as video games and camping equipment, and was successful in receiving various grants for the camps which naturally facilitated the development of a recreational facility.

In 1991 the HSYP is seen by its staff as a generic youth drop-in centre providing information on a range of health and welfare topics, operating a health clinic through out reach from Aboriginal Medical Service(AMS), and providing some recreational activities.

Staffing and management

HSYP was an initiative of Department for Community Welfare -DCW (now Department for Family and Community Services -FACS) and Adelaide City Council in response to their concern about the high number of young people frequenting Hindley Street on a Friday and Saturday night.

There was no local community identification with the need for a youth service, as around Hindley Street there is only a small residential population and the Hindley Street traders were not especially interested in youth. Thus city churches were approached. As a result, Flinders Street Baptist Church and the Adelaide Pilgrim Church became involved, forming the Management Committee and providing some financial support. Initially then, the Management Committee comprised of representatives from the Department for Community Welfare, Adelaide City Council, Flinders Street Baptist Church and Adelaide Pilgrim Church, as well as staff and volunteer representatives. By 1984, following incorporation, the Project had a Management Committee, with representatives from the above and other organisations, involved in providing welfare and health services to young people. In addition, the Project has sought representatives from the Nunga community to be involved in management, with some degree of success. There has generally been one Nunga on the Management Committee.

The Project, until 1990, operated with two part-time positions of twenty hours a week. Staffing levels were, however, generally higher, due to DCW secondments for positions like the Neighbourhood Youth Work position and the Aboriginal Youth Work position.

In 1989 the Co-ordinator's position was made a full time position. In 1991 the Project has a full time Co-ordinator, a Youth Health Worker (20 hours a week), an Aboriginal Youth Worker (15 hours a week) and a full time Clerical Officer.

Since 1983, when it became clear that the majority of the youth using the Project were Aboriginal, there has been at least one Aboriginal worker employed, through FAC's secondments, traineeship grants, and direct employment through the Project. The Project currently has two Aboriginal workers, an Aboriginal Youth Worker and a Clerical Officer.

Volunteers

Volunteer recruitment and training has happened twice a year for the past nine years. The volunteers have come from a range backgrounds. In the 1984 Annual Report it was stated that:

"The team ranges from indigenous street people to public servants, students, professional people (lawyers, social workers, teachers, engineers) to trades people, an aircraft mechanic, a railways worker, a fashion buyer, a painter and decorator."

There has been an attempt to recruit volunteers, referred to as 'indigenous', meaning people who have experienced 'street life' or are Nungas. The Project has met with some success in this regard. For a while a group of bikies were working as volunteers, and there have been a number of Nungas working as volunteers. The Project Coordinator, however, would like to see more Nunga volunteers so that on every night that the Centre is open there is at least one Nunga adult present.

All volunteers receive one training session per week over fourteen weeks of training. Volunteers generally work once a fortnight. When the Centre is open on a Friday and Saturday night there are usually two staff members with at least three volunteers. If the numbers fall below this, then the Centre cannot be opened. Volunteers are therefore seen to be crucial to the operation of the Friday and Saturday night drop-in programme

Service-users

When the HSYP opened at 104 Hindley Street the youth workers publicised it by handing out free coffee vouchers to any young person in Hindley St. Initially, the young people frequenting the Project came from a range of ethnic backgrounds, including Nungas, Italians, Greeks and Anglo-Celtic Australians.

Within 18 months 60% of service-users were Nunga. The 1986 Annual Report notes that the Project is seen as a Nunga service by other organisations in the youth sector and by service-users. The HSYP Management Committee and staff maintain that the service is available for any young person who wishes to use it.

The other group who have been identified as users of the Project are 'street-kids'. Individuals in this group are not on-going users, but frequent the Centre whilst they are

leading a street life, living in city squats and moving between shelters. Individuals in this group tend to go to the Centre for a period of between 6-18 months.

There are two main groups who have been identified in the Annual Reports as the main service-users: Nungas and 'street-kids'. The Nungas, on the whole, treat the Project like their drop-in centre, whereas the 'street-kids' go to the Project for assistance with crises like acute accommodation or financial problems and referral to other organisations.

Health

As an information service, HSYP has sought to provide information about health to its service-users. However, soon after the Project opened, the workers were needing to provide crisis health care.

The Project's youth workers have been required to respond to young people coming into the Centre requiring immediate health care and / or transportation to a hospital. The Project's first response was to form a referral network with general medical practitioners and develop a working relationship with the Royal Adelaide Hospital. In 1983, workers were paid to do the St. Johns certificate, and volunteers were provided with basic first aid training.

As early as 1983 the Project identified the need for someone with medical training to work from the Centre on a Friday and Saturday night. CAFHS were approached to see if they could provide a nurse, but although they were interested, they were unable to meet the request. In 1990, the concept was fulfilled by the Aboriginal Medical Service (AMS) and there is now an AMS clinic every Friday night at the Centre, providing health education and treatment.

The Project often works with other services in the provision of health education. In 1988 a worker from Drug and Alcohol Services Council (DASC) worked on the Friday and Saturday nights providing information on drugs and alcohol, and providing support for young people withdrawing from drug or alcohol dependence. In 1990, the HSYP, in conjunction with the Rape Crisis Centre, provided self defence classes for young women; and in conjunction with Family Planning, information sessions were provided on safe sex practices and sexually transmitted diseases.

The HSYP was involved in lobbying Government for an adolescent health service, until the Second Storey Health Service was established in 1987. In The Project's own experience, a significant number of service-users either required urgent health care or wanted information about health related issues and would not use conventional health services. The HSYP today provides both primary and secondary health care, referral to other health services, and health advocacy.

Police liaison

Police liaison has been a recurring theme in Annual Reports since 1984. In 1983 there was an incident of racial violence in Hindley Street resulting in the stabbing of a youth, and on New Year's Eve there were violent clashes between young people and the police in Hindley Street, as well as at Glenelg. Consequently, the HSYP was the focus of a great deal of media coverage.

These incidents demonstrated the need to develop effective working relationships with the police. Moreover, youth workers were often required to advocate on behalf of young people to the police, and provide young people with support through legal processes. Both the HSYP and the police have taken part in liaison activities, The HSYP participated in cadet training and introduced the new Bank Street police to the Centre. The police, in turn, have participated in the training of HSYP volunteers. Other liaison activities have included the police sitting in on the Centre's de-brief sessions, which occur at the end of Friday and Saturday nights, and working with other city youth services on networks and forums.

Annual Reports after 1984 indicate that the relationships with the police have been an issue. This would imply that the relationship does have some tensions and has needed to be addressed. Tension has existed particularly because of periodic conflicts between the police and youth workers. The police have sometimes arrested or apprehended young people participating on criminal activity and youth workers have then advocated on behalf of these people to the police, often disagreeing with the judgements of the police. In relation to the treatment of Nungas by the police, youth workers and Nungas have perceived discriminatory treatment. Nonetheless, youth workers, the police, and young people have been able to identify incidents in which liaising with the police has had positive outcomes (Annual Report 1985).

Street-work

In 1983 staff and volunteers at HSYP undertook a programme of actively observing the youth in Hindley Street on Friday and Saturday nights. It was noticed that a number of young people were not using the HSYP. These were mainly Greek, Italian and South East Asian youth (Annual Report 1984).

As stated previously, HSYP closed the Centre in response to community concern that Nunga youth were coming to Hindley Street to go to the Centre. During this time, the HSYP operated on a street-work model from October 1985 to October 1986.

The staff and volunteers of HSYP concentrated on Nungas under eighteen years old and therefore worked around the Nunga 'patch' (McDonalds corner, Bank Street, Festival Centre and River Torrens). The type of services provided by the youth workers whilst doing street-work included support for Aboriginal youth in terms of crisis intervention, controlling behaviour on the street, and providing advocacy for youth where needed in their relationships with a range of people and organisation. This has included the Police, Hindley Street traders, State Transport Authority, Festival Centre Security and the general public (Annual Report 1987).

In evaluations of the street-work programme some positive outcomes were noted. The youth who used HSYP felt safer as the youth workers were more able to provide immediate attention; there appeared to be a decline in the pressure placed on the Nungas by the police; and other agencies became more aware of the Project's work, leading to increased liaison with other agencies. At the same time it was noted that it was often very difficult to have conversations with the young people in the street, and that young people who used the Project's drop-in service wanted the 'Coffee Shop' to be open.

After HSYP resumed the drop-in service on Friday and Saturday nights in October 1986, the Project attempted to maintain a street presence through a couple of staff each Friday and Saturday night doing street-work. It was found that this could only happen if volunteer and staff numbers were sufficient. When numbers of staff and volunteers were too low to provide an adequate "drop-in" centre, street work was done instead. On some occasions when the streets are very crowded, such as on Grand Prix weekends, street work is the only mode of operation. Staff utilisation has needed to be flexible.

Conclusion

The HSYP has been in operation for ten years. During that time many changes have occurred. HSYP was original conceived as an information referral point for young people who frequent Hindley Street on a Friday and Saturday night. The Project today is known as a drop-in centre, providing a generic service for youth including information and referral, counselling and advocacy, health care and recreation. The development of the various services provided by HSYP occurred as the Project's management and staff identified needs of the service-user group.

In the Aboriginal community and among youth agencies, HSYP is now known as an Aboriginal service, although Nungas are not the only users. It happened that shortly after the Project opened, young Nungas started to use the Project in much greater numbers than other Australians. This has continued to this day.

Chapter 3

METHODOLOGY

Both quantitative and qualitative methods of social enquiry were used. These two approaches were regarded to be complementary. To some extent, what was possible was conditioned by agency constraints and the need to complete the evaluation within a six month time frame.

The methodologies employed may be summarised as follows:

A review of Agency documents

This constituted an initial step. Nine annual reports were reviewed, together with philosophy statements and policy documents. The review of agency documents provided an historical framework to changes in policy and direction of the HSYP.

Participant observation

Participant observation as an evaluation methodology allows the evaluation to experience and see a programme holistically based on the assumption that an organisation is more than the sum of its parts. In this way, the evaluator can gain insight into areas of a project or programme that are difficult to tap with direct questions, and identify programme goals that may otherwise have escaped the project's identified goals (see Patton, 1988).

In evaluating, the following were observed. The project setting (physical environment); the human social environment; project activities and participant behaviours; normal interactions and unplanned activities; language of project participants and non verbal communication.

A month long programme of participant observation was conducted in which the project officer and social work student carried out duties as "volunteers" on the Friday and Saturday night drop-in programme.

Interviews and questionnaires

These contained both closed and open ended questions. Generally questions were asked in a one-to-one situation and the answers recorded by the interviewers. This procedure applied to the following groups:

- a) the staff, both paid and voluntary
- b) the service-users
- c) the Hindley Street traders
- d) representatives from welfare and health agencies.

The exception to this procedure was the police. The questions prepared for them were provided in self administered questionnaires, because the Senior Sergeant of the police station considered one-to-one interviews too time consuming.

The project officer with some assistance from the social work student (both of whom were non-aboriginal) interviewed staff, traders and agency representatives. Interviews with service-users were conducted by students from the Aboriginal and Torrens Strait Islander School of Administration, the project officer and student.

The Aboriginal students received training from academic members of the research team in interview techniques and recording responses. Aboriginal students were paid \$20 for each interview completed.

Service-user interviews were conducted on Friday and Saturday night when the Centre was open. They were interviewed individually in private rooms. It was considered desirable that Aboriginal interviewers should be used, as far as possible. However, in some cases interviews were conducted by the project officer and social work student. In these situations interviewees were asked if they would prefer to be interviewed by an Aboriginal interviewer. None indicated that they would prefer an Aboriginal interviewer. (There were no observed difference in responses according to race of interviewer.)

Chapter 4

OBSERVATION AT THE CENTRE

Observation of the Friday and Saturday night Drop-in programme took place throughout July and August on every Friday and Saturday night. There were two observers, the project officer and a social work student, undertaking his placement.

The observation included both on-looker observation and participant observation. In undertaking on-looker observation, the two observers rotated half hourly from opening of the service to close, and had a basic floor plan of the Centre (see Appendix 2) on which they "tracked" the movements and groupings of service-users, volunteers and paid staff. In addition, notes on language, conversation and behaviour were taken. Participant observation was undertaken through the observers carrying out the role of volunteers.

Location

The HSYP is located at 61 Hindley Street. The front entrance is on Hindley Street and stairs lead up to the main area. It is directly above an amusement centre, Timezone; diagonally opposite McDonalds, about one minute away from the Bank Street Police Station (see Photographs 2 and 3).

Physical environment

In the main room of the Centre, there are five tables dotted around the room, with chairs around each table. The chairs are of various forms - plastic moulded kitchen chairs, lounge chair and sofas. Most of the chairs have been damaged in some way - either with graffiti or by torn fabric. All tables have graffiti on them. The walls have pictures of various service-users on camps or at parties, information posters, and drawings done by Nunga service-users.

Around the edge of the main room are rooms created with partitions. These include a staff-room, craft area, AMS clinic, kitchen area from which hot drinks are served, information room and referral room.

There are two toilets, male and female. The toilets are labelled with male and female symbols and the Nunga words for male and female, "cornie" and "miminie" respectively. The toilets generally have baskets in each of them containing condoms, and, in the female toilets tampons and sanitary napkins as well.

This observation report evaluates how the Centre meets its desired outcomes, which include: providing a safe place, providing basic health care and preventative health care, and providing an information referral service and a recreation service. Each of these will be discussed below.



Outside the Youth Project Centre in Hindley Street



Inside the Project Centre

Safety

Youth were observed to come to HSYP when they felt unsafe. This was seen to occur in the following contexts: having been involved in a fight in the street, or feeling threatened on the street; requiring medical treatment following a fight; having experienced sexual harassment or assault (in the case of young women); and avoiding the police.

In terms of providing a safe environment, no violent fights were observed in the Centre during the observation. Tension, however, was observed occasionally between Nungas and non aboriginal street-kids. During the observation some Nungas commented that street-kids were trying to take over their Centre. On many occasions staff were on edge, anticipating that a fight might occur.

At a volunteer forum volunteers expressed concerns about feeling un-safe. Reasons for feeling unsafe included: people over twenty-five being allowed into the Centre; recreation equipment not working, which meant there was a lack of activities to keep service-users occupied; and some inexperienced volunteers not being aware of what was happening around them.

The HSYP has a rule that no fights happen in the Centre. These rules were seen to be respected by service-users. Potential fights were seen to be prevented by both staff members and service-users advising the individuals involved that they would be banned from the Centre if they persisted with the fight. This in Nunga terminology is a "shame job", which means bringing shame to themselves and family. On one occasion, during the observation, the Centre was closed for the night because staff and volunteers felt that a situation was unsafe. This situation involved an older Nunga with psychiatric problems; his behaviour was unpredictable, and he could easily become verbally abusive to both Nungas and non-Aboriginal street-kids. The individual was later banned from the Centre.

The entrance to the Centre was monitored by staff or volunteers at all times when it was open. The door monitors' duties were to stop alcohol, weapons and illegal drugs, and to prevent banned service-users from entering the Centre.

The Centre can only open if there are five workers present, consisting of two staff members and three volunteers. If there are not five workers, then the Centre does not open, and street work is carried out. On three occasions the observers made up the number of five, because volunteers did not come in. If we had not been present the Centre would not have been opened.

Information and referral

The type of information sought by service-users included: accommodation, generally short-term shelter accommodation; legal issues, particularly in relation to the police; Social Security entitlements, and bus and train departure times. Service-users were seen to readily seek information from both staff and volunteers. Non aboriginal service-users, in particular, were observed to be seeking information in relation to crisis issues, like accommodation.

Information posters and pamphlets were around the room. Some of the information was out of date. Examples of this include Department of Social Security and Department of Employment Education and Training information.

Referrals were mostly made to Crisis Care, youth shelters, Aboriginal Sobriety Group and the Adolescent Sobering-up Unit - Ralph's Place. All of these services, like HSYP, are providing out of hours services.

Health

The health service at HSYP is an out-reach of the Aboriginal Medical Service which operates every Friday night. The health services sought by service-users included: first aid, blood tests, vaccinations, and health information, generally regarding drugs, sex and STDs. In addition to the AMS health service, the paid staff and volunteers at HSYP provide health information and basic first aid.

Young people, mainly men, come to HSYP requiring immediate first aid attention following fights in which they have been injured on the streets. Injuries included cut lips, bruises and blood noses. On one occasion, during the observation, the nurse from the AMS clinic took a young person to hospital following a drug overdose.

Frequent use of the health service was made for blood tests - mainly HIV, pregnancy, and urine tests for people who had taken drug "cocktails". When the health service was open this occurred about two to five times a night. Health counselling was seen to be carried out around the above issues, mainly by the Health Service nurse and staff, but also some volunteers.

The Health Clinic had the facilities to vaccinate against Hepatitis B. However, in speaking with the nurse, this service was mainly used by volunteers, rather than service-users.

Health information was displayed throughout the Centre, the main topics being, AIDS and STDs, drug and alcohol use, and nutrition. Staff maintained that condoms were readily available for service-users in small bread baskets on the tables around the room. This was only observed to be the case on one occasion. On four occasions the Centre had no condoms to distribute. This became known because whilst the observers were undertaking the duties of volunteers they were asked for condoms.

Smoking was allowed in the Centre by young people, but some attempt was made to discourage service-users from smoking. However, this, the observers felt, was undermined by staff and volunteers smoking in front of service-users. In addition, service-users often requested cigarettes from the workers and on many occasions were given cigarettes.

Recreation

The HSYP has a number of recreational facilities. These include board and card games, video games, a computer, TV and video and painting equipment.

During the period of the observation recreation facilities were limited. Of the two video games only one was working and the computer was "out of order". Therefore, the recreational equipment available to service-users were board games like scrabble and chess, cards, painting and one video game. Service-users were heard to complain that "this place is dead" and "it's boring". The inadequacy of recreation activities appeared to have contributed to this feeling. Some volunteers commented that the lack of recreational activities made the Centre unsafe because the service-users were bored, and therefore more likely to have fights.

Initiation of recreational games such as cards, scrabble or chess came from staff, volunteer and service-users. Board and card games were mainly played by white males; video games were mainly played by Nunga males. The most popular recreational activity amongst female service-users was painting in the craft area. Occasionally females would participate in other activities, like board games and video games.

The involvement in recreational activities appeared to reflect the mood of the night. If there were a lot of drugs or alcohol being consumed in Hindley Street, recreational activities were not used as much. If there were a number of younger service-users, around 12 - 16 years old, more games were played.

Interaction between Nungas and non-Aboriginal youth

Nungas and non-Aboriginal youth were rarely observed interacting with one another. Nungas and non-Aboriginal youth tended to stay in their own groups, sitting at separate tables. The observation took place during July and August, that is, in winter, and Nungas were not coming into the city as much as they do in summer. The non-Aboriginal service-users, on the other hand, were using the Centre more because they were living in 'squats' around the city. However, during the observation the proportion of Nungas to non-Aborigines was still greater.

We noted several times that a group of Nungas went to the top of the stairs, looked around and walked down the stairs again. It appeared that they left because there were no other Nungas in the Centre, only non-Aboriginal youth.

The only incidents of Nunga and non-Aboriginal service-users mixing were two occasions during the observation. One occasion involved a Nunga under the influence of alcohol playing chess with an non-Aboriginal youth and the other was an non-Aboriginal woman who was known to suffer from schizophrenia. She tried to talk to some Nunga women and the Nunga women walked away from her. Overall, there was tolerance between different racial groups but little interaction.



Serving refreshments



Videogames

Age of service-users

Constitutionally, HSYP provides a service for at-risk youth between the ages of twelve and twenty five years old.

During the observation it was noted that some of the regular service-users fell outside this age group. On one occasion four older men came in and slept for about four hours. There were others who were older than twenty five years old who had disabilities or appeared to be lonely.

Police liaison

The observers did not witness many incidents of police liaison on the Friday and Saturday night when the drop-in programme was operating.

The observers saw three incidents in which the police came in to the Centre. On two of these occasions the non-Aboriginal service-users, on the whole, were friendly to the police and came over to initiate conversation. On both of these occasions the police officers observed the HSYP's rules that police officers take off their hats, and turn off their radios. In addition, the police officers sat down and each had a cup of coffee.

On the other occasion a police officer came up by himself and remained standing, looking around the Centre. A volunteer approached the police officer to ask what he wanted and he said, "just visiting". On this occasion the service-users appeared quite stressed and attempted to hide behind books or move to areas of the room out of the officer's view.

Despite most service-users appearing comfortable on the first two occasions, on all three occasions service-users, volunteers and staff expressed concern about the police coming into the Centre. The observers heard comments like "what are they doing here?" and "who let them in?"

Staff effectiveness

Staff and volunteers carry out basic operational duties, for an hour each. These include making drinks for service-users, monitoring the entrance door, keeping statistics on number of service-users coming in, and holding the toilet key so as to be aware of how long individuals are in the toilet. Additional workers "floated", that is they were available to join in with other duties or play games and talk with service-users. The observers thought that these structures had been designed to give workers a clear reason for interacting with the service-users. It was observed that some volunteers carried out the basic operational duties and not much more. They did not interact with service-users beyond what was required for the duties at hand.

As mentioned above, the observers tracked the movements of service-users, staff and volunteers. There were noticeable differences in the way in which volunteers and staff interacted with service-users:

Staff

Paid staff interacted with most of the service-users, both Nunga and other Australians, and appeared to move comfortably between different youth groupings.

The nature of interaction was generally casual, asking young people what they had been doing, how things were going, how friends and family were, etc. Young people were also seen to initiate conversation with staff. Staff were observed to move service-users from casual conversation to more purposeful discourse. For instance, one service-user was casually talking about illegal drug use. The staff member was able to develop the trust of the service-user to inform him about health risks and the importance of using clean needles. The staff member also informed the young person that there was assistance available when he was ready to stop using drugs.

Volunteers

Volunteers were observed to vary in their level of skill in working with the service-users. The floor maps showed that many of the volunteers stood around in groups with each other, rather than going to service-users and engaging them in conversation or other activities. Interaction with non-Aboriginal service-users was more likely than with Nunga service-users. Some volunteers did have skills in engaging service-users in conversation. Some of these volunteers functioned similarly to staff, taking on more difficult situations, like managing people who were under the influence of drugs or alcohol. Volunteers were more likely to play board and card games with the service-users, particularly non-Aboriginal service-users.

Referrals for service-users were generally for emergency accommodation, or to the hospital for emergency medical care. These were usually done by staff, rather than volunteers.

There was a noticeable difference in the effectiveness of paid staff and the effectiveness of volunteers. Paid staff were observed to have more developed relationships with service-users and thereby were able to provide skilled assistance. Volunteers on the other hand, tended to have fairly casual relationships with service-users and undertook basic operations in the Centre, such as making coffee, keeping statistics on service-users as they came in and monitoring the door.

At a volunteer forum that the project officer observed, many volunteers said they needed on-going training. Currently volunteers have 14 weeks of training for one night a week. Various topics are covered, including Aboriginal Culture, Communication skills, sexual health, drug and alcohol issues, legal issues and other referral services. Volunteers wanted additional training to this, occurring after they had started working in the centre. Some volunteers suggested that such on-going training be made compulsory, to ensure attendance and the development of further skills.

The observation took place during the winter months. At this time, fewer Nunga youth were using the Centre and non-Aboriginal street-kids were often in the Centre.

It was observed that youth did use the HSYP as a safe place. Young people were seen to use the Centre to get away from fights or sexual harassment and abuse. In addition, young people sought medical treatment from the AMS clinic if they were injured or if they had taken drugs, and felt unsafe. Fights were not witnessed in the Centre, during the observation period. However, tense situations were observed. The HSYP appeared to be a relatively safe place compared to Hindley Street itself.

The AMS clinic, as well as being seen to provide first aid was observed to provide information and counselling on safe sex practices and STDs and other health related areas like pregnancy and drug and alcohol issues.

At the time of the observation, recreation activities were limited to board and card games, video games and a craft area. Service-users were heard complaining about the lack of activities. Nunga and non-aboriginal service-users mainly interacted with one another, tending to stay in their own groups.

Information and referral was observed to be sought mainly by non-Aboriginal serviceusers in relation to crisis issues like accommodation. It was notable that information posters and pamphlets were often out of date and therefore inaccurate.

In relation to staff effectiveness, there was noticeable difference in the ability of many voluntary staff to purposefully interact with service-users. All paid staff and some volunteers were observed to be able to effectively interact with the service-users in relation to a range of matters affecting their well-being. Many volunteers had difficulty in interacting with service-users, particularly Nungas, and tended to stay in groups of volunteers rather than mix with service-users. However, it is important to remember that at a volunteer forum many volunteers said that they wanted more training.



Painting



Chapter 5

INTERVIEWS WITH VOLUNTEERS AND STAFF

In this chapter we report on interviews conducted with two sets of people who work at the Centre: the volunteers and the paid staff.

INTERVIEWS WITH VOLUNTEERS

There were twenty volunteers currently working at the Centre. Fourteen were interviewed. It was decided, after interviewing a couple of new volunteers, not to include these interviews and not to interview any more new volunteers. (The responses from inexperienced volunteers were at best what they thought would happen or should happen in the HSYP.) The volunteers interviewed had between three months to three years of experience, the majority having about eighteen months. The questions and issues raised covered a wide range of topics (see Appendix 3). These are summarised below:

- 1. Why service-users came to HSYP
- 2. Activities enjoyed by service-users
- 3. Activities organised by staff
- 4. Information sought by service-users
- 5. Participation by service-users
- 6. HSYP's relationship with the Police
- 7. Relationships and interactions between volunteers and service-users
 - a. What was talked about
 - b. Whether service-users would go to hospital with volunteers
 - c. Would service-users stop a violent guarrel if asked by a volunteer?
 - d Would service-users participate in an activity if asked by a volunteer?
- 8. Relationship between Nunga and other service-users
- 9. What HSYP does for service-users
- 10. Does HSYP attract Nungas?
- 11. Whether the Centre is a safe place
- 12. Perceptions of what various organisations or and groups think of HSYP
 - a. Youth Support Group
 - b. Service to Youth Council
 - c. Street Link and Second Storey
 - d. Aboriginal Sobriety Group
 - e. Aboriginal Medical Service
 - f. Hindley Street Traders
 - g. The Police
 - h. Parents
 - i. The Service-Users
- 13. What would happen if HSYP closed down?
- 14. How could HSYP be improved?

1. Why service-users come to the HSYP

The most common reasons provided by volunteers to account for service-users coming to HSYP were as follows: a meeting place, safe place in Hindley Street, free coffee, can receive help with most things if necessary, and have no-where else to go. Other reasons mentioned included a place where Nunga service-users can be accepted, free toilet, and someone to talk to.

2. Activities enjoyed by service-users

According to the volunteers, the activities most enjoyed by service-users were video-games, board and card games, talking to people and painting. Some volunteers also mentioned that pool was very popular when it was available, and that camps and day trips had, in the past, been very popular.

3. Activities organised by staff

Volunteers were asked whether or not they thought that there should be more activities organised by the staff. On this topic the volunteers were evenly divided. Some were ambivalent: "it would be good but very difficult to organise."

The volunteers who thought that there should be no organised types of activities gave reasons like: it is important to remain unstructured because the service-users come in and out of the Centre throughout the night, and therefore instant activities are needed; the HSYP cannot be seen to be attracting young people into Hindley Street; and young people will not participate in organised activities because Hindley Street is the real reason why they are coming into town.

Volunteers who wanted to see more activities organised by staff, mentioned activities like screen printing, occasionally having Nunga musicians in the Centre on a Friday and Saturday night, organising discos and organising activities away from Friday and Saturday night like camps and day-trips.

The volunteers who were ambivalent towards organised activities, thought that the young people would not participate, because organised activities had been tried before but had "fizzled out". In addition, it was thought that there was not enough funding, to provide staff to organise such activities.

4. Information sought by service-users

Volunteers were asked what information was most appreciated by service-users and what information was most needed by service-users. Most volunteers, in answering these questions, did not, on the whole, respond differently to the two questions. To the first question regarding "most appreciated" a couple of volunteers identified areas like bus time-tables and whether or not a service-user's friends had been seen that night. The information identified as being most appreciated and most needed included: safe

sex (8), accommodation (7), health (6), drugs and alcohol (4), employment and training (1), Social Security entitlements (1) and personal issues (1).

5. Participation of service-users

Volunteers were asked whether they thought there should be more participation or less participation of service-users.

Some volunteers explained there was currently no structured participation of service-users in the HSYP. A few volunteers explained that service-users participated through talking to the co-ordinator and letting staff know what they wanted or did not want, for example, using an activity or not using it.

The vast majority of volunteers thought that there should be <u>more</u> participation of service-users. Suggestions of ways that young people could participate included a youth sub-committee with representation on the HSYP Management Committee, providing a suggestion box, and surveying the service-users for ideas and suggestions.

Many volunteers, whilst in favour of more participation, thought that it might be difficult to get service-users involved and maintain their commitment to participation.

6. HSYP's relationship with the Police

All volunteers said that the relationship the police had with service-users was not good. Some descriptions of this relationship were as follows:

"Tenuous, some service-users avoid them and some joke around them. There's not a lot of trust between them. The police think we're harbouring kids...."

"Not good. I've seen the police be very tough on kids - more than they deserve. On a number of occasions, I've seen police pull girls' hair when they are fighting. Star Force police relations are good on camps."

"Depends on which officer it is. Generally suspicious - Service-users know who the good officers are."

"Not good. Kids get hassled by the police. There's ongoing hostility, that is, in general; probably some police are OK. It's 'us' and 'them' in a big way!"

The majority of volunteers thought that the HSYP did improve the relationship between the police and service-users. It was thought this was done through the HSYP's liaison with the Bank Street Police Station and through mediation between service-users and the police. One volunteer explained the situation as follows: "Both service-users and police are aware that we occupy a middle ground (though a bit more for the kids). We are therefore a service that police can relate to and also the kids are on side with us. We function as a relay point ... "

It was felt by some that HSYP helped relationships with the Police by engaging them in dialogue and getting a greater understanding of each other's roles, also through providing information to service-users about how to behave with the police and what their rights are.

Generally it was thought that more liaison with the police would result in a better working relationship between the police and the HSYP. Two of the respondents felt that the police needed to make more of an effort in liaising with the staff of the HSYP.

7. Relationships and interactions between volunteers and service-users

Volunteers were asked a series of questions regarding their relationships with serviceusers, including what service-users talked to them about and what advice they sought; what proportion of service-users, if seriously injured, would go to hospital with a volunteer; whether they thought service-users would stop a violent quarrel if asked, and if they organised an activity, would service-users participate.

a) What they talked about

The majority of volunteers described the sort of of things that they talked about with service-users as "casual conversation", involving what service-users have been doing during the week, whether their friends have been seen in the Centre and what's happening in Hindley Street.

The issues that volunteers said that service-users sought advice about included accommodation (7), family and home-life (5), first aid (2), transport (2), health (2), sex and relationships (2), drugs (1), use of violence (1), and getting out of the streets (1). Two volunteers interviewed said that they do not "advise" service-users.

b) Whether service-users would go to hospital with volunteers

The majority thought that 50% or more of service-users would go to hospital with a volunteer. The following proportions were mentioned: 50 % (2), 70% (2), 75% (2), 80% (1) and 90% (2). Four volunteers said that they did not know what proportion of service-users would go to hospital with a volunteer. Many explained that getting a young person to hospital would depend on which service-users and volunteers were involved.

c) Would service-users stop a violent quarrel if asked by a volunteer?

Volunteers were given options as to whether service-users would stop a violent quarrel if they were asked. The results are summarised in Table 1.

Table 1

How volunteers responded to the question, "Would service-users stop a violent quarrel if asked by a volunteer?"

Responses of Volunteers	Number	
Options:	_	
Definitely	Ō	
Probably would	5	
50/50	5	
Probably wouldn't	4	
Definitely wouldn't	0	
Total	14	

Results from the table suggest considerable uncertainty, on the part of volunteers, as to whether volunteers would effectively intervene to stop a quarrel.

d) Would service-users participate in an activity if asked by a volunteer?

Volunteers were asked if they thought service-users would participate in an activity they organised. The distribution of responses are given below:

Table 2

Volunteers' perceptions of whether users would participate in an activity volunteers organised.

Responses of Volunteers	Number	
Options: Definitely	4	
Probably would	4	
50/50	5	
Probably wouldn't Definitely wouldn't	4	
Definitely wouldn't	0	
Total	14	

The results reflect considerable uncertainty as to whether volunteers could successfully initiate an activity with users.

8. Relationship between Nunga and other service-users

Volunteers were asked to describe the relationship between Nungas and other serviceusers.

Four people thought the relationship was good. The other ten volunteers described the relationship as one of toleration, with not much mixing between the two groups. Some volunteers explained that the HSYP is a Nunga Centre and therefore other Australians use the Centre respecting it as Nunga territory.

9. What the HSYP does for service-users

Volunteers were asked what they thought was the "best thing" the HSYP did for service-users. They tended to provide information on a <u>number</u> of things they considered to be <u>best</u> about the HSYP. "Providing a safe place" was the service mentioned most often. Seven people mentioned this. (There were specific responses regarding safety.)

Other "best things" about HSYP included: a place where young people can get help (3); provide a space to "hang-out" (2); provide recreational facilities (1); provides free coffee (1); and provide shelter from wet weather (1).

10. Does the HSYP attract Nungas?

Members of the Aboriginal community had expressed concern in previous years that the HSYP was attracting its youth into Hindley Street on Friday and Saturday nights. Volunteers were therefore asked if they thought that young Nungas would not come into Hindley Street if the HSYP was not there.

Most volunteers thought that young Nungas <u>would</u> continue to come into Hindley Street if the HSYP closed. They thought that the main reason for young Nungas coming into Hindley Street was the bright lights and excitement of Adelaide's main night spot. It was thought that Hindley Street was a meeting place for people from the Adelaide suburbs.

On the question of whether HSYP attracted young Nungas into town, the majority felt that it did not. Only four of the fourteen volunteers believed that it attracted some Nungas.

11. Whether the Centre is a safe place

As mentioned previously, volunteers had identified the provision of a safe place as one of the best things that the HSYP does for its service-users. The majority of volunteers, when asked it they thought that Nungas felt safer knowing that HSYP was there said, "yes"; one said "no", but added that service-users felt safe when <u>in</u> the Centre.

12. Perceptions of what various organisations thought of HSYP.

Volunteers were asked what they thought various groups and inner-city agencies thought of the HSYP. These included the police, parents, Youth Support Group, Hindley Street traders, Street Link, Second-Storey, Aboriginal Sobriety Group, Aboriginal Medical Service, Service to Youth Council and HSYP's service-users.

- Although five people said they did not know what YSG thought of the HSYP, the majority of volunteers gave information to suggest that YSG and HSYP had a cooperative relationship. Descriptions used included "helpful", "pleased we are here", "supportive", and "approve of us". A couple of volunteers thought there had been problems in the past with YSG, because both HSYP and YSG often worked with the same service-users but with different models. YSG were perceived as working closer with the police than HSYP.
- **Service to Youth Council**. SYC provides a street-work service for youth every night of the week in the city, mainly concentrating on the Hindley Street area.

Most volunteers believed that SYC thought that HSYP provided a valuable service but one person thought SYC had mixed opinions of HSYP because there had been some conflict between the two agencies in the past. Six volunteers indicated that they did not know what Service to Youth Council thought of HSYP.

c) Street Link and Second Storey. Street Link and Second Storey are both adolescent community health services operating in the inner city area. Second Storey is a Government body and Street Link is under the auspices of Adelaide Central Mission.

The majority of volunteers said they did not know what these two agencies thought of It was explained that in general these organisations serve a different client group, with HSYP seeing far more Nungas, and that unlike the other organisations HSYP operates in the evenings (Fridays and Saturdays) rather than exclusively in the day time. The Project has a different client group, in that HSYP sees more Nungas and Nungas use the Aboriginal Medical Service. Moreover, Second Storey and Street link are both in-hours services, whereas HSYP is a Friday and Saturday night service.

d) Aboriginal Sobriety Group. From the perspective of HSYP, the Aboriginal Sobriety Group, is a service that "picks up" Nungas after hours who are under the influence of drugs, or alcohol and takes them to a sobering-up unit or home.

Volunteers saw the relationship with ASG as a good working relationship. Descriptions included: "good" (7), "co-operative" (3), "see the HSYP as worthwhile" (1), "respect HSYP" (1), and appreciate the work of the HSYP" (1).

e) Aboriginal Medical Service. As the name suggests, AMS is a medical service for Aborigines. AMS has an outreach clinic at the HSYP operating every Friday night.

Volunteers thought that the relationship with AMS and HSYP was of a high quality. They also knew more about AMS because of its continual presence in the Centre. Descriptions of the relationship included: - "good" (4), "great" (2), "excellent" (2), and "AMS perceives HSYP as providing a vital link with Aboriginal youth".

f) Hindley Street Traders. Volunteers' perception of Hindley Street Traders was again, mixed, some negative and some positive. Two felt unable to express an opinion.

Three volunteers explained that some Traders were supportive of the Project, thinking that it did a good job, and that some traders were negative towards the Project because young people congregated in front of the HSYP Centre and attracted young people in to town. One person described the relationship with HSYP and Traders as "contradictory". The Traders recognised a need for the Project, but did not like having the Centre in Hindley Street.

g) The Police. No consistent view emerged about whether the Police approved of HSYP. Some thought they did; others thought otherwise; some admitted they had no idea. Yet others explained that the Police themselves were divided.

Those who thought the Police approved of HSYP explained that the Centre assisted the Police in working with young people who had been arrested, prevented some young people from "getting into trouble" and kept some young people "off the street". One suggested that:

"Police think we (the Centre) care about kids and we try to get an understanding between the kids and the Police"

Others, however, believed that the Police saw HSYP as a place where "young people with warrants" were hidden from them, and were generally suspicious of the Project.

Overall, it was felt that the police do not have a high opinion of the HSYP, and they showed little knowledge of the services the HSYP provides to youth. The majority of respondents identified the need for more liaison with the Bank Street Police Station and to develop a more constructive relationship.

- h) Parents. Generally the volunteers thought that parents had positive opinions about HSYP, believing that it provided somewhere safe for their children to go in Hindley Street. Some, however, believed that parents had mixed opinions. On the one hand the Project was seen as having an important positive role to play; on the other it attracted their children into the city and hid runaway children from both the parents and the police. A number of respondents (4) said that they simply did not know what parents thought of HSYP.
- i) Service-users. The majority of volunteers thought that service-users generally appreciated HSYP. Comments ranged from "really great" to comments like "see the service as necessary" and "want more recreational activities."

13. What would happen if the HSYP closed down?

All Volunteers thought that if the HSYP closed it would have a negative impact on service-users, particularly in relation to trouble with the police and the potential for young people to become involved in criminal activity.

The majority of volunteers (9) thought that there would be more trouble with the police. Other people said there would be an increase in young people's criminal activity, such as stealing cars, racist violence between Nungas and other Australians, and, young people being victims of sexual crimes like paedofilia, sexual assault and working in prostitution. In addition, it was thought that more young people would drink alcohol, and the overall relationship between Hindley Street traders and the police would become more strained.

If HSYP were closed it was believed by some that there would be no fixed place for young Nungas to go, as all other youth agencies on Hindley Street provide street based programmes, and there would be no amenities on Hindley Street for youth (toilet and hot drinks). One person thought that the Aboriginal community would be outraged if HSYP closed.

"If it closes, it will mean that there is not a meeting ground where youth can congregate in Hindley Street."

"The kids would lose a valuable drop-in centre."

Other comments were more critical:

"Some youth would probably hang around the streets more."

"A vital contact point in the entertainment area would be lost. There would be no place that they could go as other youth services, YSG and SYC, are not normally, continually open.

14. How HSYP could be improved?

Volunteers suggested a range of ways in which Hindley Street Youth Project could be improved. The following is a list of volunteer suggestions:

- 1. more funding
- 2. more Nunga workers
- 3. outreach of HSYP to the suburbs to keep the service-users away from town
- 4. more participation from service-users
- 5. better organisation in relation to volunteers, such as having volunteer rosters sent out before the actual shift
- 6. more volunteer training after the initial training
- 7. more recreational activities, like a pool table, etc.

- 8. more camps and day trips
- 9. more self-defence lessons (for service-users)
- 10. start screen printing again
- 11. provide food for service-users
- 12. provide a health service Friday and Saturday night with a nurse and doctor
- 13. volunteers be paid to undertake first-aid certificates
- 14. the Centre be re-decorated
- 15. less inter-agency fighting
- 16. the Centre be moved to a ground floor location (for easier access)
- 17. more Nunga cultural activities, and
- 18. more sexual health workshops for service-users.

SUMMARY

Volunteers thought most young Nungas came to the HSYP to meet their friends, get a free hot drink and because it was a "safe place".

On the whole, volunteers were very supportive of the HSYP. Lack of funding was considered to be one of the main problems with organising special recreational activities like camps and screen-printing. It was also thought that organised activities had been tried before, but had fizzled out, because of lack of service-user interest. In relation to service-user participation in management, many volunteers thought that it was a good idea, although some thought that service-users would not be motivated to participate.

Most volunteers, were only able to comment on other agencies that worked at night time, and that which HSYP referred, such as Aboriginal Sobriety Group. The relationship with ASG and AMS was seen to be good. This reflects the high amount of referral contact that the HSYP has with those agencies. The relationship with the other youth agencies operating in Hindley Street, SYC and YSG, was seen by some volunteers to be good and others to be mixed. This was largely because the services had had disagreements in the past. YSG in particular was identified as working closely with the police.

Volunteers were uncertain about being able to persuade service-users to go to hospital if urgent medical treatment was required. They were also unsure whether service-users would participate in an activity that they organised or stop a quarrel if asked. Overall, it appeared that volunteers had a fairly casual relationship with service-users.

INTERVIEWS WITH PAID STAFF

The permanent staff consisted of the following:

- 1. A Co-ordinator of the Project
- 2. A Youth Health Worker
- 3. An Aboriginal Youth Worker
- 4. A Clerical Assistant

Each staff member had worked at HSYP for two years or more. (The Youth Health Worker had been a paid staff member for nine months; prior to this (for eighteen months) she had been a volunteer.

At the time of interview all permanent staff had been working at the HSYP for two years or longer. A temporary Youth Health Worker had been a paid staff member for nine months; before that a volunteer for eighteen months.

All the staff were interviewed by the Project Officer. These were the issues raised.

- 1. Roles of the staff at HSYP
- 2. Skills and qualifications of the staff
- 3. Services seen as being provided at HSYP
- 4. Relationship between staff members and service-users
- 5. Relationship between volunteers and service-users
- 6. HSYP's relationship with other agencies
- 7. HSYP's referrals to other agencies
- 8. Managing different situations at the Centre
- 9. How HSYP could be improved
- 10. What would happen if HSYP closed down.

1. Roles of staff at HSYP

Each staff member was asked to describe their role, and they described them as follows:

The Co-ordinator: "To act as a co-ordinator, trainer, counsellor and advocate, supervisor and cleaner."

The Youth Worker: "To provide general supervision of shifts; some follow-up and medium term casework with service-users; keep in contact with service-users when they're in the lock-up; networking with other agencies, and liaise positively with other agencies."

The Aboriginal Youth Worker: "To provide part-time youth work and sex education."

The Youth Health Worker: "To act as interim youth health worker; to participate in general planning and implementation; provide training for volunteers; help in the training of staff; liaise with other agencies like Elizabeth Neighbourhood house; attend inter agency meetings; give follow-up support for service-users and supervising shifts."

2. Skills and qualifications of staff

Staff had a range of skills, qualifications and backgrounds.

The Co-ordinator said she was formally qualified in teaching, had experience in doing administration from previous employment; an ability to communicate with all types of people, a readiness to learn how to communicate if she does not know; group work skills and policy skills.

The Youth Worker had no formal qualifications, but had almost finished a social work degree. He said he had experience through being a youth group leader in the scouts; had skills in working with Nungas, drug and alcohol issues and legal matters.

The Aboriginal Youth Health Worker likewise had no formal qualifications, but claimed to have particular skills in conflict resolution and have a good rapport with the Nunga service-users.

The Youth Health Worker had an Associate Diploma in Community Work. He claimed to have skills in the areas of counselling, training others and working well with Nungas.

3. Services seen as provided by HSYP

The following were listed by staff as important services provided by HSYP:

- 1. Being an advocate for a wide range of issues affecting young people.
- 2. Being involved in the Aboriginal youth community and Aboriginal community.
- 3. Linking Aboriginal youth to larger bodies like Aboriginal Medical Service and Aboriginal Community Service.
- 4. Undertaking street-work.
- 5. Providing police liaison.
- 6. Referring to other agencies.
- 7. Providing a fixed place for young people to come on Friday and Saturday nights.
- 8. Providing youth training.

- 9. Relaying information on health.
- 10. Providing a safe place for young people to go in Hindley Street.
- 11. Networking with other agencies.

4. Relationship between staff members and service-users

Staff, in general believed that they had good relationships with both Nunga and White service-users. Two staff members, however, indicated that relationships with service-users could be better if staff had more contact with them.

Staff member comments included:

"It's a casual relationship based on friendship and trust. Support is provided. We don't work to a model. It takes staff 12 months to get to know Nunga service-users - it's a slow process. With non-Aboriginal service-users it's more straight forward."

"Staff and service-user relationship is not as strong as it used to be, because there is not much follow-up work done with them."

"There's a good relationship with the service-users. They respect the staff."

"Very good! Could be excellent if staff worked more hours."

5. Relationship between volunteers and service-users

All staff thought that some volunteers had good relationships with service-users, but some volunteers, it was thought, had not really developed these relationships. The following comments were made:

"... some volunteers are more active than others, some have their own issues. About a third get straight into it and act similarly to staff, another third will always be watchers and fulfil the basic role of a volunteer, and the other third work out their own issues and then become involved "

"It's growing. The vast majority of volunteers are very capable and have good contact with the service-users. But some volunteers set themselves up and are just there to say they're doing voluntary work."

"Some have a good relationship and service-users respect them. Others, the service-users try and set up."

"Could be better. Volunteers need more communication skills and on-going training."

6. HSYP's relationship with other agencies

Staff members had mixed opinions about HSYP's relationship with other agencies.

"We have good contact with other agencies. We use them when we have to and they're helpful."

"Good, other agencies see the need for 61, and that's reflected in our networking."

"Antagonistic at the moment. 61 (HSYP) is getting a reputation for down grading other agencies and not being supportive, e.g., Youth Support Group and 61 are in competition. We are now getting a broader network created by individuals in the service, e.g., involving the Co-ordinator and Rape Crisis Centre - but if an individual leaves, their network goes with them."

[Relationships with other agencies] "could improve. Effort is required keeping others informed and networking. In the last ten years not much effort has been put into youth agencies outside Aboriginal services. We don't have enough time to do all the networking."

7. HSYP's referrals to other agencies

The following organisations were mentioned as places to which service-users were referred: Crisis Care, Aboriginal Sobriety Group, Aboriginal Medical Service, Youth Support Group, the Salvation Army and West Care (for food vouchers), Aboriginal Child Care Agency and various youth shelters, Aboriginal Legal Rights Movement and the Adolescent Sobering-Up Unit - Ralph's Place.

Staff were asked to assess how well they and volunteers managed different situations. Table 3 summarises their responses.

8. Managing different situations at the Centre

Table 3

How staff perceive themselves and volunteers in the management of specific situations

		Staff		Volu	ınteel	rs
Situation:	Very Well	OK	Poorly	Very Well	OK	Poorly
Violence	3	1	•	-	1	-
People who are drunk	4	-	-	4	-	-
People who are on drugs	4	-	-	1	3	-
People who are upset	4	-	-	4	÷	-

Staff on the whole perceived both themselves and volunteers as handling the above situations very well. The one exception was volunteers' management of service-users who are under the influence of drugs. Three staff members rated volunteers in general as only "OK" in managing this situation, because they felt that volunteers were not comfortable with people who use illegal drugs because of their own values and beliefs, which inhibited their ability to manage such situations.

One staff member also thought that volunteers needed more training in counselling skills, particularly crisis intervention to manage service-users who are distressed.

9. How HSYP could be improved

Staff had many ideas about how the HSYP could be improved. The ideas expressed were:

- Be open for more days and nights, mainly after 5:00 pm when other services are closed.
- Provide more on-going training for volunteers and be more selective in the recruitment of volunteers.
- Have more Nunga workers.
- Provide more recreational activities like camps and day trips.
- Employ a recreational youth worker to ensure that recreational activities are organised.
- Provide a street-work service every shift to ensure that service providers are in touch with what is affecting service-users on the street.
- Provide an on-going case work for service-users.
- Increase salary levels so that the HSYP attract staff with formal qualifications.
- Provide more funding for training.
- Employ a doctor and nurse for every shift...
- Change location to a ground floor office space which is safer in terms of possible fire hazard and has disabled access.
- Provide Aboriginal youth health service during the day.
- Employ an HIV AIDS worker on Friday and Saturday nights.

10. What would happen if HSYP closed down

Staff thought that if the HSYP closed down the service-users would be at risk of getting into trouble with the police and there would be an increase in criminal activity amongst the service-users. In addition, there would not be a safe place for young people to go on Hindley Street. Staff made the following comments:

"Disastrous! No safe area, especially for young people at risk. Other services would miss a lot of the young people. We're the net for the other services. We give youth an alternative that is more relaxed that is stable and has a continuity to it. There would be more arrests."

"There would be an increase in deviant behaviour - violence and vandalism. The up side would be that the young people would disappear to the suburbs and the problems would then be spread throughout the suburbs. The Aboriginal community would become fractionalised and only socialise with people in their area. There would also be more youth arrests."

"Youth Support Group (Criminal Diversionary Programme) would have to deal with how to keep young people busy on Hindley Street. The nights we've closed service-users have said they felt un-safe and have expressed concern about not enough people being interested in working at 61. The service-users are disorientated when the Centre is not open. [In addition], they'll be at the mercy of the police and people in Hindley Street. They might get into break-entering crimes and draw attention to themselves through illegal activities or risk taking activities."

"Service-users will be in the street getting into trouble. The Nunga service-users will get harassed by the police. The service-users would just be looking for trouble because they're bored. It is very important to have this place as it's off the streets and they can stay out of trouble. They know it's safe here."

The interviews with paid staff showed that there was some conflict between staff. This was demonstrated, in the way that two staff members were concerned about the lack of networking with other agencies, one staff member commenting that the HSYP has a reputation for "down grading" other youth services. Conflict was further demonstrated by staff having vastly different ideas about what were the most important services the HSYP provided for its service-users.

The four paid staff supervise shifts in pairs and always work with the same partner, and often the same volunteers. Not surprisingly divergent philosophies and ideas about the HSYP have developed.

Chapter 6

SERVICE USERS

Service-users were interviewed individually in private interview rooms at times when the Centre was open. Both Aboriginal and non-Aboriginal interviewers were used.

The interviews had been publicised at the Centre beforehand. Staff at the HSYP had told service-users about the forthcoming interviews, and leaflets had been left at the Centre. The service-users were informed that they would receive \$10 on completion of the interview. The response was enthusiastic.

THE SAMPLE

The composition of the sample is given in Table 4.

Table 4

	Abo	riginals	Non-A	Aboriginals
Age Groups	Male	Female	Male	Female
12-15 yrs	7	13	1	1
16+ yrs	13	15	4	0
	20	28	5	1

The ages ranged from 12 to 26 years, the mean age being 16 years.

In this section we summarise results obtained from the interviews under the following headings.

- 1. Service user presence in Hindley Street and at the Centre
- 2. Social and recreational activities
- 3. Information provision and dissemination
- 4. Health and well being, including medical health, crisis management and safety
- 5. Perceptions of the Police
- 6. Use of other Youth Services
- 7. Relationships between parents and the Centre
- 8. Perceived staff effectiveness
- 9. Aboriginal issues for service provision
- 10. Service-users' general evaluation of the Centre

^{*} The interview schedule used with service-users is given in Appendix 4.

SERVICE-USERS PRESENCE IN HINDLEY STREET AND THE CENTRE

Service-users reported that they came to Hindley Street mainly on Friday and Saturday nights; 85% and 90% respectively indicated that they are normally there on these nights. They generally spent 4-6 hours in Hindley Street, leaving in time to use public transport to get home.

A relatively small number was continually present in Hindley Street during the mornings (less than 10%); these remained there throughout the day. A somewhat larger proportion (approximately 20%) of the service-users were to be found in Hindley Street during the afternoon of each day. (Further details are given in Appendix 5.) The service-users who were continually present in Hindley Street were non-Aboriginal.

Eighty five percent of service-users stated that they always came to the HSYP on a Friday and Saturday night. A similar percentage (86%) thought that they would definitely or probably go to the HSYP if it were open at other times.

The main reason service-users gave for coming to the HSYP was to meet their friends and relatives. Other reasons included: Have a rest or sit down, have a drink, use the toilet, and play with various games available. Clearly the HSYP is providing a central meeting place for young Nungas from Adelaide's suburbs.

SOCIAL AND RECREATIONAL ACTIVITIES

Respondents were asked to indicate which social and recreational activities they engaged in at the Centre, and how often. In Table 5 the results are summarised, giving the numbers and percentages of respondents indicating that they at least sometimes participated.

Table 5

Numbers and percentages of service-users reporting engaging in activities.

Activity	Number	Percentage
Falking to people.	53	(98%)
Play Games like Cards & Chess.	34	(63%)
Play Computer or Video Games.	33	(61%)
Playing Table Tennis.	33	(61%)
Drawing and Painting	29	(54%)
Attending Camp*	16	(30%)
Day trips*	14	(26%)
Screen Printing*	10	(19%)
Self-defence*	3	(6%)

^{*} indicates activities organised by the staff

It is evident that the activities varied greatly in popularity and/or availability, with playing games more likely to have been engaged than other activities. The bulk of the respondents engaged in between 1 and 4 different activities, with males tending to be engaged in more activities than females. (Further details are given in Appendix 6.) However, no significant differences were found in the nature and numbers of activities engaged in by people in different age groups.

Most of the service-users (more than 70%) indicated that they had not participated in activities organised by the staff, such as screen printing, camps, day trips and self defence. (See activities asterisked in Table 5.) Some service-users indicated that they were unaware that such activities had been organised. Service-users said that they wanted recreational activities like day trips, screen printing and camps to be organised by the HSYP.

Nearly all service-users (98%) indicated that they had made new friends since they had been coming to the HSYP; 85% reported that they had made a lot. The types of activities they reported that they did together were talking, using the recreational activities and walking around Hindley Street.

INFORMATION PROVISION AND DISSEMINATION

Service-users were asked what kind of information they had received from the HSYP and how they had obtained the information. A list of possible information topics and possible source was provided (see Table 6).

Table 6

Number and percentages of service-users who reported they had received information in eight areas

Information Area	Number	Percentage
Health general	43	(80%)
Condoms & STDs	29	(54%)
Legal issues	27	(50%)
Employment and training etc	27	(50%)
Social Security	24	(44%)
Recreational Activities	24	(44%)
Accommodation	23	(43%)

From Table 6 it is clear that the information most likely to have been received was about health (80%) followed by information on condoms and STDs (54%). Other kinds of information had been received by 40 to 50% of respondents. There was no significant difference in relation to age or gender in receiving or accessing information.

Information about the sources from which information had been gained on different matters is given in Table 7.

Table 7

Number of service-users reporting that they had received information and the source of the information.

	Staff Member	Peer (other youth)	Pamphlet or poster	TV or video	Visiting speaker	Don't Know	Total
Health	15	6	28	15	9	1	74
Condoms & STDs	13	4	17	5	0	3	42
Legal issues Employment	10	2	11	3	1	5	32
and training	10	3	11	1	0	5	36
Social Security	10	5	6	1	0	7	26
Accommodation	10	1	7	0	1	7	29
Recreation	14	6	. 7	3	1	2	33
Other	2	1	0	0	0	0	3
Total	84	28	87	28.	12	30.	269

From Table 7 the sources most frequently mentioned as providing information were the staff, pamphlets or posters, followed by peers and videos. Visiting speakers were least commonly mentioned. In a few cases the respondent was unable to recall the source of the information.

Some sources appear to be more important for some kinds of information than others. Pamphlets and posters, for example were most commonly mentioned as sources of information on health, condoms and STDs. Regarding general health and matters relating to accommodation and recreation and social security, staff were more often implicated.

In identifying the most useful piece of information, the majority of service-users mentioned health matters, especially those relating to sexual health, but also including nutrition and pregnancy. Other areas mentioned as important included legal issues, employment and training.

Not many service-users could think of additional information they would like the HSYP to provide, but those that did mentioned legal matters, mainly so that they understood their rights in relation to the police.

HEALTH AND WELL-BEING

This area covers receiving medical help at the Centre, feelings of safety in Hindley Street as a result of the HSYP, and gaining emergency assistance with accommodation and getting home.

Medical Health

The research team was interested in knowing what the service-users thought of the medical care being provided by the AMS Clinic. Nearly all (91%) service-users reported that they knew they could receive medical help from the Centre. Forty per cent reported that they had received medical help at the Centre. Of these 62% were male.

All people that had used the AMS clinic thought that the service they had received was good. All service-users who commented on how the AMS clinic could be improved thought it should be open on Saturday night as well as Friday nights. Some also thought that having a doctor as well as a nurse would be desirable.

Service-users were asked whether they had been tested for diabetes and had had the Hepatitis B injections. These diseases are prevalent amongst Australian Aborigines. (It should be noted that these questions were not about whether the HSYP had provided these services, although the HSYP has the facilities to do so.)

Table 8

Number and percentage of male and female service-users who had been tested for diabetes and completed the Hepatitis B vaccination

	Service-Users	
	Male	Female
Tested for diabetes	9 (35%)	11 (39%)
Had Hepatitis B Injections	21 (81%)	12 (43%)

The proportion of males and females reporting that they had been tested for diabetes was much the same. However, regarding Hepatitis B males were significantly more likely to have received and completed the Hepatitis B vaccination: 81% of males against 43% of females. ($\chi^2 = 8.15$, df = 1, p < .01).

According to both the Co-ordinator and the Nurse, AIDS education is an important role of the HSYP. Service-users were therefore asked whether a staff member had talked to them about AIDS. Fifty per cent of both males and females reported that they had been talked to about AIDS. A similar proportion reported that a staff member had talked to them about condoms and STDs.

As one might expect, more of the older users (people over 15) were likely to have been talked to about condoms and STDs: 59% compared with 36% in the younger age group. (Details are given in Appendix 7.)

Crisis Management

A substantial minority of the respondents indicated that they had needed and received help with emergency accommodation (24%), and with getting home (34%). The numbers requiring such help are given in Table 9. It is clear that assistance of this kind is being provided to a minority of users in all age groups. There were no significant sex differences.

Table 9

Number of service-users in different age groups who received assistance from the HSYP with finding emergency accommodation or getting home at night

Age group	Emergency accommodation	Getting home
14-15	6	7
16-18	3	8
19+	4	3
Total	13	18

Safety

Practically all respondents (96%) indicated that they would go to the HSYP if things got "too heavy" in the street.

More than half (57%) indicated that fights did occur at the Centre. Perhaps what constituted "a fight" was open to different interpretations. However, there was no significant difference due to the age or gender of the respondent in the estimates given.

Of the service-users that had witnessed a fight in the Centre all expressed confidence in the staff's ability to stop the fight. This was done by separating the participants and telling them to leave the centre, or talking to the participants.

A few respondents reported that they personally had been involved in a fight at the Centre. These comprised 8 males and 3 females, making up 20% of the respondents. (There was no significant differences between age groups and gender in reported involvement in fights.)

SERVICE-USERS' PERCEPTIONS OF THE POLICE

Attitudes towards the Police were assessed using a number of questions. We were first interested in whether the Police were perceived as generally "fair" in the way they treated them. The responses are given in Table 10.

Table 10

Perceived fairness of the Police to the respondent

	Number	Percentage
Always fair	2	4%
Sometimes fair	32	59%
Never fair	14	26%
No opinion	6	11%

From Table 10 it appears that about a quarter of the respondents were quite negative in their judgements, believing that the Police are never fair.

This does not, of course, tell us whether the service-users felt especially discriminated against by the Police. (Other youth may feel the same.) To examine whether the users saw themselves as being treated worse than others by the Police, we asked them to compare the treatment they received from the Police compared with that received by non-Aboriginal youth generally. The responses are summarised in Table 11.

Table 11

Respondents' perceptions of the fairness of Police treatment of Aboriginal youth compared with others

	Number	Percentage
More fair to Aboriginal Youth	1	2%
About the Same	33	61%
More fair to Non-Aboriginal	20	37%

From Table 11 it appears that the majority of the respondents saw themselves as being treated as fairly (or unfairly) as non-Aboriginal youth. However, a sizeable minority (37%) believed that the Police were more fair to non-Aboriginals. Statistically this represents a significant tendency for Aboriginals to see themselves as less fairly treated $\chi^2 = 28.7 \text{ df} = 2, p < .001$.

Given the expressed aim of the Centre to improve relations between Nungas and Police, it was of interest to discover whether there had been any changes in perceptions of the degree of fairness on the part of the Police during the time users had been coming to the Centre. A large majority (76%) indicated that their view of the Police had not changed. Of the remainder, 15% said they had become more negative in their view of the Police.

A final question on this topic asked users whether the Police were needed for their protection. The results are given in Table 12.

Table 12

Perceived need of male and female respondents for police protection in Hindley Street

,	Males	Females
Always/usually needed	3 (11%)	13 (47%)
Sometimes needed	9 (35%)	4 (14%)
Occasionally/never needed	14 (54%)	11 (39%)

About half of all respondents thought that the Police were never or only occasionally needed for their protection. However, the distributions of responses were significantly

different for males and females (p< .05). A much larger proportion of females indicated a perceived need for considerable Police protection.

Many service-users use trains to get into the city. The research team was therefore interested to know what contact the service-users had had with "transit cops". About half (44%) of service-users had had contact with "transit cops". Of these, both positive and negative judgements were expressed.

Some reported that they were "harassed" by the Police. Both transit cops and normal police officers were said to have hassled individuals unfairly when they suspected them of such activities as producing graffiti or stealing a car.

We were interested in whether the respondents believed that staff at HYSP support them when they were in difficulties with the Police. The majority (68%) of service-users indicated that they usually or always got support from staff at the HSYP when they were being "hassled" by the police. (See Table 13.)

Table 13

Perceptions of staff support when service-users are being hassled by the Police

	Males	Females
Always/usually provide support	13	16
Sometimes provide support	7	4
Occasionally/never provide support	1	2

The type of support provided was described as listening to service-users and "talking to the police".

USE OF OTHER YOUTH SERVICES

The research team was interested in the respondents' use of other youth services, as an indicator of the need for the HSYP. Almost half (46%) had used other services, and, as might be expected they were mainly the older service-users. (See appendix 8.) Ten service-users were currently using other youth services and 5 had recently used other youth services. The service mentioned as being used currently was Youth Support Group - a criminal diversionary programme also operating in the Hindley Street area after hours.

A minority (21%) of respondents reported that they had been referred to outside agencies for assistance. There was no difference for age or gender. The agencies that service-users mentioned as being referred to included: Aboriginal Sobriety Group,

Ralph's Place - an adolescent detoxification centre, Aboriginal Medical Service and various accommodation shelters. These referrals were seen to be beneficial by the respondents.

RELATIONSHIP BETWEEN PARENTS AND THE CENTRE

Service-users were asked about their parents' opinions of the HSYP, whether their parents came to the Centre, and if their parents knew that they went there on Friday and Saturday night.

Some 70% of respondents reported that their parents knew that they came to the Centre; 22% reported that they did not know that they came to the Centre; and 8% said they did not know. There was a slight tendency for more older service-users to report that their parents did not know. (See Appendix 9.)

Of service-users whose parents knew that they went to the HSYP, the majority reported that their parents thought the HSYP was "alright" because it kept them off the street and they knew where they were. A few service-users reported that their parents thought the HSYP was good because it got them "out of the house" for a while. Some typical comments included:

- "They reckon its alright"
- "They don't mind because I come up with my sister and they want us out of the house"
- "They think it's a good idea because it keeps us off the street", and
- "Alright, at least they know where I am".

A small proportion (13%) of service-users reported that their parents sometimes came to the HSYP. The reasons for them coming was to see the Aboriginal Youth worker or because they were involved in Aboriginal Services and therefore visited as part of their work.

PERCEIVED STAFF EFFECTIVENESS

Staff effectiveness was examined by asking service-users to name paid and voluntary staff. We also asked a series of questions about how staff handled specific situations as well as questions regarding the relationship users had with staff.

About a third of the respondents did not know the names of any staff. Of those that did know the names of staff, most knew paid staff members and some volunteers. The volunteers that were known to service-users were generally those who relieved paid staff in their absence.

Service-users were asked how they thought staff managed various difficult situations. Responses of those answering these questions are summarised in Table 14.

Table 14

Respondents' perceptions of how staff manage situations

Situation	Very Well	OK	Poorly
Violence	29	15	1
	(64%)	(33%)	(2%)
People who are "charged up" (drunk)	27	18	2
	(57%)	(38%)	(4%)
People who are "out of it" (using drugs)	27	14	2
	(63%)	(32%)	(5%)
People who are upset	34	13	1
	(71%)	(27%)	(2%)
Friction between Nungas and Whites	30	14	6
	(60%)	(28%)	(12%)

Ninety five percent or more respondents reported that staff handled the selected situations "OK" or "very well". In particular, most service-users thought that staff handled "very well" situations of violence, people who are upset and people who are using drugs.

The majority of service-users, but not all, indicated that if a staff member asked them to stop fighting they would.

The HSYP has staffing provision to be able to see service-users outside the Friday and Saturday night drop-in programme, to provide a more individualised service. Some 24% of respondents reported that they had received assistance from staff at times other than Friday and Saturday night. The help generally involved talking about personal issues, like family and relationship matters; issues relating to probation from gaol; pregnancy or other health matters; and practical issues like accommodation.

The majority of respondents indicated that they generally had casual conversation with staff members, such as what is happening in the street, what they have been doing during the week, and the whereabouts of friends. About a third indicated that they would talk to a staff member about personal issues.

ABORIGINAL ISSUES FOR SERVICE PROVISION

The HSYP is not funded and was not set up to be an Aboriginal service. However, between 60%-80% of service-users are Nunga. It was therefore important to find out if the Nunga service-users wanted more Nunga workers in the HSYP (there is currently 1), and whether they wanted the HSYP to be a service only for Nungas.

Rather more than half (57%) indicated that they wanted more Nunga workers. Only 4 out of 54 respondents thought the HSYP should be for Nungas only.

SERVICE-USERS' GENERAL EVALUATION OF THE HSYP

In the final set of questions service-users were asked how they thought 61 could be improved; what they thought was the best thing about the place; and what they thought was the worst.

Suggestions for improvements could be placed under three headings: recreation, opening times and other facilities.

Examples are given below:

Recreation

Get a pool table Get more board games, like monopoly Start screen-printing again

Opening Times

Open earlier on Friday and Saturday nights Be open during the week

Other

Provide meals
Get new furniture and carpet, etc.

The majority of service-users were in favour of more recreational activities. (A pool table was subsequently provided.)

Not many respondents commented on what they thought was the <u>worst thing</u> about the HSYP. Of those that did, the following are some statements.

"Drunks being in the Centre"

"People fighting"

"Workers not being here on time to open up, and not having enough workers to open"

"People coming up to laze around and sleep"

"It's dirty!"

The "best things" about the HSYP were staff being friendly and approachable; a place to meet people; a place to get refreshment; and a safe place in Hindley Street. The following are some statements made by the respondents.

- "People coming up, games TV and video".
- "If I'm in trouble, I've always got somewhere to go."
- "It's safe to be here."
- "I can get food and a drink."
- "Staff go out of their way to help. The staff are very friendly people."
- "You can come up here when you've got problems and talk to someone."

Chapter 7

ABORIGINAL AND YOUTH AGENCIES

INTRODUCTION

Part of the evaluation involved interviewing health and welfare agencies that have contact with HSYP or serve a similar client group. Thirteen such agencies were identified. These were agencies that were either set up to service youth or Nungas including Nunga Youth. Representative from six Nunga services and seven general youth services were interviewed.

There were two sets of agency interviews. The first interviews were to gain initial impressions of what agencies in the youth and Aboriginal sector thought about HSYP. Six agencies were interviewed including Second Storey, Youth Support Group, Service to Youth Council, Youth Affairs Council Of South Australia, Aboriginal Sobriety Group, and Aboriginal Medical Service. A list of questions was developed for these interviews (see Appendix 10). However, the format of the interviews was unstructured, allowing for other issues to arise.

The second set of interviews were undertaken using an interview schedule, which was developed from issues raised in the first set of interviews (see Appendix 10). All except one of the agencies interviewed in the first round of interviews were interviewed again, and seven more agencies were interviewed in the second round. The following Aboriginal Agencies were interviewed: Aboriginal Medical Service (AMS), Northern Aboriginal Neighbourhood House, Aboriginal Sobriety Group (ASG), Aboriginal Community Centre, Aboriginal Child Care Association (ACCA) and Aboriginal Legal Service. The following youth services were interviewed: Service to Youth Council (SYC), Youth Support Group (YSG), Street Link, St Johns Shelter, Joyce Schultz Shelter, Drug and Alcohol Services Council (DASC)- Elura clinic, and Youth Affairs Council of South Australia,

Issues raised by agencies and responses to the questions fall into five categories as follows:

- 1. Contacts with HSYP
- 2. Knowledge of services provided by HSYP
- 3. Aims and objectives of HSYP
- 4. Level of activity of HSYP
- 5. Should HSYP become an Aboriginal Centre?
- 6. Consequences of HSYP closing down

Information from both sets of interviews have been analysed together.

CONTACTS WITH HSYP

Contacts from other agencies in the youth and Aboriginal sector included referral to and from HSYP, service provider networks, and inter-agency projects.

Of the organisations surveyed, only Aboriginal services referred to HSYP and told young people about the services HSYP provided. One Aboriginal agency - Aboriginal Sobriety Group - explained that they did not refer young people to HSYP, but regularly received referrals from HSYP.

All of the youth services, with the exception of YSG, saw very few Nunga youth, and therefore did not refer to HSYP. All of these agencies indicated that they would be happy to promote HSYP through pamphlets and posters. Youth agencies, with the exception of Elura Clinic, did not know of referrals from HSYP, and again pointed out that they served a different client group. One of the shelters pointed out that referrals are rarely direct to a shelter but go through Crisis Care or Trace a Place.

Youth Support Group and Service to Youth Council both operate street-work programmes at night time on Hindley Street. Both Youth Support Group and Service to Youth Council referred to HSYP for immediate health care and health information on Friday nights. Youth Support Group had more contact with HSYP because they also saw the same client group and referred to HSYP if they saw a young person who needed "time out" from the street. Service to Youth Council stated that they only referred to HSYP for the health service as their client group would not use the drop-in service because they were not Nunga youth.

Five out of the six Aboriginal agencies interviewed had had contact with HSYP through joint projects. These included: Aboriginal Medical Service's Health Clinic run at HSYP on Friday nights; both Aboriginal Community Centre and Aboriginal Neighbourhood House have worked with HSYP in developing recreation programmes such as school holiday programmes, camps and discos. Aboriginal Legal Service has run workshops on legal issues for paid and volunteer staff.

Other contact with Aboriginal agencies included follow-up of individual service-users.

Aboriginal services have the most contact with HSYP. The nature of the contact is through referrals, working on projects together and follow-up on individual service-users.

Services operating at night in Hindley Street also refer to HSYP for immediate health care and health information. In addition, YSG refers young people to HSYP for 'time out' from the street. Other youth agencies do not refer to HSYP, as they perceive HSYP to be a Nunga service. HSYP has historically been a crisis contact point for youth, from which referrals to other agencies are made, as opposed to referrals being made to HSYP. However, these services were not aware of receiving referrals from HSYP.

KNOWLEDGE OF SERVICES PROVIDED BY HSYP

Agency representatives were asked what services they knew HSYP provided. The following services were identified: Friday and Saturday night drop-in programme, health service, counselling and referral; special programmes like camps, and a volunteer programme.

Drop-In. All agency representatives interviewed knew that HSYP mainly provided a drop-in service for youth on Friday and Saturday nights between 8.00 pm and midnight. They also emphasized that the service was mainly used by Nungas. In addition, all of the agency representatives emphasised that through the provision of a drop-in service the HSYP was providing a safe place for young people to go in Hindley Street.

Health. As stated above, AMS operates a health clinic from HSYP. Twelve out of the fourteen services interviewed knew that HSYP provided a health service. Both YSG and SYC stated that they do not have a health service and therefore refer to HSYP if a young person requires immediate health information or care, that is, if hospitalisation is not appropriate.

Counselling and Referral. Ten out of the thirteen agencies interviewed mentioned that HSYP provides a counselling and referral service; three out of the ten expressed concern that the counselling done by HSYP was not particularly effective. Two agency representatives described HSYP as "rescuing" young people, and two other services also expressed concern about using volunteers to work with 'at risk youth' who did not, in their opinion, have the necessary skills. One agency representative stated that there was a real diversity in the level of skill exercised by workers at The Centre, and young people had complained to their agency that they did not receive any assistance from HSYP. That representative acknowledged that at HSYP it depends on whom the young persons see as to whether they get effective assistance. Two services thought that the staff at HSYP displayed a real caring for youth and had a great deal of skill in working with a group of youth that no other service would work with.

Special Activities. Only the six Aboriginal services knew details about the special activities organised by HSYP. These included camps, day trips and programmes such as the self defence for women. As noted above, many of these agencies had participated in organising such activities. The youth services on the whole, knew nothing about special activities, with the exception of SYC and YSG, both of whom work on Hindley Street

Volunteers. Three agencies, in the context of asking, "What services do you know HSYP provides?" identified the volunteer programme. All of these agency representatives thought that volunteer programmes were positive for increasing social awareness, and allowing volunteers to develop skills in working with young people. However, two of the agencies felt that the screening of volunteers at HSYP was not thorough enough.

HSYP is widely known as a drop-in service operating on Friday and Saturday night, and in doing so, provides a safe place for young people in Hindley Street. It was widely held that HSYP was a service mainly for Nungas, even though it has always been open to all youth.

Most agencies knew that HSYP provided a health clinic, and the other youth services in Hindley Street, namely SYC and YSG, referred to the health service.

Counselling and referral was also widely known about. Some agency representatives expressed concern about the level of skill in providing adequate counselling, largely due to the high number of volunteers working at the Project. Others, however, thought that the staff at HSYP had a high level of skill in working with the young people who used the service.

The Aboriginal agencies were the only agencies that had a wide knowledge of the services and programmes provided by HSYP. This reflects efforts made by HSYP and the Aboriginal agencies to work together on projects and refer to one another. However, the converse is true for youth services. They had limited knowledge of the services provided by HSYP and were not aware of any referrals from HSYP. If HSYP continues to see non Aboriginal service-users, then it appears that more networking should be done with these agencies.

AIMS AND OBJECTIVES OF HSYP

Agencies interviewed were asked what services or programmes HSYP could provide or develop and what they thought the aims and objectives of HSYP should be. Many organisations had difficulty in responding to the questions about aims and objectives, explaining that they did not know the difference between aims and objectives; they did not know enough about the service to be able to comment, or that it was not appropriate to ask other agencies such questions. Nonetheless, many agency representatives did provide some ideas about aims and objectives. To avoid repetition, the responses to the question, "what services could HSYP provide or develop?" are included in the list of objectives.

All services interviewed identified the need for a safe place for young people on Hindley Street. Three services identified individual and policy advocacy as important aims for HSYP. The most clearly identified aim was from the Elura Clinic supervisor who described the primary aim, as follows:

"... to ensure that young people (who have a legitimate right to be users of an entertainment area) can do so without fear of exploitation, harassment or concern for their safety. Thus the Project has a role in providing a safe place, maintaining for young people a level of relative stability, and providing the knowledge and support to choose alternative activities or behaviour."

Specific Objectives. The following objectives were seen as being appropriate for the Centre:

- To link up with Aboriginal services in the suburbs and encourage young
 Nungas to use services in the suburbs;
- To break down barriers between Nunga youth and other youth that use the service;

- To provide a service for both White and Nunga youth;
- To support and enhance young people's Aboriginality;
- To employ more Nunga paid workers;
- To be involved in suburban events (referring to Nunga events);
- To provide a health worker every night HSYP is open;
- To promote healthy lifestyles;
- To provide a needle exchange programme;
- To provide a follow-up counselling service;
- To provide Group Work (away from Friday and Saturday nights);
- To review youth problems they are seeing and network with other organisations to respond to these needs;
- To advocate for young people in relation to law, employment, housing, and health;
- To improve relations with the police;
- To persuade service-users to participate in training and education;
- To provide meals, in particular to ensure that the soup kitchen to be open every night for street-kids;
- To provide more activities, like craft or music. during the day (for youths in shelters who often have no-where to go between 9.30 am and 5.00 pm);
- To invite parents in for tea and barbeque;
- To promote HSYP so that people know it is there;
- To network with other agencies;
- To provide a clothes washing service;
- To remain community based.

In appraising the above "objectives" it is evident that some refer to what is already being done, e.g., to provide a service for both White and Nunga youth and (where appropriate) to support and enhance young people's Aboriginality. But it is also clear that many of the "objectives" are really suggestions about how the Centre could expand or develop its role.

Agencies also tended to suggest objectives that were like their own. For instance, ACCA recommended developing a closer relationship between HSYP and parents, and emphasised the important role HSYP has in informing FACS about children on Community Welfare orders; Streetlink and DASC representatives recommended a needle exchange programme. In addition, many agencies reiterated existing objectives of a HSYP such as: to provide information, to provide advocacy, to provide crisis intervention and to network with other agencies.

Agency representatives as well as reflecting their own service objectives and reiterating existing objective of HSYP, also recommended objectives for HSYP that would fill significant gaps in the youth sector. These included providing free meals, being open during the day, and running semi-structured activities for youth.

Specific mention should be made of the Elura Clinic supervisor who has had a long standing involvement with HSYP. He was mindful of the other two youth services that operate on Hindley Street, which provide a similar service but operate with different models. He recommended that HSYP develop a more health orientated service, employing a doctor as well as a community health nurse, providing needle exchange, and developing health counselling.

Level of Activity

Agencies were asked to rate HSYP in terms of the level of activity toward its service-users with the use of a scale from "too passive" to "too active". Five services responded in the "passive" half of the scale, three responded about right and two in the "active" half of the scale. Three agency representatives said they were unable to comment because they did not know enough about the service, and one felt that he was unable to comment because he was not a service provider. It is worth noting that none of the agency representatives responded at either extreme of the scale, and there was a tendency for the work of HSYP to be seen more often as relatively "passive".

Passive. Five agencies suggested that HSYP was "too passive". Two stated that relations were not very good between many of the workers and service-users. One commenting that there was not enough interaction and the other that workers appeared intimidated by the young people. Two commented that there were too many unskilled volunteers and there should be more paid staff. One of the services saw the need for HSYP to become more involved in organising recreation programmes. Two Aboriginal agencies felt that there was a need for parents to become more involved with the service and that HSYP needed to use the media more in relation to youth issues. One agency representative stated that HSYP was "too passive". However, in qualifying his rating, he explained that a 'drop-in' model of practice is passive, aiming at long term change in service-users, and he saw a place for such a model in the youth sector, as some youth do not react positively to more structured interventive methods of counselling.

About right. Three agency representatives said that the level of activity HSYP provides its service-users is "about right". One of them said that HSYP was doing a good job; and two stated that <u>in the past</u> they had been too passive. (The reasons

given were that fights had happened in the past because some young people had said they didn't get any assistance from HSYP.)

Active. Two agency representatives commented that HSYP was "active". These respondents thought that HSYP were doing an excellent job having a good relationship with Nungas and that "HSYP has a nice atmosphere".

SHOULD HSYP BE AN ABORIGINAL ORGANISATION?

No direct question was asked in relation to whether HSYP should be exclusively a Nunga agency. However, both youth agencies and Aboriginal agencies raised it as an issue.

Both youth agencies and Aboriginal agency representatives thought that there should be more Nunga workers at HSYP. Two representatives from youth agencies thought that HSYP needed to make it clear whom they worked with; whether they worked with Nunga youth or "street kids". Four of the Aboriginal agencies thought that it was important for HSYP to remain multicultural and provide opportunities for youth from different cultures to socialise with one another. Three of the four Aboriginal agencies recommending this mainly serviced Nungas but saw other Australians who elected to use an Aboriginal agency. One Aboriginal agency representative said:

"It's not South Africa! People who want an all-black agency should see what it's like to live there for a while. We're a black agency but we employ white staff and see white clients. The difference is that we, the Aboriginals are in management here."

Information from agency interviews indicates that there is some confusion over the client-group that HSYP serves. The HSYP is known by agencies to be frequented by Nungas. However, it is not a Nunga agency in that the service is not generally managed by Nungas, (although currently the Chairperson of the Management Committee is Nunga). All agencies interviewed think that there should be more Nunga workers. Nevertheless, a number of Aboriginal agencies feel that it is important to service both Nungas and other Australians.

WHAT WOULD HAPPEN IF HSYP CLOSED DOWN

To the question "what would happen if the Centre closed down?" representatives from most services thought the effect would be disastrous. Most services commented that HSYP served the important function of providing a safe place for young people to go to in Hindley Street. It was pointed out that out of the three youth services operating, HSYP is the only service that is "centre based", as both YSG and SYC are street-work services. All agencies commented that there would be an increase in street fighting and conflict between youth and the police. Three agencies said that closure of the Centre would particularly anger the Aboriginal community. Some agency statements included:

... it's a rich service that meets the needs of a group of young people that no other system has effectively worked with, so where will they

[the youth] go? ... There'd still be young people in Hindley Street, so demands will be made on other services like the police and YSG ... All the good of socialising kids not to get in fights, have a good time and stay sober will be undone. Those kids would lose a voice ...

(DASC- Elura Clinic)

Nungas would have no-where to go, they'd be on the street and be getting in more trouble with the police.

(Aboriginal Community Centre)

From a health point of view, young people's health would be jeopardised, because there would be less monitoring of intoxicated youth ... There would be a lack of care and advocacy for children who are helpless.

(AMS)

There'd be Nunga kids hanging out on the streets and they'd be angrier because their service had been taken away. Hindley street would be less safe - there'd be racial clashes and no-where to go if they were threatened on the streets.

(St Johns Shelter)

It would be going backwards. The kids would have no-where to go in town and the situation with the police would become worse ... I look at it as a safety haven.

(Aboriginal Legal Service)

Chaos! Kids would have no-where to go. There would be lots of kids on the streets ... Parents would worry about their children if HSYP was not there.

(Aboriginal Neighbourhood House, Elizabeth)

In the interviews with the two youth services that operate on Hindley Street in the night, SYC and YSG, they both commented that HSYP was the only youth project that provides a place where young people can go. Service to Youth Council thought that many white people would not go in there. YSG, however, stated that they share many service-users with HSYP and commented that if HSYP closed there would be chaos.

"There would be kids hanging around the street which would put them at risk through increased conflict with the police and racial conflict with other groups on the street."

(Youth Support Group)

All agencies interviewed thought that HSYP was an important service on Hindley Street and it should not be closed down. In interviews in which the agency representative was providing much criticism of the services HSYP provided, the

question as to whether HSYP should be closed down gave way to positive statements about HSYP.

Agencies clearly stated that HSYP was crucial in the Hindley Street environment to defuse conflict between different ethnic groups and the police; provide a service for Nungas and a general crisis contact point for young people; and a safe place for youth to go.

If HSYP were closed down there would be a significant gap in services for young people in the inner city entertainment area on Friday and Saturday nights.

CONCLUSIONS

The responses to the agency questionnaire demonstrated that there were different perceptions of HSYP in the youth and Aboriginal services sector.

The Aboriginal agencies were more positive about HSYP than the youth agencies. Aboriginal agencies have more contact at HSYP through mutual youth services and joint projects. Youth services, with the exception of the other two Hindley Street services, had little knowledge of the various services provided by HSYP other than the drop-in service on Friday and Saturday nights.

In relation to the approach that HSYP had towards clients, some of the Aboriginal agency representatives thought that HSYP staff were very skilled in working with their service-users. Other agencies, however, including <u>some</u> Aboriginal agencies, expressed concern about the apparent non-interventionary approach used by HSYP staff and over-reliance on "unskilled" volunteers.

All agencies interviewed were very clear that HSYP had an important function in the Hindley Street environment: in providing a safe place for young people to go, defusing conflict between young people and the police, providing advocacy for youth, (particularly in relation to the police), and providing a service for young Nungas, who, as a group, do not use Aboriginal services.

All agency representatives wanted to see more Nungas involved in management and staff. Most of the Aboriginal agencies interviewed wanted HSYP to remain open to youth from all cultural groups.

Chapter 8

THE POLICE

The Bank Street Police Station is located in a side street off Hindley Street. It is therefore responsible for the Hindley Street area. The police presence in Hindley Street is generally foot patrols. The foot patrols generally patrol the area in pairs.

Twenty one police officers from Bank Street Police station were given questionnaires. The questions concerned their relationship with the HSYP and its service-users; what type of contact they had with HSYP; and how they thought the HSYP could be improved (see questionnaire in Appendix 11).

The senior sergeant of the Bank Street Police Station wanted the questionnaires to be given to the police officers to avoid the process of time consuming interviews. It was decided that the senior sergeant would hand out questionnaires randomly to members of the seven teams. He gave questionnaires to three people on each shift.

The senior sergeant, prior to the completion of the police questionnaires, explained that he thought that most of the police officers had a negative opinion of the Hindley Street Youth Project. In the past some police officers had perceived the HSYP as hiding young people whom the police had warrants on for their arrest. The senior sergeant emphasised the need for both the police officers and the workers at the HSYP to develop an understanding of one another's roles and work more effectively together. The senior sergeant's concerns were largely borne out by the police officers' responses to the questionnaire.

The majority of the police officers interviewed had been stationed at Bank Street Police Station for between two and three years. Furthermore, the majority had requested to be stationed there.

The topics raised with the Police were as follows:

- 1. Police Officers' knowledge of the HSYP
- 2. Relationship between the Police and HSYP
- 3. What would happen if HSYP closed down?
- 4. How HSYP could be improved

1. Police Officers' knowledge of the HSYP

Most of the police officers interviewed knew of the existence of the HSYP. A large proportion made comments to the effect that they had some knowledge about the HSYP, and would like to know more. However, they had felt that the staff at HSYP were hostile towards the police, and had therefore stopped trying to become familiar with the Project. A minority had no knowledge of the Project or its functions.

Most police officers had little or no contact with the Project. Some police said that the staff's anti-police attitude was the reason why they had little or no contact. Most officers, however, had an understanding of the functions of the HSYP. The following comments were made regarding the HSYP's functions:

"To provide care, counselling and health facilities for youth. In particular, Aboriginal youth."

"Provide a service for youth actually in Hindley Street, and provide a refuge and contact point, if required.

"They are available to assist youths in the city area, and assist in arranging accommodation, discuss problems and provide information regarding safe sex, and needle exchange."

" ... It offers an alternative for youths that would normally spend Friday and Saturday nights on the streets with no-where to go or nothing to do."

2. Relationship between the Police and the HSYP

Police officers were asked to assess their relationship between HSYP and the police, with reference to staff and service-users.

a) Staff. Only two police officers considered the relationship between staff and the police to be positive, one describing it as "good"; the other stated that information is often shared which is beneficial to both the police and HSYP.

Eight police officers thought the relationship with HSYP staff was negative describing it as "poor", "suspicious", "anti-police", and "unco-operative". Some more detailed comments include:

"Administration and staff of the Project have very negative and unco-operative attitudes towards police. At times, this attitude could be described as hostile."

"I don't know the difference between staff and others, but every time I have been there, I have been told not to harass the kids, etc. Very poor, I consider them to be unprofessional and anti-police."

The other eleven police officers were unable to comment on the relationship between the HSYP and the Police.

Service-users. The comments regarding the relationship between service-users and the police tended to be the same as those regarding staff, although many police officers commented that they knew some Aboriginal youths, but did not know if they were service-users of the HSYP.

3. What would happen if the HSYP closed down

Police, like other groups interviewed, were asked to comment on what they thought might happen if HSYP closed down. Here are some of the comments they made:

"If it closes, it will mean that there is not a meeting ground where youth can congregate in Hindley Street."

"The kids would lose a valuable drop-in centre."

Other comments were more critical:

"Some youth would probably hang around the streets more."

"A vital contact point in the entertainment area would be lost. There would be no place that they could go as other youth services, YSG and SYC, are not normally, continually open.

Ten police officers thought that closure of HSYP would have no impact at all on young people and the police in Hindley Street. Some police suggested that other youth services in Hindley Street would service the youth that use HSYP, and that the consequences would be of little significance.

"Would be of no consequence to the police, as I have had very little contact with HSYP in the past. However, youth in Hindley Street may be sorry to see them closed."

"I don't think it would affect me at all. I think YSG have had a better philosophy, i.e., working with the police. There are any number of other agencies."

"There seems to be a lot of youth agencies in the inner city area. If HSYP closed, then other agencies would cover for them."

4. How HSYP could be improved

Generally it was thought that more liaison with the police would result in a better working relationship between the police and the HSYP. Two of the respondents felt that the police needed to make more of an effort in liaising with the staff of the HSYP.

CONCLUSION

Overall, the police do not have a high opinion of the HSYP, and they showed little knowledge of the services the HSYP provides to youth. The majority of police identified the need for more liaison with the Bank Street Police Station and to develop a more constructive relationship.

Chapter 9

TRADERS

Ten Hindley Street traders were interviewed. In consultation with staff at the HSYP and the chairperson of the Hindley Street Traders Association, the research team selected traders thought to have the most contact with service-users of the HSYP for interview. This included traders who serviced youth and traders in the immediate vicinity of the Project. Interviews were conducted at the following places: amusement parlours, including two Timezones and Down Town; two fast food outlets, McDonalds and Hungry Jacks; two hotels, Tattersalls and the Century Hotel, both of whom have a high aboriginal patronage; and three traders in the immediate vicinity of the Project including a coffee shop, (Alfrescos); a T-Shirt business, (Hot Rock) and an army surplus store, (Quarter Master's Store). In addition, the Chairperson of the Hindley Street Traders Association who also operated a T-Shirt business, (T-Shirt City) was interviewed. Altogether eleven traders were interviewed (see Appendix 12).

The length of time individual traders had been in Hindley Street, varied from ten months to thirty years, with the majority being in Hindley Street for two to three years.

Most of the businesses interviewed opened seven days a week, the majority opening up to eighteen hours a day. The opening hours on Friday and Saturday nights were generally longer to accommodate the increase. Most of the traders interviewed were enthusiastic about working on Hindley Street, mentioning the variety of cultures, the noise, music and non-stop entertainment.

Overall, individual traders did not identify youth as their main customer group, with the exception of people providing game parlours who identified young men as their main customers.

The following questions were raised with the traders:

- 1. What attracts young people to Hindley Street
- 2. What traders dislike about working in Hindley Street
- What knowledge traders had of HSYP
- 4. How "safe" Hindley Street was

1. What attracts young people to Hindley Street

All traders believed that these factors attracted young people into Hindley Street: "the noise", "lights", "amusement centres," and "other young people".

2. What traders dislike about working in Hindley Street

The main thing traders disliked about Hindley Street was the "drunks". Other comments which occurred in this category included the "street-kids", and the "gangs" that gathered.

When asked about whether there was violence, theft or drunkenness in Hindley Street, the most common answer was that although these problems existed, considering the large number of people who congregate in Hindley Street, violence was not a major problem. Hindley Street was, however, subject to more media attention.

The Hindley Street traders did not identify Aborigines as a group that causes problems any more than other groups. Comments were made that a couple of years ago Aborigines used to be a problem, but not any more. "Street-kids" were identified as the main group in Hindley Street that caused problems such as theft and violence. Other groups identified were Greeks and Italians.

The traders, stated that the behaviour of young people in Hindley Street was generally very good. There was only a small minority that sometimes spoilt it. "Bad language", "graffiti", "drunkenness and loitering" were sometimes problems.

3. Knowledge of the HSYP

All except three out of the eleven traders interviewed, knew of the existence of the Hindley Street Youth Project. However only two traders, Timezone and Quarter Master's Store, had any idea of the Project's activities and purpose. The majority of the traders said that they did not have enough information to be able to comment.

4. Safety in Hindley Street

The final question for traders was how to make Hindley Street safer for everybody. The vast majority of traders interviewed said that Hindley Street was not unsafe. Comments were made such as, "it's as safe as houses", and "I didn't know it was unsafe".

In conclusion, the Hindley Street traders that were interviewed provided answers that were, on the whole, similar to one another. Whilst most traders had heard of the HSYP, few had an understanding of what the Project does for youth. The traders were generally unable to comment on the impact the HSYP has on young people in Hindley Street. What traders were at pains to point out was that Hindley Street is not a threatening environment and that Aboriginal youth are no more threatening than others. Given the adverse effect of bad publicity for Hindley street, and their trading prospects, their views are not surprising.

Chapter 10

DISCUSSION

The review of the history of the Project (Chapter 2) showed that the role of the Centre has been an evolutionary one, rather than one that has remained unchanged over the 10 years of its existence. It has evolved from being primarily an information-giving and referral point for young people who frequent Hindley Street on Friday and Saturday evenings into a facility that operates in many respects as a "drop-in" centre for predominantly Aboriginal youth. But it is generally somewhat more pro-active than the typical drop-in centre. It actively seeks to encourage certain forms of behaviour, especially those relating to a healthier life-style, both physically and psychologically, through the provision of medical services and recreational activities It also provides crisis counselling and advocacy for service-users who need it. In short, it combines functions not often found together, and it is unclear how its role will develop.

In seeking to evaluate the work of the Centre, two different kinds of questions arise. The first is whether it actually does well what it sets out to do: that is, whether it is effective. The second question is whether what it sets out to do is the right thing to do. This second question may be considered to be beyond the scope of an evaluation such as this. Nevertheless, in the course of asking questions about the functioning of the Centre from a wide range of interested people, many opinions were expressed regarding the rightness or otherwise of what the Centre was doing, and it was felt that one of our tasks was to reflect and comment, if not to adjudicate, upon the judgements that came to our ears.

We will therefore deal with both kinds of questions, those relating to the efficiency of the Centre, and those which are concerned with its role in the provision of services in the context of broader societal considerations.

THE EFFECTIVENESS OF THE HSYP

As a drop-in centre

Unquestionably many young people drop in on both Friday and Saturday evenings. The numbers vary according to the time of the year (there are many more in Summer) and the attractions in Hindley Street. During the time of this study, which was mainly in Winter, the numbers varied roughly between 30 and 100.

In general, those dropping in were those the Centre wished to target, that is, young people under 25 years. The process of gaining entry is well controlled and administered flexibly: some quite young children of primary school age are admitted when a need is recognised, and also some older adults. In keeping with the aims of the Centre, the balance of Nungas and others was, as we have seen, consistently in favour of the Aboriginal group which constituted some 90% or so of the service-users. The sex ratio was approximately even. Young people who come to the Centre commonly continue for many years and introduce other family members. The Centre clearly fulfils the first

requirement of a drop-in centre: it is well patronised and by and large attracts the users it is intended to serve.

Safety

Providing a safe environment was continually emphasised by staff at the Centre as of central importance, and it is therefore crucial to ask how well it discharges this function.

The assumption is, of course, that Hindley Street itself is a relatively unsafe place for people to be. This view is widely held, except by Hindley Street Traders who have a vested interest in denying it. It should also be acknowledged that the element of danger associated with Hindley Street is part of its attraction for young people. There is a certain ambivalence in the attitudes of the young towards Hindley Street.

One way of examining the degree to which Hindley Street is perceived as threatening to the users of the Centre is to consider their responses to the question of whether the Police are needed for their protection. Given that many Nungas have negative feelings towards the Police, the acknowledgement of some need for Police protection (see Chapter 6) can be taken as a clear indicator of the personal danger they experience in Hindley Street. Approximately half the respondents at the Centre said the Police are sometimes or always needed for their protection. This suggests strongly that the young people who use the Centre are generally aware of their own vulnerability in Hindley Street.

There is no doubt that HSYP is generally seen by the users as providing a "safer" environment than Hindley Street. Practically all the users interviewed (96%) said they would go to the Centre if things got "too hot" in the street. It was observed that young people did sometimes come to the Centre for medical attention after they had been involved in a fight.

Whether the Centre is a "safe" environment and not simply "safer" than the street is, however, open to question. Reports from users (see Chapter 6) indicate that most of them had seen fights at the Centre, and that some 20% appear to have been personally involved. Adding to the risk, it was reported, there were sometimes "drunks" at the Centre. Hence it is fair to conclude that the Centre is relatively safe for young people rather than totally safe.

How effective are the staff in stopping fights? Here the evidence is conflicting. service-users reported unanimously that fights would be stopped if workers intervened. When the volunteers were asked whether service users would stop a violent quarrel if they were asked to do so, only a minority evidently thought it likely that they would (see Chapter 5). This suggests that volunteer workers, at least, are not very confident of their capacity to effectively intervene in dangerous situations that develop at the Centre.

In general it does appear that HSYP provides an important service in providing a "safer" environment than Hindley Street, and that this is well appreciated by the users, but that safety is not completely achieved.

Social and recreational

As we have seen the function of the Centre extends beyond simply providing a retreat or haven from the street when things get "too heavy". It has a more positive role in seeking to enrich the lives of service-users through the social and recreational activities it encourages. How successful is the Centre in this regard?

On the basis of reports from service-users, the answer is "only partially successful". Where it is a matter of using existing and readily available resources for entertainment, e.g., cards, chess, video games, drawing and painting most users get involved, often in a variety of recreational activities. Where staff organised activities are concerned, the involvement has been less evident. Although self-defence and screen painting are activities which the Centre promotes, relatively few (less than 20%) have been engaged in them.

External activities such as camps were not during the period of this study in evidence, and relatively few users reported having taken part. Complaints from the users of being bored were not uncommon. Many of the suggestions made by users in the course of the interviews were about the need for improved recreational facilities and extended opportunities to take part in more games and camps. This is not to say that the staff are deaf to these requests (a pool table, for instance, was recently acquired in response to popular demand). But the impression obtained from the users is often one of disappointment.

We should also note that the overall quality of the surroundings in which the recreation activities took place left much to be desired. Seating, tables and especially the staircase leading up to the recreational area appeared dilapidated and sub-standard, contributing to an atmosphere of neglect. Criticism on this point from service-users was not uncommon. It seems likely that the somewhat depressing appearance of the physical environment may have detracted from the efforts of the staff to encourage users to participate in activities. It may also have affected the morale of the staff themselves. It follows that additional physical resources are clearly needed to improve the situation.

Information giving

As we have seen, the Centre offers a wide range of information for the service-users. Information on health matters predominates. For instance, the percentage of users who reported having been received information at the Centre about condoms and STDS was notably high, about 4 people out of 5. Given the health needs of Aboriginal people generally and the threat of AIDS in particular, the concentration in this area is most appropriate. In fact, information about health generally was rated as the most important by the users of the Centre.

Information about other matters - legal, employment, accommodation, recreation programmes and social security payments - appears to have been received in each case by about half the users. For some users information in particular areas may not be seen as relevant to them and therefore ignored. Some information may not have been recalled. Hence we could not reasonably expect users to report they had received all the information. Of some concern, however, is the quality of some of the information

provided: in particular about Social Security payments, which was found to be out of date.

Notably the main sources of information provision were staff and posters/pamphlets. (The effectiveness of the former depends, in part, on the nature of the relationships formed between staff and users, and this is examined later.) Other sources of information, for example, through videos, may possibly be underutilised. Also Visiting Speakers appear to have contributed relatively little in this way.

By and large in its information-giving capacity the Centre appears to be reaching a substantial proportion of its users, particularly in the highly significant area of health.

Health Service

The presence of a medical facility on Friday evenings at the Centre is clearly a valuable and important service. It is well publicised amongst service-users, and had been used by almost half the service-users at the time of this enquiry. Evidence of the good quality of this service and how much it is appreciated has already been been documented in this report. Given its acknowledged utility and the frequent comments made by service-users that it should be extended, perhaps to include a doctor as well as a nurse, and to be available on Saturdays as well as Fridays, there are grounds for believing that it could become even more valuable.

More specifically, a good case could be mounted for a stronger drive to provide two medical services of pressing importance to Aboriginal people, namely, testing for diabetes and giving hepatitis B injections. Not only are medical conditions associated with diabetes and hepatitis B extremely serious, but are generally recognised as especially prevalent among Aboriginal people. The fact emerging from the survey described in Chapter 7 that female service-users are much less likely to have had hepatitis B vaccination than males, strongly suggests that a persuasive effort is needed to convince females especially to avail themselves of this service.

We have noted earlier that the promotion of the view that condoms <u>should</u> be used to counter AIDS has been highly effective at the Centre. This being so it is disappointing to discover that on a number of occasions condoms were not available for service-users at the Centre, despite there being a policy to provide them. We should also add that peer-education programmes which had been planned to encourage safer sexual behaviour had not been implemented.

The overall impression is that the medical service provided is of a good quality and much appreciated but needs to be extended in a number of ways.

Helping with emergency accommodation and getting home

Although only a minority of service-users (about a quarter) need help from time to time with emergency accommodation and/or in getting home at the end of the evening when they do not have the necessary resources, providing relevant assistance is important. This function is discharged effectively: young people are sometimes found

accommodation at short notice; some are helped financially to get home. In this way the dangers to some young people is avoided and distress minimised.

The personal influence of the staff

Much of the work of the Centre cannot readily be described in terms of fulfilling clearly defined functions. The personal influence of individual staff members and volunteers must play an important role. Whether they can help depends in the first place on the kind of relationship they are able to develop with the service-users. In short, there must be a sense of trust and acceptance. What generalisations can be made about the relationships that exist and develop?

It appears that for a substantial proportion of the service-users a close relationships with the workers does not exist. About one in three of the users said that they did not know the names of any of the staff or volunteers. Relationships among service-users appeared in most cases to be much stronger than between users and staff. This may in part be due to the fact that some of the users (and volunteers) had started coming to the Centre quite recently.

Differences appeared to exist between individual staff members in the closeness of their relations with the service-users. Generally, as one would expect, permanent staff were more able to interact more freely and purposefully than volunteers with the users. The time factor appeared to be important here. Relationships involving staff and users have appeared to develop slowly, with an initial minimal contact developing gradually to a point where less superficial exchanges became possible.

There was evidence that in some cases relationships had developed to the stage where users felt they could talk in some depth about personal issues confronting them and/or their families. Significantly, about one third of the users reported that they had received counselling or support outside the Project's normal working hours.

Although relations with users are generally not close, sometimes in fact remote, there was considerable respect expressed regarding the qualities and abilities of the staff and volunteers. This was particularly evident when users were asked to rate the effectiveness of staff when there were difficult situations to be confronted. Only small minorities (around 5%) thought that staff were ineffective in dealing with situations in which violence and emotional upset were involved. This is a very positive aspect of the evaluation. There was also heartening evidence that users believed that staff would support them in times of adversity, for example, when they were in trouble with the law.

Yet there were two areas in which some workers appeared to be less than optimally effective in being able to help. One area concerns that of escorting Nungas to hospital when they needed medical attention. Given that Nungas often fear, or feel suspicious of, hospitals, a relatively high degree of trust is needed before some Nungas will go with a non-Aboriginal helper to a hospital. The failure of some volunteers to persuade a Nunga needing such attention to come with them can be seen as an indication of lack of sufficient trust. Another possible area involves the perceived inability on the part of a number of volunteers to introduce service-users to a recreational activity. It is unclear whether their initiatives would, in fact, be rejected but there was clearly a perception on

the part of volunteers that they would not have that sort of influence: that they were, to a degree, outsiders.

The effectiveness of the service-providers is also conditioned by the level of cohesiveness and general morale. The work undertaken at the Centre is often draining and staff members run the risk of "burn-out" if they continue for long periods. For much of the period of this evaluation the Co-ordinator of the Project was unwell and extremely tired. This may have affected the morale and general cohesiveness of workers, which in the opinion of the observers was not high, and the team did not appear to be operating at an optimum level.

We may conclude that relationships between service-users and staff, though highly variable between individuals, were generally not close, and characterised by respect on the part of users, rather than affection. The relationships generally were sufficiently well established and positive to enable staff to fulfil often quite difficult functions, such as intervening in situations which could become dangerous and to provide needed support for individuals in trouble.

Relations with the Police

The staff appear to be placed in a difficult situation. They need continually to liaise with the Police, who are seen at the HSYP quite often. They have obligations as citizens to be co-operative and to help the Police. At the same time, it is evident that the service-users have generally negative attitudes towards the Police (though not as negative as may be supposed), and that some of them are in trouble with the Police. Obviously the staff must offer users support if they are to retain their confidence, without which the HSYP could hardly function. We should also add that there have been claims of discriminatory actions on the part of the Police against Aboriginals, to which staff may be expected to take heed (Cunneen, 1990). The upshot is that HSYP runs the risk of antagonising the Police, and some Police Officers not surprisingly are somewhat antagonised.

Under these difficult circumstances the effectiveness of the Centre may lie in (a) providing support for users in their occasional skirmishes with Police and/or legal authorities, (b) maintaining good working relations between HSYP and the Police, and (c) helping to foster, as far as is practicable, positive relations between service-users and the Police. There is good evidence that HSYP is succeeding in its support for service users, to some extent at the expense of desirable relations with the Police. Nevertheless, its efforts in this arena have <u>not</u> led to a climate of intense"cop-hating" on the part of service-users. As we have seen, the Police are not an object of contempt among the Aboriginal youth; they are not, in fact, stereotyped to the degree one might expect. (See Chapter 6 on users' views about the Police.)

THE ROLE OF THE CENTRE

Regardless of how effectively the Centre is operating in doing what it sets out to do, the question remains whether is current role is a desirable one. It is not the purpose of this report to provide a definitive answer. However, it is hoped that the following may help in

bringing together various, sometimes conflicting, viewpoints about the proper role of the Centre and to help to define the issues more closely.

Making matters worse or offsetting possible consequences

One line of argument is that the HSYP serves to attract Nungas to Hindley Street, and that they, and perhaps others with whom they interact, would be better off if they stayed away. There would be - so the argument runs - less distress, less crime, less contamination generally as a result of fewer people being exposed to the baleful influence of Hindley Street.

The counter argument is that HSYP in itself is not the magnet. As the traders we interviewed explained, it is the bright lights and excitement of the big city that brings them in. It must nonetheless be conceded that there is evidence that some parents are happy enough to see their children come into Adelaide because there is HSYP to fall back on. On balance, however, it appears that the Centre itself is not the draw. The presence of substantial numbers of Nungas and street kids must be accepted as "a given". The more significant question is what does it do to offset possible negative consequences of these people being in a potentially quite dangerous environment.

The answer to what it does to minimise damage cannot be provided in precise terms. However, the judgements of people who commented upon this question were generally consistent. The possibility of the closing down of the HSYP was widely regarded as having negative consequences, with some describing the consequences as disastrous. The most horrendous scenarios were painted by the staff at HSYP and also, from a less biassed perspective, by Aboriginal organisations and some welfare organisations (see Chapters 5 and 7). Probable consequences included an increase in crime as well as the loss of a means by which the lives of Nungas could be made safer and their welfare enhanced. The Police, however, were divided, some believing that a valuable and useful service for some youth would be lost; others believed that the loss of HSYP would not matter since other youth service organisations would take over, including the YSG which was seen as working more positively with the Police (see Chapter 8).

Should HSYP not work more closely with other organisations?

We have seen that the Police continually complain that HSYP does not work closely or positively enough with them. Also we have commented upon the difficulties and dilemmas that affect organisations like HSYP which seek to support groups with members who are in trouble with the law. This is a major problem that needs considerable patience, and there is no obvious solution (see Marsland, 1991).

Where non-Police organisations are concerned such as YSG, with whom relations have at times been less than perfect, there are better grounds for expecting that efforts to establish more positive relations could develop. It seems likely that with some organisations relatively little is known of the activities of the Centre, and publicising the nature and range of the work being undertaken would be useful. A greater degree of networking with a range of organisations whose functions and/or interests overlap with HSYP seems desirable (see Chapter 7). As one might expect, the most positive

relations with HSYP are to be found in Aboriginal Organisations such as the Aboriginal Sobriety Group.

Is HSYP pro-active enough?

As previously mentioned over time the aims and functions of the Centre have continually changed. It now appears as a multi-purpose organisation, being not only in some respects a Drop-in Centre, but also dispensing a varied range of services.

Some critics (see Chapter 8) see it as not being pro-active enough, for example, in the area of providing, or encouraging the development of, recreational activities, and in developing a better, more extensive medical and counselling services. If it were to do this, this might well entail making use of more specialised staff. (More developed counselling skills are seen by some as needed by HSYP.)

Against this might be set the desirability of adopting a relatively passive stance, given the perceived unacceptability of imposing programmes more suitable for non-Aboriginals. This view implies that one can best help by responding to expressed needs rather than providing what may not be wanted.

Aboriginalisation of the Centre

Finally the issue of Aboriginalisation of the Centre must be addressed. This problem of identity of the HSYP is no less important to the clients than it is to the staff of the centre. This is true not just at the service level, but also at the level of self image and morale. The issue is also critical in terms of funding and centre management. For a decade this organisation has successfully assisted many children, with funding from mixed sources, with a management structure influenced but not controlled by Aborigines and for culturally diverse clients who have a common needs in safety, security and advice. However over that decade the Aboriginal organisational context has matured greatly with many service and community agencies operating exclusively under Aboriginal control.

One approach to the issue is to divide it into two questions:

The first is whether it should serve exclusively Nunga youth or include, as it now does, a proportion (about 10%) of non-Aboriginal children, who are in fact Street Children.

The second is whether the service provided by HYSP should not be more under Aboriginal influence.

Aboriginal users only?

The nature of the group to be targeted has implications for the kind of service that is provided. There are advantages in it being solely for Aboriginals. Such specialisation simplifies the task for service providers. However, it would have the effect of removing a facility which is seen as being valuable for street kids as well.

Our research indicated that the two groups are relatively separate and in fact interact only to a very limited extent. There appears to be little attempt to integrate the two. Perhaps it is less a matter of difference in race than life-style that separates them. In any event there can be little doubt that a common service is likely to be more acceptable if it is passive: that is, planned so that staff respond to user initiatives rather than provide powerful initiatives themselves. To the extent that a pro-active stance is desired, providing a service for Nungas only may be favoured.

A contrary argument can be built in part upon the preferences of the users themselves. Whilst there is clearly no particular affinity between Nungas and others, there are relatively few Nungas who would like to see non-Aboriginals excluded from using the Centre. Apart from the a practical difficulty of identifying who are Aboriginal and who are not (Aboriginal identity is sometimes self-defined) an exclusively Aboriginal user group, even if achievable in practice, obviously ignores the problem of what is to become of the street kids.

Currently providing a setting in which harmonious, but not necessarily close relations, exist between Aboriginal and non-Aboriginal users seems to be an achievable and preferred option.

Provision of services by Aboriginal people

There can be little doubt that increasing the contribution of Aboriginal people to the running of the centre is desired, and arguably this is a desirable goal. While Aboriginal community leaders have a strong influence at the executive level very few Aboriginal people are involved in the work of the Centre. (Several Aboriginal Volunteers have made contributions.) The advantages of more Aboriginal staff in terms of enhanced cultural awareness are obvious. If we assume that the present somewhat passive stance of the Centre is due to a perception that initiatives from current staff or volunteers may be culturally inappropriate, Aboriginal involvement may be expected to contribute to a more pro-active approach.

Long term institutional advantages may also accrue. Arguably links with other Aboriginal organisations would become stronger and enhance the effectiveness and quality of referrals. The Centre would also be more able forge educational and training links with Aboriginal TAFE and the Aboriginal Education Unit.

It is possible that the provision of some selected services by non-Aboriginal people might be preferred by the Aboriginal service-users themselves. Where disclosure of confidential information to other Aboriginal people such as parents may be feared, an Aboriginal user may feel more secure in disclosing to a non-Aboriginal worker. (It was evident in the survey of users that there was almost no enthusiasm for parental involvement in the centre.) This may be regarded as an argument in favour of non-Aboriginal involvement at the Centre in some roles.

Hence an argument in favour of a mixed staff of Aboriginal and non-Aboriginal workers can be sustained. We should add here that significant advantages in the area of

increased cultural sensitivity and understanding might accrue to non-Aboriginal users being serviced by Aboriginal staff.

Finally it must be acknowledged that a decision taken in favour of greater Aboriginalisation in service delivery would require changes which would not be easy to achieve, at least in the short run. Despite attempts to increase the proportion of Aboriginal volunteer workers at the Centre, they have remained greatly outnumbered. Aboriginal paid workers would be required. This would entail the development of a professional development plan to provide adequate training and inservicing for these workers. Although this could prove costly, its value in the long run could be very great.

SUMMING UP

In the course of this report we have identified both strengths and weaknesses of the HSYP. We have reflected some opinions and presented some arguments that seriously question the current role of the Centre, and have suggested possible ways in which it may develop. Conclusions about the working of the Centre will obviously depend upon what it is believed can reasonably be provided for its clients. If one's expectations are that it should provide an exhilarating and deeply enjoyable alternative to Hindley Street, in short, to provide a really "good time" for Aboriginal youth, it must be judged as a disappointment. On the other hand, if its goals are seen as more modest and perhaps "realistic", then its achievements are significant. There can be little doubt that in its present mode of operating it is contributing effectively to the safety and well-being of both young Nungas and street kids who are clearly "at risk" in Hindley Street at weekends.

This viewpoint is based upon close observations of the operation of the Centre; interviews with service-users and staff, both volunteers and paid workers at HYSP; interviews with other agencies concerned with working with youth, especially Aboriginal youth; and interviews with Hindley Street Traders and the Police in Adelaide. As one would expect, opinions varied on the effectiveness and usefulness of the Centre. With the exception of a section of the Police, the range of opinion about the work of the Centre was from highly enthusiastic to mildly positive - with some critical observations.

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OUTCOMES HIERARCHY FOR THE HSYP

HINDLEY STREET YOUTH PROJECT

	OUTCOMES HITERARCHY	ACTIVITIES	FACTORS AFFECTIVE ACILIEVEMENT OF OUTDUMES	ATTRIBUTES OF SUCCESS	PERFORMANCE INDICATORS
1.	All staff (and volunteers) adequately skilled	Initial training camp and 12 week induction monthly training and support	. previous skills . motivation	recognition by other agencies of Centres training	
		nights.	· learning skills	. young people respect and	
		external training especially first Aid sexual Health communication group Skills leadership Skill drug & alcohol knowledge		åppreclate staff	
2. S	AFEIY	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		·
•	from physical violence including intimidation	. intervention to defuse conflict	. clarity of and compliance with - rules of behaviour	. no fights	•
	and self injury from emotional violence	. vigilant supervision . giving information on safe	- Health and Safety practices . skill and knowledge of staff	. no injuries occur at Centre . no physical damage to property	
		alternative escorting clients to safe departure from Centre/city	. physical environment . condition of client on entry	at Centre clients repeat attendance at Centre	
		depicture from emicroscy	(eg. sobriety, emotions) condition of staff	. clients understand and use information on safety	
	• • •			. clients feel safe	•
3.	Information, advice and counselling received	. responding to requests for information	. current state of client	. Huny clients receive and take in information and advice about	
		 provision of pumphlets and other written unterial 	. literacy of client . communication skills of staff	- transport - accommodation	
		soshiv gnivota .	. availability of miterials	- fumon relationships - sexual activity - STD's	
		 operating library outreach service 	 'accessibility' (eg. readability) to client group of available material 	- contraception - preparicy - peneral health matters	
		. initiation, by staff, of counselling	 condition of resource library (up-to-date?) 	- inpl matters - cmployment - social socurity entitlements	
		. leading discussion groups		etc recreation programs	
		. maintaining a resource library		- malssing persons	
 4.	Clients cooled down	. restraint	. sobriety/intoxication	. disturbed or angry client does no - fight	t
		. 'talking down'	. personality of individual	- damage property - hurt self	
		. walking with client on street . separation of antagonists	. skill of staff . level of respect for Centre's rules	. client becomes calm	
		. reminding of house rules	. level of general 'stirring'	, client leaves scene of provocation	1
		. closing the Oentre	· · · · · · · · · · · · · · · · · · ·		

	OUTCOMES HIERARCHY	ACTIVITIES	FACTORS AFFYCITING ACHIEVEN IN OF NUTCHIES	ATTRIBUTES OF SUCCESS PERFORMACE INDIC	CATORS
5.	Overnight accommodation arranged	. phone: - Crisis Care - St. John's Refuge - St. John's Refuge - home or relatives - Aboriginal Sobriety Group	 availability of beds eligibility for accommodation previous experience of home/hrstel/relatives with client sobriety/intoxication 	clients needing a bed for the night get it	
5.	Hedical advice and trestment received	. giving First Aid . giving out hand bills . initiating individual and group discussions on health . services of medical practitioner and nurse	. skill of staff . availability of staff . availability of educational sids . availability of doctor and nurse . receptivity of clients	- needed treatment received relevant advice gained	
7.	Treatment in (or at) toopital received	, persuading client to go taking client to hospital . advocacy with hospital	. hospitals attitude . client's attitude . staff's attitude	clients needing hospital treatment get it	
3.	Safe departure from city	encouraging clients to catch last train or bus (or earlier) providing timetable information buying tickets escorting to train/bus driving clients home	. willingness to leave . availability of money . availability of staff	clients leave city, at latest, by last train or bus, or by staff car	
9.	Support for persons in trouble with police	 phoning for lawyer explaining legal rights providing pumphlets on legal rights assisting in police interviews contacting Youth Support Group advocacy 	. whether staff are on the street . knowledge and skill of staff . availability of information	. clients are supported . clients feel supported	

84.

	OUTCOMES HITERARCHY	ACTIVITIES	FACTORS AFFECTING ACILLEVENE:IF OF OUTCOMES	ATTRIBUTES OF SUCCESS	PERFORMANCE INDICATORS
10.	Had a good time	 talking, listening and responding to clients getting out of the way joining in games/activities with clients staff having a good time providing recreational activities 	. mood of client(s) . culture of centre . mood of staff . staff skill	. laughter, amiles . no violence . repeat attendance at centre	
u.	Clients participate in planned recreation at the Centre	organised recreation on Friday and Saturday nights eg – pool, screen printing computer games	clients mood availability of staff quality of instruction and communication	. participation . demand for more activities	
12.	Clients perticipate in sexual health program	providing information providing condons running educational peer support groups referral for medical assessment/treatment	Aboriginal dislike of explicitness general adolescent embarrassment skill and attitudes of staff availability of condoms	referred clients attend clinic for medical assessment/treatment clients participate in educational per support programs and complete their projects open discussion of sexual issues acceptance of condoms	
13.	Satisfactory relationship between clients and police	contacting Bunk Street Police clarifying expectations and relationships between centre staff and police involvement of police in training Centre's staff inviting police to Centre to meet clients giving clients clear information about role of police	. attitude of police, staff and clients . length of individual police officer's assignment to Bank Street . length of staff involvement at 61	fewer incidents between police and clients clients understand police powers and citizen's rights	
14.	Clients repeat attendance at 61 Hindley Street	• open during hours when young persons use Hindley Street	sensons and weather other attractions song dynamics	. young people frequenting Hindley Street attend 61 repostedly .	

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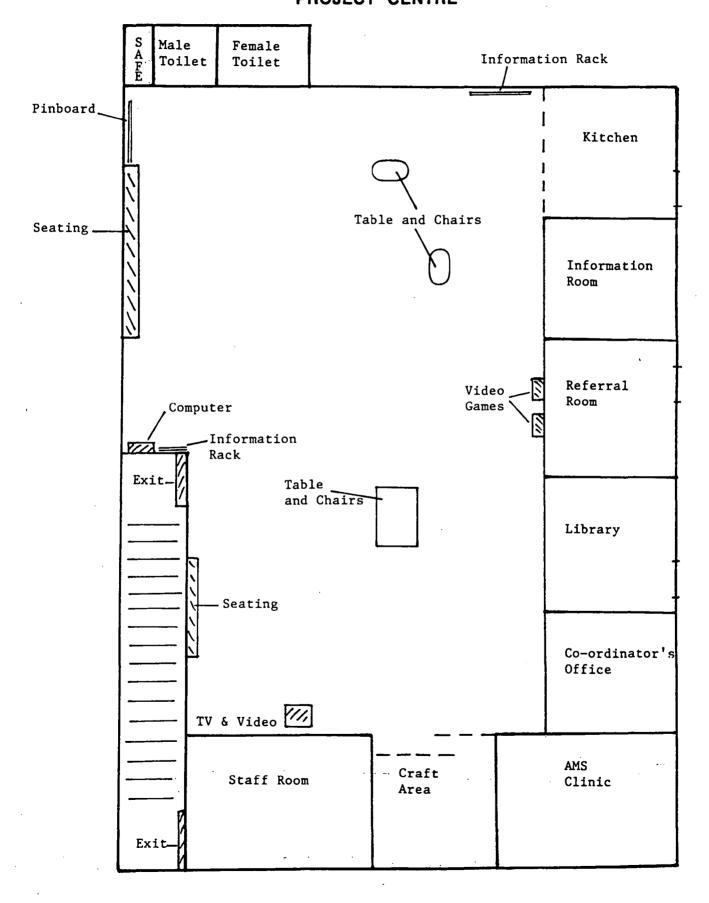
	OUTCOMES HIERARORY	ACTIVI*(ES	FACTORS AFFECTIVE ACILEVENENT OF OUTCOMES	ATTRIBUTES OF SUCCESS	PERFORMANCE INDICATORS
15.	Clients visit 61 for followup	 miking known staff availability for follow up making appointments attendance of staff to follow up matters with clients, by appointment where possible following up issues with clients who drop in during the day without an appointment 	. availability of staff . motivation of clicats	clients invited for follow up make appointments clients who make appointments keep them clients drop in to follow up issues	•
16.	Clients and, sometimes parents, participate in recreation programs outside the Hindley Street area	 organizing activities telling clients, parents about forthcoming events training staff and parents gathering resources (recreational activities away from Centre include camps, sports nights, day trips, football, netball, indoor cricket) 	. attitudes of clients, parents, staff . resources available	clients, parents take part in activities clients, parents take part in planning the activities increased demand by clients	
17.	Reduced risks of AIDS, SID's, resunted pregnancy.		Aboriginal dislike of explicitness general adolescent embarrassment	clients aware of risk factors client's take recommended precautions reduced incidence of AIDS, STD's unwanted pregnancies	
18.	Aboriginees become volunteers	. edvertising for volunteers . encouraging parents of client's to volunteer . training of volunteers	other commitments reluctance to work in a centre where their own young people go (factors particularly effecting Aboriginal families) dislike of training practices large majority of volunteers are non-Aboriginal lack of information about Centre and its programs	increased proportion of volunteers are Aboriginal	
19.	Increased parental responsibility for their young people	. talk to adult family members about young people (a) re concerns (b) general	receptivity of families to - staff - information about their young people	 priments respond to concerns raised by Centre perents spend time with young people appropriately (depending on age) 	

86.

	OUTCOMES HEERARCHY	ACTIVITIES	FACTORS AFFFECTING ACILLEVEMENT OF CUITOCHES	ATTRIBUTES OF SUCCESS	PERFORMANCE INDICATORS
20.	Increased social and survival skills	role modelling group skills demonstrated and taught problem solving skills taught	. peer group norms . staff skills	clients getting paid jobs better interaction with police less incidents in Centre	
21.	Increased recreation skills	telling client about other recreation networks		new skills increased skills participation in new networks less destructive, more construor harmless recreation	ctive
22.	Increased positive relations with peers and adults			. more positive interaction between at Centre . more positive interaction between and adults at Centre . more positive interaction outsi Centre . less friction in Centre and at	een youth
23.	Better access to outside services	referral networking mintaining knowledge of resources	awiilability of services (eg detoxification for minors) clients motivation and ability receptivity and suitability of services recognition of staff of youths' needs for services	sdeouite range of outside servi available services scoept referrals	· · · · · · · · · · · · · · · · · · ·

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FLOOR PLAN OF THE HINDLEY STREET YOUTH PROJECT CENTRE



Questionnaire for Volunteers at the Hindley Street Youth Project.

Preamble

As you probably know, a team of researchers is engaged in evaluating this youth centre. We want to begin by asking volunteers a few questions to get their impressions of the Centre. But first a few questions about yourself:

- A 1. How long is it since you began as a volunteer worker at 61 Hindley St?
 - 2. On average, how many times a month have you been working at this centre?
 - 3. How did you get into volunteering here?
 - 4. Briefly, how would you describe your role as a worker here?
 - 5. What do you personally enjoy most about working here?

What do you like least?

B Now some questions about the service users:

1. Why do you think most of them come to 61 Hindley St?

2. What are the most popular forms of recreation enjoyed by service users at the Centre?

3.	Do you think there should be more organised kinds of activity for the Service users?
	If so, what?
4.	The Centre, I understand, makes a wide range of information available to the service user. What kind of information is:
	Most appreciated?
	Most needed by service users?
5.	What do you think the service users expect to happen if they misbehave?
6.	Do violent quarrels or fights ever happen in the Centre?
	(If Yes) How often
	How are things usually resolved?
7.	In what ways do service users participate in determining what goes on in the Centre?

8.	Do you think there should be more or less participation?
	Explain.
*	
9.	How would you describe the relationship between the service users and the police?
10	. Do you think that relations between service users and the police have been affected by the work of the Centre?
	If so, in what way?
	w a few questions about relationships between the service ers and workers here:
1.	What kinds of things do service users talk to you about?
•	De di con il consendata a consettance O
2.	Do they seek your advice sometimes?
	What about?
3.	Some service users are not very happy to go to hospital even when the need urgent medical attention. In your experience, what proportion do you think would go with a volunteer?
	0% 50% 100%
	Has this ever happened to you?

C.

What happened?

4.	If 2 service and you as				uarrel or a fight
	definitely would	probably would	50-50	probably wouldn't	definitely wouldn't
	a	b	С	d	е
5.				vity for a group ey would take p	o of service users
	definitely would	probably		-	definitely
	a	b	c	d	e
6.				lescribe relatio at the centre?	nships between
7.	How would and volunt			onships betwee	n service users
8.	What differ Nunga?	ences, if an	ıy, does i	t make if the vo	olunteers are
9.	Do you thin	ak it would	be better	if more volunt	teers were Nunga?
	w some que ers:	estions abo	ut what	the Centre do	es for the service
1.	What would service use	•	the best	thing the Cen	tre does for the

D.

2. Do you think that some of the young Nungas would not come into Adelaide if it weren't for 61 Hindley St?

If yes, what proportion would you say would not come to Adelaide?

3. Do you think that Nungas generally feel safer when they are in Hindley St because of the Centre?

If yes, in what way?

4. This is a hypothetical question: If the Centre closed down, what do you think would be the main consequences? (allow them to elaborate)

E. What in your opinion do the following think about the Centre? (answer in a phrase):

- 1. The police
- 2. Parents of service users
- 3. Youth Support Group
- 4. Hindley St Traders
- 5. Street Link
- 6. Second Storey
- 7. Aboriginal Sobriety Group
- 8. Aboriginal Medical Service
- 9. Service to Youth Council
- 10. The service users

F. How would you describe the relationship between each of the above and the Centre? (again ask for brief comments).

G. Finally, can you suggest ways in which the Centre could be improved?



QUESTIONNAIRE FOR SERVICE USERS AT THE HINDLEY ST YOUTH PROJECT

Preamble

You have probably heard that some people from the University of South Australia are evaluating 61 Hindley St. It is really important that we hear what young people who use the Centre have to say about it, so the staff and volunteers at 61 know what you want. Well here's the chance to have your say!

A. Frequency

- 1 (a) How many days a week do you come to Hindley St?
 - (b) Which days and what times do you usually come?
 - (c) About how long would you spend in Hindley Street when you come in?

	Morning 6-12 noon	Afteroon 12 - 6 pm	Night time 6pm - 6am	
Monday	[]	[]	[]	4 5 6 7
Tuesday	[]	[]	[]	8 9 10 11
Wednesday	[]	[] .	[]	12 13 14 15
Thursday	[]	. []	[]	16 17 18 19
Friday	[]	[]	[]	20 21 22 23
Saturday	[]	. []	[]	24 25 26 27
Sunday	[]	[]	[]	28 29 30 31

1.	always						
2. 3.	sometimes not often						
٥.	not often						
If you	u were in town, at other times	, would	i come	to 61 if	it were o	pen?	
1.	definitely						
2. 3.	probably						
3.	unsure						
4. 5.	probably not definitely not						
Why	do you usually come to 61?					٠	
	· ————————————————————————————————————						
				.	·		
Reci	reation/Social Activities						
What	reation/Social Activities t activities have you been inv ty or Saturday night?	olved i	n whe	n you've (come to	61 on a	
What	t activities have you been inv		n whe	n you've o		61 on a	er
What Frida	t activities have you been inv						er]
What Frida	t activities have you been invary or Saturday night? Talk to people Play games like cards		<u>ten</u>		times		
What Frida	t activities have you been invaly or Saturday night? Talk to people		<u>ten</u>		times		
What Frida	t activities have you been invaly or Saturday night? Talk to people Play games like cards or chess	10 [ten]	Some [times]		
What Frida	t activities have you been invary or Saturday night? Talk to people Play games like cards	10 [<u>ten</u>		times	<u>Nev</u> []
What Frida	t activities have you been invaly or Saturday night? Talk to people Play games like cards or chess Play computer or video games	Ω (ten]	Some [times]]	<u>Nev</u> []
What Frida	t activities have you been invalved or Saturday night? Talk to people Play games like cards or chess Play computer or	10 [ten]	Some [times]	<u>Nev</u> []
What	t activities have you been invaly or Saturday night? Talk to people Play games like cards or chess Play computer or video games	Ω (ten]	Some [times]]	<u>Nev</u> []

		Someti	mes	Oft	en	Nev	er
1.	Screen printing	[]	[1	[]
2.	Camps	[]	ſ]	[]
3.	Day trips]	[]	[1
4.	Self Defence	[]	[]		. []
	other	•••••	•••••	•••••	•••••		•••••
Whic	ch activities have you dor	ne most?					
 -	ch did you enjoy most? you think of any activitie	es you would l	ike the	staff to o	rganise	· :?	
 -		s you would l	like the	staff to o	rganise	??	
Can y	you think of any activities Have you made new f						
Can y	you think of any activities Have you made new f	friends since y	you've				
(a)	you think of any activities Have you made new to	friends since y	you've				
Can :	you think of any activities Have you made new for the second sec	friends since y	you've				
(a)	you think of any activities Have you made new to the second of the seco	friends since y	you've				
(a)	Have you made new for the How many? 1. A lot 2. A few	friends since y	you've				

1	2	3

C. Information Provided by 61 to Young People

1. What kind of information have you got from here?

	Staff Member	Peer (other youth)	Pamphlet or poster	Through TV or Video	Visiting Speaker	Don't Know	
Condoms & STDs							
Health eg. Nutrition, drug and alcohol use.							10-15
Legal eg. Legal rights and legal services.							16-21
Employment/ training							22-27
Social Security Payments		,					28-33
Accom- modation				·			34-39
Recreation Programmes							40-45
Other							46-51

Wha	t would	you like to know mor	e about from 61?	
				
Hea	lth and	I Well being		
1.	(a)	Is it possible to get	health care at 61?	
		YES	NO	
	(b)	If yes, when?		
2.	(a)	Have you been trea	ted at 61?	·
		YES	NO	
	(b)	What do you think	of the service?	
				

(a)	Has anyone from he	re talked about	condoms and STDs?	
	YES	NO		
(b)	What did you think	of that?		
(a)	Have you been teste	ed for diabetes?		
	1) YES	2) NO	3) DON'T KNOW	
(b)	Have you been imm	nunised against	Hepatitis B?	•
	1) YES	2) NO	3) DON'T KNOW	
(a)	If you've been here, have you been helpe	and had no acceed by a worker a	ommodation for the night at 61?	
	1) YES	2) NO	3) DOESN'T APPLY	
(b)	What happened?			
(a)	If you've been here been helped by a wo	and had no way orker?	of getting home, have you	
	1) YES	2) NO	3) DOESN'T APPLY	
(b)	What happened?			

	8.	If you heavy	were in Hindley Str on the street, would	reet on Friday and Sati I you come up here?	urday night, and things g	ot too
		·	YES	NO		59
	9.	(a)	Do fights ever hap	pen in the Centre		
	٠.	1. 2. 3.	often sometimes never			60
•		(b)	What are they usua	ally about?		
		(c)	What generally ha	ppens?		 .
10.	(a)	Have	you personally been	involved in any fights	at the Centre?	
•	·		YES	NO		61
	(b)	What	happened?			
E.	Relat	ions to	o Others			
1.	Have	you had	d anything to do with	the police over the las	st month?	
	Bank	Street F	Police?			
	Other	Police?	•			
			· · · · · · · · · · · · · · · · · · ·			
				-	•	

				·		
				· · · · · · · · · · · · · · · · · · ·		
(b)	Have yo to 61?	our feelings towar	rds the police c	hanged at all	since you've be	en con
	1. 1	more positive				
	2. 1	no change more negative		·		
Why?						
				·		
•					<u> </u>	
		• •				
Have	you had a	iny contact with the	he transit cops'	?		
		YES	NO			
(c)	What ha	appened?				
						
		·				
Do vo	ou think th	at the police are I	more fair to:			
Do y						
	Nunga '	Youth				
(a) (b)	White Y	Couth				
(a)	Nunga \\White Y\\No diffe	Couth				
(a) (b) (c)	White Y No diffe	Couth	olice to be fair	?		
(a) (b) (c) How	White Y No diffe	outh erence e you found the p	olice to be fair	?		
(a) (b) (c)	White Y No diffe	Youth erence e you found the perfair ness fair	olice to be fair	?		

5.	Do yo	ou think that the police are needed for your protection in Hindley Street?	
	(a) (b) (c) (d) (e)	Always Usually Sometimes Occasionally Never	66
6.	(a)	Do you think that youth workers at 61 really support you when you're be hassled by the police?	ing
	(a) (b) (c) (d) (e)	Always Usually Sometimes Occasionally Never	67
	(b)	What kind of support?	
7.	(a)	Have you used other youth services, for instance Street Link, Youth Support Group or Second Storey.	
		YES NO	
	(b)	(If yes) Which ones?	68
	(c)	When?	
		 A long time ago Recently 	
		3) Currently	69

(d)	What for?	
(a)	Have you been referred to any services by 61 workers? YES NO	
(b)	Which ones?	
(c)	Were the referrals useful?	
(a)	Do your parents know that you come here sometimes?	
	YES NO DON'T KNOW	
(b)	What do your parents think about you coming here?	
(a)	Do your parents ever come here?	
	YES NO	

(c)	Would you	do you like th	hem getting involved?			
		YES	NO			
	Why?					
				<u> </u>	·	_
	· · · · · · · · · · · · · · · · · · ·					
Can w	e contact you	ur parents abo	out what they think of	HSYP?		
		YES	NO			
(If yes	s) How can w	ve contact then	m?		·	
Staff	Effectiver	ıess				
			nteers) do you know t	he name o	f? (ask for nam	es)
How	many staff (in	aff deal with	the following:	he name o	f? (ask for nam	es)
How	many staff (in	aff deal with	the following:	2	3	es)
How	well do the st	aff deal with	the following:	2	3	es)
How the How th	well do the st	aff deal with	the following:	2	3	es)
How to the second secon	well do the st	aff deal with	the following: 1 Very Well 1 Very Well	2 OK	3 Poorly	es)

····		1 Very Well	2 OK	3 Poorly	
c)	People who are "out of it"				77
Com	ment:				
					
		1 Very Well	2 OK	3 Poorly	—
d)	People are very upset?				 78
Com	ment:	_ 	·		
					
		1 Very Well	2 OK	3 Poorly	ľ٦
e)	Friction between Nungas and whites			•	<u> </u>
Com	ment:				
If you	ou were involved in a fight or argument a ld you do?	and a staff i	nember a	sked you stop v	what
(a)	Have you ever got help from staff at nights?	times other	r than Fri	day and Saturd	ay
	YES NO	•			80
-					

3.

4.

1	2	3

-			 	
		·		
-		<u>:</u>		
What sort	of things would you ta	alk to a staff member abo	out?	
				
			·	
Do you thi	nk there should be mo	ore Nunga workers at the	: Centre?	
1.	less			
2.	more			
3.	doesn't matter			
Do you thi	nk 61 should only be	for Nungas?	•	
	YES	NO		
1. Ho	w do you think 61 co	uld be improved?		
		•		
				<u>-</u>
				
				
2. WI	nat is the worst thing a	ibout 61?		
2. WI	nat is the worst thing a	about 61?		
2. WI	nat is the worst thing a	about 61?		
2. WI	nat is the worst thing a	about 61?		

3.	What is the best thing about 61?	
		6 7
Gen	der m f	
Cult	ural Background	
1.	Nunga	·
2.	Italian	
3.	Greek	
4.	Indo-Chinese	
5.	Other Australian	
Whi	ch suburb do you live in?	
Whe	ere does your family come from?	
	Den lly, a How Gen 2. 3. 4. 5. Whi	Demography Ily, a few questions about you: How old are you? Gender m f Cultural Background 1. Nunga 2. Italian 3. Greek 4. Indo-Chinese

TIME	MORNING	AFTERNOON	NIGHT
TIME 6pm)	(6am - 12noon)	(12 noon - 6pm)	(after
Monday	3	13	6
	(6%)	(24%)	(11%)
Tuesday	4	11	6
	(8%)	(20%)	(11%)
Wedneso	lay 3	12	8
	(6%)	(22%)	(15%)
Thursday	(4	9	6
	(8%)	(17%)	(11%)
Friday	4	9	46
	(8%)	(17%)	(85%)
Saturday	4	· 9	53
	(8%)	(17%)	(85%)
Sunday	3	8	10
	(6%)	(15%)	(19%)

Reported presence of service-users in Hindley Street at different times during the week

Number of Activities	Respondents	
·	Male	Female
•	4	4
0	1	ı
• 1	3	8
2	7	4
3	3	3
4	5	6
5	2	3
6	3	2
7	2	•
8	-	1

Reported number of recreational activities in which male and female service-users were involved

Age Group	Had talked with staff	Had not talked with staff
13-15	8 (36%)	14 (64%)
16-18	13 (68%)	6 (32%)
19+	6 (46%)	7 (54%)
Total	27	27

Number and percentages of service-users in different age groups who had talked with a staff member about condoms and STD's.

Age group	Used other youth services	Had not used other youth services
13-15	7	15
16-18	6	13
19+	10	3

Number of respondents in different age groups who reported using other youth services.

Age group	Parents knew	Parents did not know	Unsure whether parents knew
13-15	17	4	1
	(77%)	(18%)	(5%)
16-18	14	3	2
	(74%)	(16%)	(11%)
19+	7	5	1
	(54%)	(39%)	(8%)

Respondants' perceptions of whether their parents knew that they went to HSYP

INTERVIEW SCHEDULE FOR WELFARE AND HEALTH AGENCIES

1.	a)	Do you refer to HSYP?
	b)	Do you have referrals from HSYP?
2.	What	do you know about HSYP?
3.	Why o	do you think Nungas use HSYP?
4.	Do Nu	ungas use this service?
5.	Which use?	n services in the youth sector do you know young Nungas
6.	Have	you undertaken an evaluation of your service?
7.	What	do you know about youth in Hindley Street?

QUESTIONNAIRE FOR THE BANK ST POLICE

team fr would	indley St Youth Project is currently being evaluated by a research rom the University of South Australia. As part of the evaluation we like to interview police who work at Bank St, to see what they think The Project.
1. I	How long have you been stationed at Bank St.?
2. I	Did you request to be stationed here or were you posted?
3. V	What do you know about the Hindley St Youth Project?
4. V	What contact, if any, do you have with HSYP?
5. V	What so you understand to be the purpose of HSYP?
6. I	Do you know what activities HSYP provides for young people?
7. I	How do you assess the relationship between the HSYP and the police?
S	Staff
u	isers

- 8. How much contact so you have with users of HSYP?
- 9. Do you have much contact with the parents of the youth who use HSYP?
- 10. What do you think would be the consequences if HSYP closed?

11. Finally, how do you think HSYP could be improved?

QUESTIONNAIRE FOR HINDLEY ST. TRADERS

I'm from the University of South Australia. A research group is rt

of th	at, w	evaluation of the Hindley St Youth Project and as pa e are surveying Hindley St. traders on life In Street.
1.	How	long have you been here?
2.	When	are you open?
3.	What	do you think attracts young people to Hindley St?
4.	What	's your main customer group?
5.	(a)	What do you like about working in Hindley St.?
	(b)	Is there anything you dislike about working in Hindley St.?
		(Probes) Any groups cause Problems?
		Is there any:
		violence?
		theft?
		drunkenness?

6.	What do y St.?	ou think about the behaviour of young people in Hindley
7.	Do you kn	ow about the Hindley St. Youth Project?
•		YES NO
	(If yes)	What do you think about it?
		What do you think would happen if it closed down?
8.	(if no)	It is a youth service that operates a drop-in service on Friday and Saturday nights providing:- information and referral, assistance for young people in crisis, a safe place for young people to go, and recreational facilities. Although it is open to all young people who wish to use it, the majority of services users are Aborigines and Street-kids.
9.	Do Aborig	ines use your service?
		YES NO
10.		would you describe your relationship with young igines in Hindley St?
	(b) Are	they any different from other youth?

- 11. How do you see the relationship with the police and young Aborigines?
- Finally, any suggestions as to how Hindley St can be made a safer place for everybody?