

Centre for Sport and Social Impact



The Impact of Reclink Australia Programs on Participants

National Report



Australian Government
Department of Regional Australia,
Local Government, Arts and Sport



Acknowledgements

We wish to thank the many Reclink Australia participants who gave their time to participate in the interviews. We are grateful for their responsiveness as well as their preparedness to divulge information about themselves and their lives – this enabled us to gain valuable insights into the impact of Reclink Australia programs. The assistance of staff at Reclink Australia is gratefully acknowledged. We would also like to acknowledge the assistance of Associate Professor Kevin Brown from the Centre for Sport and Social Impact at La Trobe University in the development of this research project and Val Sands for her help in bringing this final report together.

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February 2014

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Executive Summary

Reclink Australia commissioned the Centre for Sport and Social Impact at La Trobe University to research its programs over a four-year period between 2009 and 2013. This Report examines the impact of Reclink Australia programs throughout Australia. The central aim of the project was to identify how Reclink Australia programs contribute to the physical, mental and emotional health of people experiencing disadvantage.

In order to fulfil the central aim of the research, three research methods were employed:

1. An online survey of Reclink Australia agencies (64 responses). This enabled the researchers to establish the types of organisations that Reclink Australia engages with, as well as their capacity to engage in and contribute to sport, recreation and arts programs.
2. In-depth interviews with workers from agencies that Reclink Australia has partnered with (60 interviews throughout Australia). This enabled the researchers to follow-up in more depth on some of the themes that emerged from the online survey, as well as establish what agency workers perceived were the impacts of Reclink Australia programs on their clients and participants.
3. In-depth interviews with active participants in Reclink Australia funded or supported sport, recreation and arts programs (274 interviews conducted throughout Australia, as per the following table).

The interviews with participants enabled the researchers to collect and analyse data on the perceptions of these individuals about the impact of Reclink Australia funded and supported programs on their lives.

The research revealed that Reclink Australia participants experience significant disadvantage, including social isolation; drug addiction; mental health issues including schizophrenia and depression; a lack of independence, often due to mental issues, which was in some cases drug induced; problems with the law, including incarceration and repeat offending; sexual abuse or rape; homelessness or unsatisfactory living arrangements (which included both the quality of the accommodation as well as the social or familial interactions); and broken relationships.

More importantly the findings revealed that Reclink Australia programs were a catalyst for a better life for many of the participants who took part in the study. One of the greatest benefits from participating in Reclink Australia activities appears to be regular access to a support network, and being part of a community of people who have had similar experiences or difficulties. The majority of interviewees reported that their self-esteem and confidence had been boosted by participating in Reclink Australia activities, while it was also clear from the research that participation in Reclink Australia activities was also a catalyst for addressing drug problems.

State / Territory	Participants
Tasmania	29
Victoria	101
Western Australia	29
Northern Territory	21
ACT	23
South Australia	24
Queensland	47
Total	274

Recommendations

The following recommendations are drawn from the research findings contained within this report, the experiences of the research team in conducting the research and the research team's expertise across a broad range of sport and social impact research and evaluation projects.

The Place of Reclink Australia

In recent years sport has become a popular vehicle for the delivery of social programs and the amelioration of social problems and social harms. Globally sport has been identified as an activity and an institution that can support a range of development and humanitarian goals. In Australia a range of programs have proliferated that use sport to combat intractable health, social and educational problems. In many of these programs sport is delivered as a stand-alone activity by a single organisation to a particular cohort of people who have been targeted for attention. The success of these programs often depend on the popularity of the sport to attract sufficient participants, a consistency of funding to allow for the program to develop long-term and the integration of support services to make meaningful use of sport's ability to draw people in.

Reclink Australia's operating principles enable it to deliver sport, recreation and leisure activities in a manner that appears to be unique within Australia. Reclink Australia's network of agencies means that it doesn't target a specific cohort of people via an isolated sport or recreation program. Rather, it is able to draw in a wide range of disadvantaged people and provide them with a diverse offering of services and activities that meet their needs. The Reclink Australia model of cooperating with support agencies means that it is able to respond to the needs of its target group effectively and efficiently. Its operating model also means that it is constantly in contact with agencies providing essential support services to disadvantaged Australians, thereby mitigating the need to contract these services as part of one-off sport for development activities.

RECOMMENDATION 1

Reclink Australia should continue to be funded as a unique organisation that provides a necessary link between the social service and sport sectors.

RECOMMENDATION 2

Sport and recreation programs that seek to improve the lives of disadvantaged Australians or ameliorate health and social problems should integrate sport and recreation activities with targeted social support services (e.g. drug rehabilitation, social housing or employment services)

Reclink Australia Participants

The research contained within this report clearly demonstrates that Reclink Australia provides sport, recreation and leisure opportunities to a diverse range of disadvantaged Australians, many of whom can be regarded severely disadvantaged. As detailed within the body of the report, this disadvantage includes drug addiction, mental health issues, homelessness, problems with the law, sexual abuse and rape, as well as various forms of social isolation. Many of these disadvantages or issues are inter-related and it is clear that many Reclink Australia participants are living 'on the edge' in terms of their physical and mental well-being. It is also clear from the research conducted that the vast majority of these participants would not have accessed sport, recreation and leisure activities were it not for Reclink Australia and the activities and services it provides or facilitates. Many traditional sport and recreation environments, such as the community club or leisure centre, are either too costly or too intimidating for Australians experiencing disadvantage to the extent of many Reclink Australia participants. As such, it is clear that Reclink Australia provides sport, recreation and leisure opportunities to a segment of the Australian population who would otherwise be unable to access or afford them.

As noted in the body of this report, many of those people interviewed as part of the research see themselves as long-term Reclink Australia participants in the sense that they want Reclink Australia to be part of their lives for the foreseeable future. It is clear that some participants are unable to participate in 'mainstream' sport or recreation, even if they were supported to do so financially, but there is also a significant cohort of Reclink Australia participants who have the capacity to participate in 'mainstream' sport, recreation and leisure, thereby accessing its concomitant benefits. Some of these participants also have the capacity to access additional educational and employment services through Reclink Australia, as indicated by the 'Transformational Links' program and via alcohol and other drugs education.

RECOMMENDATION 3

Reclink Australia should continue to be funded, in order that a small but significant proportion of the Australian population experiencing severe disadvantage continue to be provided with the opportunity to access sport, recreation and leisure services and activities.

RECOMMENDATION 4

Reclink Australia should be supported to develop programs that, where possible, encourage Reclink Australia participants to move beyond Reclink Australia sport, recreation and leisure and into 'mainstream' sport, recreation and leisure.

RECOMMENDATION 5

Reclink Australia should be supported to develop or enhance education and employment programs, which utilise or convert the attraction and enjoyment of Reclink Australia participants to sport, recreation and leisure, where possible, into education and employment outcomes.

Consistent and Uniform Service Delivery

Reclink Australia operates throughout Australia. What began as a Victorian program has relatively recently and quickly expanded to other States and Territories via the provision of federal and state government funding. However, it was evident during the research that growth has not been consistent and that the provision of services has not been uniform between States and Territories. This lack of uniformity can be attributed to differences in State and Territory contexts and differences in specific cohorts of disadvantage. But perhaps most importantly it is due to the presence of skilled and experienced State and Territory based staff, which in turn is influenced by sufficiently funded and resourced national system that provides long-term continuity, support and professional development. By way of example, the research team visited Tasmania relatively early in the project and interviewed participants, agency workers and Reclink Australia's State manager who was based in Hobart. At this stage the program was operating extremely well, with participants and agency workers reporting high levels of satisfaction with the program and the opportunities and benefits it was providing. These outcomes were in large part due to the State manager, who had very strong personal and professional networks, had a clear vision for the program and was able to secure additional support (financial, in-kind and political) where necessary. Soon after the research was completed in Tasmania, the State manager resigned in order to move to another position and since their departure the program in Tasmania has not achieved the outcomes it has been set. It is clear that the Tasmanian program has suffered as a result of a key staff member departing, but also as a result of a lack of funding that meant the program was overly dependent on a single individual and the national office was unable to do succession planning.

It is also clear from the research conducted for this report that Reclink Australia State and Territory managers are working alone in what are often challenging environments and interacting with clients that often have mental health or behavioural issues that make them difficult to deal with. By way of example, the ACT manager works with people living in high density housing, an environment that can be dangerous, for the residents and those visiting. The ACT manager works alone as the sole Reclink Australia staff member, which means that he is both very valuable to the organisation and well as vulnerable to the pressures of the job and the daily challenges of the environment in which he works.

RECOMMENDATION 6

Reclink Australia should be funded at a level which allows for long-term job security for State and Territory managers

RECOMMENDATION 7

Reclink Australia should be funded at a level that allows for the employment of more than one staff member in each State and Territory, thereby reducing single operator stresses and facilitating improved job performance and satisfaction

Future Research

As previously noted, Reclink Australia participants are often experiencing severe disadvantage. As such, at the beginning of this research a deliberate decision was made to interview participants in order to establish a base of qualitative research that could inform future research designs. Furthermore, it was decided that research participants would not be required to complete quantitative surveys or questionnaires prior to their initial participation with Reclink Australia, as many Reclink Australia participants spend a considerable amount of time filling out forms for agencies and government departments and engaging in 'compliance' activities. It was also the belief of Reclink Australia staff and agency workers that the requirement to complete a pre-activity survey might discourage them from participating or lessen their enjoyment. These caveats notwithstanding, it is important that future research related to the efficacy of programs such as those offered by Reclink Australia aim to collect more robust longitudinal or pre and post test data. This data would ideally allow researchers to more clearly distinguish Reclink Australia's contribution to positive participant outcomes compared to other social service providers. It should be noted that this is a complex task, but is worth pursuing in the context of establishing with greater clarity the role of sport, recreation and leisure in improving the lives of severely disadvantaged Australians. In addition, it is also clear that it is difficult to conduct a true cost-benefit analysis of programs and services such as those provided by organisations such as Reclink Australia. Where possible, it may be useful to attempt to quantify the contribution of Reclink Australia programs and services to a range of outcomes or benefits acquired by participants, thereby enabling at least a basic analysis of the return on investment made by federal and state governments.

RECOMMENDATION 8

Future research into the Reclink Australia programs should focus on providing robust longitudinal data that tracks participants from the beginning of their participation, where possible, in order to identify the discrete effect of Reclink Australia programs, thereby facilitating the possibility of an economic analysis of the contribution of Reclink Australia programs.

Report Structure

This Report is structured around five main sections:

1. An introduction to the research, a brief context for the connection between leisure and disadvantage and an outline of the literature pertinent to the project;
2. The methods used to undertake the research – agency survey, agency interviews and participant interviews;
3. The research findings – agency survey, agency interviews and participant interviews. Three ‘case studies’ are presented as part of the findings related to participants – Transformational Links, High Density Housing and Prison Programs;
4. Conclusions;
5. Life stories of Reclink participants.

It should be noted that the primary aim of the research project was to examine the impact of Reclink Australia programs and activities on the lives of its participants. With this in mind, the method and findings related to the agency worker survey and the agency worker interviews should be regarded as context for the overall project. As such, the findings related to these two components of the research are presented prior to the findings related to Reclink Australia participants and their short life histories that are presented at the end of this report.

Introduction

Reclink Australia's mission is to provide sport and arts programs to enhance the lives of people experiencing disadvantage. In targeting some of the community's most vulnerable and isolated people – those who experience mental illness, disability, homelessness, substance abuse issues, addictions, and social and economic hardship – Reclink Australia has facilitated cooperative partnerships with a network of 500 member agencies across Australia, which are committed to encouraging participation by a population group under-represented in sport, recreation and arts programs. Through a range of structured and informal programs and activities, Reclink Australia promotes and delivers health, social and economic benefits of physical activity, while also encouraging social engagement, to an otherwise largely inactive population group.

Anecdotal information collected by Reclink Australia since its formation indicated that participation in Reclink Australia funded and supported programs delivered a range of benefits for participants. However, this information was only anecdotal and was gathered in an ad hoc fashion, prompting a number of unanswered questions. First, it does not specify the exact nature of the benefits that have accrued. Second, it is unclear as to how the benefits have varied between different population cohorts. Finally, it is not clear that these benefits have been sustained over the longer term.

Setting the Context

Sport, social activity and the arts have always been integral to the effective functioning of Australian society. Despite globalised social and economic changes in recent times, these leisure-based activities have become crucially important social practices that not only provide an escape from the pressures and anxieties of work life, but also deliver many positive outcomes for both individuals and communities (Stebbins, 2008). However, leisure, like income, is not evenly spread or experienced across the population, and in the same way that people on high incomes can assemble a portfolio of wealth, these same people are also able to accumulate a disproportionate number of leisure experiences. But for people with a disadvantage, the opposite is the case. First and foremost, they are rarely able to earn high incomes, and moreover they are often the first to be unemployed when the economy falters. Second, their limited incomes rarely allow them to undertake quality leisure experiences as much of their time is expended managing their household budgets and working through the fallout from their precarious status. Third, the experience of mainstream experiences, including participation in leisure activities are often outside of the capacity of marginalised groups, resulting in social exclusion (Larsen, 2003)

Social exclusion is a multi-faceted problem, a point that was extensively examined by Wolff and de Shalit (2007), who identified a range of social exclusion indicators. These indicators were built on the foundation of an earlier analysis by Nussbaum (2000). In applying these indicators to the socially excluded, Nussbaum developed a list of basic capabilities – or substantive freedoms, as they are sometimes called – that all of society have both the right to experience, and the right to demand from their government. These rights and freedoms are listed below:

- **Life:** Being able to live to the end of a human life of normal length; not dying prematurely.
- **Bodily health:** Being able to have good health, including reproductive health and adequate nourishment and shelter.
- **Bodily integrity:** Being able to move freely from place to place, safe from physical and sexual assault. Having opportunities for sexual satisfaction and for choice in matters of reproduction.
- **Senses, imagination and thought:** Being able to use the senses to imagine, think and reason, and to do these things in a way informed and cultivated by an adequate education; freedom of expression.
- **Emotions:** Being able to have attachments to things and persons outside ourselves; not having one's emotional developing blighted by overwhelming fear and anxiety' or by traumatic events of abuse or neglect.
- **Practical reason:** Being able to form a conception of the good and to engage in critical reflection about the planning of one's own life.
- **Affiliation:** Being able to live for and in relation to others, to recognise and show concern for other human beings, and to engage in various forms of social interaction.
- **Other species:** Being able to live with concern for and in relation to animals, plants, and the world of nature.
- **Play:** Being able to laugh, to play, and to enjoy recreational activities.
- **Control over one's environment:** Being able to participate effectively in political choices that govern one's life.
- **Being able to express one's relations to others:** Not being prevented by social or legal means from expressing one's affiliation with others.
- **Obedience to the law:** Being sufficiently endowed with respect to basic capabilities such that one does not need to break the law in order to provide for the basic needs for oneself and one's family.
- **Understanding the law:** Having an understanding of the rules which govern society, what justifies these rules and why they exist.

- **Recognition:** Having one's values and identity be seen as legitimate and worthy of respect by others.

Under the substantive-freedoms approach, disadvantage is viewed as a restriction of one or more of the above capabilities. Consequently, the fewer the capabilities possessed by individuals, the greater their level of disadvantage. At the same time, disadvantage is not a rigid and fixed concept. As noted by Larsen (2003):

a considerable part of the population during the life course moves in and out of inclusion and exclusion, but ... being excluded at one point in time strongly increases the risk of being excluded at another point in time; (and) that the death rate is considerably higher among the excluded than among the included (p. 2).

It also needs to be noted that disadvantage is not only socially induced, but also economically shaped. Take for example the current economic position of Australia. While society is experiencing a modest increase in economic growth and average levels of income (ABS, 2013), there is little evidence that the benefits arising from these trends are distributed equitably. Neither is there much evidence to suggest that people experiencing disadvantage are being included in the expanding leisure opportunities available to those in full-time work and earning good incomes. At the same time, there are indicators which suggest that leisure is being democratised, albeit in small and localised ways. For instance, the expansion of municipal skateboard parks has enabled teenagers, especially those from poor households, to participate in physically challenging and creative activities in a low-cost environment.

Previous Research

It is often claimed that sport is social glue, which serves to cohere, build and strengthen communities, as well as improve the lives of individual participants, but these propositions, which underpin broader arguments about sport's impact, are largely untested. Skille (2007: 367-368) made similar observations, noting that there is a general belief in sport's potential for good, but that a range of scholars have been sceptical of the blind faith of policy makers, referring to 'the lack of evidence for the causal link between sport participation and the societal benefits of it'. Sport and sport organisations are often identified as important community nodes in the creation and maintenance of social benefits and outcomes by politicians, policy makers and advocates of sport. These benefits, which theoretically originate in community sport organisations, are often aggregated across entire communities: capacity building; the reduction of crime and youth delinquency; empowerment of disadvantaged groups; improvements in confidence and self-esteem; and an increase in social integration and co-operation (Long and Sanderson, 2001). As Coalter (2007) has argued, however, evidence for sport's role in facilitating social outcomes is undermined by both conceptual and methodological weaknesses and little or no consideration of sufficient conditions.

In discussing the role of sport, recreation and leisure, Coalter (2007) outlined a late twentieth century history of sport policy in the British government, including an evaluation of the 1975 White Paper *Sport and Recreation*. This report is credited with democratising public leisure, developing policies of positive discrimination, promoting recreation as welfare, as well as fostering the idea that participation leads to collective benefits such as improved health and reduced crime. Coulter (2007) identified that this policy was followed by the Action Sport 1981 government program, which he claimed "can be regarded as the forerunner of many subsequent sports development projects... The overall aim of Action Sport was to demonstrate that leadership can develop positive attitudes to sport and recreation and increase participation" (p. 11).

In the same vein, the Scottish Office (1999 in Coulter, 2007, p.15) stated that:

...[a]rts, sport and leisure activities... have a role to play in countering social exclusion. They can help to increase the self-esteem of individuals; build community spirit; increase social interaction; improve health and fitness; create employment and give young people purposeful activity, reducing the temptation to anti-social behaviour (p.22).

By 1999 the British Government's Policy Action Group's (DCMS, 1999 in Coalter, 2007 p. 17) action plan was for both sport and the arts and it declared that:

...[p]articipation in the arts and sport has a beneficial social impact. Arts and sport are inclusive and can contribute to neighbourhood renewal. They can build confidence and encourage strong community groups. However, these benefits are frequently overlooked both by some providers of arts and sports facilities and programmes and by those involved in area regeneration programmes (p. 5).

This policy activity in the UK was followed shortly thereafter in Australia by the Australian Sports Commission's (2006 in Coalter, 2007 p. 18) assertion in *The Case for Sport in Australia*, that:

...the importance of sport as a means to achieve wider social, health, economic, and environmental outcomes has been increasingly recognised by the Australian Government and others over recent years (p. 3).

The case for sport's role and benefits have also been advocated in the United Nation's (UN) *Sport for Peace and Development movement*, where sport has been tasked with promoting education, health, development and peace and as a tool to assist in achieving the Millennium Development Goals (MDG) (UNOSDP, 2012). A similar program is the Right to Play global humanitarian not-for-profit organisation which uses playing sports and playing games to educate and empower children and communities facing adversity and disadvantage

(Right to Play, 2008). Spin offs from these movements include evidence found in the review of the literature Kidd (2007) conducted into the use of sport to:

1. Foster child and youth development and education
2. Achieve health objectives
3. Promote gender equity
4. Foster inclusion, health and well-being of people with disabilities
5. Foster social cohesion, prevent and reduce conflict and build peace (p.3).

Kidd (2007: 5) highlighted findings which are congruent with the conclusions reached in this Reclink Australia Report about its endeavours to provide sporting, social and arts activities to enhance the lives of people experiencing disadvantage in Australia. Findings from Kidd's literature review demonstrate that, under the right conditions, sport has the potential to contribute to development and social issues, including the following:

- Regular participation in sport and physical activity enhances physical health;
- Sport and physical activity may positively affect self-esteem and self-worth;
- Sport has the potential to positively influence social integration and inclusion of people with disabilities;
- Well-designed sport programs offer important opportunities for leadership development, and personal, and professional growth;
- Sport and play may have a significant role to play in the life of children... promote physical well-being, combat discrimination, build confidence and a sense of security, as well as play an important role in the healing and rehabilitation process for all children affected by crisis, discrimination and marginalisation.

Similarly, Coalter (2007) highlighted some of the claimed potential benefits of participation in sport as being physical fitness and improved health; improved mental health and psychological well-being, leading to the reduction of anxiety and stress; personality development via improved self-concept, physical and global self-esteem / confident and increased locus of control (p.19).

Closer to home, a study by Sherry (2010) on marginalised groups participating in the Homeless World Cup found that "[p]articipants identified a feeling of social connectedness... opportunity to set goals for themselves and commit to the achievement of these goals" p.66). Sherry (2010) concluded that sport participation can "provide opportunities for people to be active and accepted members of the community" (p.68). She additionally found that in supplementing the sense of pride that comes from being a member of a sports team, the experience can also generate "economic and cultural capital through more stable housing, employment and study" (p.68).

Method

Data for this research project was collected from three sources:

1. An online survey was conducted with agencies participating in Reclink Australia
2. Semi-structured interviews with Agency workers
3. Semi-structured interviews with participants of Reclink Australia activities.

Details of each of the three data collection methods are provided in the pages that follow.

Agency Online Survey

An online survey, with quantitative and qualitative questions was conducted with Reclink Australia agencies in 2009. The quantitative questions sought to establish how long the agency had been a member of Reclink Australia; whether the agencies had sport and recreation budgets; whether the agencies had sport and recreation trained staff and whether the agencies were providers or users of Reclink Australia activities. The qualitative questions sought to elicit feedback on various aspects of the Reclink-agency relationship, as well as understand some of the challenges or barriers faced by organisations in becoming a member of or engaging with Reclink Australia activities. An invitation was sent by Reclink Australia to partner agencies via email, inviting them to participate by completing an online anonymous survey.

64 individuals completed the online survey; 63 of these completed the quantitative questions; between 42 and 63 completed the qualitative questions (in other words some questions were answered by more respondents than others – responding to each and every question was compulsory).

SURVEY QUESTIONS FOR AGENCIES

1. How long has your organisation been a member of Reclink?
2. What is the annual sport and recreation budget of your organisation (not counting the funding support provided by Reclink)?
3. How many recreation trained/qualified staff does your organisation have?
4. What is your agency's level of involvement with Reclink?
5. Was there any resistance within your organisation in terms of joining Reclink or engaging in Reclink programs? If there was, could explain why?
6. Could you provide some examples of how Reclink programs have transformed the lives of your organisation's participants/clients?
7. How could Reclink improve its services for your agency?
8. How could Reclink network meetings be improved?
9. How could the process by which Reclink activities are suggested be improved?
10. Do you have any other comments/feedback regarding Reclink that you think would be useful in improving Reclink services and programs?

Semi-Structured In-Depth Interviews with Agency Workers

Semi-structured in-depth interviews were conducted with agency workers during 2010 and 2012. In total, 60 interviews were conducted. Reclink has established and facilitated partnerships with 500 member agencies nationwide. Member agencies were invited to participate and provide feedback regarding various aspects of their relationship with Reclink, as a component of the research and evaluation process. Interviewees were sourced at Reclink interagency network meetings and at various Reclink supported sports and recreational activities. Each interview lasted on average forty-five minutes, including an interview briefing. These interviews allowed the research team to probe themes that were revealed during the agency online survey as well as informal communication with Reclink staff and agency workers.

Reclink Australia has formed partnerships with agencies from a diverse background of welfare service providers. Five distinct categories of welfare service providers were identified among the agencies involved in the research and evaluation process:

- Drug and rehabilitation;
- Disability;
- Crisis accommodation;
- Community support;
- Mental health support services.

The participating agencies had all been members of Reclink Australia for various lengths of time, ranging from a minimum of twelve months to upward and over of ten years.

INTERVIEW QUESTIONS FOR AGENCY WORKERS

The following questions formed the interview schedule, based largely on the online survey:

1. How long has your organisation been a member of Reclink?
2. What is the sport and recreation budget of your organisation (not counting the services provided by Reclink)?
3. Does your organisation have any recreation trained staff? If so, how many and what qualifications do they have?
4. Was it a difficult decision for your organisation to join Reclink? Why?
5. What is your level of involvement with Reclink?
6. What would encourage you to be become more involved with Reclink?
7. How could Reclink improve its services and organisation?
8. How could Reclink network meetings be improved?
9. How could the process by which new Reclink activities are suggested be improved?
10. Could you give some examples of how Reclink programs have transformed the lives of participants/clients that your agency/organisation has been responsible for?
11. Was there any resistance within your organisation in terms of joining Reclink or engaging in Reclink programs? Why?
12. Do you have any other comments/feedback regarding Reclink that you think would be useful in improving Reclink services and programs?

Semi-Structured Interviews with Participants

Semi-structured interviews with people who were active participants in Reclink Australia funded or supported sport, recreation and arts programs were the primary sources of data. The project collected and analysed data on the perceptions of these individuals about the impact of Reclink Australia funded and supported programs on their lives. Semi-structured interview schedules were used for the interviews to ensure consistency and minimise interviewer bias in the data collection procedures. Each interview was tape-recorded, transcribed and coded.

Interviewees were sourced through either Reclink Australia or its network members (agencies). Due to the nature of Reclink Australia programs and the nature of the participants, the sampling method was a mixture of both random and purposive sampling, with an element of self-selection that enabled the research team to access a large number of Reclink Australia participants willing to talk about their experiences prior to and after participating in Reclink Australia programs.

The researcher made initial contact with either Reclink Australia or agency staff and arranged to visit a Reclink Australia funded or supported activity. If the person running the activity was not a Reclink Australia staff member then the researcher explained the purpose of the research, the way in which it would be conducted and what would be expected of participants. At the activity, the researcher was introduced to the entire group of participants at the beginning of an activity, then introduced himself to the entire group, giving a brief outline of the reasons he was there and the purpose of the research. The interviewer then set up at a location that was visible to the participants but where it did not compromise the activity or the enjoyment of participants. Participants were free to approach the interviewer if they were prepared to be interviewed and when they felt comfortable. Unsurprisingly, the first interview was the most difficult to attract, but once the first interview was conducted, other participants were more willing to be interviewed and gave their time freely.

At the commencement of each interview, the researcher introduced themselves again and explained the purpose and procedures of the interview. The interviewees were asked to read and sign an ethical clearance/informed consent form. It should be noted that the interviewer often spent as much time interviewing as briefing the participant, explaining the purpose of the research and answering questions the participant had after reading the participant information sheet. None of the participants were reluctant to be interviewed or sought to withhold information from the researcher. This was attributed to the researcher's non-confrontational method and the voluntary nature of the interviews.

The researcher adopted a different approach to the recruitment and selection of interviewees where the Reclink program was conducted within a prison, where the protocols were far more rigid. In these instances participants volunteered for the study prior to the researcher arriving at the prison to conduct the interview; the interviewer was able to brief each participant individually about the nature and purpose of the research, as well as obtain informed consent.

In addition, the Canberra site visit posed several difficulties in the data collection process, unlike other sites, such as Tasmania, Victoria, Perth, Northern Territory, and Queensland. First, in contrast to other Reclink Australia sites, Canberra participants were not engaged with agencies who would attend the activities with the participants. Instead, individuals would independently make their way to each of the activities. The nature of this arrangement meant that some participants were difficult to locate for interview outside the time of the activities or they did not present at the activities at all. Second, many participants were still dealing with substance abuse issues, predominately drug and alcohol related. The research team was required to assess each participant that presented for an interview and determine their ability to participate in the research. In some cases participants were revisited at a later time or they were not interviewed. Furthermore, the safety of the research team needed to be assessed at several locations involving high density housing. These sites were evaluated on a daily and in some cases on an hourly basis as to the suitability of collecting data. The issues related to

criminal activity, drug paraphernalia exposed at sites and/or inebriated and drug affected individuals within the housing complexes. This was a process that was conducted in conjunction with the Reclink Australia project manager.

INTERVIEW QUESTIONS

The following questions formed the semi-structured interview schedule:

1. When did you first participate in a Reclink activity?
2. Have you been participating in Reclink activities ever since?
3. How often do you participate in a Reclink activity?
4. How did you find out about Reclink?
5. Can you tell me about the variety of Reclink activities you have participated in?
6. Can you tell me about your life and living situation prior to finding out about Reclink?
7. What was your health like before you attended a Reclink activity?
8. Can you tell me about how you spend your time when you are not participating in a Reclink activity? What would an average day or week be like for you?
9. What do you get out of participating in Reclink activities? Were these things you expected?
10. Have you made any friends while participating in activities with Reclink?
11. Have you gained access to housing or employment as a result of your association with Reclink?
12. What is your health like now?
13. Do you participate in any sport or recreation activities not run by Reclink?
14. What would you like to be doing in a year from now? How about five years from now?
15. How long do you think Reclink will be a part of your life?
16. Can you suggest anything that Reclink could do better in organising its activities?
17. Is there anything else you would like to tell me about Reclink?

Using the semi-structured interview schedule, the interviewer was able to ask each interviewee the majority of the questions, although not always in the sequence listed. This flexibility was important, both to ensure the interviewee was comfortable and to elicit relevant and valuable information.

In the case of the 'Transformational Links' program, the following interview schedule was used:

1. When you hear the name Reclink what do you think of?
2. When did you first participate in a Reclink activity?
 - a. Are you still participating in any Reclink activities?
 - b. When did you cease participation?
3. Can you tell me about your life and living situation prior to finding out about Reclink?
 - a. Growing up, Education, Employment
4. Have you had any problems with your health in your life?
5. If you picture the first time you walked into a Reclink program what did you feel?
6. What have you done within the Reclink program eg. Types of Activities
7. What were some of the good and bad things that you have experienced in the activities?

8. Having participated in Reclink and their transformational links program, what has this involved for you?
9. What is your health like now in regards to previous mentioned issues?
 - a. Has Reclink activities been a catalyst for change?
10. Have you been introduced to people within Reclink and its organisation that you otherwise may have not met?
11. Do you currently participate in any sport or recreation activities not run by Reclink?
12. What do you see yourself doing in a year's time?
 - a. What would you like to be doing in a year from now?
13. Having gone through the Reclink experience have you taken anything away from it you still implement in your life?
14. Can you suggest anything that Reclink could do better in organising its activities?
15. Has there been any other catalyst for change in your life outside of Reclink?

A total of 274 interviews were conducted from 2010 to 2012 (represented in Table 1); interviews lasted on average 30 minutes, which included an interviewee briefing, with each interview audio-taped and transcribed. The transcripts for each interview were used to probe emergent themes in subsequent interviews. The data analysis employed qualitative procedures aimed at uncovering themes in the perceptions of interviewees regarding the impact of Reclink Australia supported and funded programs on their lives.

It should be noted that more than 274 interviews were conducted, but in some instances the researcher deemed that the participant who had volunteered was not able to give informed content, or that the mental health issues that the participant was experiencing were such that an interview was not possible within the confines of the project. In many of these cases the researcher had a chat with the participant about their experiences or whatever they wanted to talk about, so that the participant felt they had been heard and had contributed.

Table 1: Participant Interviews Conducted by State/Territory, 2010-2012

State / Territory	Participants
Tasmania	29
Victoria	101
Western Australia	29
Northern Territory	21
ACT	23
South Australia	24
Queensland	47
Total	274

Limitations

This study does not claim to present views that are fully representative (in a statistical sense) of the views of Reclink Australia participants or agency workers, particularly as there was an element of self-selection in the recruitment process, as detailed above. However, all care was taken by the researchers to ensure the data collection and analyses were not dominated by any particular group or type of participants.

Findings – The Agencies

Online Survey

As reported in the method section of this report, an invitation via email to participate in an online survey was distributed to Reclink Australia affiliated agencies in 2009. The purpose of this survey was to establish the type of agencies that were members of Reclink, the organisational capacity of these organisations in relation to the provision of sport and recreation services, how the agencies experience Reclink Australia programs and the agency workers' perceptions of the impact of Reclink Australia programs on the lives of their clients.

A total of 64 individuals completed the online survey, with 63 completing the quantitative questions and between 42-63 individuals completing the qualitative questions (some respondents chose not to answer some questions, which were not compulsory). In summary, agencies that participate in Reclink Australia programs and activities typically have been a member for less than five years (at the time of survey); have a limited sport and recreation budget, and have very few or no trained recreation staff. The majority of agencies send their clients to activities run by other agencies, rather than provide activities for other agencies. The majority of agencies experienced no resistance in joining Reclink Australia; believe that Reclink Australia programs enrich the lives of participants, particularly in terms of social health and self-esteem; and would like to see more activities offered. The following sections provide more details.

MEMBERSHIP DURATION

The majority of agencies are relatively new members of Reclink Australia, which is understandable given the history of the organisation; 68% of the agencies have been a member of Reclink Australia for four years or less, with 40% a member for one year or less; 32% of agencies have been a member of Reclink Australia for five years or more.

AGENCY SPORT AND RECREATION BUDGETS

The majority of agencies have very small sport and recreation budgets, which in part explains the attraction of the Reclink Australia programs; 62% of the agencies have an annual sport and recreation budget of \$1000 or less; 38% of the agencies have an annual sport and recreation budget of \$1000 or more. Significantly, a large proportion of Reclink Australia member agencies (35%) have a sport and recreation budget of \$100, which suggests that without Reclink Australia programs the clients of these organisations would have little or no access to sport and recreation through the agency.

AGENCY EXPERTISE

The majority of agencies have very few or no staff who are recreation trained/qualified, which is indicative of the focus of the agencies, the challenges in engaging these agencies in sport and recreation activities and the attraction of Reclink Australia programs and activities; 56% of the agencies have no staff who are recreation trained/qualified; 44% of the agencies have at least one staff member who is recreation trained/qualified, while 10% of the agencies have five or more staff who are recreation trained/qualified.

RECLINK AUSTRALIA INVOLVEMENT

The majority of agencies send their clients to Reclink Australia programs run by other agencies in their region; 68% of agencies send their clients to Reclink Australia programs run by other agencies in their region; 32% of agencies run Reclink programs for their clients and for other agencies.

RESISTANCE TO JOINING RECLINK AUSTRALIA

The vast majority of respondents reported that there was no resistance within their organisation to joining Reclink Australia. Some organisations reported that there was a natural fit between

what they did and the activities of Reclink Australia. Some other organisations reported that there was slight resistance at first, but this was overcome once the benefits of the Reclink Australia programs became evident. Those that indicated there was some resistance within their organisation reported that this was an issue of educating others within their organisations about the benefits of becoming a member. Other issues included funding (an organisation where funding was a problem was reluctant to join because Reclink Australia activities didn't directly relate to funding outcomes); work relevance (an agency employee working on Reclink Australia programs that fall outside the direct ambit of the employee's responsibility must convince management of the benefits); and ownership (Reclink Australia might brand ongoing agency activities as their own).

All of the agencies recognised that the commitment required of the agencies, as asked by Reclink Australia was minimal. A large number of agencies reported that for a nominal annual fee their organisation was able to increase their capacity to provide more sport and recreational opportunities for their clients. Several agencies stated that their partnership with Reclink Australia enabled them, for the first time, to offer such opportunities to benefit in their clients recovery process.

THE ROLE OF RECLINK AUSTRALIA PROGRAMS IN THE TRANSFORMATION OF PARTICIPANTS

It is important to note that almost all of the agencies were unwilling to claim that the Reclink Australia programs had 'transformed' the lives of participants, which is a reasonable position given the nature of the activities and the long-term nature of 'transformation', particularly in terms of issues such as well-being and mental health. Rather, agencies described the Reclink Australia programs as enriching the lives of participants and providing them with opportunities that they would not otherwise have access to. There were a number of key themes

that were evident in the agencies responses in relation to the role of Reclink Australia in the transformation of the lives of participants, which are briefly summarised below.

Social Integration

Agencies referred to the social engagement of participants, which included the following: creating a sense of belonging; making new friends; social rehabilitation; socialising with people outside their normal circle; re-engaging with the community; combating social isolation; having a sense of community; building positive relationships with people; and feeling accepted.

Self Esteem

Agencies cited the impact of Reclink Australia programs on the self-esteem and self-worth of clients. Several referred to the simple act of recognising participation that resulted in a higher level of self-esteem.

Physical activity

Agencies were able to identify that their clients received physical and health benefits from participating in Reclink Australia programs. Although an instrumental component of the Reclink Australia activities, this benefit, despite being very difficult to measure or quantify, should not be underestimated.

Cost/Opportunity

Agencies referred to the Reclink Australia programs providing their clients with opportunities they would never have had otherwise, in large part because of the cost. In this respect Reclink Australia activities are often a 'first' for participants at a number of levels.

Findings – The Agency Workers

Agency Worker Interviews

As reported in the method section of this report, semi-structured in-depth interviews were conducted with agency workers during the project. In total, 60 interviews were conducted. An analysis of the interview data with agency workers revealed key issues and emergent themes facing both Reclink Australia and the agencies in maintaining their partnership for both the present and in the future. The issues and emergent themes are outlined below in the next sections.

Limited Resources

The first issue was the limited resources reported by the agencies, which illustrated the difficulties that they each face in providing the best possible service to their participants. Whilst this was a common barrier, all agencies acknowledged the importance of maintaining the partnership between Reclink Australia and their organisation in order to be able to meet the needs of their participants.

Many agencies reported the serious dilemma of being inadequately resourced and therefore not being able to provide extracurricular services to their clients outside of their core business activities. The term “under resourced” was often reported as part of the interviews with agency workers, linked particularly to agencies that have limited funding and personnel within their organisations.

A common theme across three quarters of all of the agencies showed they did not have a specific budget for sport and / or recreation within their organisation. These agencies further reported that because of limited operational funding, it was seen as unrealistic to have standalone allocated budgets for such activities. It was reported by many of the agencies that no funding was allocated to programs involving sport or recreation from their overall operational budget. Several organisations identified having a budget specifically for sport and / or recreational activities, but reported that the allocated funding was too small for its purpose.

These organisations confirmed that their budget allocation was between \$1000 and \$5000 a year. A small number of agencies reported having a specific budget of more than \$10,000 for sport and / or recreational activities.

The agencies that identified having limited or no funding for sport and / or recreation did not have any identified sport and / or recreational trained staff within their organisations. Many of these agencies reported that having a specialised staff member in this area would be very uncommon because of the nature and type of programs offered to clients. At least half of the agencies stated that although they provided sport and / or recreational opportunities for their clients where possible and appropriate; these activities were generally organised by staff that are predominately from a Health Science trained background. A very small number of agencies could identify a staff member specifically trained within sport and recreation; this qualification was at a tertiary level, within the field of Human Movement. These staff were in organisations with a specific sport/recreation budget.

Communication Processes

The second issue cited as needing attention was the need for improved communication processes with Reclink Australia. Agency workers believed if communication was strengthened between Reclink Australia and the agencies that this would encourage a greater level of involvement in Reclink Australia supported activities.

Organisational Involvement and Understanding

Although Reclink Australia has established a partnership between itself and each agency, the level of involvement from agencies varied considerably. Using the research data gathered from the agency workers, the level of involvement from each agency can be divided into three tiers. Each of these three tiers are expanded on below.

Agencies in Tier One have had participants engaged in a Reclink Australia supported sport or recreational activity within the last twelve

months. For some of the agencies this was the entirety of their involvement with Reclink Australia. They did not attend or rarely attended network meetings, rarely accessed the Reclink Australia website for activity information, and did not provide any leadership in coordinating an activity on behalf of Reclink Australia. Without prompting from the researcher, a number of workers from these agencies defended this position, by reiterating that due to limited resources within their organisation it is difficult to become any more involved. Workers from three agencies claimed that they were unaware that network meetings were conducted by Reclink Australia. In isolated cases the workers said that agencies were resigned to their present level of involvement.

In comparison, Tier Two agencies had a vested interest in their partnership with Reclink Australia beyond client participation. A nominated person from each of the agencies in this category consistently attended the Reclink Australia network meetings and the agency would also access the Reclink Australia website regularly. However, agency workers reported that these agencies fell short of being involved in organising or coordinating any activities. The agencies in this category found that attending network bi-monthly meetings to be an efficient way of being kept up to date with Reclink Australia activity. They also reported that the Reclink Australia website was an efficient way to observe key dates and locations regarding upcoming activities. The only consistent reason suggested by participants as to why agencies do not participate further is linked to a perception that, if an agency worker took on more responsibility, that it would greatly increase their personal work load – beyond what they deemed manageable – and that they would not be able to be financially compensated.

Agencies categorised as Tier Three encompassed agencies that Reclink Australia purports to actively engage and promote. These demonstrate active leadership in the development and running of Reclink Australia supported sport and recreational activities.

Workers from agencies within this group reported a wide range of responses referring to why they were more inclined to be involved, although no clear consensus emerged amongst the agencies as the reason for this tendency. Some responses focused on the agency worker's passion for their job and / or sport and recreation, while other agency workers stated that previous involvement with Reclink Australia had contributed to their current level of participation level.

There was no evident correlation between the sport and recreational budget of agencies and their likelihood of being linked (or not linked) to any particular tier.

However, it was apparent that the level of involvement that agencies had with Reclink Australia often related to the level of their knowledge regarding Reclink Australia and how its community model operates.

Reclink Australia Impact and Benefits

A wide range of examples were provided by each agency worker describing, from their perspective, how participants have benefited from attending Reclink activities. Although many different personal participant stories were shared, it was clear that a similarity existed in the types of outcomes that agency workers had witnessed. Many discussed the noticeable positive changes in the reduction of stress and anxiety levels combined with the increased level of confidence and self-esteem displayed by participants actively involved in Reclink Australia activities. Many believed that participants have also had positive physical benefits, including weight loss and increased cardio vascular fitness. Whilst discussing the associated benefits for participants many agency workers described the concept of participants being more connected to community. The workers stated that many friendships had formed between participants and that for some participants the social interaction at Reclink Australia activities was the only form of contact had with other people. Several reported that as a result of the positive experiences with

Reclink Australia, participants were becoming more independent. They reported that in some cases participants have engaged themselves in mainstream activities, joining a variety of community groups and sporting clubs.

A conclusion that can be drawn across the agencies is that involvement in Reclink Australia activity has greatly improved the quality of life of participants on some level. It was also highlighted by workers from the majority of the agencies that they believed that their participants would not be as advanced in their rehabilitation without the opportunities that Reclink Australia had provided them. Others went further suggesting that perhaps without Reclink Australia's support they would not be able to meet the needs of their clients.

Agency workers suggested as a result of such positive outcomes participants also became more engaged with the wider community, enhanced their sociability, and formed friendships. In short, the overwhelming response from agency workers suggests that participation within activities such as those provided by Reclink Australia is synonymous to an individual having positive health and wellbeing outcomes. This is congruent with the benefits participants report when they are involved in Reclink Australia supported sport and recreational activities: that is, reduction in stress and anxiety levels, and increased confidence and self-esteem. These claims are examined further in the next section.

Findings – The Participants

The Process

Although not directly relevant to the aims of the research project, it is important at the outset to note that interviewees welcomed the opportunity to talk about their lives and life history, as well as their experiences with Reclink Australia. Most remarked at the conclusion of the interview that it was “nice” to be asked these questions, an indication perhaps that they were in an increasingly positive frame of mind and were willing to share their story. An important caveat is that because interviewees self-selected (as described in the method section of this report), they were perhaps more inclined to have a positive story to tell about their experiences with Reclink Australia, and therefore more willing to be interviewed.

The answers interviewees gave to the interviewer’s questions were often very short in the first instance, despite the fact the questions were intentionally open ended. At times, it required considerable persistence on the part of the interviewer to tease out more in-depth responses. For example, upon being asked the question ‘how was your health prior to participating in a Reclink Australia program’, most interviewees answered something like ‘Yeah, good’. However, when probed further about their physical and mental health at this time, interviewees were more willing to move beyond their initial answer and often admitted to having very poor health in one of the two areas, particularly mental health.

Despite many of the interviewees experiencing significant disadvantage, they often struggled to identify or articulate areas of difficulty in their lives. For example, a person who was homeless might have noted that their life was “fine” or “good”, but this was an absolute judgement, rather than a relative judgement compared to someone who might be considered well off. Interviewees often needed time to have questions explained and many interviewees struggled with somewhat simple terms and concepts. There are a number of reasons for

this, which are not explicitly pertinent to the reporting of the findings. Rather, the difficulty in interviewing people who had experienced significant and often traumatic disadvantage is the context in which the findings of this report should be interpreted. It should be noted, as discussed in more detail in the method section of this report, that the interviewer/s endeavoured to explain the questions and the terms to the satisfaction of the interviewee.

The Participants

The majority of the interviewees who took part in the study had spent less than five years in a Reclink Australia funded or supported program, whereas a small but significant number of interviewees had been long term users of Reclink Australia programs and services. However, an important finding of the research was that many of the interviewees were not sure whether they had or were participating in a Reclink Australia funded or supported activity. Furthermore, some of the interviewees who took part in the study did not know what Reclink Australia was. This may be because participants are focussed on the activity itself, rather than the provision of the activity. On the other hand, many of the interviewees who took part in the study were very clear about what Reclink Australia was and which activities it supported, but credited Reclink Australia with either saving their lives or being the catalyst for new behaviours, lifestyle or outlook.

LIFE PRIOR TO RECLINK AUSTRALIA

Although the task of talking about their lives prior to Reclink was difficult and challenging for some interviewees, most were prepared to talk openly about the disadvantage they had suffered throughout their lives and the situation they found themselves in prior to participating in Reclink Australia programs and activities. The types of disadvantage experienced by the interviewees who took part in the study are in part a reflection of the people that Reclink

Australia seeks to engage with. The following is an indicative list of disadvantage that interviewees reported:

- Social isolation
- Drug addiction
- Mental health issues including schizophrenia and depression
- A lack of independence, often due to mental issues, which was in some cases drug induced
- Problems with the law, including incarceration and repeat offending
- Sexual abuse or rape
- Homelessness
- Unsatisfactory living arrangements (which included both the quality of the accommodation as well as the social or familial interactions)
- Broken relationships

Many of these issues are inter-related, as indicated by the following comment from one of the interviewees:

'Oh, my living conditions were absolutely terrible, you know I used to live in me car ... [because of the] family breakdown we had five years ago. Made me turn to drugs and alcohol ... yeah, that was pretty bad time for about two years. I used to drink at seven o'clock in the morning ... [and] ... just go all day'

Approximately half the interviewees answered that their health was good prior to engaging in Reclink Australia activities, yet it was subsequently revealed in most of the interviews that this was not in fact the case. Many of the interviewees were very comfortable talking about what had happened to them in the sense of their living situation, but found it difficult to focus specifically on their health. It was also evident that interviewees were in a better situation at the time of interview than they had been previously and found it difficult to reflect on their previous health situation.

The remaining interviewees who took part in the study noted that their health was not good. Almost all thought their physical health was good, whereas their mental health was a concern.

Reclink Australia Participation

Most of the interviewees found out about Reclink Australia or one of the activities it offers, supports or funds through a case worker or agency they had accessed in the past. A small proportion of those interviewed found out about Reclink Australia and its activities through other participants.

Participation in Reclink Australia activities, for the vast majority of the interviewees who took part in the research, is regular; every interviewee who took part in the study was engaged in a Reclink Australia activity at least once per week. Approximately half the interviewees participate in multiple Reclink Australia activities. This is mainly due to the seasonality of the activities, such as when a participant plays football during winter and cricket during summer. In a small number of cases a Reclink Australia participant might be engaged in one sport and one arts activity. Very few participate in multiple sport activities concurrently. It is important to note that not many women participated in the sport activities; the largest proportion of female participants was at lawn bowls, where approximately 25% were female. By contrast, arts activities, such as dance, knitting and yoga were almost exclusively attended by females, with only one or two men participating. The choir activity was the only Reclink Australia activity within the study at which there is an even spread of men and women.

The Benefits of Participation

Reclink Australia was found to be a catalyst for what can be described as a better life for many of the interviewees who took part in the study. For example, approximately one-third of the interviewees felt they had pieced their life back to normality through participating in Reclink Australia funded or supported programs. For

approximately half of this group, this meant not thinking about suicide (it is important to note, however, that this is only those interviewees who actually used the word suicide in describing their lives). Some of the responses to the question about their health after participating in Reclink Australia were as follows: 'I'm alive'; 'I don't think about suicide'; 'I don't use heroin'; 'I don't use speed'; 'it means life'. For many of the interviewees who took part in the study, participating in a Reclink Australia activity was an important turning point in their lives. Interviewees reported many positive impacts including that their attendance at Reclink Australia activities had helped to:

- Establish a positive support network
- Engage in important social interaction
- Build their confidence to participate in community activities
- Seek out treatment for drug and alcohol problems
- Engage in meaningful activity.

All these activities can have far-reaching positive impacts on their individual, family and community life – including a possible prophylactic influence on guarding or preventing against social isolation, further drug use, and conceivably even contribute to better outcomes for the management of their physical and mental disadvantage. In short, Reclink Australia participants experienced “social inclusion” and the positive benefits this brings. Each of these features is outlined in more detail below.

Support Network

One of the greatest benefits from participating in Reclink Australia activities appears to be regular access to a support network. In practical terms this means that people suffering severe disadvantage are connected to people with similar situations and backgrounds, which in turn means that there is understanding and support from people who will stick with them through difficult times. Many of the interviewees don't have social interactions in their lives and being part of Reclink Australia funded or supported activities means they are exposed

to a community of people; they now feel part of broader community of people that means something and has a purpose.

Social Interaction

Being part of a community of people who have had similar experiences or difficulties also means that the participants don't feel like they have to explain themselves. Rather, they are able to interact socially with people who intuitively know what it is like to be having a 'bad day'. For those people who participated in the research, the majority of their friends have been made through Reclink Australia and its activities. Furthermore, the interviewees viewed these friendships as positive, far more so than the friendships they had developed outside the Reclink context. Previous friendships were viewed as negative, a reminder or legacy of a previous lifestyle. An additional social benefit of Reclink Australia activities is that participants and their agency workers spend time together doing activities that are pleasurable, which in turn results in them forming a stronger client-worker relationship.

Confidence to Contribute to and Claim a Stake in the Community

The majority of interviewees reported that their self-esteem and confidence had been boosted by participating in Reclink Australia activities and that they were now participating in non-Reclink activities of their own volition. A significant number of the study's interviewees had subsequently sought out and found other agencies that ran sporting events not supported or funded by Reclink far-reaching. In this respect Reclink Australia's far-reaching activities were the catalyst for increased and additional social activity. This was particularly true of the women in the study who were experiencing social isolation and are now volunteering and contributing to the community.

Seek Out Treatment for Drug and Alcohol Problems

It was clear from the research that participation in Reclink Australia activities was also a catalyst for addressing drug problems. The interviewees who took part in the research claimed they were able to wean themselves off drugs and credited Reclink Australia with playing an important part

in this process. A small minority of interviewees who took part in the study indicated that they were still using drugs, however, in a significantly reduced frequency. Smoking and alcohol use are still prevalent among the interviewees involved in the study.

Engage in Meaningful Activity

Approximately a third of the interviewees who took part in the research hold part-time jobs, while the other two-thirds are not working and do not appear to be seeking employment. This is perhaps not an indication of Reclink Australia's ability to integrate its participants into mainstream society through employment, but rather that a large proportion of Reclink Australia participants suffer from significant mental issues, which in turn brings in to question their ability to participate in the workforce. However, a significant proportion of those interviewed appear to be so comfortable with what their agency provides (and the Reclink Australia programs that form part of the agency activities) that they do not see seeking employment as a priority. Many of these people are on a pension and are supported by the government.

The Future

All interviewees struggled to answer the questions that related to what they would like to be doing one or five years from now. Indeed, many of the interviewees appeared embarrassed by this question, as if they had never been asked a question like this before, perhaps because many of the people interviewed had or were experiencing disadvantage at such a level that survival was their only priority. In this sense the timeframes of one or five years appear disconnected with their day-to-day reality; the interviewees live in the moment, in the 'here and now'. As such, the answers that interviewees gave to questions that related to what they would like to be doing in the future were at either end of the continuum, either very simple or else outlandish, with very little in between.

Almost all interviewees were either sure that Reclink Australia would be part of their lives forever or else wished it would be. This can be read as an indication of both the affirmative and constructive impact and irrefutable influence Reclink Australia programs have on the lives of participants. However, it may also be interpreted as the sense of dependency that can be created by programs, especially for those with any impediment which restricts their ability to function physically, mentally, or socially – such as those who typically participate in Reclink Australia activities. This is not to suggest that Reclink Australia participants don't develop other interests and move on from Reclink Australia – they do – but rather that participants have a high regard for Reclink Australia's role in the personal transformation they have undergone, and perhaps have the insight to be fearful that they may regress should Reclink Australia no longer be a part of their lives.

The following sections provide an examination of three 'case studies', as a way of exploring the variety of Reclink Australia activities in more detail. They confirm the findings presented above, but also provide additional contextual detail that is useful for understanding the work of Reclink Australia among specific cohorts and communities around Australia.

Case Studies

Transformational Links

The 'Transformational Links' program is one of Reclink's programs that targets either long-term Reclink participants or participants who have been identified as being able to benefit from additional help. These participants have received additional training or funding in the main to assist with their ongoing personal or professional development.

Interaction with Reclink

Most of the participants associated the organisation Reclink with having been given a second chance in life. The participants reported that their lives were better for having been involved in Reclink, to the point that many are now able to deal with the significant challenges in their life with more confidence and purpose. As such, the notion of Reclink providing them with a second chance is not a surprising finding.

Most of the interviewees had participated in Reclink programs for several years. This is consistent with the 'Transformational Links' program identifying long-term Reclink participants, or at least those people who had demonstrated through their Reclink participation that they would benefit from further assistance. It is important to note that for many of the interviewees their participation in Reclink programs is ongoing because they have transitioned from participating in Reclink programs to being employed by Reclink. For those that are not employed by Reclink, ceasing participation occurred because their lives became too busy with other activities – progression away from Reclink participation was not a conscious decision but rather than an organic occurrence.

It was clear from the interviews that some of the participants believe that their lives would not be 'OK' without Reclink. In this respect Reclink is the only thing in their lives that is keeping them well and for these participants their relationship with Reclink is one of dependence.

Life Prior to Reclink

Like most Reclink participants, the group of 'Transformational Links' participants had experienced a wide variety of disadvantage prior to be introduced to Reclink, such as drug abuse and addiction, homelessness, marginalisation as a refugee, marriage breakdown, depression, mental health problems and abusive relationships (physical and sexual, both men and women) – 'I don't think you get to Reclink just because you've had a bad day, you've probably had a bad decade'. For many of the participants, their lives prior to Reclink were beset by a variety of health problems that were the direct result of the disadvantage that they were facing.

Reclink Participation

Most of the interviewees reported that they were apprehensive prior to participating in a Reclink activity. In particular, they wondered whether people would want to know about their past. However, most of them said that once they were physically involved with an activity that they were solely engaged in the activity and their apprehension, anxiety and negativity ceased.

The participants interviewed as part of this research had participated in a variety of Reclink activities. Participants were generally involved in multiple programs; as such these participants can be considered 'heavy users' of Reclink programs, which in part explains why they may have been selected or approached to participate in what can be called 'Transformational Links'

The interviewees reported that the main benefits that arose from their participation were the development of friendships, camaraderie, a sense of achievement, and importantly a purpose in life:

It's made me a better person as in it's made me think about life, it's made me care about other people. It's brought me and a lot of people together as friends.

It's about a sense of belonging, it's about the feeling of self-worth, it's about being in a group of like-minded people that if you ... there's I suppose a way of explaining the environment of RecLink is when two people in the RecLink program talk to each other, some will say that this has gone on for them, and the other person will nod and say yeah, I know how you feel. And outside of RecLink, if I was to walk into a milk bar or even go see a psychiatrist or a psychologist or a doctor and say this is how I feel, you know they're not going to be able to turn around and say yeah I know how you feel because nine times out of 10 or 99 times out of 100, whatever way, you know that they can't physically feel what you've been through, where participants in RecLink, they've been there and done it

None of the participants had anything negative to report about their Reclink involvement, which is perhaps not surprising given the intensity of their involvement, the extra support they had received and that a large proportion of the interviewees are employed by Reclink. The following comment is an exemplar in terms of what participants saw was the role of Reclink:

Now normally you'd have to go out and do it all on your bloody own, with Reclink, mate, everything's handed to you, it's given to you on a platter, here have it, we want you to take it, we want you to play football, we want you to become a different person to what you are, you're depressed and your anxiety and your low self-esteem and the crap that's going on in your life we can change that. Here put on a pair of boots and see how good you feel after it and you do, you feel bloody marvellous.

The participants did, however, acknowledge that Reclink alone was not responsible for their recovery. Rather, the interviews revealed that Reclink is one organisation with a network of support providers and services, albeit an important one.

Most participants reported that their health was now a lot better than it had been, especially prior to Reclink, but were also quick to report that without Reclink they believed that that they would 'fall back' and that their health would worsen. Some of the participants wished that their health would remain the same or get better in the future, while others reported that in the future they would like to be in paid work, or doing what they are doing now (this was particularly true for those currently employed by Reclink).




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High Density Housing

In Canberra, Reclink Australia participants are almost exclusively located in high density housing; this was the basis of their involvement with Reclink Australia programs. As such, it was not always the case that participants were engaged in a process of change or improvement. Rather, Reclink Australia programs and activities are designed to ameliorate some of the negative effects of high density housing; engagement with these programs and activities may be the catalyst for change in some participants, but this is not necessarily the case.

The Participants

The interviewees can be categorised into two groups. First, the vast majority had been involved in a Reclink Australia activity for more than twelve months. Of these, a substantial proportion had been involved for more than two years. For many of these participants this long-term involvement was due to the ease of access to the community garden, which is located within the residential complex, as well as the fact that once the participants get granted community housing it is rare that they move. Other activities, such as the 'run, roll or walk', had long-term, but sporadic involvement because of the need to travel to the activity. Second, a small minority of participants access the programs infrequently; this infrequency is largely due to the participants dealing with substance abuse and addiction, which does not allow them to engage in an activity with any degree of consistency. There are no long-term Reclink Australia participants in Canberra, as there are in Victoria for example, because the Canberra program has been operating for a shorter period of time.

All of the participants interviewed as part of this study were clear about what Reclink Australia is and were particularly clear about the key role of the Canberra manager, Mark Ransome. When participants were asked an open-ended question at the end of the interview to solicit any further information that had not been covered previously, almost all interviewees took the opportunity to talk about Mark and in terms of how he had become a mentor and confidante to them. This appeared particularly important to those participants who were very young and it was revealed in the interviews that many had not had a solid or dependable adult in their lives. It was clear that the participants rely on Mark a great deal to solve day-to-day problems and look to Mark to gain assistance, in part because he is viewed by the participants as independent from ACT Housing and the police, and in part because they believe that he cares about them.

Life Prior to Reclink Australia

Although the task of talking about their lives prior to Reclink Australia was difficult and challenging for some of the interviewees, most were prepared to talk openly about the disadvantage they had suffered throughout their lives and the situation they found themselves in prior to participating in Reclink Australia programs and activities. The types of disadvantage experienced by the interviewees who took part in the study are in part a reflection of the people that Reclink Australia seeks to engage with. In many respects the types of disadvantage faced by the Canberra Reclink Australia participants is similar to that faced by participants in the Victorian, Queensland, West Australian, Tasmanian and Northern Territory programs. The similarity indicates that Reclink Australia has a clear target group for its programs, funding and activities, but also that disadvantage, although often context specific, has a number of common underlying causes and symptoms. The following is an indicative list only of the types of disadvantage faced by Canberra Reclink Australia participants:

- Drug addiction
- Alcohol abuse
- Mental health issues ranging from schizophrenia to depression
- Unsatisfactory living arrangements (which included both the quality of the accommodation as well as the social or familial interactions)
- Social isolation
- A lack of independence, often due to mental issues, which was in some cases drug induced
- Problems with the law, including incarceration and repeat offending
- Homelessness
- Broken relationships

It was clear from the research that many of these issues are inter-related. For example, homelessness can lead to drug or alcohol addiction, or drug and alcohol addiction can lead to homelessness and broken relationships. In this context, however, an important distinction needs to be made. Among the interviewees there were two types of participants identified. First, there was a large group of high density housing residents who were suffering from inter-generational disadvantage. In other words, many residents were children and grandchildren of men and women who had been unemployed, drug and alcohol addicted, or who had problems with the law. Second, there was a smaller group of residents who had been placed in high-density housing as a result of life circumstances that had led to disadvantage (such as broken relationships or an acquired brain injury or disability, for example).

Many of the interviewees that participated in this research can be regarded as being in the middle of a personal crisis, rather than having transitioned out of this period. In research conducted into Reclink Australia programs in other states and territories, it is clear that many participants are attempting to improve their lives, often through engagement with a specific agency (such as drug and alcohol rehabilitation centres). In Canberra, participants are involved in Reclink Australia programs largely because of their living arrangements (i.e. high density housing) and as such are not necessarily engaged in addressing the personal problems or disadvantages that have beset them. This means that the Canberra Reclink Australia participants can be regarded as a high-risk population group.

Reclink Australia Participation

Reclink Australia support and operate five specific programs within the ACT: community gardens, 'run, roll or walk', community based art, gym, and the workshop program. The community gardens are the longest running program within the Canberra site, operating for approximately three years. The community gardens located in two separate high density housing complexes are supported in partnership with ACT Justice, ACT Health and ACT Housing. The community gardens are specifically targeting the residents of each location. The 'run, roll or walk' program is held monthly and has been operating since February 2010. The activity has no restrictions on participation and is supported by both ACT Justice and ACT Health. The community art program is made up of several smaller programs either started by Reclink Australia or supported by the organisation. The program has been in existence for two and a half years. The workshop program has been operating for the last twelve months, providing mostly men the opportunity to be involved in learning new skills on a weekly basis (working with wood). The program has been specifically designed to engage participants living within a particular area of Canberra. The gym activity is the newest of the Reclink Australia supported and/or operated activities, commencing nine months ago. The program is run in partnership with a local leisure centre and is open to all participants to access the gym on a weekly basis.

The interviewees found out about Reclink Australia or one of the activities it offers via a range of sources. The majority of the participants involved in the community gardens found out about the activity by way of notices posted within the high density housing complexes. 'Word of mouth' was the next most common way participants were directed to a Reclink Australia program, particularly the gym, community gardens and workshop programs. Participation in the 'run, roll or walk' program or the community art program was a direct result of their previous involvement in either the community garden program or gym activity.

Participation in Reclink activities, for the vast majority of the interviewees who took part in the research, is regular; participants were mostly involved on a weekly basis. Many participants are involved in multiple activities, for example the community garden and the gym program, which could mean participants are engaged in a supported activity up to three times a week. Conversely, participants involved in the 'run, roll or walk' program reported sporadic involvement due to the nature of the monthly fixture being weather dependent and the propensity for issues to arise in the participants lives.

The Benefits of Participation

The benefits of participating in Reclink Australia programs and activities can be categorised into six key themes:

1. Breaking down the barriers to isolation;
2. Establishing and maintaining friendships;
3. Alleviating boredom;
4. Providing a sense of community;
5. Encouraging self-esteem and confidence; and
6. Acquiring skills.

It should be noted that much of the analysis of the benefits of participation is derived from interviews with participants in the gardening program, as this was by far the largest group of participants. It was clear that the benefits of participation were also within the 'run, roll or walk', gym, workshop and art programs, but the numbers of participants interviewed was not sufficient to make definitive statements about generalizable benefits.

Each of the six themes is discussed in greater detail in the following sub-sections.

BREAKING DOWN THE BARRIERS TO ISOLATION

It was clear from nearly all the interviews that high density housing complexes are often an environment in which people are reluctant to engage in social interaction. Participants spoke about their fear of other people within their housing complex, and in particular the fear of the unknown; it appeared that, for them, the stigma of high density public housing exacerbates the sense of isolation and fear.

Through participation in the Reclink Australia programs and activities, particularly the gardening program, high density housing residents were able to meet their fellow residents in a less threatening social environment:

'I like to see people too, the other people that are isolated, I like to talk [to] them because I don't like seeing people on their own'; 'there's a lot more people I know in these blocks but it used to be really quiet. No-one talked to each other, no-one wanted to communicate really'. (Jenny)

Participants reported that meeting people through the Reclink Australia programs enabled them to get to know people and therefore provided them with a greater sense of ease in their living environment than they would have had without the Reclink Australia program:

'normally people stick to themselves pretty well and that so when this happens, well, we all get together and get to have a chat to each other'. (Brad)

The interaction with other people through the Reclink Australia activities has enabled the high density housing residents to better understand the environment in which they live, via increased social interaction, and as a result feel more comfortable in their surrounds.

ESTABLISHING AND MAINTAINING FRIENDSHIPS

Many of the people interviewed as part of this research reported that they had either made friendships or improved them via participation in Reclink Australia programs and activities. Some of the participants used the word 'friends', while others talked about acquaintances or simply 'knowing people'. In the main women were more likely and prepared to talk about developing friendships, particularly through the garden program, while men were on the whole more reluctant to talk about 'friends'.

About half of the people who talked about making friends identified people employed in agencies, such as the Red Cross, whom Mark had introduced them to, as 'friends':

'all of them are just a great bunch of people, really I mean it has restored my faith in humanity somewhat ...'. (Elvis)

This probably indicates that some residents in high density housing complexes would like greater social contacts and connection with people who live outside the housing complexes. The other half of the people who talked about making friends reported that they believed friendships had been created with other participants. It should be noted, however, that these people were almost exclusively women and participating in the gardening program and its activities. As previously suggested, men were more likely to report that they had made acquaintances, although this also probably reflects broader social trends.

ALLEVIATING BOREDOM

It was clear from the Canberra interviews, as per Reclink Australia research in other states and territories, that the programs and activities run by Reclink Australia facilitate the alleviation of boredom. In itself this is not a particularly surprising finding, because many people suffering significant disadvantage or living in high density housing complexes report that they have very little to keep them occupied from one day to the next. The Reclink Australia programs provide some of the residents with activities that ameliorate boredom and provide some degree of structure to their lives. This is greater for people who participate in activities more than once a week (for many of the gardeners, for example) and less for people who engage in activities sporadically (for those who attend the 'run, roll or walk' activity every couple of months, for example).

Some of the participants who were interviewed as part of the research reported that their substance abuse was reduced because they were occupied by an activity run by Reclink Australia for a day or part thereof. This finding is to be treated with some caution given the sample size, but participants reported that while engaged in the activity that they were not using or abusing a substance, such as alcohol or drugs. There was also some evidence that some participants moderated their behaviours prior to an activity (such as the night before) in order that they were in a condition that allowed them to participate:

'you do it [drugs] because you have nothing else to do or you do it because you're bored because then you know that if you ... no matter what you do after that, it's going to seem slightly more exciting than if you did it while you were sober, but you come out here in the garden and you sit for hours and hours and hours going over the tiniest little weeds'. (Amelia)

PROVIDING A SENSE OF COMMUNITY

The gardening program has enabled many of the participants to develop a greater sense of community, which is important in the context of previously reported comments by residents in which they report that high density housing can create fear and isolation. For these people, prior to Reclink Australia programs, high density housing did not provide any sense of community. Rather, the housing was merely a collection of individuals, who were often involved in conflict and arguments (sometimes violent).

The Reclink Australia gardening program has enabled high density housing residents to develop a sense of achievement and through this achievement (the development of the garden) a sense of ownership. For many of the women in the program this ownership is bound up in reclaiming public space within the housing complexes:

'I was a lot more secluded. I spent a lot more time in my house by myself. Now I talk a lot more with my neighbours because we all come out here and sit down and have coffees, have cigarettes and do some gardening and stuff'. (Jacqueline)

The gardening program enables public space to be used in a positive way, rather than a negative way (for drug deals, for example). The garden becomes a safe space when Mark from Reclink Australia is present and running activities. The location of the garden in these public housing complexes has created a central meeting space and this space is used particularly by the women who were interviewed as part of the research. Using the garden to produce fresh vegetables and fruit, which can be used in cooking, has also created bonds among female participants who are able to enjoy a shared experience.

ENCOURAGING SELF-ESTEEM AND CONFIDENCE

The interviews conducted as part of this research revealed that participants of Reclink Australia activities developed increased levels of self-esteem and confidence. For some residents this increase in confidence was directly linked to becoming less isolated within their housing complex and developing friendships that allowed them to feel more comfortable within their immediate surrounds. In this sense their confidence was increased as a result of feeling safer in the high density housing complex. For other participants the Reclink Australia activities provided the opportunity to develop or increase their self-esteem and confidence through success and achievement. For example, people who had never gardened but were able to grow a plant to the point it bore fruit, or people who were very unfit but through regular participation are now able to complete a full circuit of the run, roll or walk activity, now have increased self-esteem and confidence through their achievements:

'I go for a jog up that mountain some mornings and I'm really working hard to get to the summit without stopping ... I feel good about myself and I wouldn't ... be doing that if it wasn't for the helping hand [of the Reclink program]'. (Tom)

Although these achievements may seem inconsequential at first glance, for the residents of the high density housing complexes, often dealing with severe disadvantage, these achievements can be the beginning of a more positive outlook:

'the first couple of times I couldn't walk the full lake, but the last time I went I walked the full lake. I was the last person, but I made it ... it felt really good to do ... and not only that, the people that I walked with too, they felt really good, like it was an achievement for all of us'. (Violet)

ACQUIRING SKILLS

Many of the participants reported during their interviews that they had acquired new skills by participating in Reclink Australia programs and activities. Participants in the community gardening and workshop reported they had learned or developed new skills, typified by the example of a young female participant who had acquired full-time gardening employment with the local council, as a result of the skills she had developed by participating in the gardening program.

Participants reported that they took great joy in being able to learn to care for something through the gardening program. Nurturing plants and being able to watch something grow was a new and unique experience:

'I like knowing that I can plant a little plant and then in a few weeks it's up tall and you can start [to] pick fruit off it'. (Kathy)

For some of the participants who participate in the workshop program, learning new skills had the practical benefit of resulting in new furniture, such as coffee tables and shelving, being created. The acquisition of new skills also had the additional benefit of increasing the self-esteem and confidence of participants, as referred to previously.

The Future

All interviewees struggled to answer the questions that related to what they would like to be doing one or five years from now. Indeed, many of the interviewees felt embarrassed by this question, as if they had never been asked a question like this before, perhaps because many of the people interviewed had or were experiencing disadvantage at such a level that survival was their only priority. In this sense the timeframes of one or five years appear disconnected with their day-to-day reality; the interviewees live in the moment, in the 'here and now'. As such, the answers that interviewees gave to questions that related to what they would like to be doing in the future were in the main very simple.

Almost all the interviewees were either sure that Reclink Australia would be part of their lives forever or wished it would be. This was an indication of both the impact and influence Reclink Australia programs have on the lives of participants, as well as the fact that many of the high density housing residents feel that they are trapped and will be there indefinitely. In this sense the residents would like Reclink Australia and its programs to be part of their lives, because they are perceived as one of the few positives in an otherwise fairly depressing environment.

Prison Programs

The following are the findings related to Reclink Australia programs within two prisons – one in Tasmania and one in Alice Springs. The structure of the findings is different to the other 'case studies' on the Transformational Links program and the Canberra program, largely because of the legal and ethical requirements associated with interviewing prisoners. As an example, questions about the life of prisoners prior to participating in Reclink Australia programs are not permitted.

Potential participants were identified by either a program facilitator or a prison administrator connected to the activities. Interviews with participants were held, where possible, around sport and recreation sessions to enable the participants to share their experience and personal outcomes of the program with the researcher in a comfortable and suitable environment. Semi-structured interview protocols were developed in consultation with the program delivery and corrections authority staff.

It is worthy to note that conducting research within prisons and with inmates posed particular challenges, which had an impact on the data collection and the approach of the researcher conducting the interviews. Upon arriving at each prison the researcher would be checked for drugs and other banned substances, in some cases a finger print scan was also required to confirm the researcher's identity. Before clearing the initial security screening the researchers were required to hand in all personal items such as keys, pens, wallets, and mobile phones, with special permission required to use the recording device for interviews within the confines of the facility. Long periods of time within the prisons were spent waiting for either a correctional staff member to become free to escort the researchers to a new location within the prison or just waiting for an inmate to be cleared to meet with the researcher to be interviewed. Interviews with inmates were held in various locations within the prisons including interview rooms, gymnasiums, cell blocks, sports fields, education rooms and workshops.

Risdon Prison Complex

Risdon Prison complex was commissioned in 1960, is the primary prison for the state of Tasmania and is located in an outer suburb in the city of Hobart. The prison houses both male and female inmates. The prison complex is made up of a series of prisons including the Risdon prison which contains up to 223 maximum and medium security male inmates, the Ron Barwick minimum security prison which can house up to 124 male inmates, and the Mary Hutchinson women's prison which houses up to 35 female prisoners of all security classifications. The Risdon Prison complex research focused primarily on inmates' participation within an organised physical exercise program that was delivered within the prison by Reclink Australia. The program was run on a rotating weekly basis across all three prisons. The primary aim of this program was to provide meaningful physical activity for inmates to occupy their time and to develop a link to similar established programs that inmates could access once released. Some of the activities run in the prison complex included soccer, football, softball, and a boot camp. In total seven inmates (four men and three women) participated in an interview.

A majority of the inmates discussed how the activities had helped them to pass time and elevate boredom whilst in prison – *“it gets you out of the division... otherwise you're just warehoused in a division with no movement”*. Several of the male inmates indicated that the diversion the sporting activities provided helped reduce issues that could arise because of inmate boredom – *“[boredom] definitely leads to arguments with officers, ‘jack-ups’ in jail”*. Female inmates stated that the activities allowed them to forget where they were for a short period of time – *“it's great, it takes your mind off where you are... you just concentrate on the activity”*.

When the inmates discussed their health a majority of them stated that both their mental and physical health had been poor prior to participating in the activities – *“not in a great place... very stressed, not eating, not sleeping”*. A majority of the inmates perceived that their health had improved because of their involvement in the activities. Inmates argued that the activities had provided them with an outlet to cope with stress and anxiety – *“healthy body, healthy mind... definitely notice that after a football game”*.

Both male and female inmates spoke about how the physical activities had helped their personal growth – *“I'm just a sports nut... I know it assists my personal growth... it's been awesome for me”*. Inmates stated that the activities had provided them with a personal challenge and when they contributed positively to an activity they felt good about themselves – *“[I] feel a sense of belonging ... [a] sense of achievement”*.

Finally, many of the inmates spoke of their willingness and want to connect with a similar program upon their release from prison. The inmates stated that having a program like the one they were involved in one the outside might help them to not return to prison – *“something to look forward to instead of hanging around the old crew”*.

Alice Springs Correctional Centre

The Alice Springs Correctional Centre (ASCC) officially opened in 1996 and is located 25km south of Alice Springs in the Northern Territory. A total of 316 medium and maximum security male prisoners are held within the main prison complex while a further 84 low security inmates are housed in cottages just outside the main perimeter fencing. Whilst the facility typically holds male prisoners the ASCC can hold female inmates in H block located inside the main prison.

The ASCC research focused primarily on participation within an organised Australian Rules football competition that was facilitated by Reclink Australia. Local football teams were brought into the prison each fortnight to play a team of prisoners. At the completion of the season inmates were also allowed to participate in finals, games often held at off-site locations. The primary aim of the program was to provide meaningful physical activity for inmates to occupy their time and to develop stronger links between inmates and the wider community.

In total six male inmates participated in an interview. The number of participants that the researchers were able to access at this location was limited because of the language barrier between inmates and the researcher. A high proportion of inmates within the ASCC are initiated Indigenous men who speak English as a second or third language.

Only a few inmates in the ASCC stated that the football program had helped them to improve their physical health and only one participant had perceived improvement in their mental health – *“better than sitting down doing nothing...keeps me happy”*. Whilst inmates did not directly perceive any improvement in their mental health several inmates stated that the football program helped them to reduce stress and anxiety related to family issues that were occurring on the outside – *“takes my mind off the phone sometime”*. All the inmates believed that the program was an effective diversion from their current environment – *“makes my time easy...just concentrating on what you’re doing in here”*.

Several inmates discussed the importance of football to Indigenous communities and that the skills they are learning within the program in prison will help them to role model positive behaviour when they are released – *“I like to show the young men they can carry on with it [football]... they can be role model when they go home, they can take their skill back to where they come from”*. A few of the inmates also believed that if they were to continue to change their behaviour then it was important to continue playing football when they were released – *“it important to take it from the inside to the outside, carry on with it, even for me I might start back when I go home”*.

The inmates also stated that the football program created harmony amongst the different Indigenous groups within the prison – *“We are one team... brothers, cousins and nephews”*.

Conclusions

The three key conclusions that can be drawn from the research presented within this Report revolve around the improvement in the metrics of (1) social inclusion, (2) how participants dealt with mental health issues, and (3) positive transformation of participants' lives. First and most importantly, Reclink Australia programs provide significant benefits to their participants. The research found that these programs are often the catalyst for people experiencing severe disadvantage to make major changes in their lives. In the most extreme cases this change might be manifest in people dealing with long term drug addictions, or finding employment and housing. More generally, Reclink Australia supported and funded programs are very successful at generating **increased social inclusion** in particular, through the development of significant friendship and support networks. These networks provide an important buffer, particularly during times of difficulty or stress.

Second, Reclink Australia programs are successful at **addressing or ameliorating some mental health issues** experienced by participants. This conclusion is based on the finding that Reclink Australia programs are useful in developing social networks that provide support, both within and outside Reclink Australia activities. The research revealed that participants were more aware of their mental health problems than they were of their physical health problems. As mentioned in the body of the report, this is likely because interviewees made an absolute rather than a relative judgement about their health. This aside, it was revealed through the research that improved mental health appeared to be connected to participation in sport, leisure or arts programs and activities provided by Reclink Australia. The improvement can be attributed, in part, to the participation itself and was in part due to the additional social benefits acquired through participation.

Finally, the research revealed that many of the participants viewed Reclink Australia as an essential organisation to their life, while almost all participants were determined for Reclink Australia programs and activities to remain an ongoing part of their lives. For many participants it was clear that they placed enormous importance on **the role of Reclink Australia in positively transforming their lives**. As such, they were reluctant to change, perhaps because the withdrawal of Reclink Australia might represent a return to a previous 'negative' lifestyle.

It is obvious to the research team and to Reclink Australia that more work needs to be done to encourage some participants to move beyond Reclink Australia and establish more sustainable social support networks and activities. For other participants, it was an inescapable conclusion that Reclink Australia services are an essential part of their daily or weekly lives and that the removal of these services and activities would be detrimental. In this respect it was evident that some Reclink Australia participants do not have the capacity to connect with 'mainstream' society through mediators such as employment.



Life Stories – Reclink Participant 'Snapshots'

The very nature of research, with its emphasis on confidentiality, anonymity and generalizable results, often dehumanises the people who participated in the research or obscures individual stories and findings.

With these issues in mind, this research project collected and produced short 'life histories' of the research participants, as a way of telling their stories and giving the research audience a more detailed insight into the specific disadvantage these individuals have faced, and into their experiences with Reclink. All reports produced throughout the duration of this research project have included a sample of what we have called participant 'snapshots'; this national report is no different. We have included 200 participant snapshots in this final national report in order to give the reader an opportunity to read about the research participants in more detail. We acknowledge, however, that these snapshots do not do justice to the lives of Reclink participants. Their lives and the disadvantage they have faced are far more complex than we have been able to present. It is impossible to adequately capture the difficulties and hardship that participants have faced; equally, the pleasure, relief and joy that many have experienced by participating in sport, recreation, leisure and arts activities through Reclink are not simple to capture. Nonetheless, we believe their voices and experiences are valuable contributions to the research and to the final report, and so we have tried to encapsulate their stories. Each participant has been given a pseudonym and is referred to as 'the participant'; this is an acknowledgement of their voluntary participation in the research, as well as expressing their involvement in as Reclink participants. In this respect participation is active, not passive, and is highly valued.

Kenny

The participant was mentally challenged, although they did not discuss this as a disadvantage they faced. Unable to maintain independence, the participant spent the majority of their early life in the family home. The participant stated that they had only once been able to maintain a job, working in a saw mill for two years. Unfortunately, the participant was ultimately sacked for “playing up”. The participant has been homeless for close to 20 years now and has only recently been able to find emergency accommodation in a hostel.

Whilst in the hostel the participant was introduced to Reclink-supported activities, close to eight months ago. The participant has been regularly involved in the bushwalking program. The participant mentioned that this activity was their only activity, both in and out of Reclink. Meeting new people and making friends was one of the most important things the participant got out of their involvement in the bushwalking: “got no friends, you got no-one”. The participant further suggested that this was the first time that they had in fact made friends. The participant also believed that their involvement in the activity kept them out of “trouble”. The key goal the participant had in the next 12 months was to maintain their place in the hostel so they had somewhere to live.

Jeff

The participant stated that they had lived a “regular life” until their relationship with their partner fell apart almost five years ago; the strain affected the participant both mentally and physically. Leaving the family home and their two young children, the participant lived in their car; the participant also resigned from their job, unable to cope with the stress of the ordeal. The relationship breakdown was cited by the participant as a contributing factor to their development of drug and alcohol

addictions. The participant only realised the depth of their addiction problems after selling their car, also their only place to sleep, in order to feed their addiction. The participant subsequently checked themselves into a drug and alcohol rehabilitation centre. The participant stated they had been “clean” for two years. Currently, the participant is a part of a transitional housing program and is waiting for a housing commission property to become available.

The participant was introduced to Reclink and the activities they fund through a case worker. For the last two years, the participant has been a regular at both the lawn bowls and bushwalking activities; the participant has seen great changes in their mental health. The Reclink activities have helped the participant develop a greater level of self-confidence, which has in turn resulted in them volunteering some of their time in a kitchen at a drop-in centre. The participant also believes that they have been able to develop new friendships and that these friendships have had a positive effect on their health and wellbeing. When asked what they would like to be doing in a year’s time, they responded: “give up smoking to start with... working part time”. The participant also said that they wanted to volunteer their time more: “most of me life I have always been a taker and now I want to be a giver... people have helped me, I’ve taken and now I want to give back”.

Martin

The participant is married and has worked hard all their life to own their own home. As a short-statured person the participant has faced consistent bullying and ridicule from others. The participant described how their mental health had suffered through the constant attention as a result of their short stature, so much that they have often wanted the “footpath to open up and swallow them”. During the participant’s mid-twenties they used

alcohol to “numb the pain” of bullying and ridicule. By their late twenties the participant was extremely depressed and started to seriously think about suicide. More recently, the participant has had to face another life challenge: breast cancer.

The participant was introduced to Reclink and its funded programs after finding an article in the local paper. The article was promoting a choir that had begun in the city and stated the program was being modelled on the Choir of Hard Knocks. Having a passion for music, the participant attended a choir practice and has been involved now for almost three years. When asked what the participant got out of being involved in the activity, they stated that it gave them an opportunity to help others. The choir has also allowed the participant to personal expression. The participant’s plans for the next 12 months included the launch of a book that they were writing in the next 12 months; they also wanted to meet participants from the Choir of Hard Knocks.

Paul

The participant grew up in a low socio-economic family, which meant they had very little opportunity to have any experiences outside the family home. At age nine the participant was confronted with discovering their mother’s body after she had committed suicide. The participant’s mental health has never been the same since, living with chronic depression after the traumatic experience: “knocks you rotten when you are little like that”. The participant stated that their battle with depression has been made harder because they have a serious intolerance to the anti-depressant medication used to manage the illness. The participant is married, has three grown children, has worked all their life and is now retired. Three years ago the participant suffered a heart attack and needed a triple bypass to save their life. The experience has greatly changed the

participant's outlook on life: "[I'm] grateful for everyday". Furthermore, the participant is currently the primary career for their partner, who suffered a mental breakdown and has since been in and out of psychiatric institutions for the last two years.

Feeling very isolated from society because of their current circumstances, the participant reached out to Reclink's choir program. After finding out about the choir through an article in the local paper, the participant attended a choir rehearsal and has now been involved for the last two years. When asked what the participant gets out of being involved in the activity, they responded: "I go away better than when I come". The participant stated that they look forward to the activity every week. The participant's involvement in the activity has been their connection to the outside world, away from their problems; it has also provided them with a vehicle through which to express their feelings. The participant wanted to continue their involvement in the choir as their primary goal over the next year: "[doing the] same thing, if I'm alive".

James

The participant has suffered from mental illness for the majority of their life; they stated the catalyst for the illness was the death of their sister when they were nine years old. The participant spoke light-heartedly about the frequency with which they had been admitted into psychiatric facilities for self-harm; self-harming episodes have in fact almost cost the participant their life on more than one occasion. Over time, the participant's behaviour has alienated them from people and, more specifically, their family. They believed their mother had purposely become withdrawn, expecting that the participant would eventually succeed in killing themselves. Currently, the participant lives in their own flat and survives financially on a disability support pension. The participant is

also currently studying a Certificate IV in PR and media communications.

The participant was introduced to Reclink after watching the television series, *Choir of Hard Knocks*. When a Reclink choir started up in the participant's local community, they immediately wanted to become involved. The opportunities and experiences the choir has given the participant, such as being a member of the 'small group', has made them feel a part of "the cool gang... people now rely on me". The performances have also appeased the competitive side of the participant, which has been important to them. Making friends in the choir has been difficult for the participant as they felt that in the past some members of the choir had taken advantage of their generosity. The participant believed that there had been a considerable improvement in their mental health since joining the choir: "my energy levels are hugely different". The participant stated the choir had become the sole reason for them to stay out of hospital.

Robbie

As a gay person the participant has struggled to find acceptance in society, and this has led them to feel isolated for the majority of their life. The participant described a difficult upbringing: their father died of cancer when the participant was only 11, leaving their mother with the sole responsibility of raising them. The participant eventually became a successful corporate manager for many years before retiring. The participant stated that they had suffered a mental breakdown during their working life as a result of the way others treated them for being gay.

The participant found out about Reclink and the choir program through an article in the local paper. Having a passion for both theatre and music, the participant decided to get involved. When the participant was asked what they get out of participating, they responded: "learning [the] process of

music and voice". The participant also stated they enjoyed the leadership opportunity they got from being involved in the 'small group'. Although they enjoyed the activity, they were considering leaving to follow their passion for acting. The participant believed they have made friends while participating in the choir, but was hesitant to say there had been an improvement in either their mental or physical health since being involved. On further discussion, the participant thought perhaps their mental health was better. In the next 12 months the participant said they were focusing on moving into a regional part of Tasmania to begin a theatre group.

Carl

The participant had great difficulties in communicating with their family growing up and, as a result, left home at 16. Moving to the mainland, the participant described living a transient lifestyle. The participant recalled their first job was working as a 'spotter', the person who looks after the welfare of prostitutes. Some of the participant's activities during this time eventually got them into trouble with the law and they spent time in prison for minor offences. The participant has lived on the streets and squatted in unoccupied buildings at different stages of their life. The participant stated that they have always been physically fit but mentally: "there's another story... I'm not the man I want to be but, thank god I'm not the man I was". After the recent deaths of their sister and father, the participant has moved back to his home state to reconnect with their remaining family. Currently, they are studying at TAFE and live in emergency housing.

The participant was introduced to Reclink and the activities they support through a case worker. The participant has been involved in ten-pin bowling, yachting and other one-off field trips for the last six months. These activities have stimulated the participant mentally and the new experiences have brought them great enjoyment.

The participant also stated that they “got a buzz out” of watching other Reclink participants experiencing things for the first time. This was demonstrated by the participant sharing photos they had taken during the activities. The participant stated that they had made friends and also believed that their mental health had improved because they had something to look forward to on a regular basis.

Liam

At the age of 19 the participant was sentenced to serve ten years in prison. Prior to being incarcerated, the participant was heavily involved in drugs and admitted to being an addict. After being granted early release, the participant opened a gym but was re-incarcerated after several parole violations. The participant is now serving out the rest of their term in a minimum security facility.

The participant found out about Reclink after prison management informed inmates that an independent organisation was going to be holding an AFL football clinic; they have now been involved in all Reclink activities operating in the prison for the last 12 months. The participant believed that they have always been physically and mentally healthy. When asked what they get out of being involved in the activities, they responded: “I’m just a sports nut... I know it assists my personal growth... it’s been awesome for me”. The participant said that all prisoners looked forward to Reclink activities and that the programs were greatly needed in the prison system. The participant said they wanted to “link up” with Reclink and become involved in their programs on the outside when they are released from prison.

John

The participant was heavily involved in drugs before being sent to prison and they described their life as being “on a one way path” to destruction.

This is the participant’s second time in incarceration, currently serving a seven year sentence. Married with four children, the participant has very little contact with their family which has had a significant impact on their mental health. The participant stated they had very poor physical health before getting involved in Reclink activities.

Reclink and its activities were introduced to the participant after being transferred into the minimum security prison almost a year ago. The participant has been involved in AFL, basketball and soccer clinics in the time since. The participant looks forward to the activities because they give them something to do and alleviate the boredom that is experienced in prison. As the activities often included both inmates and correctional staff, the participant believed that the activities enabled them to strengthen relationships with both groups. The participant also stated that being involved in the Reclink activities helped them and other inmates release stress and anxiety: “healthy body, healthy mind... definitely notice that after a football game”.

The participant was not sure what they wanted to be doing upon their release from incarceration, as the occasion was too far away. However, the participant suggested they might use Reclink on the outside: “something to look forward to, instead of hanging around the old crew”.

Brett

The participant is a single parent with two children, who worked part-time and was very active before being incarcerated. The participant stated that they believed they have never faced disadvantage in their life: “I’ve had a good life, no disadvantages at all”. Currently serving a nine month custodial sentence, the participant is soon to be released on parole. When asked what led them to be incarcerated, they responded: “not

asking for help and making the wrong choice”.

The participant found out about Reclink and its activities in the prison after reading a flyer on the inmates’ notice board soon after their arrival. The participant stated that they had formed a positive relationship with the Reclink coordinator which has further encouraged them to participate on a regular basis. The family days held by Reclink have had a very positive influence on the inmate’s mental and physical health: “I feel good after exercise”. Being able to relieve stress and anxiety have been two positive outcomes from their involvement in activities. The participant wanted to find a full time job and resettle with their kids when they are released from prison. The participant has also started to think about perhaps finding Reclink-supported activities when they are released to assist them in reintegrating back into the community.

Stephen

The participant was a working professional, married with three children and, as described by them, “living a normal life”. Currently, the participant is serving a two year prison sentence for what can be described as a crime of passion. The participant stated that both their mental and physical health was not good prior to being involved in Reclink activities: “not in a great place... very stressed, not eating, not sleeping”. The participant has very little contact with their partner and children who currently live interstate because of work commitments; this has exacerbated their stress levels.

It was only three weeks after starting their sentence that the participant got involved in Reclink-supported activities, after having read a flyer on the inmates’ notice board. The participant has been involved in basketball, football, boot camp, and family day activities for almost a year. Being involved in the Reclink activities has been a way for the participant to

deal with their anxiety and the stress associated with being incarcerated: "it's great, it takes your mind off where you are... you just concentrate on the activity". The participant believed that the activities helped all prisoners as it was very easy for someone to just sit around and do nothing while incarcerated.

Fred

The participant has been in trouble with the law on a number of occasions and is currently serving a six month sentence and is soon to be paroled. This is the second time the participant has been incarcerated for similar offences. The participant stated that they had poor mental and physical health prior to being involved in Reclink activities.

Reclink was introduced to the participant via a flyer on the inmates' notice board. Over the last five months the participant has been involved in football, basketball, netball and tennis activities organised by Reclink. The participant stated that they wished Reclink activities were available to inmates the first time they were in prison because they believed things may have been different for them on the outside. When the participant was asked to explain this further, they stated that they had "seen an attitude change" in themselves since being involved with Reclink. The participant stated that they have had many positive outcomes from being involved in the activities: "[I] feel a sense of belonging ... [a] sense of achievement". The participant also felt the Reclink family days were a real "bonus" for inmates, as they provided an opportunity to experience additional interaction with the world outside the prison. Involvement in the activities has also helped the participant to manage their levels of stress and anxiety.

Soon to be released, the participant was keen to engage with Reclink on the outside and said that they had already been talking to the Reclink

coordinator about the possibilities: "see what Reclink has planned for me". The other goal the participant had upon their release was to continue to move forward and to not reoffend.

Willie

The participant believed they face disadvantage daily; they have faced racial abuse their entire life as an Indigenous person. The participant has been a user of drugs, in particular cocaine, which they recognised as a contributing factor to their incarceration. The participant has been incarcerated several times; in total they have spent close to a third of their life in the prison system. The participant has two children and a partner.

A flyer on the inmates' notice board introduced the participant to Reclink and their supported programs in the prison. The participant has been involved in several different activities, such as cricket, football and boot camp, while they have been in prison. Being involved in the activities has provided the participant with a regular physical outlet beyond their prison cell: "it gets you out of the division ... otherwise you're just warehoused in a division with no movement". The participant also believed that being involved in the activities gave them something to do; they felt it was like a reward for inmates. Upon release, the participant wanted to continue running their business, get more involved in their children's lives and get married to their current partner.

Alvaro

Since adolescence the participant has been a user of drugs, particularly amphetamines. The participant described that their life "went wrong" after a series of complex family issues. Currently serving a sentence, the participant has been in and out of prison, having served a total of almost eight years for different offences. The participant stated that each time they

have been released they have not been able to change their life pattern: "if I could go back and change it I would".

The participant found out about Reclink after recently being introduced to the Reclink coordinator. New to the activities supported by Reclink, the participant has only been involved in a football clinic and a boot-camp activity. Although new to the activities, the participant stated they had "definitely" made friends whilst participating. The participant stated that the enjoyment and physical fitness have also helped alleviate some of the boredom associated with being incarcerated for long periods of time. The participant believed that keeping the inmates active with opportunities like Reclink reduced issues in the prison: "[boredom] definitely leads to arguments with officers, 'jack-ups' in gaol". The participant wanted to start their own business when they left prison; they also thought that they would try and get involved with Reclink upon their release to assist with settling back into the community.

Richard

Recently retired, the participant has been living in a housing commission property for the last two years. As a teenager the participant joined the army and was discharged after only a few years' service due to poor health, whereupon they worked a variety of odd jobs to maintain an income. The participant stated that they had been married twice and had five children across both marriages. The participant's second partner died almost five years ago, as a result of alcohol abuse related health issues; the participant explained that they were currently estranged from their children.

Reclink and its supported activities were introduced to the participant only recently, after a visit from the Reclink coordinator to the housing commission flats. In the last month the participant has joined the Reclink walking group and they are also

about to join the Reclink-supported bushwalking group. The participant has enjoyed the walking activity, as it has assisted them with dealing with issues of isolation that they face due to their current circumstances. The activity has connected them with their local community as they have been able to strengthen relationships with other participants who also live in the commission flats. The participant stated that the activity was a highlight in their week: "I thoroughly enjoy it... there is something to look forward to".

Charles

The participant has faced many difficult periods throughout their life: "every time I started to get back on my feet something knocked me about again". Having a hereditary health issue has impacted on the participant's ability to maintain their independence. They have survived primarily through the assistance of their partner of 40 years and a disability pension. The participant stated that the same hereditary health issue claimed the life of their mother and sister in close proximity of each other, which had a severe impact on the participant's mental health at the time. The participant stated that their mental health impacted on their relationships with people and in particular with their partner. Currently, the participant spends a lot of their time looking after one of their children who suffers from depression, assisting with looking after the grandchildren, cooking meals and assisting with other household chores.

The participant was introduced to Reclink and its supported activities through word of mouth from other participants involved in Reclink. Having been involved in the choir activity for two years, the participant does not like to miss the activity: "I have to be really sick not to get here". Social contact, self-fulfilment, friendships and self-confidence are some of the outcomes for the participant. In discussing outcomes further, the participant stated: "this has got to be the most supportive family group I

have ever been involved with... and I have been involved in lots of clubs and committees over the years". The participant also believed that their mental health had improved during their time in the activity; they suggested that they are now able to cope with problems more easily: "it's not just one foot in front of the other, or one day after the other".

Davos

Diagnosed with an incurable disease almost seven years ago, the participant's life has significantly changed since. Previously, the participant worked full time and considered themselves to be very physically active; however, as a result of their illness they are now restricted in the hours they can work and the type of physical activity they are able to participate in. The participant and their partner moved states several years ago, another decision prompted by the nature of the participant's illness. The participant stated that they had isolated themselves from family and friends because they were not coping mentally; being isolated seemed to be easier than having to explain their situation to others: "I just didn't like talking about having an incurable disease".

The participant's social worker introduced them to Reclink and its supported programs. The participant has been involved in the choir for just over a year; they stated they look forward to it week to week. In discussing what the participant gets out of participating in the choir, they stated: "it's comforting to be with people [with] who[m] you can be who you really are". The activity has also been a great way for the participant to reconnect with society again after being isolated for so long: "you forget how good it feels to be a part of something... I just want to sing and be with people". The participant strongly believed that they had made good and lasting friendships through their involvement in the choir and that their mental health had greatly improved.

Mick

The participant has struggled with a mental illness throughout their entire life but was only formally diagnosed as an adult. The illness has affected the participant's ability to maintain relationships with people, which has greatly compromised their ability to maintain a job. The participant suffered a breakdown as a teenager and left school at this time. After separating from their partner and going through a divorce in their forties, the participant has used the income from a pension to survive and has lived in a housing commission property for well over a decade. The participant has had a drug dependency for the last 15 years and believes their illicit drug use has helped with the symptoms of their mental illness: "the best medication I could ever have... I have that above anything else including food".

More recently, the participant has been enrolled in several adult education courses and volunteered their time at a drop-in centre for people who are disadvantaged. The participant stated they had both poor mental and physical health prior to being involved in Reclink activities: "I didn't have much self-esteem ... no confidence ... couldn't see the point in struggling with mental ill health and addiction and poverty".

The participant discovered Reclink and its supported activities through word of mouth almost three years ago; the participant has since been a regular member of a Reclink-supported choir. The activity is something that the participant looks forward to and they do not like to be absent from a rehearsal: "Tuesdays are a really special day; I would never ever miss it". Discussing what the participant gets out of being involved in the choir, they responded: "people here are a family and a community, I don't [just] see it as a singing choir, it's more than that". Friendships were another notable outcome for the participant; the participant stated that these friendships had a more positive effect on them than any other relationships

they had formed with people in the past: “not as many caring friends as now”. Overall, the participant believed they had something to live for and that both their mental and physical health had greatly improved since being involved in the activity: “much better, heaps better... I’ve got so many positives in my life now”.

Ron

Being a single parent with a child that suffers from mental health issues has made life difficult for the participant. Unable to work while raising their child has meant that the participant has survived financially on Centrelink benefits. The participant described being in several violent situations with their child over the years a result of the child’s psychotic episodes which often resulted in the police being called to assist. The child’s ongoing anti-social behaviour made the participant feel inadequate as a parent and embarrassed about their situation. As a result, they have purposefully isolated themselves from other people: “you take yourself away from society”. Almost two years ago the participant was evicted from their rental property and, with little money to spend on accommodation, the pair was forced to board in a room above a hotel for nine months. In an attempt to make money go further the participant started attending drop-in centres to receive free meals and access other services. More recently, the participant has started some casual work and has begun studying at TAFE; the participant now resides with family.

The participant was introduced to Reclink and its supported activities after reading a flyer on a notice board at one of the drop-in centres they were attending. For the last 12 months the participant has been involved in several supported art activities, including an exhibition of Reclink participants’ work. When the participant was asked to describe what they had gained from their involvement in the activities, they responded: “I’ve proven I can achieve

something”. The participant had indicated that their involvement in the activities has really helped to build their self-esteem. In describing how their health had changed since being involved in Reclink activities, they stated: “two years ago a negative would’ve been a negative, I now look at it you can always turn a negative into a positive... mentally I’m very fit, physically I’m still getting there”.

Tom

The participant has had to manage poor health and multiple physical disabilities their entire life. With prominent physical impairments the participant has found it extremely difficult to maintain any form of employment, despite being more than willing to work. The participant stated that they could not afford to be involved in any form of paid recreational activity as they survive financially on a pension. The participant talked about the difficulties they had living in a boarding house for six years while waiting for a housing commission property to become available. The participant is currently studying for a TAFE certificate in the hope of increasing their employment opportunities. In discussing what the participant’s health was like before getting involved in Reclink-supported activities, they stated: “[it] wasn’t very good... not much good just sitting around here doing nothing”.

The participant was introduced to Reclink and its supported programs through a disability employment agency. For the last 12 months the participant has been involved in the supported bushwalking and ten-pin bowling programs. The participant believed that there had been several notable positive outcomes for them since getting involved in Reclink, in particular: social connection and physical activity. The participant was feeling much happier through participating in the activities as they were enjoying regular social interaction. The participant said that they had also lost 15kg in the last 12

months due to the regular physical exercise. These outcomes have played a significant part in the participant’s increased levels of confidence. The participant also noted that their increased confidence has been a contributing factor in their recent enrolment in an accredited TAFE course.

Larry

Despite being diagnosed with schizophrenia as a young teenager the participant stated that they had lived a very active and rewarding life. It wasn’t until the participant’s involvement in an accident that they really became disadvantaged in their own estimation. The participant was hit by a car almost 12 years ago which left them with what they described as an acutely acquired brain injury. Discussing how the accident affected their life the participant stated: “I tended not to believe it... when it all goes it’s a bit of a shock”. The participant supported themselves financially by working full time prior to the accident, but now can only manage menial part time work due to the side effects of their injuries. The participant currently resides in their privately owned property.

The participant was introduced to Reclink and the activities it supports through an agency that works with people with acquired brain injuries. For the last eight months the participant has been involved in the mini golf and choir programs as well as attending Reclink-supported outings (for example, the Tasmanian symphony orchestra concert). When asked what they get out of being involved in the activities, the participant responded that the activities were fun and enjoyable, but most of all they believed they were in a “safe place”. The participant stated that they had made friends at the various activities, especially in the choir: “the whole idea behind the choir is to make friends”. The participant believed that there had been an improvement in their physical health, but more notable was their improved mental health.

Donald

Suffering from clinical depression for most of their life, the participant has found it difficult to maintain their independence. The participant has had several severe episodes of depression which have required them to spend lengthy periods in hospital; these episodes were usually triggered by physical exhaustion. The participant is currently not working and is manages financially on a pension. The participant owns their own home, but has needed to return to their parents' home for increased support during difficult times with their illness.

The participant was introduced to Reclink and its supported programs through word of mouth while they were studying at TAFE. Over the last two and a half years the participant has been involved in several activities: choir, mini golf, ten-pin bowling and swimming. The most significant benefit that the participant gets out of being involved in these activities is the social interactions with other participants: "I like meeting people... getting out of the house". The participant also mentioned that the activities assisted them in managing their illness: "I've got a routine... it's very important". The participant stated that they had made friends whilst participating. In discussing the possible differences in the participant's change in mental and or physical health since starting Reclink, they stated: "I think I've gotten better since I've started... because before I was sitting at home doing nothing... whereas now I'm getting out in the community, doing things that are enjoyable".

Joe

Leaving home at the age of 16, the participant moved interstate in search of work, but it wasn't until a failed relationship several years later that the participant decided to move back to his home state. The participant said that they had been in trouble with the law on several occasions and that they were waiting to appear in court

again. Currently, the participant is not working and, after being evicted by their landlord, they have been residing in a men's hostel.

The participant was introduced to Reclink and the activities it supports through contact with a sport and recreation worker at the men's hostel. For the last five months the participant has been involved in the mini golf program and a men's group supported program. In discussing the notable outcomes for the participant as a result of being involved in the activities, they stated: "[it] keeps you happy... especially keeps your mind always going instead of sitting in [the hostel] and going 'oh jeez, this is boring... got nothing to do'". The participant believed it was their boredom that contributed to them getting involved in criminal activity: "that's when the crime bit comes into it too". Friendship was another notable outcome for the participant; they enjoyed being with people whom they considered similar to them: "that's the best thing about Reclink, same kind of people like us". The participant shared that they believed their physical health has improved; they stated that their smoking habit had been significantly reduced as a result of their mind being occupied with the Reclink activities. They also felt that their mental health had slightly improved as well: "just being out of the house is good, keeps your mind off things".

Gary

After going through a separation from their partner almost 12 months ago, the participant was forced to leave the family home and move into a caravan park. The participant stated that after several months they were unable to meet the continuing cost at the park and, as a final resort, sought refuge in a men's boarding house. The participant has found it very difficult not being around their three children on a regular basis and this has had an impact on their mental health. The participant stated that they have not worked for

three years as, prior to the separation, they primarily maintained the family home and looked after the three children. The only financial income that the participant currently has is a family pension.

A worker at the men's shelter told the participant about Reclink and the activities its supports. The participant has only been involved in Reclink for a little over a month, but stated that they had become involved at least twice a week over that period of time in mini-golf and a supported men's group. In discussing what the participant had gotten out of their involvement in the activities, they stated: "makes me want to go to work, it doesn't bring me down". The participant went on to say: "[the] more activities I do the more I get up and do 'em ... [it] helps me achieve... cause I'm not sitting around home all day... I get a lot out of it". The participant felt that they had been able to form friendships with other Reclink participants in the short time they had been involved.

George

The participant described the last 18 months of their life as "a bad period" as a consequence of spending time in gaol for driving related offences and losing their employment as a construction worker. After their release from prison the participant was initially living in a boarding house for homeless men and currently resides at a caravan park.

The participant was introduced to Reclink and the activities it supports through a worker employed at the men's boarding house. In the last two months the participant has been involved in various activities: ten-pin bowling, mini golf and a men's group. Discussing the benefits of participation in the activities, they noted that they benefited from: "enjoyment, friendly competition... getting together with a group of guys, something to look forward to". Although the participant stated they had not made any new friends whilst participating, they did

believe the activities had helped to strengthen existing friendships.

Ted

The participant has not worked since being retrenched from full-time employment five years ago. With very little financial support the participant, lived on the streets for over a year before finding accommodation in a hostel for homeless men. The participant stated that they also suffered from schizophrenia.

The participant was introduced to Reclink and the activities it supports through a worker employed at the men's boarding house where they currently reside. The participant has only been involved with Reclink for the last month, participating in mini golf and a supported men's group. In discussing what the participant gets out of their involvement in the activities, they cited: "fun... it's something to do of a day instead of sitting around". Friendships have also been a notable outcome for the participant; they have started socialising with other participants outside of the activities.

Dennis

The participant had an addiction to speed and heroin for over ten years. The catalyst for the participant to seek help for their addictions was that they realised they wanted to be a part of their children's lives; they have now been clean for 18 months. To be closer to their children the participant moved from interstate. The participant has very little financial assistance and has not worked for the last two years. Currently, the participant lives at a camp ground as they cannot afford to rent a house.

The participant found out about Reclink and activities it supports through word of mouth just over a month ago. Having only participated in mini golf and ten-pin bowling, the participant was excited about the possibilities of being involved in other activities. The participant stated they

had already noted positive outcomes for them since being involved: "mates, enjoyment... I'm a bit happier... getting out doing stuff instead of sitting on my bum watching TV".

Jerry

The participant spent the majority of their childhood as a 'ward of the state' as a direct result of both parents having long term issues related to alcohol abuse. The little recollection that the participant had of their biological mother was of endless hours spent as a small child sitting outside of a pub waiting for their mother to emerge after a drinking session. The participant was not only separated from their parents but also from an extensive number of siblings. The participant stated that they had little family connection and or support and in fact knew very little about their siblings.

Moving from one foster home to another, the participant endured constant mental and physical abuse at the hands of their custodians. At the age of 16 the participant left formal schooling, entered the workforce and engaged in a number of labour intensive jobs. The participant claimed that they were required to move regularly in order to find work which made it difficult to form any genuine and meaningful relationships with people. The participant told how, as a result of a string of bad relationships, and through associating with the "wrong people", they were introduced to heroin and ice early in their adult life. The participant's life, as stated by them, spiralled out of control when they became addicted to methadone, after they had joined a methadone program. It has now been nine years since the participant has used any of these substances, although they continue to use marijuana.

Throughout discussions with the participant about their mental health prior to being involved in Reclink activities, the participant spoke openly about several issues, including anger management problems

stemming from their child hood and hearing voices which continually told them to do "very bad things". The participant identified that they were "very much institutionalised" as a result of their early experiences in life. The participant described how they believed that their mental health issues went misunderstood by many health professionals and that they have been battling these issues alone for decades. It has not been until recently that the participant has felt that they have been provided with suitable health care to manage their mental health issues.

Currently, the participant resides in a high density public housing complex and they do not work. The participant described an average daily routine for themselves as being "pretty much bludge after me chores are done". Reclink first became known to the participant after they spotted a flyer in the onsite shared laundry facility at their housing complex. For the last 12 months they have been actively involved in three programs: gym, run-roll-walk and a community garden. The participant described their mental and physical health prior to being involved in the activities as being "pretty crap". Asked to describe what they get out of being involved in the activities, the participant stated: "gardening's like good for the soul... this gym gives me a stronger frame". The participant has particularly enjoyed the gardening project as they are proud of their contribution to, not only the construction of the garden, but also maintaining it: "[I get to] watch things grow, very rewarding".

The participant's response to the question of whether they had made friends in the program was positive: "yes I have actually... all of them are just a great bunch of people". Overall, the participant believed that their mental and physical health had improved since being involved in the activities; however, the participant recognised they were "still in a daily battle". The participant also noted that their use of marijuana

had been reduced because they were “utilising my time better” and that the interactions they had in the Reclink activities had “broadened my horizons”.

Daniel

The participant described their upbringing in the family home as: “[a] hard time”. They recalled that they had run away from home on numerous occasions, either escaping to a friend’s house or an extended family member’s home. After struggling at school, the participant left the education system aged 13; it was during this time in the participant’s life that they developed substance abuse issues with aerosols and alcohol. Throughout The participant indicated that they had been in trouble with the law throughout their troubled teenage years, however, they had never been imprisoned. The participant stated that they had found themselves homeless on several occasions, moving from one temporary boarding house to another. The participant suggested their daily life had become more difficult as they were now suffering from brain damage and drug psychosis as a result of many years of substance abuse.

Now in their mid-twenties, the participant has never been employed; they survive financially on a disability pension and live in a high density public housing complex. The participant was first introduced to Reclink through a friend whilst participating in another private agency activity provider for homeless and disadvantaged people. For the last 18 months the participant has been involved in Reclink’s community garden, gym, and run-roll-walk programs.

Asked to describe their mental and physical health prior to being involved in Reclink activities, the participant stated: “not that good”. Further discussion of the topic revealed that the participant was more focused on what their health would be like if they were not involved in the Reclink activities, rather than reflecting on

the past: “If I don’t stop playing video games, if me gardening falls off and I stop going to the gym, it ain’t going to be good”. The participant stated that through Reclink activities they “stay fit and healthy, I wanna try live a long life you know, living good, living big age”. The participant also recognised that the activities had provided them with an opportunity to interact with other service providers: “[I] get a feed, [I’m] all connected”. When not involved in Reclink activities, the participant stated that they have very few other constructive ways to fill their time.

Gerald

The participant grew up in a military family, moving home regularly to wherever their father was stationed. Once the participant had completed their year ten schooling, they followed in their father’s footsteps and joined the Australian army, serving in multiple overseas deployments. The participant stated that things only went wrong for them when their partner died. They indicated that the pressures of looking after four children and coping with the sudden loss of their partner culminated with the participant attempting suicide: “[I] went off the deep end... I wanted to be with her”. Discharged from the military the participant focussed on the upbringing of their children, and worked casual jobs where they could. The participant shared that they had spent time incarcerated “a long time ago”, but they did not elaborate further on this. When the participant was asked if they had ever had any issues with substance abuse, they replied “no” to illicit drugs; however, they stated that they drink alcohol and consume, on average, two cartons of beer a week.

The participant currently lives in a high density public housing complex and continues to work as much as possible in casual employment. The participant stated that they had a close relationship with their children but unfortunately had little contact with them as they all had busy lives and

worked interstate. Reclink was first introduced to the participant through word of mouth; over the last two years they have been actively involved in a residential garden program and sporadically in the run-roll-walk activity. The participant enjoyed being involved in the gardening program as it has encouraged them to become more sociable with others: “gets me out of the flat... you get flat fatigue in this place”. The program has helped residents to form bonds with each other: “there is a lot more people in these blokes that I know, it used to be really quiet, no one would talk to each other, no one wanted to communicate really”. Furthermore, the participant stated that the activity made them feel safer in their environment by helping residents reclaim space in the complex as a community. The participant believed that the high density housing complex was a dangerous place to be residing in: “you have to fight junkies here”, although they suggested this was slowly changing. When the participant was asked if they had noticed a change in their health since being involved in the activities, they said: “yeah, I come out a lot more”, referring to being more physically active; the participant did not discuss the current state of their mental health.

Ray

At age ten the participant’s mother died, leaving them and their siblings in the primary custody of their grandparents. The participant explained that although their father was still present in their life, he was not a great role model; he was a violent man and he periodically disappeared for great lengths of time. After leaving school as a teenager, the participant lived a transient lifestyle, moving regularly to find work. The participant stated that they also lived a violent lifestyle and were regularly involved in altercations, either as the antagonist or defending themselves from others. Cumulatively, the participant has spent more than two decades incarcerated. The participant has battled with

substance abuse issues their whole life; they have used speed, heroin, methamphetamines and marijuana. After a marriage breakdown, the participant attempted suicide on several occasions.

Currently, the participant lives in a high-density public housing complex and survives financially on a pension. They were first introduced to Reclink after spotting a flyer and have now been involved in the residential gardening program for the last two years. The participant initially stated that they are not actively involved in the garden program; however, during course of the interview, they stated they enjoy venturing out of their flat to interact with others, weed the garden beds and maintain the bed structures when it seems necessary. Asked to describe what they get out of being involved in the program, the participant responded that they are wary of people in their housing complex but they felt more comfortable to interact with people through the activity. Furthermore, the participant stated that they enjoyed the fruits of their labour as they are able to pick food from the garden beds when they wanted. The participant was reluctant to describe any changes in their health or whether they had made friends since being involved in the activity.

Wendy

After leaving school at the age of 16, the participant went to work in a grocery store; a few years later, the participant married and continued to work sporadically up until the birth of their first child. The participant described their marriage as horrible; they were subjected to physical and mental domestic violence: "a violent, violent marriage that was horrible... for ten years". During this marriage the participant and their partner spent time living out of a car because they could not afford a rental property. The participant escaped from this marriage by "running away". The participant then entered into another relationship

which they stated was good for many years, before a complicated family issue ended the relationship: "I had a very violent daughter so I had to run". Describing their health prior to being involved in Reclink activities the participant stated: "[Physically] I'm pretty healthy... [mentally] you have your ups and downs". The participant later shared a further insight into their mental health struggles: "I've been suicidal a couple of times, and just really depressed... I went to a psychiatrist once and he said I had post-traumatic stress". The participant declared that they smoke marijuana and liked a few wines; however, they did not consider their habits to be detrimental to their health.

The participant currently resides in a high density public housing complex and is the primary care provider for a primary school aged child. The participant is financially supported on government benefits; they have not had what they considered a "proper job for 26 years". The participant stated that they experienced isolation as a result of their residential environment: "I've never lived in a place like this in my life... I was really freaked out and scared".

Reclink and their supported activities were first introduced to the participant through the gardening program: "I just saw Mark [Reclink staff member] in the garden". Over the last 18 months the participant has actively been involved in the community gardening program and more recently they have engaged in a further two more Reclink-supported activities: the run-roll-walk and the gym program. In describing what they get out of being involved in the activities, the participant stated: "it's good just to get out and talk to others". The gardening program was the main social activity for the participant in their week. The activity provided a safe place for the participant to get to know other residents: "I feel safe sitting out here... when I first moved here, no way". The participant has made several friendships through being involved in

the activities and suggested that this represents a significant change in their life. The satisfaction received from growing fruit and vegetables was also noted as a significant achievement for the participant: "yeah it's good and you think, oh god I just weeded all that or planted all those carrots". They also take pride in the garden, making sure others don't abuse the space outside of the regular weekly activity. The participant had not previously reflected on whether they had noticed a change in their health since being involved in the Reclink activities: "well, I must be healthier". The participant stated their physical health was improving, noting that until recently they could not walk the entire run-roll-walk course. In terms of their mental health, the participant suggested they were happier and as a result had become more engaged in their daily lives.

Roger

The participant completed their year ten certificate before going on to do an apprenticeship during their teenage years. The participant stated that they had maintained paid work for their entire adult life, prior to a cycling accident three years ago. The participant also discussed their battle with mental health issues. They described how angry and frustrated they had become during their marriage breakdown and stated that this had severely impacted on their mental health. It was during the separation that they were diagnosed with bipolar disorder. The participant indicated that they have been involved with the law; however, they have never been incarcerated. They stated that, other than smoking a packet of cigarettes a day, they did not have any issues with drugs or alcohol.

The participant currently lives in a high density public housing complex and survives financially on a disability pension. The participant has been involved in Reclink activities for almost two years, after spotting a Reclink flyer posted in their housing complex.

The participant has been engaged in both the residential gardening and run-roll-walk activities. As described by the participant, their involvement in the activities has been sporadic due to other commitments: “just other things to do, mainly with me family”. The participant suggested that they do not actively get involved in the activities. Instead, the participant explained that they used the Reclink activities as a time to come and socialise with people from in their housing complex: “just enjoy the company”. The time that the participant spends ‘socialising’ in the activities is the only time that they interact routinely with other individuals. The participant believes that in the last two years they have been able to form new friendships whilst being involved in the activities. When the participant was asked if they had gained anything else out of being involved in Reclink, they said they were happier.

Harry

The participant left school midway through year ten after being kicked out of the family home. They ‘couch surfed’ for several years before moving into a government housing unit. The participant has only had a handful of casual jobs, none of which they have been able to maintain for any length of time. As a teenager, the participant dealt with alcohol related; now they have a significant marijuana addiction. These substance abuse issues have impacted on the participant’s ability to live a normal life: “without it I feel quite sick”. The participant suffers with both depression and anxiety: “I just get really, really sad some days and I just don’t want to get out of bed”.

The participant does not work and currently resides in a high density public housing complex. The participant’s daily routine is: “clean my house, play my Xbox, get stoned”. Approximately six months ago, the participant was introduced to Reclink through word of mouth. The participant has since been regularly involved in the residential gardening program and is

just about to start in the gym program. When the participant was asked to describe what their health was like prior to being involved in a Reclink activity, they discussed the idea that they did not have very nutritious lifestyle: “I eat a lot more vegies now, ‘cause I eat all the vegies we grow”. In reflecting on their prior mental health, the participant described how isolated they had become: “spent a lot more time in my house by myself”. The participant listed several key outcomes that they believed they had achieved by being in the gardening program: an increased sense of trust; they were happier; they had a sense of pride; and they had reduced their marijuana usage.

When asked to explain how they believed the program had assisted in these outcomes, the participant responded that their sense of trust in others had greatly increased because the activity allowed them to meet new people in an environment that gave them a shared connection. This has helped breaking down barriers and, in some instances, the stigma felt by those living in the housing complex. The participant thought that they had been able to form some strong friendships with other participants through the activity. Being happier was connected to the fact that the garden and the activity provided a space for the participant to reflect and be removed from their everyday surroundings: “it does make me happier... it’s like you’re actually not in [the housing complex]... it’s the best part about it”. The participant stated that they were proud of their achievements in growing their own food, which was something they had not done before: “we are very proud, just harvested our first crop of corn”. Finally, the participant shared that the garden program was a distraction from their daily routine of sitting in the flat and smoking marijuana: “I come out here, not get stoned and just spend hours sitting out here talking to people, just doing the gardening”.

Linda

The participant left high school after completing year ten to pursue a TAFE qualification; after completing a diploma, they secured employment and worked in their chosen industry for a short period of time. The participant found casual employment across several fields and maintained paid employment until the birth of their first child. The participant stated that there was an absence of positive role models during their childhood, which they believe has impacted on their ability to form close relationships with others. This has made the participant feel very isolated. Being a young single parent has also added to the mind-set of the participant feeling isolated: “it means that my stress levels can go up more easily... the things I do have to handle I don’t have any on to talk to about it either”. In discussing the participant’s mental health prior to being involved in Reclink activities, they stated they often suffer with depression and they consider themselves to have bipolar disorder, although the condition has not been diagnosed by a health professional. The participant said that in terms of their physical health, their energy levels were low, especially because they had only recently given birth.

The participant currently lives with their child in a high density public housing complex; they do not work and survive financially on a government allowance. The majority of the participant’s day is spent with their child in the park, cooking food or cleaning their flat. Reclink activities were first introduced to the participant after they noticed a flyer at the entrance to their housing complex. They have been involved in the gardening activity for the last two years. The participant indicated that they are involved in the activity primarily because: “I want to know about where [I’m] living and what goes on [here]”. The participant stated that they engage in the activity as often as the garden requires attending to, either with planting or harvesting food, as well as attending the weekly

gardening day that Reclink organises. The participant enjoys using their time in the gardening program to socialise with others; however, they do not believe they have formed any close personal relationships with any of the other participants involved. Education and pride were listed as the two most significant outcomes for the participant. The participant enjoyed the learning process of maintaining and caring for a garden: “[the] learning thing is wonderful, its one big thing I get out of it”. This has also given them a sense of pride in their involvement, especially when they are able to cook with some of the produce they have planted: “you really appreciate the fact you [have] been a part of it... because the food is there I will find a way to use... I feel better because the food I make... is more nutritious”. The participant was confident that they had seen a change in their health since being involved in the activity, but believed they could not entirely link this to their involvement with Reclink: “I’ve definitely seen a change in my health, but that’s due to a number of factors... but yeah, I definitely think the garden has played a role in it”.

Carol

The participant felt forced to leave school aged only 15 to assist their parents in making enough money for their family to survive: “I wanted to make sure we had enough to eat”. They recalled that their father spent long periods away from the family home and would only come home irregularly to provide the family with some money. The participant stated that the money their father brought home was typically never enough to cover the next period of time that he would spend away. At the age of 18, the participant married; they described their relationship as being mentally and physically abusive: “I married a bashing husband; he thought his way of communicating was to come up and king hit you in the back of the head”. The participant also noted that they still live in fear of this relationship which

has at times affected their mental health. Unfortunately, the participant's second marriage was also an abusive relationship. They stated that their partner would drink too much and would spend most of their time screaming at them. It wasn't until the participant had left this relationship that they reflected on how isolated they had become. The participant has been the main care giver for their three children. The participant has worked for the majority of their life until a fall only a few years ago; they also suffer from arthritis which leaves them in pain frequently. Despite these physical setbacks, the participant has often volunteered their time when they are more able bodied to keep themselves occupied: “I like to keep busy when I'm well enough to do this stuff... I'm not able to do it regular to be a paid worker”.

The participant currently lives in a private rental and survives financially on a pension. Reclink and the activities they support were first introduced to the participant approximately two years ago. They were unable to recall how they found out about the organisation. The participant has been regularly involved in both an art program and the run-roll-walk program supported by the organisation. The participant described their mental and physical health prior to being involved in the activities: “it's always been up and down”. The participant described the art activity as a “good outlet place”. They enjoyed being able to express their thoughts and feelings without having other people judging what they were creating: “oh yeah I get a buzz... they can't see what I'm painting, but sometimes I'm painting pain and things, it means things to me”. The participant believed that their involvement in the art activity the participant believed gave them with a noticeable lift in their mental health, which they said could last several days. The participant also stated they felt a sense of achievement in completing tasks in the activities. They used the example of their recent

experience in a run-roll- walk activity: “the first couple of times I couldn't walk the full lake but last time I walked the full lake... it felt really good, it was an achievement”. Interactions with other participants have also been very important for the participant; they stated that they would go out of their way to talk to participants that have had similar experiences to themselves.

Lawrie

The participant left school after completing year ten to work in a slaughter house; for the majority of their life they have been involved in labour intensive work. The participant stated that they had never spent more than two years in the one job. The inconsistency in available work has required the participant to regularly relocate to where work was available. When the participant was asked if they have ever had any drug or alcohol related issues, they talked about their battle with alcoholism. The participant shared that they were now battling an alcohol related disease as a result of prolonged alcohol abuse. In terms of illicit drug use, the participant stated that they had only ever used marijuana and that their consumption of this substance was limited. When asked whether their drug or alcohol use has ever landed them in trouble with the law, they replied: “a few times”; the participant has been incarcerated on several occasions.

The participant currently resides in a high density public housing complex; they survive financially on a pension as they have been unable to work for almost three years. The participant was introduced to Reclink after spotting a flyer in their housing complex; for the last two years, the participant has regularly been involved in a residential garden program. The participant was reluctant to share any insight into what their health was like prior to being involved in the activities, other than to say it was “OK”. An average day for the participant does not consist of much activity, other

than gardening or taking their bike out for a ride. The participant was reserved in discussing any identified changes in their health as a result of their participation; however, they believed the community garden program boosts their mental wellbeing: "cheers you up... the joy, bit of peace". Discussing what the participant believed they get out of being involved in Reclink activities, they stated: "mainly 'cause we get fresh vegetables and that to eat when we want". The participant also stated that they thought the activity facilitated forming friendships with other participants also residing in their housing complex: "oh yeah around the flats it does... in the complex it does".

Wayne

The participant had an extremely disturbed childhood and this was a contributing factor to the participant leaving school aged 13. The participant has suffered with audio hallucinations their entire life and it was not until later in their adult life they were diagnosed with schizophrenia. The participant has worked intermittently, when their health has allowed, supporting themselves financially. However, they have relied heavily on a disability pension and small financial contributions from family for the majority of their adult life. The participant discussed being hospitalised on several occasions; they described these incidents as being traumatic events. The experiences that the participant had whilst hospitalised have had a distinct impact on their current mental health: "isolated cell... drugged up... out of control... I really didn't have a problem until they started on me". Furthermore, they described the prejudice and isolation they believe they have been subjected to as a result of having a mental health condition: "it's sort of having that on your name, it sort of like a bad, a black mark against ya". Stemming from the participant's poor mental health, serious substance abuse has also been an issue for the participant. The participant currently

suffers from short term memory loss and episodes of drug psychosis resulting from their years of substance abuse.

The participant has been actively involved in Reclink activities for the last 12 months. They have been involved a community garden, run-roll- walk, and a woodworking project. When the participant was asked what they get out of being involved in the activities, they responded: "I don't like sitting around doing nothing". When the participant is not involved in the activities they keep themselves occupied with odd jobs in their flat or they walk to the shops to buy groceries. The participant was unable to discuss whether they had noticed a change in their mental or physical health since being involved in the Reclink activities; they only discussed some of the current physical health issues they had been experiencing.

Sandra

The participant left school midway through year ten and moved out of home by the time they were 16. The participant did not have a stable upbringing, partly due to the fact their mother was an alcoholic. After leaving home the participant 'couch surfed' from one friend's home to another; eventually they received a public housing property. The participant has worked casually and periodically; they survive financially on a government allowance.

The participant currently lives with their partner in a public housing complex, looking after their new born child. The birth of the participant's child has placed a large amount of responsibility upon their shoulders at a very young age. The participant stated that an average day for them would be to potter around their flat, taking care of their child. Reclink and the activities they support were first introduced to the participant after they spotted a flyer posted in their housing complex. The participant decided to get involved after recognising they were becoming

very isolated and that boredom was a contributing factor to their isolation. Since becoming involved 12 months ago, the participant has regularly been involved in a community garden supported by Reclink.

When the participant was asked to describe what their health was like prior to being involved in the community garden, they stated: "before [Reclink] came along I didn't care what I did, I was just sitting in the house all day and that". The participant stated that they had developed several friendships with other participants in the program; they stated this was a positive environmental change for them. Furthermore, the participant said that they would not have spoken to anybody in their housing complex prior to the gardening program, unless it was to sort out a disagreement: "oh no, and if we did, it would always end up in arguments". The participant has also enjoyed the educational experience the gardening has offered: "I like knowing I can plant a little plant this big and in a few weeks it's up this tall and you can start picking fruit off it". Finally, the participant expressed how their involvement with Reclink has motivated them to engage in new activities supported by the organisation and to be more engaged in their own personal health: "all right, you know what? I going to start getting healthy and join this gym and start eating right".

In the next 12 months the participant stated they wanted to own their own home in a location that would be a safe place to raise a child; however, the participant was very doubtful that they would ever be able to own their own place: "it's just a dream".

Henry

Growing up in a single parent family, the participant did not have a great relationship with their mother. Unable to resolve these issues, the participant moved out of home into a private rental at the age of 14. The participant remained living independently whilst

completing their education, including their year 12 certificate. After leaving school they took up a plumbing apprenticeship. The participant stated that throughout this period of time they did not have any communication with their mother. The participant has suffered with depression and anxiety for several years, which they believe has placed a strain on their relationship with their partner and has also affected their ability to maintain work: “just make me not wanna go to work, or not wanna do anything sometimes, or just angry outbursts, we’ve had angry fights [with their partner]”. Recently, the participant has had a child with their partner, which has forced the participant to take on serious responsibility at a young age. Asked whether the participant has had any issues with substance abuse in their life, they responded: “yep, I smoke cannabis regularly”.

The participant is currently living in a public housing complex and they have not worked for almost 12 months. The participant survives financially on a government allowance. Reclink and the activities they support were first introduced to the participant after they spotted a flyer posted in their housing complex. In the last 12 months the participant has been regularly involved in a community garden supported by Reclink. Working alongside other residents of the housing complex in the program has facilitated the development of new friendships: “with the people who go, definitely”. The participant also stated that the program has motivated them to seek further assistance from Reclink to help them find employment.

Susan

Moving around regularly with their parents, the participant struggled to settle in one location. At the age of 14 the participant was kicked out of the family home: “because of my bad decisions”. The participant lived in refuges and group homes until they received their own public

housing property when they were 19. During this time the participant completed their Year 12 certificate. The participant discussed some of the “bad decisions” they made as a teenager, such as mixing with the wrong people and getting into drugs. The participant’s substance abuse started with marijuana; they subsequently went on to use ice: “It was like a big game, stupid and young”. Reflecting on how their drug habits had affected their life, the participant stated: “I just woke up one morning and realised that the way that I was thinking was so different to how it was before I was doing it”. Recognising this change and witnessing firsthand the serious effects of substance abuse amongst their circle of friends, the participant went about changing their life. When the participant was asked whether they had ever suffered from a mental health problem, they indicated that they had been dealing with depression and anxiety for several years. The participant’s poor mental health had been a contributing factor in them becoming isolated from others.

The participant currently lives in a public housing complex and has just commenced full time employment. The participant was first introduced to Reclink after they decided to walk down to the community garden in their housing complex during one of Reclink’s weekly BBQ and gardening session. They described how they had watched the activity from afar for almost 12 months before gaining enough confidence to engage with the Reclink activity coordinator. For the last eight months the participant has been actively involved in the community garden, almost on a daily basis. When the participant was asked to describe what their health was like prior to being involved in the program, they responded: “average, haven’t really thought about it”. The participant has recognised several key outcomes for them as a direct result of their participation in the community garden: confidence, enjoyment, and employment. They believe their

confidence was developed as a result of the indirect mentoring they had been received from the Reclink program coordinator. The participant has developed a passion for horticulture, stating: “definitely, this is what I’ve decided to do the gardening... I love seeing things grow”. Their new passion and confidence motivated the participant to access assistance from Reclink in securing full time employment with a large organisation involved in horticulture. This is the first time the participant has secured full time employment.

Graeme

Born and raised in a rural setting, the participant left school after completing year ten and joined the workforce as a labourer. Not long after beginning work, the participant was conscripted into military services. During their time in service found themselves in trouble with the military police on several occasions. The participant also mentioned that they lost a significant proportion of sight in one eye whilst in the army. After being discharged from national service, the participant was employed in a government agency; they worked in this field for almost three decades before going into private business. The participant’s business folded and almost financially bankrupted them; their marriage fell apart soon after. The participant was forced to sell the family home to recoup financial losses. They also lost contact with their three children which was mentally difficult for the participant; they did not want to reflect in great length on the topic: “I’ll leave that alone”. When the participant was asked to describe how this experience had impacted their life, they responded: “that’s a part of growing up”. Although the participant did not directly say they have had any issues with alcohol, they spoke of spending most of their time in the pub and that they were “not a bad judge of a schooner”.

The participant is currently living in a public housing complex and survives financially on a government pension. The participant became involved in a Reclink activity eight months ago through word of mouth. They are actively involved in a wood working activity as well as a run-roll-walk program supported by the organisation. The participant said that the wood working program was a place of solitude for them: “quiet space... I love just fiddling around doing what I do”. In discussing what the participant get out of being involved in the run-roll-walk program, they stated that they did not actively get involved, rather they volunteered their time to help the Reclink coordinator set up and run each monthly event. The participant went on to say that they only volunteer their time because they thought the Reclink coordinator was doing good work in the community. In response to the question on whether the participant had recognised a change in their physical or mental health, they responded: “no”. In further discussion, the participant was asked if the Reclink programs had added enjoyment to their life and they responded: “yes, I’ve never thought of it that way”. The participant was hesitant to say they had made friends with other participants in the activities, stating: “I would hope so”.

Arthur

After completing year ten, the participant was kicked out of the family home: “my mum kicked me out, ‘cause I started to get into a bit of drinking and smoking”. For the following three months the participant slept rough, where they said they learned fast in order to find food and warm shelter. After finding supported accommodation, the participant found casual employment as a labourer. The participant has had several periods of time in their life where they have been unable to find work, some as long as 12 months. When the participant was asked if they have had any substance abuse issues in their life,

they described their dependence on alcohol: “[it’s a] form of self-medicating really”. The participant stated that they have had to deal with a lot of anger in their life, stemming from family issues, and they drink to cope with these feelings. In discussing whether the participant felt that their alcohol consumption habits had affected their life in any way, they stated: “definitely affected me, but it’s, I’m quite happy with it”. The participant also discussed their battle with depression and how their poor mental health had contributed to their current sedentary and isolated lifestyle.

The participant currently lives in supported hostel accommodation for people who are homeless and survives financially on a government allowance. They have been involved in Reclink-supported activities for 12 months and are actively involved in a woodworking program. The participant has also had sporadic involvement in a run-roll-walk program. Due to the participant’s living location, it has been difficult for them to regularly attend the monthly run-roll-walk activity. The participant was unable to reflect on what they thought their health was like prior to their involvement with Reclink. In response to questioning about what they get out of being involved in the wood-working activity, the participant stated: “I’ve always liked working with wood”. Furthermore, the participant discussed the practical outcomes that they have achieved through the construction of items such as shelving which they used to furnish their room. The activities have also played a significant role in developing relationships with other participants who also reside in the hostel: “there’s a few residents that go over there when the Reclink thing opens that I wouldn’t have met up here otherwise”. Asked why these new relationships were important to them, the participant replied: “[it] de-demonises the [place], more security about where I live”. The participant believed they had not noticed a change in their mental or physical health either since being involved in the supported activities.

Jack

After completing year nine the participant left school to work in a timber yard. They have worked on a casual basis their entire life and have needed to move regularly to find employment. Throughout the interview the participant discussed their enduring battle with substance abuse; many of the issues they have faced have been connected to their alcohol and marijuana use. However, the participant did not directly state they had any issues with these substances, instead reflecting in the third person: “I’m told that [I have issues]... you have to do something, you have to cope in your way”. The participant has been in trouble with the law on several occasions but has not been incarcerated for any substantial period. The participant said they suffered from depression and could also suffer episodes of paranoia; they further stated that they isolate themselves as a way of not getting into trouble, although they did not explain this notion further.

The participant currently lives in supported hostel accommodation for people who are homeless and survives financially on a government allowance. It was through their association with another private agency that assists homeless and disadvantaged people that they learned about Reclink two years ago. Since being involved, the participant has regularly attended a woodworking activity and has occasionally been involved in a run-roll-walk program. Confining their response to the woodworking activity only, the participant stated that the Reclink-supported program was “a resource and a therapy” for them. They enjoyed using their time in the program to construct shelves and other domestic items they could use in their room: “it’s just to do practical things”. Furthermore, the participant was very proud of their achievements: “it’s bloody good, if I can say so myself”. It was not the participant’s belief that they had formed any new friendships in the program; however,

they believed it reinforced pre-existing relationships with other participants: "I think it may have cemented them or strengthened them". In discussing the concept of the activity being a therapy for the participant, they explained: "if you're doing something, you feel better about yourself... I'm happy doing things". Furthermore, the participant said the activity provided them with a distraction from the daily norm as they knew if they wanted to be involved in the activity they could not be under the influence of alcohol: "oh you can't handle a hammer and a chisel when you're drinking, and it's against the rules".

Annik

The participant was born overseas and moved to Australia as a young child; they completed their year 12 certificate and a University undergraduate degree. The participant believed they were lucky to have received such a good education; however their family environment was filled with "emotional violence". This experience severely impacted on the participant's mental health. The participant described how, starting at the age of 18, they had developed a serious addiction to prescription drugs and marijuana. The participant has been diagnosed with a variety of mental health issues including bipolar disorder, depression and anxiety. At the participant's self described "rock bottom" they were self-harming. Unable to maintain any form of employment as a result of their poor mental health state and substance abuse, they have struggled to survive financially. The participant has also been in trouble with the law on several occasions; however, they have never been incarcerated.

The participant currently resides in a private rental and survives partly on a government allowance. The participant was introduced to Reclink and the activities they support through word of mouth. For the last 12 months they have been regularly involved in a supported gym activity. When the

participant was asked to discuss what their mental and physical health was like before starting the gym program, they responded: "I was really flat... I was kinda here but really down". The participant has noticed many changes in their life since coming to the program: community connection, increased confidence, improved mental health and improved physical health. Discussing how the participant feels more a part of the community through their involvement in the activities, they described the friendships they had been able to develop. Furthermore, the participant thought the development of such friendships had become easier because they were becoming more confident within themselves: "feel more relaxed therefore I am happier to talk to other... friendships and the rest I've formed have been vital [in my change of health]". The participant's improved confidence has helped them to secure casual employment in a community radio station: "I found my feet now, I'm really happy, a lot of that has to do with the confidence that has come out of this program". The twice weekly routine of the gym program has provided the stimulus for improved mental health for the participant: "as soon as I started living well, the world seems a happier world... that [gym] sets me up for a good day". The participant has also noticed a significant change in their physical health as a direct result of the nature of the activity. Recently, the participant was involved in a 30kilometre cross country fun run. They stated that 12 months ago they would not have dreamt of doing something like this, now they regularly run or ride to the supported gym activity.

In establishing whether or not the Reclink-supported activity was the only catalyst for change in the participant's life, they responded: "there are probably two factors that have led to my recovery completely and Reclink would be one of them, so I think a social worker and Reclink... both saved my life". The participant

stressed the importance of the progress they had made with the assistance of a social worker, and further stated: "I think the social workers should be referring people to Reclink".

Judy

After attending boarding school and attaining their year 12 certificate, the participant worked overseas for a couple of years. Upon their return to Australia they secured full time employment as a public servant. The participant remained in full time employment before being involved in a serious motorbike accident that left them with permanent physical disabilities. Unable to return to work, they were made redundant and they have been unable to return to any form of employment since. The participant discussed another difficult period in their life when their marriage fell apart; during the divorce the participant's mental health suffered severely.

For the last two decades the participant has been living in a public housing complex and survives financially on a disability pension. The participant talked about the issues they and other residents have faced whilst living in the complex. They believed that there are ongoing concerns with alcohol and drug related incidents. The participant recalled that on several occasions that they have been fearful for their safety. Mindful of the issues in the complex, the participant stated that it was very easy to isolate yourself from others to avoid conflict and confrontation. Discussing their mental health prior to their involvement in Reclink activities, the participant spoke of having suffered from anxiety. The participant was introduced to Reclink and the activities they support after noticing a flyer in their housing complex approximately 12 months ago. In the last year the participant has been regularly involved in a Reclink-supported community garden Reclink. The participant believed that their mental health

had improved significantly since their involvement in the community garden: “better ‘cause I mix more”. The participant also believed they had developed a greater sense of community in the housing complex as a result of developing relationships with other participants. The participant noted that many of the new friendships that they had developed were with agency workers that also get involved in the Reclink-supported community garden.

Hoang

The participant was five years old when their family migrated to Australia. As a young child the participant had several health complications involving tumours on the brain. Although these were removed, the doctors believed that the participant would not live beyond 17. As a result of the invasive surgery, the participant now suffers a cognitive impairment. Struggling to live independently, the participant has relied on the assistance of family to support them into adult life. The participant has found it difficult to find employment. Having worked in a sheltered workshop for several years, the participant was determined to find work in the public service. After many failed attempts the participant eventually was provided an opportunity; they maintained this employment for almost a decade before they were made redundant. The participant stated that during their time as a public servant they had been subjected to bullying on a regular basis. The participant suffered a nervous breakdown as a result of the ongoing bullying: “you wouldn’t treat your worst enemy the way they treated me”. The participant spent a period of time recovering in hospital from the breakdown and since this time the participant has not returned to any regular form of employment.

For the last two decades the participant has resided in a public housing complex and survives financially on a disability pension.

Although they are not in paid employment, they try to remain active by volunteering their time in a local library. The participant described having felt isolated in their housing complex due to the behaviours of the residents around them: “we could write a few books about this place”. The participant stated that it was not uncommon for other residents to be affected by drugs and or alcohol on a regular basis. The participant was introduced to Reclink and the activities they support through word of mouth. For the last 12 months they have been regularly involved in a supported community garden and an arts and craft program. The participant was unable to express what their health was like prior to being involved in a Reclink activity; however, they stated they were happier now because of their involvement. The socialisation aspect of the activities was the most rewarding for the participant, they also liked being able to see the enjoyment others were having in the activities. Although the activities had not helped the participant to build trust with other individuals, they stated that it was: “nice to get to know people”. The participant believed that they had made friends in the activities; however, they did not spend time with any of the participants outside of the activities.

Jess

The participant completed year ten before leaving school. It was at this time that the participant was placed into foster by their sole parent because they were “getting into too much trouble and my dad couldn’t help me anymore”. At the age of 18 the participant left foster care, with nowhere to go and no family to seek assistance from, they were homeless. The participant spent almost three years homeless before recently finding secure housing through government. Although the participant has worked sporadically, they are primarily financially supported on a disability support pension. When the participant was asked if they had suffered

from any mental health issues, they responded that they were diagnosed with schizophrenia as a teenager. Before getting involved in a Reclink-supported activity, they believed that their mental and physical health good be described as “pretty good”.

The participant was introduced to Reclink and the activities they support through a case worker in the mental health profession. For the last two years the participant has been regularly involved in a variety of supported activities including: lawn bowls, ten-pin bowling, cricket, football and volleyball. When the participant was asked to describe what they get out of participating in the activities, they stated: “fun, meet new people... I feel healthier... clears my mind”. The participant did not distinguish between the benefits they accrue from their participation in individual activities. The activities gave the participant a chance to concentrate on the task at hand and not think about any problems they might be facing, particularly surrounding their mental health. The participant believed that they had made friends in the activities; however, they do not see these friends outside of Reclink activities. In discussing the participant’s current mental and physical health, they were unable to clearly identify any improvements: “sort of”. The participant was unsure of what they would like to be doing in the next 12 months and stated: “I’m not sure”.

Victor

The participant is an Indigenous person who grew up in a remote community where they attended school. The participant was unable to recall how old they were when they left school. English is not the participant’s first language; they are also able to speak two indigenous languages. The participant has worked in the hospitality industry on a casual basis. Currently, the participant is not working; they survive financially on a government pension and live in

government housing with family and extended family members.

The participant was introduced to Reclink when the organisation started to support an existing choir that they were involved in. The choir was originally started to provide an outlet for people who were considered to be marginalised and or disadvantaged. For the last two years the participant has continued to be regularly involved in the choir because it made them happy to be “singing to God”. The participant stated that in the next 12 months they wanted to continue to sing in the choir.

Andrew

The participant stated that they had a difficult childhood. As a victim of bullying at school, the participant they did not enjoy school: “far from fun”. When discussing the participant’s upbringing in the family home they stated: “well I didn’t have a home really”. The participant didn’t know where their mother was; they stated that their father was also rarely home because they were often incarcerated. The primary caregiver for the participant was a grandparent. The participant felt that not having a stable upbringing contributed to their development of a drug habit, a habit that started with marijuana before progressing to the use of heroin. When the participant was asked if they have ever had any issues with their mental health, they responded that they had been diagnosed with “manic depression”. Currently, the participant lives in a private rental and is married with two children. The participant survives financially on a disability support pension as they have not worked for many years.

The participant was introduced to Reclink and the activities they support whilst they were attending a drug and alcohol rehabilitation centre. For the last three years the participant has been actively involved in several activities on a seasonal basis, including: football, cricket and

lawn bowls. When the participant was asked to describe what they get out of their participation in the supported activities, they confined their remarks to their involvement in the cricket program: “there is nothing better than a having a cricket ball in your hand”. Discussing this further, the participant stated they enjoyed the challenge of the game: “I get a high a buzz”. The participant believed that being able to become absorbed in the activity allowed them time to get away from any issues they might be facing. The participant believed that involvement in the activities had a positive influence on their health; however, when the participant was asked to talk about their current mental and physical health, they responded: “it’s all over the place”, both mentally and physically. The participant was able to say what they wanted to be doing in the next 12 months, other than to state: “I’d be happy if it just kept going the way it is”.

Spencer

The participant is an Indigenous person who grew up in a remote community. The participant stated that they had attended a mission school the participant but were unsure what level of schooling they had achieved. English is not the participant’s first language; they are also able to speak two indigenous languages. The participant moved to Alice Springs later in life where they lived in ‘town camps’ for several years. Currently, the participant lives in government housing and survives financially on a government allowance.

The participant was introduced to Reclink when the organisation began supporting an existing choir that they were involved in. The choir was originally started to provide an outlet for people who were considered to be marginalised and or disadvantaged. When the participant was asked to describe what they get out of their participation, they shared that they had always loved to sing because it allowed them to express themselves and to

seek “salvation”. In discussing this further, it was clear that the participant was using the term salvation with reference to their religious beliefs. The participant was not sure what they wanted to be doing in the next 12 months, other than to continue singing.

Hakan

Born in Europe, the participant migrated to Australia with their family as an infant. The participant stated that they had a difficult time in school, a victim of bullying because other students viewed them as “different”. A further difficulty the participant encountered at school was their lack of proficiency in English. The participant could not recall what level of schooling they reached before leaving. The participant stated they had suffered with poor mental health for many years: “nine-ten years of hell, unable to keep a job”. The participant was diagnosed with schizophrenia in their teenage years; however, they believed: “that came in very early in my life around five-six years old”. Currently, the participant works casually ten hours a week; this income is supplemented with a disability support pension. The participant lives in a hostel.

The participant was introduced to Reclink and the activities they support through a case worker in the hostel. For the last 18 months the participant has been regularly involved in a supported guitar activity. When the participant was asked to describe what they get out of participating in the activity, they stated that it was: “sometimes fun”. In further discussion, the participant said that learning the guitar could be very frustrating for them; however, being able to perform at “gigs” was rewarding: “I do enjoy that”. The participant did not think that had made friends in the activity, adding “I think that’s the idea of it”. Discussing their current health, the participant stated that they did not believe they had noticed a change. The participant wanted to visit family in the next 12 months.

Ryan

The participant is an Indigenous person who grew up in a remote community. The participant was unsure what level of schooling they had achieved at the mission school they attended. English is not the participant's first language. They are also able to speak two indigenous languages. The participant lived with their grandparents and eight other siblings because their parents both worked away from home. When asked if they had ever been faced with tough times in their life, the participant responded: "no problems". More recently, the participant has spent time living in town camps around Alice Springs. Asked about their experience living in these camps the participant stated: "no good, drunken people, fighting". The participant shared that they had worked when they were younger; however, they had not worked for many years. Currently, the participant lives in government housing and survives financially on a government allowance.

The participant was introduced to Reclink when the organisation began supporting an existing choir that they were involved in. The choir was originally started to provide an outlet for people who were considered to be marginalised and or disadvantaged. When the participant was asked to describe what they get out of their participation, they shared: "it makes me happy". The participant stated they often felt isolated and that their singing in the choir made them feel more connected to others. In the next 12 months the participant wanted to "still be singing".

Eddie

The participant is an initiated Indigenous person who was raised by their grandparents in a remote community. They attended a mission school but were unsure what level of schooling they had achieved. When the participant was asked where their parents were during their upbringing,

they stated that they had both passed away. The participant has been in trouble with the law in the past and has been incarcerated for a period of approximately 12 months. It was the participant's opinion that all their trouble with the law had been the result of having issues with alcohol: "drinking and smoking too much". When the participant was asked what they thought their health was like prior to getting involved in a Reclink activity, they replied: "my thinking is right and thought alright". Currently, the participant lives in government housing and survives financially on a government allowance.

The participant was introduced to Reclink and the activities they support through word of mouth from another participant. For the last 12 months the participant has been involved on a regular basis in activities including: football, choir and guitar. The participant did not elaborate on they get out of participating in the activities, other than to state that they were "fun". When the participant was asked to describe their current health, they replied: "I'm alright". The participant stated that they wanted to find work in the next 12 months.

Justin

After the participant completed year 12 they started an apprenticeship. The participant stated they went from one apprenticeship to another without actually completing any of the training programs they had started. When the participant was asked if they had ever had any issues with drugs or alcohol in their life, they responded: "na, no problems, used obviously, just recreational". In discussing this statement further, the participant stated they had used marijuana and ecstasy on an irregular basis. The participant stated they were introduced to the substances through a friend's mother. When the participant was asked to describe their health prior to being involved in a Reclink-supported activity, they

responded: "[mentally] fine, [physically] unfit". Currently, the participant is incarcerated where they have been for the last three years.

The participant was introduced to Reclink and the activities they support whilst in gaol. For the last three months the participant has been regularly involved in a supported football program. When the participant was asked to describe what they get out of their participation in the activity, they stated that football gives them something constructive to do in passing the time. Furthermore, the participant stated the activity gave them an escape from their reality: "you're just keeping your mind off where you are". The participant stated that they look forward to playing football each week and that it would be extremely disappointing if for any reason they were unable to participate on any given week. The participant stated that after their release from gaol they wanted to "try and get on the straight and narrow".

Christos

Born in Europe, the participant moved to Australia with their family as an infant. During their time at school the participant stated that they were bullied by other children because of their heritage. The participant spent some time in the Australian army and after receiving an honourable discharge, they married their partner. More recently, the participant has spent the majority of their time living in a remote community with their partner's family. At the time of the interview the participant was in a drug and alcohol rehab on court order. The participant stated that they had been a user of marijuana for many years. Currently, the participant does not work and has not worked for more than seven years. They live in government housing and they survive financially on a disability support pension. When the participant was asked to describe what their health was like prior to being involved in a Reclink supported

activity, they responded: "I was going downhill". The participant shared that they had been recently diagnosed with cancer and that physically they were also very overweight.

The participant was introduced to Reclink and the activities they support whilst in rehab. For the last three months the participant has been actively involved in a variety of activities including: cricket, choir, gym and a men's shed program. When the participant was asked to describe what they get out of participating in the activities, they responded: "it's a very self-esteem, very, very, encouraging thing for a person, with development and growth". In discussing this statement further, it became clear that the participant believed that the gym and cricket activities had been beneficial for them in managing their weight issues, while the choir and men's shed activities had helped them to "express how you feel". The participant stated that they had found all the activities to be a great way to socialise with others and that they believed that they had been able to form friendships with some of the other participants in the activities. In discussing their current health, the participant believed that physically they were okay; however, they had recently suffered other ailments that overshadowed any physical improvements they had achieved. In terms of their mental health, the participant believed they were the same as prior to their involvement with Reclink. In the next 12 months the participant wanted to reunite with family.

William

The participant is an Indigenous person who was removed from their family home as a child in the Northern Territory and sent to live in Victoria with foster parents. When the participant was asked how the experience of being part of the Stolen Generation affected them, they replied: "I went with it". As a result of their experience,

the participant can no longer speak their traditional language, and they lost contact with many of their family members. The participant suffered an accident in the work place and sustained an acquired brain injury and several physical disabilities. This has impacted the participant's ability to maintain any form of work for the last 12 years. Currently, the participant resides in a hostel and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through an agency worker in an organisation that assists people with mental health problems. For the last 12 months the participant has been involved in a guitar supported activity. When the participant was asked to describe what they get out of their participation in the activity, they responded that it had assisted with their coordination. The participant shared that they did not enjoy the activity because they found it difficult. In discussing their current health, the participant did not indicate that they had noticed any change either in their physical or mental health since their involvement in the supported activity. In the next 12 months the participant wanted to: "kick back with a good fishing line".

Kevin

The participant is an initiated Indigenous person who grew up in a remote community. The participant was unsure what level of education they had attained at school; they stated they were 19 or 20 years of age when they finished school. The participant went into the building trade after they left school; however, they do not have any qualifications in this area. The participant stated that they were introduced to alcohol as a young teenager which has impacted on their life: "Got me in the wrong direction for football". Currently, the participant is incarcerated in gaol. The participant has been incarcerated previously on

multiple occasions as a result of issues involving alcohol. The participant stated that they had spent, in total, approximately three years in gaol.

The participant was introduced to Reclink and the activities they support whilst in gaol. For the last 12 months the participant has been actively involved in a supported football program. Asked to discuss what they get out of their participation in the activity the participant stated that it was a chance for them to socialise with other inmates, particularly with other family members that were also in gaol: "we are one team... brothers, cousins and nephews". The participant did not indicate that they had noticed any changes in their mental or physical health since being involved in the activity. In the next 12 months the participant wanted to: "be in my community". They also stated they want to become a football umpire upon their release.

Jack

The participant is an initiated Indigenous person who grew up in a remote community. When the participant was asked about their time in school, they referred to learning their tribal ways, dancing and hunting, as their schooling. It wasn't until the participant had moved to Alice Springs that they started to get into trouble with the law because of their problem with alcohol: "come into town, get into trouble, get locked up". For the last ten years the participant has been incarcerated in gaol on numerous occasions and was in gaol at the time of the interview.

The participant was introduced to Reclink and the activities they support whilst in gaol. For the last 12 months the participant has been involved in a supported football program. When the participant was asked to discuss what they get out of their participation in the activity, they stated that they loved to play football and that playing the game was a constructive way to spend their time in gaol. The participant did

not indicate that they had noticed any changes in their mental or physical health since being involved in the activity. Upon the participant's release from gaol, they wanted "to go back to community".

Isaac

The participant is an initiated Indigenous person who grew up in a remote community; the participant did not attend school. English is a third language for the participant who also speaks two native languages. The participant began work as a stockman aged 12 and this is the only type of work they have ever done. The participant has been married for more than 35 years and has four children. Currently, the participant is incarcerated and has been there for more than six years. The participant believed that it was their issues with "grog" that has got them into trouble with the law. Discussing how being in gaol has affected their life, the participant spoke of their partner: "I think she moved on with her life... too hard to wait for her husband in here". Further, the participant stated that they had become accustomed to life in gaol: "it's sort of coming up to easy... cause I've been here for a while". The participant thought their mental and physical health were "OK" both before getting involved in a Reclink-supported activity.

The participant was introduced to Reclink and the activities they support whilst in gaol. For the last 12 months the participant has been actively involved in a supported football program. When the participant was asked to discuss what they get out of their participation in the activity, they stated that they had been given a chance to be a positive role model for other inmates: "I like to show the young men they can carry on with it [football]... they can be role model when they go home, they can take their skill back to where they come from". The participant went on to state that the activity took their mind

off other issues they might be facing, particularly problems involving their family: "take my mind off the phone some time". In discussing what they wanted to be doing after their release, the participant expressed that they had been thinking about this question themselves: "I'm looking at the same problem". On release from gaol, the participant wanted to coach football teams so that they could continue mentoring young Indigenous men in their community. The participant also made reference to the importance of taking the skills they had learnt from the Reclink-supported activity because it might assist them from returning to bad habits: "it's important to take it from the inside to the outside, carry on with it, even for me ... I might start back when I go home".

Tony

The participant was raised by a single parent. The participant stated that they were constantly bullied by other children during their time at school because they had learning difficulties. At 15 years of age the participant left school and began working. The participant stated they had remained in the one job for 15 years before they left. They cited being bullied by other employees as a primary the reason for leaving. The participant suggested that the constant bullying they faced in the workplace was the reason for them being hospitalised with mental health issues; the participant stated they were diagnosed with severe depression in hospital and that they have battled with depression since. Currently, the participant lives in a hostel and survives financially on a disability support pension. When the participant was asked to describe what their health was like prior to being involved in a Reclink-supported activity, they responded: "my mood was stressed, suicide".

The participant was introduced to Reclink and the activities they support through a case worker they met whilst in hospital. For the last six months

the participant has been involved on a semi regular basis in a supported swimming program and ten-pin bowling program. The participant stated their attendance was only semi regular because: "sometimes, I get too tired [to attend]". Asked to discuss what they get out of their participation in the activity, the participant stated: "just to get out and do something... I get my frustrations out". Having not worked for many years and being house bound by their depression on a regular basis has isolated the participant from other people. The activities have provided them with a regular opportunity to socialise with other participants. The participant stated that the ten-pin bowling activity helped them to release their frustrations that build inside them. Discussing this further, the participant stated that the action of "knocking the pins down" was a positive outlet for releasing this energy. The participant did not think they had made any friends whilst involved in either activity. When the participant was asked to describe their current health, they replied: "it's up and down". In the next 12 months the participant wanted to return to the workplace.

Jon

After completing year 12 the participant went straight into the workforce. It wasn't long before the participant lost their job because of their issues with alcohol. The participant stated that alcohol had consumed most aspects of their life: "too much drinking". Currently, the participant lives in a drug and alcohol rehab and survives financially on a government allowance. When the participant was asked to describe what their health was like prior to being involved in a Reclink-supported activity, they responded: "I wasn't thinking straight... mind all over the place".

The participant was introduced to Reclink and the activities they support through a case worker in rehab. For

the last five weeks the participant has been actively involved in a supported gym program and a ten-pin bowling activity. When the participant was asked to discuss what they get out of their participation in the activities, they stated: “enjoyment, fitness and a positive focus”. The activities in the rehab gave the participant with some enjoyment which helped to take their mind off where they were. The gym activity was also assisting the participant to feel better about their physical appearance. Finally, the participant stated that the activities gave them a focus in their recovery: “makes you strong in the mind... you thinking of your family and that drinking and you’re doing something positive like training... really keeps you not thinking of the alcohol”. When the participant was asked to describe their current health, they replied: “I feel one hundred percent good at the moment”. In the next 12 months the participant wanted to still be sober and to have found employment.

Jimmy

The participant is an initiated Indigenous person who grew up in a remote community. The participant was unsure of what level of education they had attained at school but stated that they were still very young when they left. The participant speaks two indigenous languages, in addition to English. The participant has worked as a stockman sporadically; however, due to problems with alcohol, the participant has spent long periods of time incarcerated: “pretty bad ... made me end up here”. Currently incarcerated, the participant shared that they had spent approximately 15 years in total in gaol.

The participant was introduced to Reclink and the activities they support through a sport and recreation officer in gaol. For the last three years the participant has been regularly involved in a supported football program. The participant stated they have remained involved in the football program even

when they have not been in gaol. Discussing what they get out of their participation in the activities, the participant stated: “makes my time easy...just concentrating on what you’re doing in here”. The participant spoke of how difficult it was to put issues on the outside out of mind whilst in gaol. The participant stated that the football activity helped them to focus on something different, rather than focussing on not being able to see their daughter. The participant believed they were physically healthier than before being involved in the activity; however, they did not mention any change in their mental health.

Brian

The participant is an initiated Indigenous person who grew up in a remote community. Raised by relatives with their four other siblings, the participant speaks two indigenous languages, in addition to English. After completing year 12, the participant stated they began work as a sports and recreation officer. The participant has been in trouble with the law as a result of their issues with alcohol. They stated they were first introduced to alcohol after winning a football grand final. Currently, the participant is incarcerated and has spent approximately 18 months in total in gaol. When the participant was asked of their experience in gaol, they responded that it was hard because they don’t get to see their family or their daughter much.

The participant was introduced to Reclink and the activities they support through word of mouth in their local community. Over the last four to five years the participant has been semi regularly involved in a supported football program. The participant stated that they wanted to get involved as soon as they heard that Reclink ran activities in the prison. Asked to discuss what they get out of their participation in the activities, the participant stated: “better than sitting down doing nothing...keeps

me happy”. The participant used the activity as a way of not thinking about what was happening on the outside. Boredom was another issue for the participant in gaol; the football program gave them something to look forward to each week and to constructively use their time. The participant stated that they wanted to “get a job and stay away from drugs and grog” when they are released.

Pete

Diagnosed with schizophrenia at the age of 14, the participant has struggled to maintain their independence. The participant currently lives in a housing commission flat. The participant described how difficult it has been for them to find any form of employment: “to tell you the truth I just can’t get a job doesn’t matter what I do”. The participant volunteers their time at a drop-in centre for people with mental health issues. When the participant was asked to describe what their health was like prior to being involved in a Reclink activity, they skirted around the conversation, either misunderstanding it or not wanting to talk about it.

The participant was introduced to Reclink and the activities they support through a agency worker. Over the last three years the participant has only been involved in a supported darts program. However, in the course of the conversation it became clear that the participant had little knowledge of who Reclink is and what they do: “it’s referred to but only casually”. The participant said that being involved in the darts program has helped alleviate the “sheer boredom” that they face on a daily basis. The participant also stated that they were only at the darts activity because it was a part of their volunteering commitments. When asked if the participant had made friends whilst being involved in the activities, they responded: “a lot of very sincere acquaintances, no friends”. In the next 12 months the participant wanted to find part time work.

Alex

Living with both mental and physical disabilities since childhood, the participant's quality of life has been severely impacted. The participant has never been able to find permanent accommodation and has resided in hostels for close to 35 years. The participant stated that they have found it difficult to find stable employment which has contributed to their financial problems. However, currently, the participant works part time at a drop-in centre for people with mental illness. The participant stated that they had very poor both mental and physical health prior to being involved in Reclink activities.

A social worker employed at the drop-in centre the participant frequents introduced them to Reclink and the activities they support. For the last two years the participant has been involved in a supported darts activity. Although the participant was involved in other sporting activities, they stated these were not supported by Reclink. The participant stated that involvement in the darts activity had lifted their spirits in general as they felt happier whilst participating. Meeting new people and making friends at activities were noted as two other significant outcomes that the participant has noticed since being involved in the activity. In the next 12 months the participant wanted to learn how to use a computer and take cooking lessons.

Eric

The participant was formally diagnosed with clinical depression and anxiety later in life but believed that they have struggled with their mental health for a long time prior to the diagnosis. The participant stated that they are currently not working, they live in a housing commission flat, and that they live a very insular life which has had a negative effect on their overall health and wellbeing. The participant stated that their circumstances had also made it difficult for them to be financially independent which made

them especially grateful for their commission flat: "[without it] probably be on the streets".

Reclink and the activities they support were introduced to the participant 12 months ago through their contact with an agency that assists people with mental illness. The participant could only identify one activity of the many that they are involved in that received Reclink support: "I don't think I've done any of their other activities, to my knowledge". The participant stated that they enjoyed the interaction with people at the activity and that it was something that they looked forward to: "although it's only one day a week, it's a focus". When the participant was asked whether or not they had made friends whilst participating in the activity, they responded: "I think so, yeah". The participant had difficulty answering when they were asked what they wanted to be doing in a year from now; eventually, they responded: "I don't know".

Timothy

For the last five years the participant has been trying to piece together a life for themselves after spending close to 23 years in gaol. The participant described their time in gaol as if their life almost came to an end. Having no initial support on the outside following their release made the participant's reintroduction into society very difficult. The participant's desire to be a part of society is reflected in the activities that they get involved in. The participant has been unable to find work since their release and is therefore somewhat financially dependent on their current partner.

Reclink and activities they support were introduced to the participant through their attendance at a community house almost three years ago. Since the introduction, the participant has been regularly involved with Reclink, participating in a drama group and a choir. The participant has cherished their involvement with Reclink as it has provided them with

opportunities to reconnect with the community: "helps me... I'm joining a community...it's like opening a door inside of me". The participant also noted that their health and wellbeing had noticeably improved since they started the activities. Having the opportunity to make friends at the activities was another positive outcome for the participant. Reclink has further assisted the participant through their transformational links program: Reclink paid the membership fees to a drama group that the participant was keen to join. In 12 months' time the participant wanted to finish building their campervan and to travel around Australia.

Anna

The participant was diagnosed with bipolar disorder at an early age; the illness has made it very difficult for them to maintain normality in their life and they have struggled to maintain a job and sustain relationships with people. The participant has been admitted to hospital numerous times for treatment of the illness, which has also been disruptive to their life. The participant stated that their health has been the best it has ever been in the last five years. Currently, the participant lives in a flat and is not working.

The participant was introduced to Reclink and the activities they support through their case worker. Over the last 18 months the participant has been a regular attendee at a Reclink-supported choir. The activity is a major highlight in the participant's week as it provides them with a sense of belonging to something more than just a choir: "we are like a family we support each other... [I'm] lost without it". The participant has also formed many friendships with people in the choir and this has been very important to them.

In the next 12 months the participant wanted to continue their connection with the choir hopefully singing in concerts and maybe producing a CD together. Finally, the participant

said they wanted the choir to become “more well-known than the Choir of Hard Knocks”.

Megan

Having lived with a physical disability all their life, the participant has worked hard to maintain independence for themselves: “it has its difficulties but it’s all in the attitude”. The participant has always worked part time to supplement their disability allowance and lives independently. When the participant was questioned about what their health prior to being involved in Reclink, their response only referred to physical health: “not awesome”.

The participant found out about Reclink and its supported activities through a previous co-worker. The choir activity is the only activity they get involved in because, firstly, they are not interested in sports, and secondly, they didn’t think they could allocate any more spare time. When asked what the participant gets out of participating in the choir, they responded: “I love working with the people... love singing... gives me a mid-week break I guess”. The participant believed that they had been able to form friendships with some people in the choir and that these friendships were important to them. During their time in the activity the participant had not noticed a change in their physical or mental health. The participant was unsure what they wanted to be doing in the next 12 months: “I don’t know... I really don’t know”.

Molly

The participant, who suffers with post-traumatic stress, has been unable to live their normal life since becoming a victim of a tragic event. The participant has been unable to work since the event and struggles to form basic relationships with people. Over the last ten years the participant has spent time in and out of hospitals dealing with depression and anxiety associated with the event. The

participant described their health as: “not very healthy, I was in hospital” prior to joining a Reclink activity.

Reclink and the activities they support were introduced to the participant through another participant. Over the last 12 months the participant has been involved weekly in a choir supported by Reclink. The choir has offered the participant a way of expressing their emotions; further, they described how important that music was for them because it acted as a “natural medicine”. The participant also said that the activity also provided them with a safe place to come and meet new people who they could just be themselves around. Having formed several friendships with other participants in the choir has encouraged this participant to think about trying other Reclink activities in the future. Referring to their present mental health, the participant believed it was still poor, rating it “a three or four out of ten”. When the participant was asked what they wanted to be doing in a year’s time, they responded: “that’s too hard”.

Hannah

The participant is a young student who has battled with depression their entire life. Recently, the participant succumbed to their mental illness and needed to be hospitalised for a period of time. The participant stated that they have never moved out of the family home and have also never had a job. When the participant was asked to describe what they thought their health was like prior to joining a Reclink activity, they responded: “a train wreck that got progressively worse”.

A year ago the participant became involved with a theatre group that was in fact supported by Reclink but it wasn’t until the participant joined a Reclink choir that they understood Reclink’s previous involvement in the theatre group and other various activities. The participant stated that their participation in the choir has directly improved their living

situation and social networking ability; they stated that in general they were coping with their illness better: “nearly everything in my life that was a worry before, has gone up”. When asked what the participant gets out of their involvement in the activities, they stated: “I get a lot of energy from performing”. They also thought their involvement in the theatre was almost the best thing that they had achieved last year.

The participant believed that they had made great friends at the activities because they had shared similar social experiences: “it’s finding out that there are other people who have the same issues as you”. In the next 12 months the participant wanted to gain part time employment, get involved as a volunteer somewhere and build upon their social network.

Jordan

For many years the participant has struggled with isolation at home and suffered bouts of severe depression as a consequence of a significant mental illness. The participant has been hospitalised on one more than one occasion: “I was in a cycle of in and out of hospitals for a while”. The participant has their own flat but they are unable to work because of their illness; they have a young teenage child that visits them two days a week.

After watching Reclink’s Choir of Hard Knocks on television the participant did some investigating and found that there was a similar choir in their area. After attending “an interview”, the participant is now a regular choir member and is involved on a weekly basis. Over the last 18 months the participant has also become involved in other Reclink-supported activities, such as a theatre group, a street orchestra and touch football. The participant stated that since being involved with Reclink they have not returned to hospital; the participant believed this was a direct result of their involvement in the activities. As stated by the participant, other key

benefits from their Reclink involvement were: they are now more confident in themselves; they are happier; and they have a strong sense of belonging with the other participants. Reclink activities are ongoing and the participant felt that the organisation created stability for participants “who are a bit fragile”. In summing up the benefits, the participant stated: “it’s probably kept me alive in a sense”. When the participant was asked what their health is like now in comparison to before participating in a Reclink activity, they stated that there was a “big change” and that their mental health was greatly improved: “I don’t think about suicide anymore”.

The participant has also used Reclink’s transformational links program to secure financial assistance from the organisation to join a local theatre group. The participant had no doubt that without Reclink’s assistance with the tuition fees they would not have been able to afford the costs of being involved in a mainstream theatre group. In the next 12 months the participant wanted to increase their fitness and “maybe” find causal work, depending on their mental health.

Sarah

The participant was a victim of sexual abuse as a child and into their teenage years. After attempting to put these events behind them, the participant suffered a mental breakdown later in life. The breakdown not only cost the participant their job but also their home and temporary custody of their child. The participant spent a lot of time in and out of hospital seeking assistance as they had regular thoughts of committing suicide. The participant spent a period of time living on the streets as they had nowhere to go; eventually they secured a place in a refuge shelter. The participant currently lives with their partner in a housing commission flat and has custody of their child. When the participant was asked to describe their mental and physical health prior

to being involved with Reclink, they stated: “pretty much at its bottom really”.

The participant was introduced to Reclink and the activities they support through a social worker in a refuge. In the last 18 months the participant has become involved in a choir and a street orchestra, both supported by Reclink. The participant stated that the activities were an integral part of their ongoing plan to stay healthy. When the participant was asked to explore this notion further, they stated that when they participate in Reclink activities, in particular the choir: “I feel connected to myself, I feel connected to others, I feel connected to the world”. The participant shared their gratefulness for the friendships that they had formed whilst in the choir and the importance of those relationships to them. Overall the participant thought that the support that they had received whilst at Reclink activities: “kept them solid under circumstances where I was not”. The participant wanted to “give back” to Reclink in some way over the next 12 months, but was unsure how they might do this.

Jennifer

The participant has had both a mental and physical disability since birth, but despite this, they have lived a very independent life. After losing their partner to cancer several years ago, the participant is still coming to terms with not having them around anymore. The participant said that they had worked hard to try and keep themselves active since their partner’s death. The participant was married for over 40 years and has several children. When the participant was asked to describe their health prior to getting involved in Reclink activities, they stated: “wasn’t too bad”.

The participant was introduced to Reclink and the activities they support through their involvement in another organisation that was running an arts program in their local community. For the last 12 months the participant has

been involved in a Reclink-supported choir. The participant stated that they enjoyed both the social and performance aspects of the choir. The other major benefit that the participant identified was that they considered the activity a “relaxing day” for them: “Wednesday is a day I really set aside... just being with friends... and having that support”. On the topic of friends, the participant did not hesitate to acknowledge the friendships that they had formed with other participants whilst in the choir: “some good, close friends”. The participant did not believe there was a significant change in their mental or physical health when making comparisons to before their Reclink participation and now. Asked what they wanted to be doing in a year from now, the participant responded: “I don’t know...I live in the moment”.

Nicholas

The participant has had a long history of unemployment and homelessness, which has been compounded by the fact they suffer from a mental illness. It was only recently that the participant has become eligible for affordable housing through the state government. Discussing their life and living situation the participant explained that they “don’t have many possessions... the clothes I stand up in is all I have”; they suggested that this was as a result of their circumstances. The participant stated that their physical health prior to being involved with Reclink was “quite good”, whereas they thought their mental health was not: “weathering the punches... especially the last 13 years”.

The participant found out about Reclink and their supported activities through word of mouth; they have since been involved in a Reclink choir for almost one year. Human contact and the shared understanding between participants were the two notable positive experiences that the participant got out of being involved in the activity. The participant was not sure if they had made friends whilst participating but did say that they

had shared conversations with other participants over a cup of coffee after the activity on several occasions. When the participant was asked to describe what their health was like now, they responded: “you can only say it [Reclink] helps keep me stable”. The participant did not have any idea of what they would like to be doing in a year from now: “no... It’s just day to day”.

Angela

A victim of childhood sexual assault, the participant attempted suicide aged just 15 because of feeling hopeless and alone. The participant stated their attempt on their life came about because: “I think I was desperate, basically”. After recovering in hospital the participant went to live with extended family working on a farm. Approximately six years ago the participant again suffered a mental health crisis. Married with two children at the time, the participant’s health related issues strained their personal relationship in the family home and as a consequence they moved into shared hostel accommodation. The participant has since been able to purchase their own unit to live in following the divorce. The experience of the divorce has been exceptionally difficult for the participant because once their health started to improve they were keen to resume their relationship; however, these feelings were not reciprocated. Unable to work due to their health, the participant relies on a disability support pension for financial assistance. When the participant was asked to describe what their health was like prior to being involved in Reclink, they responded: “worse than what it is now”.

A personal friend of the participant introduced them to Reclink and the activities they support approximately three years ago. The participant is involved in the supported choir activity. When the participant was asked to discuss what they get out of being involved in the choir, they

responded: “[Reclink has] helped me in many ways... [Singing] lifts me up, lifts my spirits”. The participant went on to say: “it’s been a big part in my recovery from my mental illness”. The participant was asked to explain how their involvement in an activity like the choir had been such a catalyst for change in their life. They explained how they feel emotionally supported by others involved in the activity: “when you have a mental illness you need a good support network... if you don’t have a good network it’s a harder road to travel”. When the participant first came to the activity they were supported by a social support worker, this worker used to also provide transport to and from the choir venue. The participant discussed how singing and performing in front of others have boosted their confidence in their own abilities; this increased confidence has led them to attending the activity independently, including organising their own way to and from the choir venue. The participant also recognised that they had made some close friends with other participants involved in the choir. When asked if their health had improved since being involved in the choir, they responded: “overall my general mental health has improved”. In the next 12 months the participant wanted to find a partner and they also wanted to have further improvements in their mental health: “I get pretty lonely by myself... I’d like to think I had a partner and that my mental health kept on improving”.

Joseph

The participant described having a normal life until they suffered an injury from an undisclosed incident. The participant stated that they’d needed surgery to rectify the problem and that it became impossible for them to maintain their job. Losing their job placed significant pressure on them financially until eventually they were forced to move out of their rented home. The participant stated that at this time they had become “basically homeless”. The participant described

relying on the generosity of friends who allowed them to couch surf while awaiting medical treatment. When the participant was asked to describe their health prior to being involved in a Reclink activity, they stated that physically they were “not great”; however, mentally, their health was: “okay”. Currently, the participant is living in a men’s hostel and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through their case worker. For the last 12 months the participant has been involved in a supported choir and an orchestra. When the participant was asked to discuss what they get out of being involved in the activities, they responded: “sense of belonging somewhere, I have friends, very, very close friends”. The participant also shared that the sense of belonging to something had helped improve their self-esteem. There had not been a noted change in the participant’s health, other than the change in their physical health since their operation. In the next 12 months the participant wanted to be: “still involved with the Reclink activities”.

Benjamin

At the age of 15 the participant had a mental breakdown related to their experience of being a victim of sexual abuse. The participant shared that they were regular users of heroin and amphetamines in their early adulthood life through until recently and that their substance abuse stemmed from their mental health problems. The participant discussed being incarcerated on multiple occasions; their longest period of time in gaol was 18 months. Currently, the participant survives financially on a disability support pension and lives in government housing.

The participant was introduced to Reclink and the activities they support after having a conversation with their psychologist. For the last 18 months

the participant has been involved in a supported choir and an orchestra. Asked to describe what they get out of being involved in the activities, they responded: “having that very different environment to welcome you into it allows things to shift in your head... and having an environment that still accepts you as a person regardless of some of the activities you have been doing”.

The participant stated that they had formed some very close friendships with other participants and that they also see these people outside of Reclink-supported programs. Furthermore, the participant stated that opening up to new people had been a new experience for them because they tended to isolate themselves: “I’m very reclusive”. The participant believed that they have seen an improvement in their mental health since being involved in the activities: “I am more in control of myself, I’m stronger”. In the next 12 months the participant wanted to continue their involvement with Reclink: “I’d still like to be involved in the Reclink activities”.

Okwa

The participant was born in a war-torn African country. Orphaned at a young age, the participant has had no formal schooling; they discussed the difficult childhood they had in which they struggled to survive without any family. Eventually the participant escaped across the border into another country and spent some time in a refugee camp. The participant stated they came to Australia with their husband and children to start a new life. The participant stated that on their arrival their husband “ran away”, leaving them the sole carer for their children. At the time the participant could not speak or write English and was very scared of their new environment. They hid in their accommodation isolating themselves from others for several years.

The participant was introduced to a Reclink supported activity through

their involvement in an agency that assists new arrivals in learning English. For the last five months the participant has been involved in a supported visual arts activity, despite being unaware of who Reclink is. In discussing what they get out of being involved in the activity, the participant responded: “no have my parents, no have any family in Australia, my family is these people who sit together”. The participant spoke of being able to momentarily forget the problems they face thanks to the enjoyment they get out of being with the other participants: “it’s nice... you feel good”. In the next 12 months the participant wanted to continue learning English so that they could eventually secure employment.

Stephanie

The participant left school at the age of 16. The participant stated they left school because they were bullied by other students. After leaving school, the participant gained employment in various domestic labouring jobs. The participant stated they have not worked for more than five years because they were also bullied in the work place. When the participant was asked if they have ever had any issues with drugs or alcohol, they responded yes to both. The participant was unwilling to discuss this topic further, other than to say they first became involved in drugs at the age of 17. When the participant was asked to describe their health prior to being involved in a Reclink activity, they responded: “pretty bad”, both mentally and physically. Furthermore, the participant shared that as a result of prolonged substance abuse they had developed drug induced psychosis and they had been diagnosed with schizophrenia. The participant’s mental health is also affected by bouts of depression and paranoia. It has become a common occurrence for the participant to be hospitalised to help manage their mental health issues: “yes, been in and out”. Currently, the participant is living in transitional

housing and survives financially on a private trust allowance.

The participant was introduced to Reclink and the activities they support through their case worker in transitional housing. In the last six months the participant has been involved on fortnightly basis in several supported activities: pool, table tennis and touch football. The participant believed that their involvement in the supported activities is the only time they leave their bedroom: “get me out of the house, and it’s interesting”. When the participant was asked what is interesting about the activities, they responded that they get to “meet new people”. The participant acknowledged that by being physically active they had found it easier to manage their mental health issues. The participant also discussed feeling happier when they are involved in a Reclink activity. However, this sense of happiness diminished when they return to their accommodation. When asked what they would like to be doing in a year’s time, the participant responded that the question was too personal for them and that they did not want to comment.

Victoria

Born with cerebral palsy, the participant found schooling difficult and decided to withdraw at age 16. The participant went straight onto a disability support pension from this time forward. When the participant was asked to discuss how having cerebral palsy may have affected their life, they responded: “nothing really, ‘cause I can do everything, I’m like a normal person”. The participant stated that they had been hospitalised on one occasion for mental health problems: “I got really sick... they said I had schizophrenia, but it wasn’t”. The participant has a daughter who was also born with cerebral palsy and is in their twenties. Although they do not live together, they have some contact with each other. Currently, the participant lives in a commission flat and survives

financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through their case worker less than 12 months ago. In this time the participant has been involved in a variety of supported arts classes, a sewing activity and a supported darts program. When the participant was asked to discuss what they get out of attending the activities, they responded: “just going there and joining in”. This is significant for the participant who suggested that if they were not involved in the activities, they would spend their time “just sleeping at home”. The participant stated that they had also made several friendships with other participants. However, they have not been involved with these people outside of the activities as yet. The participant stated that currently their health was: “alright at the moment”; they had not seen any change since being involved in the activities. In the next 12 months the participant was unsure of what they would like to be doing: “I don’t know ... whatever comes, comes”.

Justin

After becoming sick in their final years of schooling, the participant was hospitalised due to their mental health issues: “I went crazy”. The participant was diagnosed with schizophrenia; after their release they went to live with their sole parent. Currently still living with their mother, the participant survives financially on a disability support pension. The participant volunteers their time once a week with a charitable organisation.

The participant was introduced to Reclink and the activities they support through their doctor. Over the last three years the participant has been involved in a supported men’s group and a soccer program. The participant struggled to respond to questions asking them to discuss what they get out of their participation in the activities. They were able to say that

the activities were “fun” for them and that it gave them an opportunity to get out of the house. The participant further stated that they look forward to the activities, especially the soccer program: “the day before I think soccer is pretty cool”. The participant was not sure what they wanted to be doing in a year’s time.

Michael

At the age of six, the participant and their siblings were all placed in orphanages after their father, an alcoholic, killed their mother. The siblings were all separated and sent to different institutions, leaving the participant to fend for themselves. The participant stated that their formal education ceased at the age of 13 because they were put to work making cane baskets. They stated they did not have a choice in what they did during their childhood and that any resistance was met with severe consequences: “we just done our thing and we just had to live from day to day there and put up with what was dished out there”. As the participant got older they were sent to work on several farms. They worked unpaid and lived on modest rations, usually sleeping outside with the livestock. The participant was sent back to the orphanage after having trouble with one particular farm owner. Asked to describe their time in the care of the orphanage, they replied: “I’ve never been to hell or that but I know it was traumatic... it was very frightening, very scary”. The participant described how once they became too old to stay at the orphanage, they were sent to a detention centre and kept captive. Upon being released several months/years later, the participant stole a car with a friend and ended up in gaol. The participant shared that they had spent many years of their life in prison. In describing their experience of being in prison, the participant stated: “they treated me like a king”. The participant believed that going to gaol had been the best thing to happen to them because they had somewhere to sleep and that

they were fed regularly. Furthermore, the participant suggested that the conditions in the gaol were so good that they would commit crimes almost immediately upon their release just to be sent straight back inside: “I broke into a shop just to get back into gaol”. The participant stated that it had been very difficult for them their whole life to form any sort of long term relationship with people. The participant has suffered regularly with panic attacks and depression. They have also experienced long periods of unemployed and homelessness. Currently, the participant lives in government housing and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through a case worker at another agency that they frequent regularly. For the last two years the participant has been involved in a supported art program. When the participant was asked to describe what they get out of their involvement, they replied: “I get lot of happiness ... a lot of excitement ... I can be with and around other people too, that are around about the same as what I’ve been going through in my life”. The participant stated that their involvement in the supported activity had helped to build their self-confidence through their achievements in completing art pieces and developing friendship with other participants. Furthermore, the participant stated that their involvement in the activity allowed them to temporarily forget any problem they might be facing on any given day: “I seem to try turn off”. When the participant was asked to describe their health now, they stated that their mental health had improved and that they have needed less medication to help manage their mental health issues. It is important to note the participant believed that other programs, in addition to Reclink, have also assisted in the change to their health. In the next 12 months the participant wanted to be doing the same things as now.

Amanda

After being expelled from high school in their final year, the participant withdrew from reality any way they could: "I basically lived my life losing myself". The participant was introduced to drugs by a sibling around the same time and the participant became regular user of marijuana, amphetamines and, eventually, ice and heroin replacement drugs. When the participant was asked to describe how their drug habit affected their life, they responded: "[initially] loved it". It wasn't until much later when the participant's habit progressed into the use of ice and heroin replacement drugs that things started to fall down: "it just ruined me... I totally changed for the worst and all I was concerned about was using". After losing friendships and straining relationships with family, the participant became homeless; they were sleeping in a men's shelter at this time. The participant shared that they have been in rehab on several occasions but each time the reverted to their drug use. Asked why they continued to be a user of drugs, the participant responded: "I didn't have a motivation to get and stay clean". The participant spoke about their poor physical and mental health prior to being involved in a Reclink activity: "health was on the slide". They shared that they had suffered a drug induced heart attack, they suffered with paranoia and psychosis related schizophrenia. Currently, the participant is raising a young family, is living in government housing and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support whilst in rehab. Over the last two years the participant has been involved in a supported orchestra activity. The participant stated that their love for music provided them with a purpose to remain in rehab at the time and to remain drug free since: "it gave me a purpose to get up for". The participant said the instrument building component of the orchestra

program has been a fantastic source of achievement and motivation for them. Furthermore, the participant believed that having an activity like the orchestra to focus on helped with improving their mental health: "absolutely, I think keeping occupied, that's very important". When the participant was asked to describe their current health, they answered: "my health pretty good at the moment, my physical health is fairly well, I'm feeling fairly emotionally stable". In the next 12 months the participant wanted to continue being involved in the supported activity and to find employment.

Joan

The participant attended school, completing year ten prior to training as a nurse. The participant stated they had lived a relatively normal life, getting married, having children and working. The participant stated that they remained on the family farm working the land for on their own after their marriage ended. They stated that, although this was rewarding work, they isolated themselves from others: "the only contact I had was getting the groceries". After retiring, the participant stated that they were able to support themselves as a self-funded retiree. During the global financial downturn the participant lost a substantial amount of money which made life financially difficult. Furthermore, in the last two years the participant has suffered a series of strokes which has had an impact on their short term memory. Currently, the participant is living in a lifestyle resort and survives financially on a disability support pension. Asked to describe their health prior to becoming involved in a Reclink activity, the participant stated that physically they were "not great". The participant was unable to describe the state of their mental health prior to their involvement in Reclink activities: "I don't really know".

The participant was referred to a community centre for women by their doctor following their health

complications. It was whilst attending the community centre that the participant was introduced to Reclink and the activities they support. For the last two years the participant has been involved in yoga and belly dancing classes. The participant stated that the activities had provided them with some structure in their week, as well as opportunities to meet new people and a place to regularly exercise. Having regular contact with other participants at the activities in the community centre had instilled a sense of belonging for the participant: "I have a real sense of pride about what this place actually represents, fitness for women, who in my experience have spent their whole life inside a house with almost no outside contact". The participant discussed the friendships that they had formed with other participants and how these participants are now a part of their social support network. When the participant was asked to discuss what their health is like now, they responded: "I'm nowhere near as depressed... I don't get depression anymore ... that seems to have gone". In the next 12 months the participant wanted to continue in the activities they were involved in now and to go on an overseas holiday.

Zachary

The participant was raised in foster care and left school aged 13. At the age of 14 the participant started drinking and smoking, and was in trouble with the law: "I got mixed up with the wrong crowd, ended up going to boys' homes". The participant stated that they developed a drug habit in their late teenage years and used speed and heroin. By the time the participant turned 20, they had been incarcerated and had spent more than four years in gaol. The participant described how they were unwell at the time they committed the offence that sent them to gaol; they were later diagnosed with schizophrenia. When they were asked how they believe their mental health issues had affected

their life, the participant responded: “it’s a different world you go to”. After leaving gaol the participant struggled with a speed addiction for another eight years. Currently, the participant lives with their mother in government housing and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through their case manager. For the last three months the participant has been involved on a weekly basis in a supported soccer program. The participant enjoys the activity because it is one of the rare occasions they leave the family home and interact with other people. When the participant was asked if they had made any friends in whilst involved in the activity, they stated: “I’d like to think I’m familiar with the people who come”. The participant found it difficult to reflect on their current health was like: “I don’t know what my problem is when I’m sick, I haven’t been sick since I’ve been here”. The participant was unsure what they wanted to be doing in the next 12 months: “it’s hard to say with me ‘cause I sort of live day to day”.

Cody

The participant moved around a variety of schools and did not have a great experience in school because they were regularly bullied by other students: “I didn’t enjoy school very much, ‘cause I was picked on a lot”. The participant completed high school and went onto university where they completed an undergraduate degree. Soon after finishing their degree, the participant was employed and they worked in an office job for four years. The participant was not happy in their chosen field and so returned to university; it was here they experienced their first manic episode. The participant was later diagnosed with bipolar disorder. When the participant was asked how their mental health had affected their life, they stated: “I felt like committing suicide”. The participant has been

in trouble with the law on several occasions and currently resides in a secure psychiatric facility.

The participant was introduced to Reclink and the activities they support through the staff at the hospital they are living in. For the last five months, the participant has been involved in a supported drama program. The participant stated that the activity had been very good for them: “it gives me something to look forward too, to hope for, to aim for”. Involvement in the activity has been a successful way for the participant to build their confidence through interacting with other participants: “getting up in front of a group and performing and letting your inhabitation go”. The participant believed that they have formed friendships with other participants through the activity. These friendships were particularly important to the participants because the opportunity to interact with people outside the hospital is rare: “I look forward to seeing them every time I come”. The participant believed their health, particularly their mental health, had improved since being involved in the supported drama program.

Samuel

The participant stated that they struggled with a learning difficulty at school. After completing year 12, the participant moved out of the family home and into a boarding house. When asked to discuss why they had left the family home, the participant suggested that they were too much for their single mother to handle. From the age of 18 the participant has worked selling copies of the Big Issue; they stated they have done this job for over 15 years. The participant shared that they have struggled with depression on a regular basis and that at times their mental health can be very debilitating for them. Currently, the participant lives in a men’s boarding house and survives financially on the sales they make selling the Big Issue, supplemented with a disability support

pension. When the participant was asked to reflect on their health prior to being involved in a Reclink-supported activity, they responded: “never thought of it”.

The participant was introduced to Reclink and the activities they support through a former Reclink employee. For approximately the last three years the participant has been involved in a supported drama activity. The participant gets much enjoyment out of the activity and believed that it has been good for their mental health: “drama is all about expressing yourself, I guess”. Furthermore, the participant stated that they got a real sense of achievement when they performed to audiences. The participant sees the drama activity as a part of their weekly routine rather than something they look forward to: “it’s just an every week thing”. In discussing whether or not they had formed friendships with any of the other participants in the activity, the participant stated they had made some good friends; however, they have yet to catch up with any of these people outside of the activity. The participant was unsure of what they would like to be doing in the next 12 months: “I dunno I will see what happens”.

Aaron

The participant was born with severe intellectual and physical disabilities. They are unable to communicate verbally and require full time care. Living with their parents, the participant spends the majority of their time in a care facility during the day. The participant was introduced to Reclink and the activities they support through their carer and for the last three years they have been a regular attendee of a supported choir activity. When the participant was asked what they liked about the activity, they communicated through sign language that they enjoyed listening to music, seeing other people and eating the food that was provided each week. The choir activity is the

primary interaction the participant has with people other than their carer. The participant conveyed that they were always happier when they attended the activity.

Dylan

The participant was born with an intellectual disability and attended a school for people with special needs. After completing school, the participant moved out of the family home and into full time care in a hostel. The participant stated that they do not see their family very much, other than a sibling of theirs who is in the same position. The participant has sold the Big Issue on a casual basis to supplement their disability support pension. When the participant was asked if they have ever had any issues with their mental health, they responded: "I don't know where to begin". They have struggled with depression for most of their life and can occasionally have issues with anger management because they feel misunderstood.

The participant was introduced to Reclink and the activities they support through their case worker. For the last three years the participant has been regularly involved in several activities including darts, lawn bowls, ten-pin bowling, choir and drama. When the participant first started attending the supported activities they needed their worker to attend with them because they were unable to be independent. The participant shared how their confidence had grown significantly and how much happier they were since becoming involved in the activities. They now attend independently from their case worker and use public transport to get to and from several of the activities. The participant stated that they had made many friends at the activities and they enjoyed catching up with the other participants. When the participant was asked to describe their current health, they responded: "I don't know". The participant also did not know what they would like to

be doing 12 months from now: "I don't think about it".

Colin

The participant was born in the United Kingdom and moved to Australia at the age of 17 to live with their mother. Having only completed school up to the age of 15, the participant has only ever worked as a casual labourer. Asked if they have ever had any issues with drugs and alcohol, the participant responded: "many a time". The participant stated their habit started with smoking marijuana before progressing quickly into the use of speed and, on one occasion, heroin. The participant has been in trouble with the law on several occasions and is currently incarcerated in a secure psychiatric facility. The participant stated that they had been in this institution for approximately ten years.

The participant was introduced to Reclink and the activities they support through word of mouth in the hospital. For the last two months the participant has been attending a men's shed and drama supported activities. The participant stated they have enjoyed the activities because they were "something different" to being inside the hospital grounds all day. They believed attending the activities has had a positive effect on their mental health because they were able to interact with others outside the hospital. The participant did not think that they had made any friends with other participants through the activities.

Brendon

After finishing high school the participant went on to complete an undergraduate degree at university. On leaving university the participant suffered a nervous breakdown and was later diagnosed with schizophrenia. When the participant was asked how their mental health had affected their life, they responded: "my mind was dysfunctional, I couldn't,

I had abnormal thinking patterns, I became very isolated". The participant shared that they have had an issue with marijuana since their diagnosis; they suggested the reason they smoke marijuana was because they were bored, depressed and sick. Currently, the participant lives in public housing and survives financially on a disability support pension. For the last six years the participant has been able to maintain part time work, one day a week, in a cleaning company.

The participant was introduced to Reclink and the activities they support through a support worker. For the last two years the participant has regularly attended supported tennis and soccer activities. The participant stated they had a great time in the activities because participation helped build their self-esteem and made them feel a part of a team. When the participant was asked how the activities achieved this, the participant responded: "everybody says hello to me... if I do a good shot everybody pats me on the back". The participant stated they had made friends with other participants, particularly with the group involved in the tennis activity. When the participant was asked to describe their current health, they responded: "it's a fight for mental health, I come down here run around the paddock for two hours and I know that I will have a good mood for a period of time". In the next 12 months the participant wanted to start a small business with an idea they had been developing over the last few years.

Amber

After completing high school, the participant went on to university where they started to experience poor mental health. The participant shared that they had suffered with bipolar disorder and post-traumatic stress disorder for many years since. They stated that their mental health issues centred on the fact they were the victim of child sexual abuse. When the participant was asked to describe in what ways

their mental health had affected their life, they stated that it had been difficult for them to develop and maintain relationships with people and that they had experienced isolation because of the stigma attached to their disorder. The participant has been hospitalised on several occasions for mental health reasons and it was only recently they suffered another “bad episode”. It has been difficult for the participant to maintain their independence during times of poor mental health, relying greatly on family for assistance with temporary living arrangements and financial support. The participant has worked previously, but they have not had paid employment in more than 20 years. Currently, the participant lives in a private rental and survives financially on a disability support pension. When the participant was asked to describe their health prior to being involved in a Reclink-supported activity, they responded: “I was more isolated”.

The participant was introduced to Reclink and the activities they support after accessing a community house for women. For the last two years the participant has been regularly involved in two supported activities: yoga and a drama group. When the participant was asked to discuss what they get out of being involved in the activities, they suggested that the activities provided them with a chance to build new relationships with other participants; furthermore, it had improved their independence and their confidence. As a result of the participant’s regular attendance in the two supported group activities, they believed they were “much more interlinked now” with other people. Regular interaction with the other participants has also improved the participant’s confidence: “strong sort of core, it’s not the different people all the time, so I don’t get fazed by strange environments”. The participant stated that they had formed friendships with some of the other participants and described these new friendships being important to them because of their past experiences with relationships:

“it’s not something that I was very proficient at”. The participant stated that they had also lost a considerable amount of weight which had improved their physical health. Having improved physical health has increased the participant’s mobility which has had a direct impact on their ability to maintain their independence. In the next 12 months the participant wanted to continue their participation in the Reclink-supported activities and to continue to improve and expand their relationships with other people.

Liz

The participant discussed living what they described as “a normal life”. The participant finished school in year ten, after which they found work; soon after, they met a partner and they married. The participant has three children and has worked the majority of their life to support their family. The recently retired participant stated that they have found it difficult to adjust to their new lifestyle. When asked to describe their health prior to participating on a Reclink-supported activity, the participant responded: “not too good at that moment”. The participant stated they were physically overweight and that their mental health was not the best because they had started to feel isolated.

The participant was introduced to Reclink and the activities they support after attending a community centre for women. For the last ten months the participant has been involved in a yoga activity and more recently has started a belly dancing activity. The participant stated that the activities had been a great way for them to readjust after working life. They have formed friendships with other participants and they are more physically active. When the participant was asked to describe their current health, they responded: “pretty good”, both mentally and physically. In the next 12 months the participant wanted to travel with their partner.

Robert

The participant stated that their parents separated whilst they were young which resulted in them being moved around a lot from the care of one parent to the other. Leaving school at the age of 16, the participant found work as a builder’s labourer. The participant stated that not long after commencing work, their mental health deteriorated. The participant has been hospitalised on several occasions and has struggled to maintain long periods of improved mental health. The participant has struggled to maintain any form of independence as they have not worked for more than 20 years and experience regular episodes of poor mental health. They have never lived outside of the family home and survive financially on a disability support pension.

The participant was introduced to Reclink and the activities they support after reading a notice board at an agency the participant frequents for people with mental health problems. For the last four months the participant has been involved in a supported soccer activity. When the participant was asked to discuss what they get out of the activity, they responded: “I really like it, it’s fun... I wanna get up in the morning, it’s one of my favourite days”. In discussing their current health the participant stated: “with the right drugs I can handle it”. In the next 12 months the participant wanted to still be doing the things they are doing now.

Shane

The participant currently lives in a secure psychiatric facility; they stated that they have been in and out of hospitals for the majority of their life. When the participant was asked how long they had been in the hospital on this current visit, they stated more than ten years. The participant stated they have not lived outside the family home before and that they have found it difficult to find work when not in hospital. Asked if they have ever had mental health problems, the

participant responded: “they say I have schizophrenia, but I don’t believe them”.

The participant was introduced to Reclink and activities they support through the hospital staff where they are housed. For the last six years or more the participant has been involved in two supported Reclink supported activities on a regular basis: touch football and a men’s shed program. When the participant was asked to describe what they get out of being involved in the activities, they replied: “you don’t want to stare at four walls all day”. The participant also thought keeping active in activities like touch football helped them manage their mental health issues: “it mellows me out in a way, you’re really active, you switch onto another world when you play sport and stuff like that”. The participant stated that they had made friends through participating in the activities.

Mary

The participant was a ward of the state after being removed from their family as a young child. They declared that they were removed from their family because of their Indigenous descent. Whilst in foster care, aged nine, the participant was sexually abused. The participant described being moved out of foster care and into a detention centre for youth considered ‘uncontrollable’ at the age of 17. After leaving the detention centre the participant began a relationship with a person who was an alcoholic and was physically abusive towards them. The participant described how they used marijuana and LSD on a regular basis at this stage in their life. The participant was later diagnosed with a form of cancer which had an impact on their physical and mental health; at the time of the interview they were in remission. When the participant was asked to describe what their health was like prior to getting involved in a Reclink-supported activity, they responded that they were still recovering:

“I’ve been ill all my life [mentally]... [Physically] I died once after an asthma attack”. Currently, the participant is living in government housing and survives financially on a disability support pension, supplemented with casual employment.

The participant began an art therapy course several years ago because they thought it would assist them in confronting the issues of their past: “It was time for me to confront that fear I had and that blockage”. In continuing their recovery through their artwork, the participant was introduced to a Reclink-supported art program through word of mouth. The participant was not aware that the program was supported by Reclink and did not know about the organisation or that they supported the art program they were involved in at the time of the interview. The participant couldn’t recall how long they had actually been involved in the Reclink supported art program, except that it was longer than 12 months. When the participant was asked what they get out of being involved in the art program, they responded: “I get so much out of it ... each painting I do I have more and more development and it’s all my story”. Furthermore, the participant described feeling proud of the work that they complete which has assisted in improving their self-esteem: “I’m just so amazed every time I finish a painting, every time I finish it, it’s just so amazing to know I had something to do with that being there”. The participant also believed that they had made friendships with other participants in the art program because they could all connect through their shared experiences and artwork. In the next 12 months the participant wanted to continue their art programs and get more opportunities to exhibit their completed pieces.

Rebecca

The participant shared that they have always felt socially isolated in their life: “It’s always been an issue

for me, always had a small number of people in my life”. At the age of 15 the participant started to smoke marijuana and has continued to use the substance because they feel it provides them with a sense of “comfort [and] pleasure”. After completing school, the participant found work as a public servant. The participant was still a teenager when they married; they stated that this relationship was abusive and that they were the victim of physical abuse over a prolonged period. The participant has one child from this relationship. More recently, the participant has completed an undergraduate degree. The participant stated they returned to study in an attempt to understand their own mental health issues. When the participant was asked to discuss their mental health further, they responded that they had been diagnosed with bipolar disorder and that they have been hospitalised on more than one occasion because of “severe episodes”. The participant said they have lived with their mental health issues since their teenage years. Currently, the participant lives in a private rental and survives financially on a disability pension. The participant stated they had not worked for at least four years. When the participant was asked to describe what their health was like prior to getting involved in a Reclink-supported activity, they responded: “I was pretty depressed”.

The participant was introduced to Reclink and the activities they support through word of mouth. For the last 18 months the participant has been actively involved on a weekly basis in two supported activities: an art class and a drama group. Asked to describe what they get out of participating in the activities, the participant suggested the activities provided them with a weekly routine: “I find it helpful to have something to get up and go out and do”. The participant also stated that the activities provided them with an opportunity to interact with other people which alleviates their feelings of isolation: “I feel like I’ve achieved

something, chatted to people... 'cause I can get very isolated, I can just stay at home and not talk to anyone for days if I don't have things to do". One specific outcome, related only to the participant's involvement in the supported drama activity, was their identified sense of increased connection to the wider community. The participant explained that their involvement in staged productions gave them an opportunity to contribute to their community. When the participant was asked if they had developed any friendships with other participants whilst involved in the activities, they responded that they had; however, they only saw these people at the activities. The participant didn't identify any significant changes to their health since getting involved in the supported activities, but stated that their current mental and physical health were "reasonable". In the next 12 months the participant wanted to improve their physical and mental health: "I'd like to be more active and energetic".

Jacob

Not long after the participant completed school, their sole parent died of cancer. Struggling to support themselves, the participant worked many casual jobs in restaurants, commercial cleaning and in home gardening. The participant stated that they have been homeless for three to four years in the past. The participant stated that they had suffered with issues relating to their mental health; however, they did not want to comment any further. The participant shared that they have been in trouble with the law and that they have only recently been released from gaol after spending six months incarcerated. Currently, the participant is living in a boarding house and works two jobs during the working week.

The participant was introduced to Reclink and the activities they support through their case worker. Over the last three to four years the participant

has been involved in a wide variety of activities including: soccer, touch football, cricket, basketball and tennis. The participant stated they would attend an activity on average once a week where possible. When the participant was asked what they get out of participating in the activities, they replied that they were fun. The participant did not elaborate further. In the next 12 months the participant wanted to continue what they were already doing now.

Trent

The participant left school at 16 because they were having problems with their mental health; they were eventually hospitalised that same year. The participant explained that they had needed to be hospitalised for a substantial portion of their life as a result of their mental health issues: "I've been in and out of hospitals for, like, 17 years now". The participant explained how difficult it was for them to come to terms with their schizophrenia diagnosis: "it was hard for me at the start because I didn't want to accept I had a mental illness". Currently, the participant is in a secure psychiatric facility which they have been in for over seven years. Describing their health before attending a Reclink supported activity, the participant said: "I guess I wasn't as comfortable with other people as I am now".

The participant was introduced to Reclink and the activities they support through a notice board in the hospital. Over the last 12 months the participant has regularly been involved in a supported drama activity. When the participant was asked what they get out of participating in the activity, they responded: "it utilises my mind... doing something purposeful". The participant explained that being actively involved in activities like the drama group helped them to manage their mental health issues. The activity has provided the participant with an opportunity to integrate into the wider

community as many of the participants involved in the activity are not from the hospital. Furthermore, the participant believed that they had started to form friendships with some of the other participants. When asked about their health, the participant stated they were unsure.

Allen

Although the participant completed high school, they did not have a great experience in the education system: "I come from [a] underprivileged home yeah, I've never had a strong relationship with education". The participant attended university briefly before withdrawing. They described their time in university as "a dysfunctional experience". For the next two years the participant worked as a casual labourer before they were consumed by their addiction to marijuana: "I only did a couple of years' work... then I became a drug user". The participant stated they started using marijuana when they were 17 and that they had become a chronic user of the drug by the time they were 19. Asked to describe how their use of drug had affected their life, they responded: "drug use diminishes your capacity to reason". Furthermore, the participant stated their drug use isolated them from friends and family and eventually they felt lost as a person. The participant has been in trouble with the law and they have been incarcerated for six months. Describing their experience of being in gaol, they stated: "it was a much better thing to go to prison than to flounder in the private hostel system". The participant shared that 12 months of leaving gaol, they were hospitalised because of poor mental health. It was at this time that the participant was diagnosed with schizophrenia. The participant described their health prior to getting involved in a Reclink activity as: "[mentally] atrocious... [physically] really bad". Currently, the participant lives in community housing and they are financially supported on a disability

support pension. The participant has not worked for more than 23 years.

For the last 18 months the participant has been attending three supported programs; gym, ten-pin bowling and men's shed group, having been introduced to the activities by their case worker. The participant stated that they were unaware of Realink or that Realink had any involvement in the activities they attend. When the participant was asked to describe what they get out of participating in the activities, they responded: "because I'd never done any activity, my system had shut down... you only need to motivate it to a certain degree and it comes back to life". The participant stated that they had experienced the best outcomes for them at the ten-pin bowling activity: "ten-pin bowling makes me really happy, more so than gym". Asked to discuss why ten-pin bowling was better for them, the participant stated: "it's a really relaxing environment". The participant described the friendships they had formed with other participants in the activities as: "activity friends, not social friends". The participant had not noticed any significant changes in their health since being involved in the supported activities. The participant was initially unsure of what they wanted to do in the next 12 months: "I don't know... it's still just a bit of a battle". After considering the question further, the participant stated they wanted to meet new people, find casual employment and learn how to use the internet.

Kate

The participant completed year 12 and then went on to further education at a TAFE. The participant completed a certificate and then began work in their chosen field. After working for several years, the participant resigned from their job to again further their education. Shortly after the participant started attending university they began to struggle with mental health issues: "it all fell apart. I started getting

sick, I ended up in hospital and the next few years were totally a mess". The participant stated that they have been unable to return to work or study since this time. The participant did not want to elaborate on what their mental health issues had been. Currently, the participant lives in a private rental and survives financially on a disability support pension.

The participant was introduced to Realink and the activities they support through their social worker. For the last seven months the participant has been regularly involved in a supported choir activity. When the participant was asked to describe what they get out of their participation in the activity, they responded that they felt the activity had provided them with an environment where they could be themselves and feel accepted: "I don't feel like I have to say, 'oh no I have a mental illness' and hide from the crowd". The participant also stated their participation in the choir was a time to forget about any issues they might be having on any given day: "I can go out and sort of leave everything behind and just go and sing". The participant was hesitant to say whether they had made friends with other participants in the activity, eventually, they stated they had formed acquaintances with other participants. In the next 12 months the participant wanted to return to study.

Thomas

The participant finished year 12 before getting a job in retail. The participant stated that their life started to change after working several years in the industry: "after I left that, that's when my life turned upside down". A series of incidents, including being involved in a car accident, being assaulted and going through a separation from their partner, deteriorated the participant's mental health: "I just lost the plot one day and they put me in hospital". The participant was diagnosed with schizophrenia and depression. The participant described

how they developed an addiction to marijuana after being released from hospital, a drug they explained they have used recreationally since they were 19. The participant stated their reliance on marijuana has impacted their life severely: "If I don't have any smoke, I get really agro". The bouts of depression that the participant experiences also impact on their ability to function: "sometimes I get depression real bad. I feel like giving up". Currently, the participant lives in a boarding house and survives financially on a disability support pension.

The participant was introduced to Realink and the activities they support after attending a drop-in refuge for homeless and marginalised people. Over the last nine years the participant has been involved on a regular basis across a variety of supported activities including: cricket, tennis, football and lawn bowls. When the participant was asked to describe what they get out of their participation in these activities, they responded that they have been made to feel welcome and accepted by everyone involved in the supported activities. Furthermore, the participant identified the team aspect of the activities had provided them with the most noticeable outcomes: "It got me out, got me back playing as a team and knowing that there are people out there, instead wanting to burn you, that there are people out there that will actually help you... 'cause all I been is been burnt by everyone". The participant did not believe they had made friends in the activities, rather: "I've made some mates and associates but I wouldn't say friends". Asked to describe their health now, the participant responded that it was okay. Discussing their health further, the participant believed that their involvement in the supported activities had improved their mental and physical health: "I think that might have a lot to do with getting out and playing sport and running around kicking a footy instead of sitting at home and looking at four walls and

taking your medication doing nothing". The participant was unsure of what they wanted to be doing in the next 12 months: "honestly, I don't know".

Michelle

The participant was removed from the family home at age 11 along with five other siblings because their parents were deemed unfit to care for them. Some of the participant's siblings were placed in the care of a grandparent, while the remaining children were sent to live in an orphanage. At the age of 15 the participant was taken out of school and sent out to work in an industrial laundry business. The participant stated that during their five years in the orphanage they were physically abused and felt completely isolated. At the age of 19 the participant married and they have three children from this relationship. The participant continued to work labour intensive jobs for the majority of their life; however, they have not worked for the last three years. When the participant was asked if their childhood experiences had impacted on the quality of their life they shared that it had severely compromised their ability to form meaningful relationships with people because they struggled to place trust in others. The participant stated that they have suffered with bouts of depression in their life: "sometimes I feel a bit down". Currently, the participant lives in a private rental and survives financially on a disability support pension. Discussing their health prior to being involved in a Reclink supported activity, the participant stated: "[mentally] I get stressed a lot still [and physically] sort of down".

The participant was unaware the programs that they have been participating in are supported by Reclink. For the last six months the participant has been involved in two supported activities: music and an art group. The participant was introduced to the programs through a case worker at an agency they frequent that assists 'Forgotten Australians'. When the

participant was asked to describe what they get out of the activities, they responded: "it's someone to talk to... you're learning new things". The participant stated that they have made friends in the activities and that these new friendships were important to them: "it's very important to me because you don't want to be alone for the rest of your life". Having regular contact with the other participants has provided the participant with an opportunity to develop social skills they believed they did not have before: "you're learning from other people and they are learning from you too". Involvement in a supported activity also gives the participant a chance to unwind and relax in a day: "I try and blot out what's going on in the day... which is really hard". The participant did not identify a significant change in their health since participating in the activities, describing their health as: "still a bit up and down". When the participant was asked what they would like to be doing in the next 12 months, they responded: "really not sure".

Theo

The participant was born in Europe and had completed their schooling before taking a holiday to visit family in Australia. The participant stated that after six months they were meant to return home to complete national service. To avoid enrolling in the military, the participant remained in this country and was granted permanent residency several years later. The participant went to university where they completed an undergraduate degree; the participant worked in their chosen field for many years. As described by the participant, their life was "normal", until a series of events impacted on their mental health: "there were a few things that happened to me one after another". These events included the death of their father, loss of employment and marriage separation. Asked to describe how their mental health had affected their life, the participant responded: "in a big way, life is not the same

anymore, times that you felt like you are a vegetable". After the participant's separation from their partner they also spent a period of two years homeless; during this time they stayed in various dorms and shelters for homeless people. The participant stated that this was a very scary and difficult period of time because they had never experienced anything like this before: "I didn't know what to expect... sleepless nights, lots of unnecessary stress and tension, seeing people being beaten up over nothing... very, very scary". Currently, the participant lives in government housing and survives financially on a Centrelink benefit. The participant has not worked for more than 15 years. When the participant was asked to describe their health prior to being involved in a Reclink-supported activity, they responded: "not good [mentally]... [physically] I was overweight". In further discussion of the participant's health, they stated that they had suffered with depression for many years but it wasn't until recently that they were diagnosed with the disorder.

The participant was unaware that the gym program they have been participating in for the last 12 months was supported by Reclink. They were introduced to the program through a social worker in a hospital that the participant was admitted to at the time. When asked to describe what they get out of participating in the gym activity, the participant responded: "I think it's helped me quite a bit in my recovery from depression". Discussing this further, the participant stated that the activity was a great way for them to release tension and stress: "I'm not stressing as much... I feel energised a little bit better". The participant believed that they have developed friendships with some of the other participants in the activity. The participant enjoyed the activity so much that they have paid for a gym membership so that they can now attend whenever they want. The participant stated their health had improved slightly, however they still

have their bad days. In the next 12 months the participant wanted to start working again and to perhaps run their own business.

Keith

The participant moved from the United Kingdom with their parents when they were 11 of age. After completing year 12, the participant went onto university where they studied for only a few months before withdrawing. The participant was employed in various casual jobs going on to working as a social worker. They remained a social worker for many years before suffering a nervous breakdown. The participant stated that all their problems stemmed from the fact they had struggled with a drinking problem for the majority of their life. They described themselves as an alcoholic. Furthermore, the participant stated that their father was also an alcoholic: "most people you will find at an AA meeting will have fathers, uncles and granddads like that have been drinkers". When the participant was asked how their drinking problem had affected their life, they responded: "it wrecked it". The participant stated they had lost relationships with partners and friends because of their drinking and that they have also spent a period of time being homeless. The participant has not worked for seven years and survives financially on a disability support pension; the participant lives in government housing.

The participant was introduced to Reclink and the activities they support through a social worker. For the last three months the participant has been heavily involved in three supported activities including a men's shed program, an orchestra and a choir. When the participant was asked what they get out of participating in the activities, they responded: "it gives me an outlet for my creativity". The participant went on to say that they enjoyed the camaraderie of the activities such as the choir and orchestra. The participant believed

that the rehearsals and performance nights that those involved were required to participate in as a part of the choir and orchestra activities promoted this sense of camaraderie. The participant stated they had started to feel a part of a "micro community" because of their regular attendance in the activities. Although the participant has enjoyed the social aspect of the activities, they were unsure if they have developed any friendships with other participants. The participant also stated that having meaningful activities to attend in their week has assisted them in staying away from drinking alcohol. The participant described their current health as: "ok [physically]... getting better [mentally]". In the next 12 months the participant wants to continue to be in the choir and to take up voluntary work.

Julie

Born and raised in the United Kingdom, the participant moved to Australia aged 25. The participant had only just completed teachers college wanted to move here for work. The participant stated that after only living in Australia for a few years they became involved with people who took advantage of them and left them with nothing. The participant stated that they lost all their money and their home. The participant shared that after they had recovered from this experience, they went through another very similar scenario. The participant spoke of being in a relationship for nine years which they described as: "an unhealthy relationship". Asked how these experiences had impacted on their mental health, the participant stated that they have suffered with anxiety, depression and post-traumatic stress since. Currently, the participant lives in a private rental and survives financially primarily on a disability support pension. The participant works on a casual basis a few hours a week.

The participant was introduced to Reclink and the activities they

support through word of mouth. Over the last two years the participant has been regularly involved in a supported choir activity. When the participant was asked what they get out of participating in the choir, they responded: "a sense of belonging is the first thing and that family feeling". The participant described that it was through their and other participants' regular attendance that the choir activity had created this environment. They further stated that other participants have a shared similar experiences in life: "I think its unique in that respect... there's an empathy, I think there is just an unspoken knowing that everybody is at some point on that journey of maybe recovery". The participant believed that the performance aspect further strengthened their feeling of belonging and family: "I get such a buzz, we all do, from the performances". The participant stated they had formed friendships with many of the other participants and that they have started to see each other outside of choir activities. Asked to discuss their current health, the participant stated that it had improved, particularly their mental health.

Olivia

After leaving school at the end of year 11 the participant obtained a casual position in a convenience store. During the next few years the participant moved from one casual job to the next. The participant stated that they had been battling an alcohol issue since they were 18 and that this had affected their ability to be financially independent: "affected my finances more than anything". During the participant's mid-twenties they experienced mental health issues that left them "in and out of hospital". Whilst in hospital the participant was diagnosed with schizophrenia. Currently, the participant lives in a private rental and survives financially on a disability support pension. The participant stated that, prior to being involved in Reclink-supported activities

their physical health was not very good but that mentally they were “OK”.

The participant was introduced to Reclink through their case worker and for the last six months the participant has frequented gym and ten-pin bowling activities. Involvement in the activities has helped the participant to become more physically and socially active, as noted by them: “a better fitness level [and] gives me something to do”. The participant stated that Reclink-supported activities provided them with opportunities to be regularly involved in sport and recreation that they could otherwise not afford themselves: “gives me an opportunity to do things I wouldn’t normally do”. As a result of their regular interaction in the activities, the participant believes they have been able to form friendships with other participants. Asked to describe their current health, they responded: “better now”, referring to their improved physical fitness. In the next 12 months the participant wanted to return to work, preferably in a cafe.

Jeremy

After leaving school at the completion of year 11 the participant worked in casual labouring jobs. The participant shared that they had suffered poor mental health in the past and that they had been diagnosed with schizophrenia; however, they did not offer any further information regarding their health. Since a motorbike accident the participant has not worked and they have been homeless and have slept rough long term. Furthermore, the participant stated that they have also experienced substance abuse issues with alcohol and marijuana: “it seemed to be the main priority in my life; I was overruled by the drug”. The participant currently lives in a boarding house and survives financially on a disability support pension. The participant described their health prior to being involved in a Reclink-supported activity as: “not great”.

Reclink-supported activities were introduced to the participant through word of mouth and over the last six months they have been involved in a golf activity on a fortnightly basis. When the participant was asked what they like about participating in the golf, they stated that it was the competition with other participants and also the individual nature of the activity. The participant believed they had formed some friendships with other participants at the activity but they had not interacted with any of these friends outside of the supported program. When the participant was asked to describe their current health, they avoided the question. In the next 12 months the participant wanted to pursue playing more golf and eventually join the Professional Golf Association tour.

Lucas

Born in Victoria, the participant moved with their family to South Australia at an early age. The participant was placed into foster care as a result of family issues at age 11; they remained in care until they turned 18. The participant left school after completing year 11 and found work in hospitality. The participant stated that after several years in this field the type of work they were doing became too physically and mentally demanding for them: “buggered me, buggered my moods, everything”. Around the same time, the participant left their place of residence due to issues concerning their living arrangements. This left the participant homeless and living rough on the streets. The participant shared that they had struggled the majority of their life with depression which has made living a ‘normal life’ difficult at times. Prior to being involved in a Reclink-supported activity the participant believed their health was: “overall health was fine; I think mentally I was shot”. Currently, the participant lives in government supported housing and survives financially on a disability support pension. They have not had any type of employment for

the last seven years. When they are not involved in a Reclink activity they stated that they sit at their home all day, watching TV and playing console games.

An agency worker that the participant is connected to introduced them to Reclink and the activities they support. Over the last five years the participant has been involved in several different supported programs on a monthly basis: swimming, fishing, and football umpiring. The participant believed that bad weather conditions and their own poor mental health made it difficult for them to become more involved. Discussing what they get out of attending an activity, the participant responded that it was an opportunity to just leave the house for a few hours: “you get out and enjoy life a bit more”. Meeting other likeminded participants at the activities was also positive for the participant because they got to share their experiences with others. The participant discussed how they believed that their social interactions with other participants at the activities were helping to build their self-confidence. Furthermore, the participant stated they had formed friendships with other participants from the activities and that they sometimes see these friends outside of the activities. The participant thought their health had not changed much since being involved in the activities: “still the same, stable in my opinion”. When asked what they would like to be doing in the next 12 months, the participant replied: “would not have a clue... ‘cause you can’t even budget for yourself what’s going to happen tomorrow”.

Brandon

Born and raised in New Zealand, the participant came to Australia after they turned 18. The move was triggered when the participant’s parents decided that they wanted to move here after a family holiday. The participant left school after completing year 11 and started working in a casual

labouring job. When the participant moved to Australia they started an apprenticeship in carpentry and cabinet making; after completing their apprenticeship, they worked in this industry for many years. The participant indicated that things went wrong for them after a complicated issue arose with their then neighbours. The participant left the family home because of the ongoing disputes and became homeless; they slept rough on the streets on and off for over five years. The participant stated things were tough for them during their time being homeless and that most people: “don’t realise what it’s like”. When the participant was asked if they have had any mental health issues in their life, they responded that they had struggled with depression although had not had a formal diagnosis. The participant also shared that they had been in trouble with the law on a few occasions and that they had spent roughly six weeks incarcerated. The participant stated that they had been badly assaulted on one occasion whilst living on the streets; as a result of this experience they are financially supported by a disability support pension. Currently, the participant does not work and is living in government supported housing. The participant described their health prior to being involved in a Reclink activity as: “I was pretty down, pretty unfit”.

The participant was introduced to Reclink and the activities they support through word of mouth whilst visiting a drop-in centre for the homeless. Over the last 14 years the participant has accessed a variety of supported activities: swimming, fishing, ten-pin bowling, snorkelling and golf. The participant stated that they would take part in Reclink activities mostly in summer because they were more involved in the water based activities. When the participant was asked what they get out of being involved in the activities, they responded: enjoyment, togetherness, outings and friendships. Having an activity to attend gave the participant something to look forward

to and was usually the only other activity in which they would interact with other people in a given week. The participant shared that they had made friends with other participants and that the activities gave them a chance to “catch up with mates”. It is difficult for the participant to see these friends outside of the supported activities because the participant lives a considerable distance away from any of them. The participant described their current health as: “mentally pretty good, physically bad”. Although the participant believed that attending Reclink activities had improved their overall health, there were still other factors that had a negative impact on it. In the next 12 months the participant wanted to travel overseas and to have better health.

Alan

The participant had a difficult up bringing; their father was an alcoholic and their mum suffered with emphysema. Not coping with the situation, the participant turned to recreational use of marijuana. The participant left school in year ten; they described experience of school as: “the worst time of my life”. After stealing from their mother to support their growing drug habit, the participant was kicked out of the family and a short time later the participant moved to South Australia. The participant’s substance abuse issues continued to grow through the use of amphetamines. When the participant was asked how their drug habit affected their life, they replied: “turned to crap basically, I withdrew into myself”. Furthermore, the participant said they were unable to form any sort of relationship with other people and they had lost contact with their family. As a result of the long term use of drugs, the participant started to experience severe bouts of depression and anxiety. The participant stated that their health prior to being involved in a Reclink activity was “going downhill”, both mentally and physically. Currently, the participant lives in government

housing and works part time five days a week.

Reclink and their supported activities were introduced to the participant 14 years ago after seeing a flyer at a homeless drop-in shelter. Over the participant’s journey with Reclink, they have been involved in a wide variety of activities: snorkelling, scuba diving, fishing, golf, bowling, a choir and several Reclink-supported camping weekends. Although still struggling with their addiction at the time of the interview, the participant stated that their involvement in Reclink activities had made them realise that: “when I started doing stuff with Reclink, it made me start to look at my life, [I realised] it could be more than just drugs in my life”. After a short involvement in the activities the participant went “cold turkey” on their own. The participant described how, during this time, they went to as many activities as possible to keep them away from temptation: “in my recovery I was going to everything, anything, and everything to get me out of the city”. Asked what it was about the activities that helped them make this lifestyle change, the participant shared: “doing something got me back doing something else... once you start doing something, it’s hard to do nothing... a reminder of what life was like”. The participant believed that the scuba diving course provided them with the best outcomes because of the educational aspect of getting their diving certificate and the responsibility that came with diving: “consequences for bad actions”. The participant believed that Reclink activities had made them feel a part of a community and that they had been able to form some strong friendships with other participants. In addition to the activities, the participant stated that Reclink had played a large part in them securing long term housing and causal employment. Overall, the participant believed the activities and their involvement with Reclink were key to their improved confidence and self-esteem.

The participant wanted to continue their involvement with Reclink for the rest of their life, both as a participant and through casual employment. In the next 12 the participant wanted to be doing: “exactly the same, just more of it [work and Reclink activities]”.

Jack

The participant primarily grew up in foster care because their father was an alcoholic who was abusive and their mother spent long periods of time in hospital. After completing year 12, the participant was introduced to drugs through friends and their brother.

The participant’s brother committed suicide; the participant became more involved with drugs and developed a serious habit. When asked how their drug habit may have affected their life, the participant responded: “fun and games to begin with... some bad times... a lot of good times”. The participant shared that as a direct result of their habit they had nearly lost their life on several occasions. Discussing their mental health, the participant spoke of having suffered with depression, anxiety and panic attacks, as well as episodes of drug induced psychosis. The participant believed their health was: “quite good, considering what I was up to” prior to being involved in a Reclink-supported activity. Currently, the participant lives in government supported housing and survives financially by working two days a week, supplemented by a disability support pension.

The participant was introduced to Reclink and the activities they support through a friend, ten years ago. Over a five year period the participant was a regular participant of Reclink activities until they became ill and unable to attend. The participant has only recently reconnected with Reclink. The participant has been involved in a wide variety of supported activities including: ten-pin bowling, bike riding, swimming, scuba diving, and several weekend camps. Significant outcomes experienced by the participant include

being made to feel welcome and equal to everyone else participating in the activities. The participant stated that being in a supported environment made them feel that other people understood what their life was like, without making judgement. When the participant was asked if there was any particular activity that provided them with better outcomes, they responded that the scuba diving was: “one of the best experiences I have ever had was with Reclink [diving]”. Acquiring their diving certification in a Reclink-supported program was a great achievement for the participant: “massive achievement for me”.

Over the next 12 months the participant wanted to get: “right back into it”, participating in Reclink activities; they also wanted to further their education by enrolling in a sport and recreation TAFE course.

Geoffrey

After leaving school aged 16, the participant began an apprenticeship which they soon left because they didn’t enjoy their chosen field. Over the next few years the participant was employed as a labourer in several jobs before moving to South Australia for a job offer. The participant stated that they have struggled with alcohol substance abuse on two occasions in their life. The participant stated that they suffered issues relating to alcohol abuse in their twenties to early thirties. The participant was sober for 12 years before again developing an alcohol problem. The participant described how everything went wrong for them after they decided to stop taking medication for their mental health condition, bipolar disorder. The participant stated that they had made the decision to stop taking their medication because “everything was just going so well”. As a consequence of the decision the participant’s mental health declined and eventually they lost their successful private business, their family home and their relationship with their wife. When the participant

was asked to describe what their health was like prior to getting involved in a Reclink-supported activity, they replied: “my health wasn’t there at all [physically], mentally not great”. Currently, having not worked for 12 years the participant survives financially on a disability support pension and lives in a private rental.

The participant’s case worker introduced them to Reclink and the activities they support. Over the last 18 months the participant has been involved in both a scuba diving and supported surfing activity; they have also attended several camps supported by Reclink. Some of the things the participant gets out of participating in the Reclink activities include: education, confidence, having a sense of responsibility, rewarding activities, friendships and better health outcomes. Although the participant enjoyed all the activities they were involved in, they stated that the scuba diving provided them with the most positive outcomes. The participant had previously acquired their diving license but when they attended the Reclink diving they had to relearn all the skills. The participant stated that diving required them to take responsibility for their actions, not only while diving, but also in the lead up to a dive: “with diving you have to be a bit serious... can’t drink while diving so I stay away from alcohol”. Diving was also regarded as a very rewarding activity for the participant because they got to explore life underwater: “it’s a buzz”. Diving requires a person to be reliant on a dive ‘buddy’, and the participant stated that this fact had helped them with forming friendships with the different ‘buddies’ they went diving with. In regards to health, the participant stated that: “when I’m diving weekly, I don’t drink at all”. Describing their overall health now, the participant said: “it’s a lot better, not 100%”. In the next 12 months the participant wanted to think that they would be sober and that they wanted to be still diving and surfing with Reclink.

Greg

After leaving school aged 15 the participant commenced employment at a petrol station; 18 months later they secured a job in a winery. The participant worked for the one organisation in the wine industry for over 37 years and lived what they described as a comfortable life. As a consequence of the Vietnam War, the participant was drafted into national service for a period of two years in their twenties. Twelve months of this service was spent in Vietnam. When the participant was asked to describe their experience of Vietnam, they responded: "wasn't all beer and skittles". In the years following military service, the participant was diagnosed with depression and post-traumatic stress syndrome. The participant's battle with mental health issues has been difficult at times and on several occasions they have been hospitalised. Discussing the participant's health prior to being involved in a Reclink-supported activity, they stated: "I thought I was alright". Currently, the participant is living in supported housing because of their ongoing mental health problems and survives financially on their retirement benefits: "I'm a self-funded retiree".

A worker in their supported housing complex introduced the participant to Reclink and the activities they support. For the last 12 months the participant has been involved in a golf activity held fortnightly. One of the main reasons why the participant is involved in the supported golf is because it's an activity they have enjoyed most of their life. In the next 12 months the participant wanted to be doing exactly what they were doing now.

Trevor

The participant was born and raised in the United Kingdom. After leaving school aged 15 the participant worked as a butcher; they continued in this profession for most of their life. The participant moved to Australia after their then wife took up a job in Victoria

and after 12 months they moved to South Australia. The participant described their experience of migrating to a new country as: "extremely difficult for me". Discussing this further, the participant stated that they found it difficult to get employment themselves because "every man and his dog was a butcher". When the participant was asked if they had ever had any issues with drug or alcohol in their life, they responded that they had always had issues with alcohol. They explained that they grew up in a poor area with very high unemployment where lots of people drank excessively, including their father whom they described as an alcoholic. The participant believed that their surroundings as a child influenced their own issue with alcohol abuse from an early age: "extremely early because I really can't remember being sober ... so I'd actually say 15, or 16 years of age". The participant stated that they had attempted to get sober on four separate occasions but it wasn't until their last attempt that they had succeeded. When asked to explain how their problem with alcohol had affected their life, the participant stated: "every relationship I had broke down". This included their relationship with family, their wife, daughter and friends. After going through a divorce the participant spent two years homeless, couch surfing and sleeping in their car. The participant believed they isolated themselves from people and they suffered with depression during this period. The participant described their health prior to being involved in a Reclink activity as: "not very good at all". After suffering several heart attacks over a period of seven years, they have survived financially on a disability support pension; currently the participant lives in a private rental.

The participant was introduced to Reclink and the activities they support after attending rehab 12 years ago. The participant was involved in several activities for five years before having a heart attack. The participant's health problems ceased their involvement at that time. The supported activities that the participant was involved in

included: scuba diving, snorkelling, fishing, and camps.

Grant

After leaving school in year nine the participant went and worked in a mechanics shop. When the participant was not offered an apprenticeship, they left their employer. The participant stated that they found it difficult to find employment after that. Discussing what they did for the next few years, the participant described their involvement in 'street life' and their involvement with gangs. Asked if they had ever had any issues with drugs or alcohol in their life, the participant stated that they had only smoked marijuana for a short period of time whilst involved in gangs; they also stated that they had been through a period of heavy drinking after separating from their partner. Discussing the participant's alcohol problems further, they stated: "six months [they drank] two slabs a day, from when I woke up until midnight". The participant stated that they'd wanted to commit suicide during this time. The participant described their health prior to Reclink as: "not very fit... [mentally] pretty stable". Currently, the participant is living with their partner in government housing, is not working and survives financially on a government allowance.

The participant was introduced to Reclink and the activities they support after being introduced to the state manager for Reclink at a church function. In the last ten months the participant has been involved in a wide variety of supported activities including football, snorkelling, surfing, fishing and stand up paddle boarding. The participant categorised their involvement in the supported programs as a volunteer. Being able to help others was the biggest outcome for the participant. They believed that they had also been able to form friendships with other participants. In the next 12 months the participant wanted to be "working and trying to help people as much as I can".

Gerard

The participant stated that they did not enjoy their experience of school. Having difficulty making friends and being picked on by other students contributed to the participant leaving school after year seven. The participant found employment working in several grocery stores before getting married and moving out of the family home into public housing. When the participant was asked if they had ever owned their own home, they responded: "no... Never been financial enough". Discussing further the participant's financial hardships in their life, they stated that they believed they had never faced disadvantage: "I doubt it... most problems I've faced I think most, or a lot of, people probably face: shortage of money and things like that". Towards the end of the participant's working life they suffered a serious back injury which prevented them from returning to work. Currently, the participant lives in public housing with their partner; they spend their time looking after their grandchildren or volunteering their time at a homeless shelter. They survive financially on an aged pension.

The participant could not remember how long they had been involved with Reclink but was firm that it was close to ten years. They found out about Reclink and the activities they support whilst volunteering their time at a homeless shelter. They have until recently been involved in a monthly ten-pin bowling program supported by Reclink. When the participant was asked what they get out of being involved in the activity, they replied the company. In the next 12 months the participant wanted to be doing exactly the same things as now.

Stanley

The participant was raised by their grandmother from the time they were seven months old. Having never gone to school, the participant started working on farms when they were 11. The participant worked many

labouring jobs before eventually having to move to the city to find other work: "another few jobs here and there, knock on the door, work there for a couple of days, move on then knock on the next door". The participant believed they had worked in more than 70 different jobs in their life time. During the participant's youth, they were in trouble with the law on numerous occasions and were incarcerated in several boys' homes before spending a short period of time in gaol. At age 18 the participant was married; this relationship lasted for 24 years before ending in divorce. After their separation the participant travelled around Australia working across the country in various jobs. The participant moved to South Australia where they spent seven years homeless sleeping in parklands. When asking the participant to describe their health prior to getting involved in a Reclink activity, they responded: "no wasn't too good, 'cause I was living on the streets". Currently, the participant is living in government housing and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support after meeting the organisation's state manager at a drop-in centre for homeless people. Over the ten years that the participant has been involved with the organisation they have been involved in a wide variety of activities: scuba diving, golf, ten-pin bowling, fishing and several camps. For the last six months the participant has not been able to be involved in any of the activities because they have been diagnosed with advanced emphysema. The participant described their involvement with Reclink as 'work', because they volunteered their time to assist in most of the activities. Asked what they get out of their involvement in the activities, the participant replied: "I wanna give back... and for myself too because I'd only be sitting here doing nothing". Furthermore, the participant stated that through their association with

Reclink they were able to secure long term housing. In the next 12 months the participant wanted to be doing the "same as what I'm doing now, I guess".

Marek

Born in Europe, the participant moved to Australia with their family when they were very young. The participant completed high school and graduated from university; the participant has spent the majority of their working life in hospitality. Asked if they have ever had any issue with drugs and alcohol, the participant responded: "over the last 25 years". The participant acknowledged that they had been an alcoholic and that they had regularly used marijuana and methamphetamines. The participant was asked how their use of substances may have affected their life; in response, they stated: "it held me back from achieving my goals... hindered my relationships... and probably hasn't done my health any good either". Furthermore, the participant discussed the mental health issues they have experienced. Although the participant has only recently been diagnosed with depression and anxiety, they recognise in retrospect they probably have had poor mental health for many years. The participant described their health prior to being involved in a Reclink activity as: "I treated myself quite badly for a number of years... both mentally and physically". Currently, the participant lives in a private rental and is trying to keep occupied after only recently going through rehab for their substance abuse issues.

It was while the participant was in rehab that they were introduced to Reclink and the activities they support. The participant's case worker encouraged them to get involved in sport and recreational activities as a part of their recovery. In the last seven months the participant has been involved on a weekly basis across several different activities: football, surfing, ten-pin bowling, and golf.

Discussing what the participant gets out of the activities, they stated that Reclink activities had been a real driving factor for them to help turn their life around: "Reclink has been a part of that [change] has been an instrumental part of my recovery". The participant was asked to further explain how their involvement in Reclink activities has assisted their recovery; they responded that they not only looked forward to being involved in an activity but it gave them a focus for the week: "restores something in my life that was missing before... it's a wholesome, healthy activity which spurs me on to stay healthy". Furthermore, the participant believed that the activities around surfing and golf were particularly satisfying for them because they had always wanted to try them. The participant believed that their mental and physical health had improved considerably but they also stated that they were only in the early stages of their recovery. In the next 12 months the participant wanted to continue their TAFE studies and participation in Reclink activities; they also wanted to consolidate some of the friendships that they had developed whilst involved with Reclink. Furthermore, the participant stated that they eventually wanted to volunteer their time with Reclink so that they could give something back to the organisation.

Ian

Having a dislike for school, the participant left formal education midway through year ten. Only able to find casual labouring jobs, the participant was able to supplement their income playing football. Although the participant stated they have never had any issues with alcohol or drug personally, they shared that they were in a long term relationship with a person who did. The participant discussed the difficulty they had in this relationship and shared that tragically this person committed suicide not long after they divorced. The participant also shared that they have been

unemployed for many years as a result of injuries they received after a night out that ended in a violent altercation at a pub. Not being able to work has been difficult for the participant to deal with: "you really see time ticking away". Currently, the participant lives in a private rental and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support after volunteering their time at a rehab centre that was taking other participants to Reclink activities. For the last two years the participant has been involved in coaching a Reclink football team, as well as umpiring several cricket matches supported by the organisation. The coaching opportunity has provided the participant with a meaningful activity for them to engage with others and to share their knowledge of football with. When asked if there was anything else that they get out of the activities, the participant responded saying that the most satisfying thing for them was seeing "what they [other participants] get out of it". Reclink had also given the participant the opportunity to get formal qualifications in coaching. In the next year the participant wanted to still be coaching with Reclink and taking another team if the opportunity presented itself.

Bryan

The participant was born in rural NSW; their parents decided to move to Adelaide when the participant was seven. The participant stated the reason for the move was to provide the three siblings in the family the best opportunity to flourish in life away from the past experiences of three family generations that had worked in the mining industry. At the age of 17 the participant left school to pursue an apprenticeship in boiler-making. When they were only months away from completing their apprenticeship, the participant was involved in a serious car accident which put them in a coma for over three months. They

sustained lasting physical disabilities including losing the sight in one eye. The accident was significant for the participant who stated that: "it [the accident] stopped me from doing a lot of things I loved". Not being able to continue life how they wanted was a significant factor in the participant developing an issue with alcohol. The participant shared that they had battled alcoholism for almost 20 years: "I was basically a binge drinker". The participant stated that periods of drinking excessively also triggered their issues with gambling. Discussing the effects of gambling on their life, the participant said: "when I lost, it put more pressure on me". For over 20 years the participant has not been able to maintain any form of employment, relying entirely on a disability support pension to survive financially: "being not qualified in anything makes it difficult to get good work and well paid work". The participant has lived in government supported accommodation for the last 15 years. The participant described their mental and physical health prior to being involved in a Reclink activity as: "my health was average because I was still drinking".

The participant was introduced to Reclink and the activities they support after a chance meeting with the Reclink state coordinator at a drop-in centre 15 years ago. Since this time the participant has been involved in a wide variety of activities including: fishing, lawn bowls, golf, scuba diving, ten-pin bowling and occasional camps. The participant has enjoyed their time involved with Reclink so much that they have been volunteering their time to coordinate an activity once a month. The participant suggested that having fun was the main benefit for them from participation in the activities: "if I didn't get any fun out of it, I don't think I could do it". The participant also shared that they loved to see other participants getting something positive out of their participation in the activities: "it's very rewarding to start to see people show their personality... seeing other

people enjoy themselves, given they are in a safe environment". Being given the opportunity and responsibility to coordinate activities has had a significant impact on the participant's attitudes to changing their drinking habits: "help[s] me to stop drinking". After having regular involvement in the activities, the participant believes they have been able to form friendships with other participants. In the next 12 months the participant stated that they wanted to be doing the "same thing".

Paul

At the age of eight the participant's parents separated; their parents shared the responsibility for raising them during different periods of their childhood. After completing year ten, the participant withdrew from school to pursue an apprenticeship in fitting and turning. Three years into the apprenticeship the participant was released because the organisation they worked for needed to downsize. When the participant was asked if they had suffered with any mental health issues, they stated that it was their doctor's opinion they were schizophrenic; however, they did not believe this to be true. For the last six years the participant has been living in a housing trust and survives financially on a disability support pension. When the participant was asked to describe their health prior to being involved in a Reclink activity, they responded: "not so good".

The participant was introduced to Reclink and the activities they support after meeting the Reclink state manager at a drop-in centre for disadvantaged and marginalised people. For the last 18 months the participant has been involved in a variety of activities: paddle boarding, surfing snorkelling and a Reclink-supported camping trip. The participant stated that they enjoyed the activity involving the snorkelling the most because it opened their eyes to a whole new world: "good feeling". They believed that they had developed

some strong friendships with other participants. In the next 12 months the participant wanted to progress from snorkelling to scuba diving with Reclink.

Jillian

The participant was born and raised in regional South Australia; they described their childhood as: "kind of a dark history, really". Not wanting to provide many details, the participant stated that they had suffered post-traumatic stress since leaving the family home. The participant shared that they were not only the victim of physical and verbal abuse at school but also in their own home: "I would come home bullied and whatever and then I'd cop it there too, when I got home, so there was virtually no escape". They only escape the participant had was their interest in music and in particular the piano. Having been constantly bullied at school, the participant left formal education when they were 15. The participant has never worked, currently lives in supported accommodation and financially survives on a disability support pension. When asked to describe their health prior to being involved in a Reclink activity, the participant responded: "not too different".

For the last 18 months the participant has been involved in a Reclink supported choir activity. The participant was introduced to the choir through word of mouth. The participant stated they had been unaware that it was a Reclink-supported choir until only recently. The participant stated the only real benefit they believe they have experienced by being in the choir has been that "it's given me an avenue to share my ability with others". When asked what the participant would like to be doing in a year, they suggested they do not think that far ahead.

Cameron

At age 15 the participant's mother died, leaving them and their other siblings in the sole care of their father. The participant described their father as being a tough man who solely lived for his job. Not coping well with their mother's death, the participant left school the same year and took up work as a kitchen hand. Eventually, in their late teens, the participant started an apprenticeship as a book binder, a profession they remained in for more than 20 years. When the participant was asked if they had ever had any issues with drugs or alcohol in their life, they responded by describing themselves as an alcoholic and said that they had battled alcoholism for more than 14 years. The participant's drinking problem magnified after their marriage broke down and at one point almost cost them their life: "I was knocking off about two litres of port per day and probably at the end of the day scratching for more". The participant's marriage breakdown left them homeless and living in their car for almost a year before their vehicle was stolen. For the next 12 months the participant had no alternative other than to sleep rough. As a consequence of the participant's drinking it has been difficult for them to maintain a relationship with their two teenage daughters. Currently, the participant lives in supported care housing and survives financially on a disability support pension, which they have done for the last six years. The participant described their health prior to getting involved in a Reclink activity as not being very good.

The participant was introduced to Reclink and the activities they support through the activities officer at their supported residential accommodation unit almost two years ago. The participant described how they have been unable to participate in any activity for the last eight months because of health issue. A supported golf activity was the only activity they were involved in prior to their health problems. In asking the participant

what they get out of being involved in the activity, they responded that it had been a great way for them to forget about any problems they might have been facing: “we just crack jokes and go around hole to hole”. In the next 12 months the participant wanted to find casual employment, spend more time with their daughters, start a short course in computing and to be living in their own home.

Scott

The participant shared the trauma they had faced during their childhood stemming from the forcible removal from the family of several of their siblings by a government organisation. At the age of 15 the participant left school and found work in a factory. When the participant was asked to recall how long it had been since they had any form of paid employment, they replied: “ages ago, I can’t remember”. The participant also shared the issues that they have had with substance abuse, including a long battle with alcoholism and heroin use. The participant stated that they developed a drug habit whilst in hospital being treated for injuries sustained after being assaulted. Asked if they had ever been in trouble with the law, the participant replied: “plenty of times”. Furthermore, they spoke of being incarcerated on three separate occasions and having spent approximately a year in total in correctional facilities. The participant has also experienced significant periods of homelessness and sleeping rough. In discussing their health, the participant stated that in the past they have experienced issues with depression and anxiety. Currently, the participant resides in a commission housing complex and survives financially on a disability support pension.

The participant stated they were introduced to Reclink and the activities they support after meeting the Reclink state manager. Over the last three years the participant has been

regularly involved in several different supported activities: golf, fishing and ten-pin bowling. More recently, the participant has also volunteered their time to Reclink to assist in coordinating one of their activities. When the participant was asked to discuss what they get out of their involvement in the activities, they responded: “you gotta have human contact mate, you gotta have fresh air”; Reclink activities provided them with these things. The participant believed that the supported golf activity provided them with the greater outcomes. Asked to discuss their current health, the participant responded that it was no different. In the next 12 months the participant wanted to still be involved with Reclink.

Brad

The participant stated they went to “special school” because they had severe learning difficulties. After leaving school aged 17, the participant began work in a sheltered workshop. Not long after beginning their job the participant moved to Adelaide with a partner. The participant shared that they had experienced homelessness after their relationship finished, sleeping rough for about a year. When the participant was asked if they have ever had any issues with drugs and alcohol in their life, they answered yes to both. Further discussing these issues, the participant said they were a frequent user of marijuana and speed. Asked how their issues with substance abuse began, the participant’s only response was: “’cause I had a terrible life”. Currently not working, the participant lives in government housing and survives financially on a disability support pension. When the participant was asked to describe their health prior to being involved in a Reclink activity, they stated: “poor, very poor... I was a wreck”.

The participant could not recall how they were introduced to Reclink and the activities they support. Over the last seven to eight years the participant has tried several different activities;

however, fishing was the only activity they have continued to be involved in. Describing what they liked about the fishing activity, the participant offered: “time out, I enjoy it”. The participant explained that the fishing activity gave them time to just be themselves and not worry about any of their other problems. The participant enjoys the activity so much they stated that it was a real disappointment for them when they had to finish for the day. The participant believed they had noticed a change in their physical and mental health but was unable to explain how or why this change had occurred. The participant was unsure what they wanted to be doing in a year because it was too far away to think about: “anything could happen, could be dead”.

Devlin

The participant stated that they withdrew from school part way through year nine. The participant described how, at the age of 14, they started to make the wrong decisions: “I got in with the wrong crowd... started doing things I shouldn’t have”. The participant stated that it was at this time they started using drugs, including marijuana, MDMA (ecstasy) and other amphetamines. Asked how their drug habit might have affected their life, the participant responded: “terribly, mate”. The participant described how their relationships with family and friends became distant and strained. They further described how it had affected their ability to hold down a job and the ongoing health issues they still live with. During the participant’s early twenties their usage of illegal substance increased dramatically after their mother passed away. When the participant was asked to describe their health prior to being involved in a Reclink activity, they responded: “[physically] shocking... [mentally] ok”. Currently, the participant is enrolled in a drug and alcohol rehab and survives financially on a government allowance.

The participant was introduced to Reclink and the activities they support through their case worker in the rehab. For the last three months the participant has been involved on a weekly basis in the Reclink football competition. Discussing what they get out of the being involved in the activity, the participant stated that it was a great opportunity for them to get out of the rehab centre meet new people and to gain some personal fitness. The participant stated that their mental and physical health had improved over the last few months, primarily because they were not affected by substance abuse. In the next 12 months the participant wanted to begin a business course so that one day they might be able to start their own small business.

Derek

The participant stated that they struggled at school because they were constantly at odds with teaching staff that used corporal punishment in the class room: "I started to become a bit dysfunctional". After completing year 12, the participant left home to pursue an acting career; during the first year away from home the participant mostly slept rough on the streets of Kings Cross. After ten years of acting, the participant became involved with a woman who fell pregnant with their child. The financial pressure forced the participant to gain employment on the railroads. The participant stated that their relationship did not last long; however, they continued to work on the railroads for several more years. When participant left the railroads they had "come out of that with a raging alcohol problem" and they became homeless again. The participant stated that their drinking problem stemmed from the fact they felt "lost". The participant shared that they still have this feeling of being 'lost' today: "these days I just don't see any purpose in life". The participant stated that they have had very little paid work since leaving the railroads. Currently, the participant is living in government housing and

survives financially on a new start allowance.

The participant was introduced to Reclink and the programs they support after talking to an agency worker at a drop-in centre for by homeless and disadvantaged people. For the last two years the participant has been involved on a regular basis in several activities: golf, fishing and ten-pin bowling. When the participant was asked to discuss what they get out of being involved in the activities, they said: "it's good to get out and do something... you feel better because you've done them". The participant also shared that they would not normally have the opportunity to do some of the activities themselves because of the cost associated with participation: "a lot of people [other participants] do things that they wouldn't normally do". Although the participant enjoyed the activities and they had been able to developed new friendships, they stated that there had been no change to either their physical or mental health as a result of their participation. In the next 12 months the participant was unsure what they wanted to be doing: "don't know, don't know".

Richard

The participant moved from the United Kingdom to Australia in their early twenties. They stated they had great difficulties at school because of learning difficulties and ADHD. After leaving school in year ten, the participant worked in several casual jobs as a labourer. The participant shared that they also found the workplace difficult because they were constantly bullied because of their learning difficulties. When the participant was asked to discuss in further detail about any issues they have had with their mental health, they said that they have bipolar disorder and that they had also experienced drug psychosis, anxiety attacks and bouts of depression as a result of many years of marijuana use. Furthermore, the participant stated that they spend

significant amounts of their income each week indulging in their drug habit. The participant also shared that their drug habit had impacted on their relationships and specifically on their relationship with their teenage daughter. The participant has been in trouble with the law on several occasions and has been incarcerated for in total for one month. Currently, the participant is living in government housing and survives financially on a disability support pension.

The participant was introduced to Reclink and the activities they support through word of mouth. Over the last three years the participant has been regularly involved in the Reclink-supported football competition. When the participant was asked to share what they get out of being involved in the football, they responded: "football has given me a chance to be a fully functioning member of society for a change instead of being a dope head". The participant was asked how they believed football had made them feel a part of society, to which they replied that through physical activity they have a constructive way to release anger and energy and that this helped them socially when interacting with other people and participants. The participant also stated that they had formed friendships with other participants and that these friendships provided them with a strong sense of belonging. When the participant was asked to describe any changes in their health since participating in Reclink activities, they stated that their mental and physical health had improved. Furthermore, they said that they had dramatically reduced their use of marijuana. In the next 12 months the participant wanted to continue being involved in Reclink and they also wanted to be employed part time.

Shannon

The participant was introduced to Reclink through a housing commission worker who brought them down to the guitar lesson activity being organised

and run by a Reclink staff member. The participant found an immediate connection as their love for music was a good fit with the activity being offered; they also formed a bond with the Reclink staff member. The participant is also involved in a Reclink choir on a weekly basis.

The participant was living in a shared housing commission flat before irreconcilable issues arose between the occupants. This left the participant with no choice other than to move back in with their mother. The participant has suffered from a long term injury to their back; surgery to correct this issue has left the participant unable to leave the house for long periods of time. The participant has also not been employed for a lengthy period of time.

The participant was not comfortable to share in the study further information about living and life situation prior to being a part of Reclink, but did want to communicate that since being a part of Reclink: "my life got totally better... it strengthened me in a lot of areas". The participant believed that they get a lot out of participating in Reclink activities, friendships being the most notable outcome. The participant highlighted how hard it is to maintain contact with people in their living circumstances but Reclink provided a weekly avenue for them to be in regular contact with people. The participant dreams of being able to one day produce their own record label / CD. The participant has been inspired by their involvement in musically orientated activities organised by Reclink.

Lindsey

Almost two decades ago the participant was diagnosed as a chronic sufferer of schizophrenia and depression. Since the diagnosis the participant has primarily resided with their parents but more recently has sought independence by living in shared accommodation with others in similar circumstances. The daily events of the house are overseen by an agency worker who assists the

participant where needed. It was the participant's agency worker who introduced and encouraged them to become involved with Reclink.

The participant believed that their health was good prior to joining Reclink, stating that they had managed their illness well, meaning they had not had an episode for some time. Since their initial involvement in a Reclink activity the participant has been regularly involved in the choir and guitar programs for almost a year.

The participant believed that their involvement in Reclink provided them with "community spirit" which was created by the people around them in each of the activities. When asked what they would like to be doing in a year from now, the participant responded: 'I don't know, probably similar to now... I'm quite happy now'.

Louis

Over the past six years the participant has been transitory, living week to week in different accommodation, depending on who offers them a couch or bed to sleep in. Not having a great choice in where they stay has sometimes left the participant feeling very uncomfortable about the people they are interacting and socialising with: "been in freaky sorta scenes, which ya tend to have to do when ya want to eat and things like that". The participant felt that their lifestyle has had a negative effect on their health.

The participant found out about Reclink through word of mouth from others who had been involved in Reclink associated activities in the past. Currently, the participant is involved in a choir supported by Reclink. As the participant can be inactive for weeks at a time, sitting and sleeping on a couch all day, Reclink has provided them with an opportunity to have regular contact with other people in an environment that is non-threatening and does not demanding significant time. When asked what they would like to be doing in a year

from now, the participant responded: "I'm not sure about timeframes... I had an idea in the back of my head of like [starting] a youth centre".

Nathan

The participant has dealt with a mental illness all their life and has faced an ongoing struggle to remain mentally and physically healthy. Throughout different stages of the participant's life they have spent long periods of time doing very little, which has caused them to feel utterly lost in life. Not able to function at a high level in mainstream society has meant the participant has relied on family to house, feed and clothe them. The participant receives a disability pension to assist them financially.

Reclink was introduced to the participant through an organisation they access which helps with managing their illness. Having being involved in a wide variety of activities such as bowling, sailing, fishing, run-roll-walk around the Tan and many other one-off activities, the participant has noticed obvious improvement within themselves: "better emotionally and physically, if ya know what I mean". The participation in Reclink activities has provided the participant with a great sense of achievement, providing them with experiences that they would not have otherwise been able to access for themselves.

Gavin

The participant has suffered with a mental illness their entire life which has impacted on their ability to maintain independence. The majority of the participant's life has been spent living in the family home, supported by a single parent. The participant proudly pointed out that they pay a token amount of board when possible to assist with expenses associated with having them at home. When asked about health prior to attending a Reclink activity, they rated it to

be “good” because they had been “stable” for some time.

A case worker who regularly assists the participant with managing their illness introduced them to Reclink several years ago; the participant also believed that hearing of other participants positive experiences of Reclink made it easier for them to want to become engaged with the organisation. Since being introduced to Reclink, the participant has regularly been involved in activities such as lawn bowls and football. The participant has really embraced the team environment and the social aspect of the Reclink activities. The regular interactions with other individuals with similar backgrounds have made it easier for them to form lasting friendships.

Emma

The participant had a breakdown earlier in life which contributed to them going “off the tracks a little bit”. During this turbulent time the participant was diagnosed with schizophrenia. Since the diagnosis, the majority of the participant’s life has been spent living with their parents. The participant has been unsuccessful in their several attempts to as a result of complications with their illness.

Over ten years ago the participant was introduced to the Reclink organisation through an agency that they accessed to help them manage their mental illness. Since that introduction the participant has become regularly involved in a wide range of the Reclink associated activities: football, lawn bowls and ten-pin bowling. The participant has also attended several of the one-off annual events organised by Reclink, such as the Christmas lunches.

Through their involvement with Reclink, the participant believes they have had many new opportunities presented to them such as playing in a team environments and meeting new people; the participant stated that they have become excellent friends with

some of the other participants. Over the next year the participant wants to do a course in mental health so that they can assist others in a similar position, as well as gain independence by finding a place of their own through the department of housing.

Gerry

Although suffering from a mental illness, the participant is not reliant on family for their living arrangements. Apart from enduring difficult times in relation to their illness, the participant felt they are mentally and physically healthy. The participant does however state they have a constant issue with boredom; they are not employed and have very little to do.

After mentioning to their case worker that they wanted to play sport, the participant was introduced to the Reclink organisation. Since being involved with Reclink they have participated regularly in lawn bowls, football and cricket. The participant enjoys having Reclink as a part of their life because it provides them with a regular social environment. The participant was completely unsure of what they wanted to do in the next year: “just take things as they come”.

Noah

Several years ago the participant decided it was time to change their lifestyle after years of substance abuse that included drugs such as speed, cocaine and heroin. It took almost a full decade on the methadone program before having a breakthrough in their battle with addiction. The participant’s problems with drugs were compounded further by the fact they were also homeless, living from couch to couch, and often on the wrong side of the law. When asked what the participant’s health was like during this period in their life, the participant replied that they often thought of suicide.

The participant was referred to Reclink through their case worker and has

since participated in football and lawn bowls for a number of years. The participant excitedly conveyed that since being involved in Reclink they had not used drugs, except for the odd beer with his footy mates, nor had they been charged with any offences. When asked what they got out of being involved in Reclink, the participant stated: “living really... without it I wouldn’t be well”. The participant believed in the next year the best thing that could happen to them was to gain permanent accommodation through the department of housing.

Edward

The participant was diagnosed with schizophrenia as a teenager and has struggled with the illness through much of their adult life. More recently, the participant has gained independence as a result of finding temporary accommodation. The participant described their past health as: “not good”; they stated this was due to medical professionals struggling to find the right medication balance to treat their illness. This has left the participant suffering from sleep deprivation and on one occasion (that they could recall) being admitted to hospital as a consequence of incorrect medication dosages.

A mental health case worker assigned to the participant introduced them to Reclink almost a year ago; since this introduction the participant has been regularly involved in numerous activities such as football, lawn bowls and the walk/run around the Tan. Being involved has provided the participant with regular opportunities to socialise and they have made many friends through Reclink; further, it has given them a greater sense of independence: “you enjoy what you want to do”.

Marissa

The participant is a single parent of two primary school aged children living in a small regional town. The majority of the participant's time is spent attending to the daily needs of their children, running them to and from various activities, preparing meals and maintaining the family home. With the little spare time available, the participant works on a casual basis, as well as volunteering in the primary school.

As a result of the participant's circumstances they have felt very isolated from the rest of the community and lack confidence in their social surroundings. The participant was introduced Reclink through their volunteer work and became involved in the Reclink-supported art program in an attempt to gain "some 'me time'".

The participant strongly believes that since participating in the art program they have achieved significant personal change; they have increased levels of confidence, respect for others and, more importantly, themselves. The participant also stated that the art program has become a part of their support network. When asked if they'd made friends since participating in the program, the participant replied: "I have, I've made terrific friends".

Marian

After migrating to Australia over 40 years ago, the participant now resides in a small regional town, and has been unemployed since injuring themselves in the workplace several years ago. Not being able to work has made life very difficult for the participant, who is forced to live in shared accommodation. Being unemployed, living in a small town, and being on their own has left the participant feeling overwhelmingly isolated from the rest of the world.

The participant recently decided to visit their local community centre where they were introduced to the art program supported by Reclink. The

participant enjoys having the regular activity to attend because it motivates them to get out of the house and to socialise with others. The art program itself gives the participant great pleasure and sense of achievement, completing art pieces whilst also working in a group environment. The participant believed that their involvement in the art classes has helped them to form strong friendships with other participants, reducing their sense of isolation. The participant wants to be doing the same things as now in the future; they just want to "enjoy life" and not look too far forward.

Merlin

The participant migrated to Australia 20 years ago and currently lives with their partner in a rural community. Before suffering a stroke two years ago, the participant had worked hard to pay off the family home whilst living an active life. Since the stroke, the participant's lifestyle has changed dramatically. Unable to work due to constant memory lapses, the participant has suffered a loss of confidence in their abilities and now spends the majority of their time at home alone. The lack of social interaction has left the participant feeling very isolated from the rest of the world.

The participant was introduced to the Reclink organisation, in particular the art program, through another group activity they participate in. The participant stated that they get satisfaction, self belief and friends from participating in the arts program. This was summed up by the participant: "[when] I've completed something [like artwork], makes me proud".

Adrian

Currently living with their partner and four children, the participant has overcome a drinking problem which they believe was brought on by inactivity. Only having a seasonal job has meant that the participant has had long periods of time

sitting at home doing nothing. The participant's drinking habits during these long periods of inactivity got to a stage where they very seriously contemplated the idea of suicide.

A friend who also participates in Reclink-supported activities introduced the participant to the organisation. The participant has since been involved in the football and cricket competitions. The participant believed that participation in the activities assists them to "not fall back into old habits". The participant looks forward to the activities from week to week. The participant has made many friends as a result of their involvement in the activities; they see these friendships as important because they are able to spend time with people who have faced similar circumstances to their own.

Shaun

Suffering from a mental disability and being a regular user of drugs for a long period of time has severely disadvantaged this participant. They have, however, managed to hold down a part time job which has helped them to survive financially. The participant came to Reclink football and cricket programs on the recommendation of a friend who already attended the programs.

Being involved in Reclink is an important factor in the participant not going back to their old ways: "If I'm here I'm focussed, I'm not doing the other stuff". The participant has formed many friendships with others involved in the Reclink programs, noting that: "all my mates are here". The participant also spoke about how much the Grand Final days held by Reclink mean to them as they had never experienced anything like this before in their lives.

Ryan

Being kicked out of home as a teenager, left homeless and struggling with a mental disorder was the catalyst for the participant starting down a

long path of drug use, which ranged from smoking marijuana through to the use of speed. As a result of their long term drug abuse, the participant found themselves often in trouble with the law. Eventually, the participant had a moment of clarity where they found themselves wanting to change their life: “one day I said ‘na’... I boiled down crying and said ‘I can’t live like this’”.

After talking to a friend who had mentioned Reclink, the participant got involved in the football and cricket programs. In the two years that they have been involved in Reclink the participant has kicked their drug habit, except for the occasional drink with friends. More recently, the participant has found more permanent living arrangements at a friend’s house. The participant felt that helping other participants learn the game of football brought them the most enjoyment out of being involved. Friendships were the other key outcomes in participating in the activities for the participant.

Patrick

The participant has been a long time sufferer of depression, which was exacerbated by the tragic loss of one of their children in an accident. The participant experienced periods in which they spent countless days where they would not venture from the family home, instead spending most of their time watching the television and sleeping as a result of their depression: “I really wasn’t interested in anything”. The participant was finally admitted to hospital after living for a long time in this isolated state: “not ever having the proper help... everything finally got too much”. Asked to describe their health prior to being involved in Reclink, the participant responded: “no... no, wasn’t good”.

The participant’s case worker passed on information regarding Reclink to them when they were released from hospital and through the help of another agency the participant became involved in the lawn bowls and

ten-pin bowling programs offered by Reclink.

The participant sought assistance from Reclink with pursuing their interest in lawn bowls further, after recognising that not only did they thoroughly enjoy the game but they noticed that the activity was having a positive effect on their life. The participant used the transformational links program offered by Reclink, which assisted them to join the local lawn bowls club. The participant has since spent much of their time at the local club practising and getting involved in other social functions held at the club.

The participant is certain that the enormous positive turnaround in their life is due to the opportunity to become involved in Reclink activities, further stating without lawn bowls they most likely would not be alive today: “truthfully, probably dead”. When asked what they would like to be doing in a year’s time, the participant responded: “win the [lawn bowls] state championships”.

Vanessa

The participant is a parent of two children and has spent the better part of two decades maintaining the family home. Being isolated in the family home has seen the participant suffer with depression symptoms: “I was at home, all day, bored stiff.... I got into a rut”. The participant described their health as: “not good” prior to finding out about Reclink.

After visiting their local community house, the participant stumbled across some literature on yoga classes being offered at the centre. The participant attended the classes on a regular basis before being informed that the program was supported by Reclink. The participant has also become a regular member of the art classes, another Reclink-supported program. Attending the activities has boosted the self esteem and confidence of the participant; they

have since actively sought out other opportunities that allow them to become more involved in the local community. The participant has also relished the opportunity to make new friends at the activities which provides them with a stronger support network.

Dawn

The participant recently moved into a small rural community as a part of their retirement plan. Without transport the participant found that they were becoming increasingly isolated from the rest of the community. The participant thought that their health prior to participating in Reclink was okay, but being so isolated made them suffer a bit from depression. After picking up a Reclink pamphlet in the local library, the participant took up yoga and art classes.

The participant has found that attending Reclink activities has increased their level of physical and mental stimulation, which has been a key factor in reducing their levels of stress. Being able to meet new people has also led to the participant making new friends; this in turn has also helped them to develop a support network in the community.

Charles

After finishing a career in the military and going through a divorce, the participant found themselves living in a men’s boarding house for a period of three years. Whilst in the boarding house the participant began using heroin and other drugs to “provide an escape”. The participant clearly recognised that during period of their life their mental health suffered. For the last couple of years the participant has been able overcome their drug addiction, although their housing situation has worsened as they now live in a squat. More recently, the participant has been diagnosed with terminal cancer.

A friend of the participant introduced them to Reclink almost ten years

ago when they were both living in the boarding house. The participant has been involved in numerous activities, such as lawn bowls, rock climbing, cricket, and football. Although not competing in any activities currently due to their health, the participant still attends football training to encourage and support his mates. The participant identified the development of mental strength as one of the key benefits of participating in the activities: “gives you mental strength... bit more courage... no one wants to do drugs”. Friendships were the other benefit identified as a result of participating in Reclink-supported activities: “Friends you can rely on... mates who look out for ya”.

Luke

The participant recalls that many years of their life were marred by drug use; the participant used heroin, speed, marijuana and alcohol. After one day realising that they didn't want their two young children to constantly see them in their drug induced state, they attempted to seek help for their debilitating addiction. The participant was unsuccessful in their attempt and, in the chaotic fallout that ensued, the department of child welfare removed the children into protective custody. Recently, the participant has moved from their native state to seek a new beginning and to try to regain custody of their children back.

After coming across literature on Reclink in an agency that the participant accesses, they have become involved in the football competition supported by Reclink. When asked what the participant gets out of engaging in the Reclink activity, they responded: “me playing football, helps me stay off the drugs and that's going to help me get my children back”. The participant also stated that they believed that their involvement with football made them realise that they are a better person than they are when they are just sitting around doing nothing all day. In the short time that they have participated in the activity the participant believed that they have

made friends; the participant believed this was very important in their road to recovery: “they look out for me... have a yarn [with me]”.

Robin

By the age of nine the participant had already witnessed their mother, an alcoholic, slowly die from liver failure. Not being able to cope with the death of their mother, the participant became the “black sheep” of the family before being sent to a boy's home. The participant stated that during their stay at the home they were molested by staff. In the participant's teenage years they were again the victim of a vicious sexual assault; the participant stated that they had been raped as they were heading home from a party, and were then forced into a long-term non consensual relationship with their attacker.

The participant has regularly found themselves in trouble with the law; they described several years living a transitory lifestyle, working up and down the east coast of Australia in “sideshowes”. The participant has been diagnosed with anxiety disorder and depression as a result of their past experiences; reflecting on this, they stated: “[I] haven't had a healthy relationship... sad really”.

The participant was introduced to Reclink after reading literature on the organisation in a mental health agency. The participant has been involved in several activities over the ten years such as choir, football, golf, cricket and ten-pin bowling. When the participant was asked what they get out of participating in Reclink activities, their response was: “Reclink take me out of my depression, out of my unsociability, out of my loneliness”. The participant strongly believed that they had got their life back because of Reclink. Reclink-supported activities connected them back to the world: “Reclink have given me my heart back”. This was an extremely difficult revelation for the participant to share as they truly believed before finding

Reclink that nobody cared about them and or their situation.

The participant has used the Reclink transformational links program to gain funding to do a public speaking course through which they developed skills which they now use in their work as a motivational speaker.

Dustin

The participant had a long history of both alcohol and drug addiction before eventually getting into a 12 step recovery program. The participant described their previous life style: “[I] wasted my life, not learning, trying to kill myself”. A person also involved in the same 12 step program introduced the participant to Reclink as a part of their recovery process and getting their life back on track: “it's a part of my get well plan”.

The participant has been involved in many Reclink-supported activities over the last five years, including cricket, run-roll-walk around the Tan, swimming and football. After the self realisation that the participant could achieve goals by participating in sport and recreational activities they decided that there was “no reason [I] can't achieve big goals... I use sport and recreation to get my high”.

After many hours of hard training and participating in several locally organised triathlons, the participant gained assistance from Reclink to compete in an iron man triathlon race. After completing the course in a World Series qualifying time the participant was invited to compete in the World Hawaiian Iron man series the following year, which they did, finishing well inside the top half of the field. The participant has also gained full time employment for the first time in over 15 years with another agency that helps disadvantaged people. The participant believed that their direct involvement with Reclink was the catalyst for them gaining the employment opportunity. The participant would like to keep helping other people.

Marcus

The participant's teenage years were marred by drug and alcohol abuse; they went through stages of being suicidal and episodes of self-mutilation as direct side-effects of their life style choices. By their mid-twenties they were burnt out, witnessing countless friends around them die or end up in gaol and mental institutions. The participant moved back into the family home and then checked into a rehabilitation centre, where they began the journey to change their life.

A part of the participant's rehabilitation was to take part in sporting activities, which were supported and run by Reclink. Football was an activity the participant particularly looked forward to: "it was like a light, if I got through the next week I'd be playing football... something to look forward to". The participant strongly believed that the Reclink activities were the key factor in them staying in rehab and getting better.

When asked what the participant got out of being involved in Reclink activities they responded that they felt needed again, it was a release from their frustrations and that it reminded them that they are a good person. The participant has also gained employment from being involved in Reclink's sailing activity. The participant is now the head instructor at a prestigious yacht club, and as a result of this experience have participated and competed in Sydney to Hobart yacht races.

When asked what the participant wanted to be doing in a year's time they responded by saying they were keen to volunteer more of their time to Reclink, in order to assist in the running of their programs.

Amy

A victim of Victoria's recent devastating summer bushfires, the participant lost "everything" including the family home. In the past 12 months the participant and their partner have moved out of

the bushfire ravaged area, choosing to relocate to a small coastal town "for a change of scenery". During this period of change the participant also decided to retire from working life. Over the last year the participant has been trying to adjust to their new surroundings, wanting to fit into the community "any way [they] can".

After visiting the local community centre searching for information about activities in the area, the participant came across a yoga class supported by Reclink. The participant has enjoyed being involved in the activity because it has given them a vital opportunity to integrate into the local community. The participant felt they have also started to make friends through the activities, which has helped them to feel better about themselves. Since being involved in the Reclink-supported yoga program the participant has gone on to be involved in many other activities offered in the community.

Dick

The participant has lived on the streets for many years after being kicked out of the family home at a young age. Since living on the streets the participant developed a drug addiction, using heroin on a regular basis. Describing their lifestyle before becoming involved in Reclink the participant stated that they were "always looking for a hit". The participant has four children from two failed relationships and only gets limited custody of the children. It was also noted by the participant that as a direct consequence of their past drug use, they now have to deal with mental health issues which has led to them being admitted to psychiatric hospitals.

The participant found out about Reclink through word of mouth on the streets almost 13 years ago. Since this time the participant has been heavily involved in Reclink-supported and organised activities such as football, cricket, golf, tennis and camps. The participant used their time at Reclink to

help to stay drug free and as a means of establishing regular access to their children. Being much happier in Reclink activities, the participant has formed many meaningful friendships, which they believe has been an important part of their recovery process. The participant has also used the transformational links program to access a mainstream weekend cricket competition.

Mitchell

The participant described how they became despondent with their lifestyle working interstate on engineering jobs. Seeking a change, the participant decided to move to Victoria. They participant struggled to find work; they were living in backpacker-style accommodation and needed to use soup kitchens in order to survive. It was while eating a meal at a church that the participant found a flyer on Reclink, inviting people to get involved in physical activity.

The participant has been involved in basketball and football program supported by Reclink for just over six months. Still unemployed, the participant finds it hard to remain motivated, but stated their involvement in the Reclink programs has made life more "enjoyable". The participant also believed that they have made friends whilst being involved in the activities, but does not socialise with other participants outside the Reclink programs. The participant's main priority in the next 12 months is to secure employment.

Grace

The participant, a primary school teacher, went through a divorce which left them with sole custody of their three young children. Finding it difficult to manage three children and full time employment, the participant resigned from their job as a primary school teacher. The participant stated that their health was "good" prior to participating in Reclink funded

activities. For the last six years the participant has been living alone in a high rise housing commission estate.

The participant found out about Reclink through their local community house. Over the last three years the participant has been regularly involved in knitting and dance. When the participant was asked to explain what they get out of participating in the activities, they responded: meeting diverse people, making friends, learning new skills, and staying active. Being able to remain active was very important for the participant because they expressed the loneliness that can be experienced living where they do: "it can be isolating in high rise living". In the next 12 months the participant would like to find part time work.

Hao

The participant relocated from Vietnam 15 years ago with their partner. Shortly after arriving in the country the relationship broke down leaving the participant as sole carer of their infant child. The participant speaks little English and does not work which has isolated them from the community.

The participant was introduced to the Reclink-funded program, knitting, almost a year ago through a friend. The participant noted that this was the only social activity that they were involved in. When asked what they get out of participating in the activity, they replied: "when I'm knitting I feel relaxed, I enjoy knitting". The participant also believes that they have made friends whilst being involved in the activities. In the next 12 months the participant wanted to be able to continue the class: "hope to come every week, very happy". Improving their English skills and learning how to use a computer were also priorities for the participant.

Kelly

The participant is a qualified nurse who suffers with depression which makes it difficult for them to maintain

consistent work schedules. Suffering from depression has meant that the participant spends long periods of time isolated in the family home, unable to motivate themselves to do anything. Due to their illness, the participant has spent time in hospitals at different stages of their life. The participant's caseworker recommended Reclink programs to them as a way of being more active and adding consistency into their lifestyle.

The participant has been involved in Reclink-supported knitting and ballroom dancing. Being active and making friends were cited as the two primary benefits the participant received as a result of their participation in Reclink. The participant wanted to return to full time employment in the next 12 months, but mentioned that they would still find time to come down to the activities as it was important to them.

Erica

The participant was diagnosed with clinical depression in the mid 1990s. Unable at times to get out of the "spiral" caused by depression, the participant tried "self medicating": drinking alcohol in an attempt to "get happy". The illness was affecting the participant's life so much so that they began to consider suicide as a way out. The participant has spent two significant periods of time in psychiatric facilities due to the effects of their illness. The participant is unable to live independently and has been a part of a residential services assisted living program, living in shared accommodation with other people who also suffer with a mental illness. Asked what their health was like prior to being involved in Reclink activities, the participant responded: "felt like crap, always down... mind wasn't healthy".

The participant was introduced to Reclink-supported programs through their case worker in the supported residential services program. Participating in lawn bowls, cricket, and football for the last 12 months, the

participant has made many friends, which has helped them to feel happier: "I'm a lot brighter". In responding to being asked what they get out of participating in Reclink-supported activities, the participant responded: "I love it, it's a day out... it's a bit of fun, have a chat, laugh".

Trang

The participant migrated to Australia from Vietnam in 1987. Speaking very little English and having no friends has isolated the participant from the wider community. In the mid 1990s the participant was diagnosed with depression. The participant is unable to live independently so they reside with their elderly mother. When asked to describe their health prior to participating in Reclink-supported programs, the participant responded: "lonely, no friends... cry a lot".

The participant accesses an agency that assists people with mental illnesses on a daily basis and it was through their association with this organisation that they were introduced to Reclink. The participant has been involved in many Reclink-supported programs, including lawn bowls, ten-pin bowling, fishing, run-roll-walk around the Tan, and many other one-off activities. The participant felt that as a result of their participation in the activities they are "much happier". The participant spoke of making friends whilst participating in the activities and that their health was improved: "feel better".

Belinda

The participant has been suffering from depression since the mid 1980s. The participant survives on a pension and until recently lived in shared accommodation with their brother. More recently, the participant has been able to purchase a unit in where they now live on their own. When asked to describe what their health was like prior to participating in Reclink funded

programs, the participant responded: “reasonable”.

Unable to work due to their mental illness, the participant occupies their spare time accessing agencies that provide sporting and recreational activities for people who suffer from mental illnesses. It was through these agencies that the participant found out about Reclink. The participant has been involved in a wide variety of Reclink funded programs for over a decade: lawn bowls, ten-pin bowling, fishing, pool, and golf. When asked what the participant gets out of participating in the activities, they responded: “sense of achievement... like I’ve done something worthwhile... purposeful”.

Antonio

The participant was diagnosed with schizophrenia at an early age, almost 20 years ago. The participant lives with their mother as they are unable to live independently due to their mental health issues. The participant is not working and receives financial benefits from the government as a means of supporting themselves financially. The participant said that their health prior to attending Reclink-supported activities “wasn’t really that good, the anxiety and voices”.

Reclink and Reclink-supported activities were introduced to the participant through their attendance at a drop-in centre for people with mental illness ten years ago. Since then the participant has been involved in football, ten-pin bowling and golf programs. The participant believed that their involvement in the activities kept them mentally and physically active which was necessary for them to maintain good mental health. The participant stated that they had made friends whilst participating in the activities and that these friendships were very important to them. Over the next 12 months the participant wanted to get part time work.

Jenna

As a young person diagnosed with schizophrenia, the participant has struggled to connect with mainstream society. The participant lives at home with their mother and has worked part time irregularly. As a consistent form of social interaction the participant accesses a drop-in centre for people with mental illness in their local area. The participant described their health prior to being involved in Reclink funded activities as not great, as they believed they were regularly hearing things in their head.

A caseworker involved with the drop-in centre that the participant frequents introduced them to Reclink-supported activities four years ago. Since getting involved the participant has participated in lawn bowls and ten-pin bowling programs. Friendships and the increased social interaction with people have been notable outcomes for the participant.

Heather

The participant was diagnosed with cancer in 2003; at the time, they were married with two children and working. The participant suffered a breakdown which turned into depression. After being diagnosed with depression, the participant accessed a drop-in centre for people with mental illness. While at the centre the participant was introduced to Reclink-supported activities. When the participant was asked to describe their mental and physical health prior to being involved in Reclink-supported activities, the participant responded: “health wasn’t the best”.

Currently in remission and working part time, the participant still accesses a lawn bowls program supported by Reclink as a part of their overall mental health recovery plan. The participant described making friends and being happier in general as the two main positives they get out of being involved in the Reclink-supported activity.

Kristen

The participant left home at age 16 after constantly fighting with their parents. Having nowhere to go, the participant became homeless and lived on the streets. During the participant’s time on the streets they were introduced to heroin and a variety of other drugs, which led to addiction. After being an addict for four years, the participant was placed on a methadone program. The participant reported that they have not used heroin or methadone for ten years; however they spoke of still “dabbling” in amphetamines on occasions. More recently the participant has been through a difficult relationship breakdown which has left them the primary carer of their two young children. The participant lives in a housing commission property and receives a pension as a means of supporting themselves financially. The participant described their health prior to joining Reclink-supported programs as poor because they were consistently in a “struggle with [their] personal life”.

Ten years ago the participant was introduced to Reclink through word of mouth “on the street”. The participant has been involved in a wide range of supported activities: football, basketball, run-roll-walk around the Tan, golf, and triathlons. The participant said that they enjoyed participating in the Reclink-supported activities because of the “physicality of it... the opportunities you get... and the social networking, friends”. The participant also believed that their health had improved since being involved in the activities: “it’s a lot better; I’m a lot mentally stronger”. When talking about the future and where the participant is heading, they stated: “I try to escape this life... I have to admit I want the better life”. In the next 12 months the participant wanted to get a qualification in personal training and work in the profession.

Rodney

As a teenager the participant was diagnosed with schizophrenia; as a result of complications with their mental health they have been institutionalised on several occasions. The participant's poor mental health has meant that they have been unable to maintain their own independence or have continuity in their life. The participant has never worked and has only just been provided independent housing by a state government agency. The participant accesses a mental health drop-in centre on a daily basis. The participant stated that their health prior to being involved in Reclink funded activities fluctuated due to episodes with their illness.

Reclink funded activities were introduced to the participant through the mental health agency that they frequent and football is the only activity that they have participated in. The participant enjoys the male bonding aspect of the football and believes that the environment helped them maintain a healthier mental state: "can't just sit around home doing nothing".

Ricky

The participant has suffered from schizophrenia for the majority of their life. Up until recently the participant's only form of financial support was a disability pension. The participant has relied heavily on their family's support to survive and it was with this help that they were allocated a housing commission property to live in. Asked about health before being involved in Reclink-supported activities, the participant replied: "not as good as what it is now". The participant also said that living with their illness had been difficult; however, they had learnt to survive with it.

The participant was introduced to the Reclink organisation through their case worker. For the last three years the participant has been involved in Reclink's football and run-roll-walk around the Tan programs. Being

more active, staying healthier and friendships were identified as the main positives to come out of their involvement in the programs. The participant was able to identify a significant change in their current health as they stated that their health had improved mentally and physically: "getting pretty close to normal now". Having built their confidence during the Reclink activities, the participant secured part time employment and has been able to maintain this current employment for the last eight months.

Danny

The participant was in a ward of the state as a child and throughout their teenage years. After turning 18 the participant became transient due to a variety of incidents that they described as: "doing something stupid, hurting someone, trouble with the law". The participant stated that they had addiction issues with marijuana and alcohol. Currently, the participant is homeless and has only just finished a two weeks' incarceration in the Melbourne assessment prison. When asked to discuss what they thought their health was like prior to being involved in Reclink-supported activities, the participant said: "I'm all over the place".

The participant became involved in a Reclink-supported activity through word of mouth three years ago. The participant stated that they tried volleyball for a short period of time before losing interest. More recently, the participant has become reinvolved with Reclink and the football program. The participant believed attending the football program was a positive step towards being able to stop abusing marijuana and alcohol: "keep[s] me mind of it"; they stated that they found that sport "relaxed" them. In the next 12 months the participant was keen to study, find employment and, more importantly "be off drugs".

Glenn

The participant abused drugs and alcohol for over a ten year period: "basically from high school to Reclink I was a drug addict, I guess... I used drugs and drank as much as I could, but trying to stop the whole time". The participant's problems with drugs started with the use of marijuana and escalated from there to heroin. Seeking help on several occasions, the participant has voluntarily checked into various drug and alcohol rehabilitation centres; the participant stated that on one such occasion they had spent up to a year in one particular facility. The participant has worked odd jobs most of their life to support themselves and their habit, but has also had to rely heavily on the generosity of others to provide them with stable accommodation. More recently, the participant has become the sole carer for their ten-year-old child and is awaiting the birth of their second. The participant has been able to maintain their sobriety both from alcohol and drugs. They have started a TAFE course to further their education and have gained part time employment in a social welfare organisation.

The participant found out about Reclink and the activities they support through friends that they had met at Narcotics Anonymous; these friends were also involved with Reclink at the time. Over the last eight years the participant has been involved in a wide variety of activities including: lawn bowls, triathlons, football, basketball and golf. The participant stated they have something to look forward to on a weekly basis, thanks to their involvement with Reclink; the regular attendance at the activities has also instilled in the participant a sense of achievement: "I walk away feeling good".

Barry

After a long working life the participant was made redundant three years ago. The participant was unable to find alternate work and their pre-existing

issues with alcohol and gambling were amplified: “the grog got a hold of me, the punt got a hold of me”. The participant’s struggles with alcohol and gambling addictions were contributing factors to the participant losing all they had, including their home. The sudden loss of everything was a trigger to a steep decline in the participant’s mental health; they stated that they had become suicidal. Also during this period the participant found themselves living on the streets. More recently, the participant has been receiving help from several agencies and expressed the belief that they were “one of the lucky ones”.

It was through one of the agencies that the participant was introduced to Reclink. The participant believed that their mental and physical health prior to Reclink was very poor. In the last 12 months the participant has been actively participating in lawn bowls, croquet and ten-pin bowling. The participant stated that the benefits of participation were: respect from others, support outside of family. The participant also believed that their involvement in the activities alleviated their feelings of isolation and suicidal thoughts as the interaction with other participants provided them with an understanding that they are not alone. In further discussion, the participant stated that without the assistance of several agencies and the activities provided by Reclink they believed that they would “probably be dead”.

When the participant was asked to think about what they would like to be doing in a year from now, they responded: “still breathing, love to be at work”.

Dean

Eight years ago the participant endured some personally tough times which they stated had a dramatic impact on their mental health. It was during this period in the participant’s life that they were also formally diagnosed with depression. The participant’s poor mental health

was further compounded by the fact that they were socially isolated. The participant has financially survived on a disability pension and lives in community care accommodation provided through a government agency. The participant described their mental and physical health prior to their involvement with Reclink as: “not good”.

The participant was introduced to Reclink through an agency they were engaged with to assist them in managing their mental health issues. In the last five years the participant has been regularly involved in Reclink-supported and or funded programs such as lawn bowls, gym, and ten-pin bowling. The participant stated that through their participation in Reclink activities their level of confidence and self-esteem had improved greatly which has in turn made them more self-assured. In response to questioning on how the activities had assisted in this change, the participant stated that they believed that they were “treated with respect” by everyone involved in the programs which put them at ease. More recently, the participant approached Reclink to assist them in joining a mainstream tennis club. Reclink provided the participant with the equipment required to participate in a Saturday competition. This assistance from Reclink has provided an opportunity the participant believed that they would not have been able to achieve on their own: “they really care about the people they serve”.

Raelene

The participant was diagnosed with a mental health issue 20 years ago. Living with schizophrenia has had a major influence on how the participant functions in life. The participant has never worked and survives financially on a disability pension. The participant stated they have lived in a housing commission property for close to 30 years. The participant was unable to articulate their thoughts on their health

before their Reclink involvement; instead they referred to the present changes, stating that they were a great deal happier.

Reclink and Reclink-supported activities were introduced to the participant four years ago by a case worker. The participant has been involved in lawn bowls on a regular basis over this period of time. It was stated by the participant that the activity was a major highlight to their week and was the only source of human interaction outside of mental health agency workers and their husband. According to the participant, the increased social interaction has had a positive impact on their level of personal confidence: “the more I get involved the more confidence I feel”. The participant stated that they had made friends with other Reclink participants which: “gave them a life”.

Bradley

Diagnosed with schizo-affective disorder at an early age, the participant has had to cope with numerous episodes of paranoia, hallucinations, delusions and long periods of depression. The participant’s poor mental health has impacted their ability to maintain any sort of independence. Unable to work or support themselves, the participant has been reliant on their parents to provide them with the most basic needs such as clothing, food, and housing. In discussing the participant’s health prior to being involved in Reclink, the participant stated that both their physical and mental health was “very bad”.

The participant was introduced to Reclink and Reclink-supported activities through a mental health agency they attend. Over the last three years the participant has been involved in several activities such as ten-pin bowling, croquet, badminton, gym and tennis. The participant discussed the need for these activities in their weekly routine as it was a “big part of staying healthy”. In discussing what the participant gets out of the

activities, they stated that they gained enjoyment, they were inspired to do other activities, and overall they believed the activities provided them with “a lot of positive energy”. From the confidence that the participant gained, particularly through ten-pin bowling, they approached Reclink to assist them in joining a mainstream ten-pin bowling league. Reclink provided the participant with a league bowling ball and they also paid the season membership fees at a local club. Without Reclink and Reclink-supported activities the participant believes that they would not have been in a position to engage in an opportunity like the one they have now.

In the next 12 months the participant's main goal was to continue their positive frame of mind and remain in all the activities they are currently involved with. The longer term goal of the participant is to eventually gain their own independence.

Judy

In their late teenage years the participant was diagnosed with bipolar disorder. The participant described their 20 year struggle to manage their health following their diagnosis; the participant suffered severe episodes which have led to hospitalisation on several occasions after doing what the participant described as “silly things”. In the past the participant has been able to manage full time work with several large financial institutions. This period of employment only coincided with periods of good mental health. Over the last eight years the participant has been unable to maintain any form of work. The participant has been able to live independently for small periods of time. Since their employment ceased they have resided permanently with their elderly mother. It was hard for the participant to offer any perspective on their health prior to Reclink; they stated they have had manic stages where they felt “invincible”, which then led to periods of poor mental health.

Almost two years ago a mental health worker known to the participant introduced them to Reclink. The participant has been involved in several Reclink and Reclink-supported activities such as tennis, lawn bowls, ten-pin bowling, gym, and mini golf. In discussing what they get from participating in the activities, the participant replied: fun, the opportunity to mix with others and the enjoyment of being involved in sport in general. The participant also identified the support received from other Reclink participants as a benefit for them. In exploring this statement further, the participant explained that, although they have a keen interest in sporting activities, their motivation to get involved is determined by their mental health state, so the encouragement provided by other participants supports and drives their motivation to turn up week after week. The participant stated that they looked forward to the activities because it was a time for them to be active as well as meet with friends.

Wanda

The participant has experienced poor health for several years, including being obese, which has translated into other medical issues such as type two diabetes and arthritis in their back. A previous relationship that went bad has left the participant bankrupt and suffering from depression. The participant stated that they have not worked for several years as they were required to provide palliative care to both their parents who have since succumbed to cancer-related illnesses; this experience has also dramatically affected the participant's mental health. More recently, the participant has been visiting a drop-in centre for meals and other services and relies on the generosity of extended family to provide them with housing. The participant described their mental and physical health prior to being involved in Reclink as “very bad”.

The participant was introduced to Reclink and Reclink activities two years ago. They have since participated in activities such as a women's group, including women's pamper days and a dance program. Discussing what they get out of being involved in the activities, the participant stated that they have learnt new skills, made friends and, most importantly, they get to experience things that they would not normally have access to, particularly because of financial reasons. The participant was unable to differentiate any substantial change in their mental or physical health since being involved in Reclink activities because of other additional situational factors that have occurred. In the next 12 months the participant wanted to be happy and perhaps consider finding work.

Beth

The participant has suffered with Tourette's syndrome for over 30 years, which has had a significant impact on their mental health and wellbeing. As a result of the confrontational nature of their health issue, the participant has isolated themselves out of embarrassment. The participant stated that they have been ridiculed by others at times and not accepted by the general population. Living in various housing commission properties over their lifetime, the participant has also found it hard to participate in the workforce. More recently, the participant has begun to suffer from symptoms of arthritis which has limited their mobility, further minimising their interaction with others. The participant described their health prior to Reclink as being good; however, if they had had a bad day with their syndrome it would have a negative impact on their mental health.

The participant was introduced to Reclink and Reclink-supported programs through an agency that they attended for meals and other health services. They have been involved in a women's group supported by Reclink

for the last two years. In discussing what the participant gets out of the program, they responded: “this group has given me freedom... I’m more alive”. The participant further explained that they feel accepted by other participants, which has boosted their self-esteem and confidence. Most importantly, the participant stated that they felt protected in the group, which has allowed them to be themselves. The participant believed there has been a considerable change in their mental health: not only are they less stressed, but they are significantly happier and more motivated to be around others. In the next 12 months the participant wanted to work on their physical fitness and then contemplate finding part time work.

Janice

The participant has had very little independence in their life having lived with their mother until her death four years ago. The participant has resided in a housing commission property for as long as they can remember and has found it very difficult to maintain any form of employment. When the participant was younger they were involved in a traffic accident: they were hit by a car while crossing the street. This accident left them with an acquired brain injury and impaired vision. In describing their mental and physical health prior to being involved in a Reclink activity, they responded: “on the back foot”.

The participant was introduced to Reclink and Reclink-supported programs through an agency that they attended for meals and other health services. A women’s group supported by Reclink has been the only activity they have been involved in over the last three years. The participant described how they were happier when they were involved in the activity as it was usually the only source of social interaction they had with others on a weekly basis. These social interactions have also led to positive steps in building self-confidence and making friends.

Diana

The participant has never worked and has lived in a housing commission property for the last two years; prior to this they were in private rental accommodation. Discussing their life and living situation prior to Reclink, the participant stated that they believed they had never faced disadvantage of any kind. The participant mentioned that they spent the majority of their time sitting at home and not interacting with anyone other than their partner. The participant mentioned that their partner also does not work and spends most of their day consuming alcohol.

The participant was introduced to Reclink and Reclink-supported programs through an agency they visit on a weekly basis to collect a food parcel. Asked about outcomes of being involved in the program, the participant responded that it was more about them getting the opportunity to help others than to assist in developing themselves. In probing further, the participant described how the program allows them to be more connected to community.

Delia

Since being kicked out of the family home 18 months ago the participant has been homeless. Currently, in their mid-forties the participant has been staying at friends’ houses to sleep and visits several agencies that provide meals services on a regular basis. The participant stated that they were very dependent on others as they were unable to take care of themselves: “I can’t cook, I can’t clean”. Living with a mental illness has also made life difficult for them. The participant discussed being diagnosed with schizophrenia and bipolar disorder in the mid 1990s. The participant also stated that the large amounts of drugs that have been prescribed to manage their conditions have had a significant negative impact on their daily motivation levels. The participant receives a pension as a means of

supporting themselves financially and is still homeless.

The participant was introduced to Reclink three years ago, when their then partner was involved in the Reclink football competition. The participant got involved at the time by running water at games for the players. More recently, the participant has become involved in a women’s group that is supported by Reclink. The participant sought the activity out after having had the initial positive experience at Reclink football. In discussing what the participant gets out of the activity, they responded: fun, enjoyment, good times, and friends. Making friends was very important to the participant as they noted they didn’t have a lot of friends prior to Reclink and that it was these new friends that keep them active on a weekly basis. The participant believed their mental health had improved since being involved in the women’s group purely because they were happier; however, the participant also conceded that they had a long way to go with regard to stability in their mental health issues.

Gina

The participant discussed their history of abuse; they went on to state that they have suffered from severe depression which caused them to attempt suicide on several occasions. Sadly, and more recently, the participant’s mental health has declined further after their son committed suicide after being diagnosed with cancer. The participant was reluctant to discuss their health prior to Reclink, instead they stated that the Reclink activity they were involved in: “got me through times [when] I felt I couldn’t do it any more”.

Two years ago a mental health worker got the participant involved in a Reclink-supported choir. The participant stated that they had achieved a lot since being involved in the choir and that it has become a big part of their life: “it’s like another

family". Discussing this idea further, the participant stated that the other participants involved in the choir had become a crucial support network for them. Having the extra support has given the participant more confidence to become more actively involved in the local community outside Reclink. The participant stated that it was hard for them to compare their health now to before involvement in Reclink, because there is still so much going on in their life. The participant did state however that: "I'm feeling the best I've been feeling in a long time". In the next 12 months the participant wanted to continue to be involved in the Reclink-supported choir as it was an instrumental part of their overall recovery plan.

Terri

Approximately five years ago the participant had what they described as a mental health breakdown. The breakdown was triggered by the sudden death of their father and the subsequent hospitalisation of their mother. Up until then the participant had been successfully running a business and was financially independent. The participant stated that their health prior to Reclink was: "on the fence". Explaining this statement, the participant recalled how they felt mentally unstable and that when they came to Reclink they were only in the early stages of their recovery.

Approximately three years ago the participant was introduced to Reclink and a Reclink-supported choir through a mental health case worker. The participant stated that the choir has been an important part of their health recovery plan since: "[the choir] keeps me grounded". Other positive experiences to come out of their involvement in the choir are the friendships that they have made with other participants. The participant explained that the relationships they had with other choir participants had become more than just friendships

over the journey and in fact now the group had become more like a substitute family for them. This strong connection with the group has also provided the participant with a greater sense of belonging in their local community. The participant believed there has been a considerable change in their mental health as they are now stronger and more mentally capable. In the next 12 months the participant wanted to gain employment in the social work sector, so that they might be able to assist others.

Beverley

For the majority of their life the participant has suffered from anxiety and depression. The participant owns their home and survives financially on a government allowance. The participant has been out of the workforce for the last eight years. Discussing their health prior to getting involved in Reclink, the participant recalled that their mental and physical health was "not too fantastic".

A mental health worker known to the participant introduced them to Reclink six years ago. During this time the only activity that the participant has been involved in is a Reclink-supported choir. The participant believes that involvement in the choir takes them away from their daily problems. Being happier, a sense of achievement and friendships were also identified as other positives to come out of their involvement in the activity. The participant stated the friendships they have formed at the activities have become a significant part of their support structure. Having noticed a positive change with their mental health as a result of participating in the Reclink-supported choir, the participant concluded: "I just want it [the choir] to go all day".

Wendy

The participant stated that they have faced "a lot of tragedy in [their] life". As a teenager the participant was

diagnosed with bipolar disorder. Their condition was only diagnosed after the participant had become severely depressed following the loss of their mother to cancer. In trying to live an independent life since, the participant has struggled to maintain any type of employment. Furthermore, the participant believed that it has been difficult for them to maintain any form of personal relationship because of their mental health disorder. More recently, the participant has been attending university. The participant described their mental and physical health prior to Reclink as "pretty good"..

The choir master was the person who introduced the participant to Reclink, two years ago. Asked what they get out of being involved in the activity, the participant responded that it helps them focus and relax: "singing is very therapeutic for me". The participant also suggested that the activity links them in closer to other people and their local community: "the singing allows you to have an activity where you are not thinking just about yourself, 'why me, why's that happened to me?' [It] changes that to, 'I'd like to contribute to this group'". Although the participant enjoyed the company of the other participants, they stated that it was not their sole aim to make friends with everyone they met. The participant believed that their mental health had improved because they were more settled in having activities to attend. In the next 12 months the participant wanted to continue their higher education and perhaps obtain part time work.

Chris

The participant was employed full time, owned their own home and lived a relatively normal life, as described by them, until ten years ago. The collapse of the organisation the participant worked for was a turning point for them. They were unable to find employment elsewhere and the increasing financial hardship felt by

the participant meant they had to sell the family home to repay debts. More recently, the participant has been living in a men's hostel and working part time doing odd jobs. When the participant was asked to describe what their health was like prior to being involved in Reclink, they responded: "I was fine, both mentally and physically".

The participant got involved in Reclink and activities they support through another Reclink participant. In the last two years the participant has been involved in cricket, football, and lawn bowls. When discussing what the participant gets out of being involved in the Reclink-supported activities, they spoke about learning new skills, socialising with a wide variety of other participants and how the activities provide a chance to just enjoy playing sport. The participant believed that they had made acquaintances at each of the activities, but this had not progressed into friendships as yet. The participant believed that there has been "a bit of a change" in their mental and physical health since being involved in the activities. In the next 12 months the participant wanted to become more active in the work force.

Jonathan

The participant believed that they had a privileged life growing up, having had lots of opportunities and experiences that not many other people are exposed to. Despite this, five years ago, the participant found themselves in a rehab centre, to deal with their addictions with drugs and alcohol: "alcohol was my first drug of choice from the age of 13". As a result of the need to fuel the participant's habits, they eventually found themselves in trouble with the law. The catalyst for the participant to seek help came after their doctor gave them a prognosis of only three months' survival if they continued to abuse substances in the way they did. The participant spoke of being so ashamed and guilty for their actions, which had devastated them, their family and their wife, they

almost decided not to seek help. It was whilst the participant was in the rehab centre that they were introduced to Reclink. Other patients in the facility had spoken to the participant about their involvement in Reclink-supported sport programs and had said that they had felt it was a safe place for them and part of their recovery.

Shortly after leaving the rehabilitation centre, the participant got involved in a Reclink-supported football team. The participant stated that the activity provided them with a safe environment to continue their recovery: "[I] feel safe and no longer alone". The participant identified that it was not necessarily the activity that has made them feel this way, but rather that the other participants were able to provide them with the support they needed. When the participant was asked to describe if there had been a change in their health since being involved in Reclink, they responded that their physical health is now remarkably good and mentally they were stronger: "to be able to say I don't do that [drugs] any more, is such a good feeling... no shame no guilt". The participant has also used Reclink's transformational links program which has provided them with an opportunity of employment. This has been a great opportunity for the participant who had believed that they would never find work again. In the next 12 months the participant stated that they wanted to "be a better dad, husband and a better person".

Walter

The participant believes they have lived with their mental illness all their life, but was not formally diagnosed until adult life. Suffering from clinical depression, the participant often has panic attacks and bouts of anxiety. This has made it very difficult for the participant to live on a daily basis. The participant that prior to their diagnosis they used alcohol as a way of managing their symptoms and to "escape". The participant stated that they have a social phobia, which is manifested

as a result of their mental health issues. Currently, the participant lives in a private rental property and receives a disability pension. When the participant was asked to describe their health prior to getting involved in Reclink, they responded: "good, but no one else did"; the participant explained that just prior to getting involved with Reclink they were in a prolonged manic state which led them to be eventually hospitalised.

The participant's case manager got them involved in a Reclink-supported choir, one and a half years ago. The participant finds that the choir is mentally uplifting, which makes them feel happier. The participant's raised levels of happiness can sometimes continue into the day following the activity. The participant was asked to describe how the choir achieves this change; they stated that it was as a result of the camaraderie amongst other participants and the non judgmental way people interact with them at the activity: "I'm just so used to being judged [by others]". The participant stated that their mental health had improved since being involved in Reclink as the extra weekly social contact gave them routine. In the next 12 months the participant was unsure of what they wanted to be doing: "perhaps volunteer work... still in the choir".

Randall

The participant does not work and survives financially on a disability pension. When the participant was asked if they had a mental illness, they replied: "no"; however, they stated their doctor believed that they have mental health issues. The participant also said that they had faced a lot of disadvantage in their life but did not want to elaborate any further.

A fellow church colleague introduced the participant to Reclink and Reclink-supported activities. In the last two years the participant has been involved in a Reclink-supported choir. Asked what they get out of participating in the

activity, that the participant replied: “[it] relaxes me, relaxes your mind... helps out with problems you’ve got... happier”. The choir also gave the participant something to do during the week as they said they spent a lot of time at home on their own. The participant believed that there had been a change in their mental health as a result of their involvement: “I’m relaxed, I’m me”. In the next 12 months the participant wanted to stay with the choir and help it expand to include more participants.

Dale

The participant has lived with a mental illness all their life. The participant suffers from schizophrenia and explained that they understand they do not live a normal life, but that they could not change this either: “you fight with it, you struggle with it”. The participant lives in a private rental property; unable to maintain full time employment, the participant works sporadically doing menial tasks to survive financially. The participant stated that they have had issues with alcohol abuse in the past. When the participant was asked to describe their mental and physical health prior to being involved in Reclink, they responded: “no good”.

A mental health case worker introduced the participant to Reclink and Reclink-supported activities. In the last two years the participant has been involved in lawn bowls, badminton, tennis and a Reclink Christmas party. The participant explained that the activities have improved their confidence which has helped them to develop a drive and passion to be more socially interactive. The participant looks forward to the activities each week and participation has become a big part in developing a consistent routine in their lifestyle. The participant stated that they have made friends whilst being involved in the activities and that they now invite these friends over to their house to socialise. The participant believes there has been a positive change in their mental health and they attribute some of this

change to their involvement in Reclink activities. In the next 12 months the participant wanted to be doing “musicals and dance”.

Russell

The participant was very reserved in sharing about their life and living situation prior to Reclink; however, they spoke briefly about recently being diagnosed with bipolar disorder and depression. The participant stated that they have had issues with alcohol abuse in the past. When the participant was asked to describe what they felt their health was like prior to Reclink, they responded: “not happy, still not happy... but this helps”.

A social worker at a soup kitchen introduced the participant to Reclink and Reclink-supported activities. In the last six months the participant has been involved in supported cricket and basketball programs. Asked what they get out of participating in the activities, the participant responded: “something to do... meet people...stay fit”. The participant believed there had been a positive change in their physical fitness, yet at this stage their mental health was no different. The participant became withdrawn when they were asked to comment on what they would like to be doing in the next 12 months, only stating: “bit scary for me right now, just better than now”.

Billy

Since the age of 13 the participant has had severe drug and alcohol problems. The participant made poor choices while affected by these substances which further alienated them from family and friends. The participant believed during this destructive stage in their life they were suffering from a mental health issue, yet was unable to access the help they needed: “I knew I wasn’t right”. Currently on a disability pension, the participant has begun their recovery from substance abuse and resides in an assisted living care facility for youth that are going through detoxification. The participant has

only recently been diagnosed with schizophrenia. When the participant was asked to describe what their health was like prior to being involved in Reclink, they responded: “hell of a lot worse [than it is now]”.

A case worker overseeing the participant’s recovery introduced them to Reclink activities about six months ago. In the last six months the participant has been involved in gym, swimming and ten-pin bowling programs. Describing what they get out of being involved in the programs the participant stated the main benefits were regaining their health, feeling encouraged to become more socially and physically active, and the mental stimulation for them. The participant believed all these outcomes were important in terms of their overall recovery. The participant was asked to discuss the possible changes in their mental and physical health since their involvement in Reclink activities and responded: “yeah, hell of a lot of difference”. In the next 12 months the participant wanted to join the workforce.

Curtis

Prior to being involved in a traffic accident that left the participant requiring eight operations, they had worked full time their entire adult life. Not long after the accident, the participant separated from their partner of 25 years. Unable to work and newly separated, the participant’s mental health deteriorated, they became suicidal and were institutionalised. The participant recalled that as a teenager they were sexually abused by their step-father; the participant was unable to seek help because the participant’s mother did not believe them. When the participant was asked to consider if they have been faced with disadvantage in the past, they responded: “no”. Currently living in government housing, the participant survives financially on a disability pension. The participant described their physical and mental

health prior to being involved in Reclink as: "I was bad".

The participant was introduced to Reclink by a case worker; in the last three years they have been involved in Reclink-supported golf and ten-pin bowling activities. The activities have provided the participant with immense enjoyment which they believed has helped them to become more relaxed as a person. The social interactions and the friendships the participant has developed whilst involved in Reclink have also been very important to them. Due to other circumstances the participant said their physical health had not changed in the three years; however, they had noticed a significant change in their mental health. In the next year the participant wanted to reconnect with their daughter, who they had not seen for several years.

Johnny

The participant lived a transient lifestyle growing up due to the nature of their father's employment. As a result of constant relocating, the participant did not receive an education because they were never in the one spot long enough to enrol in school. In their adult life the participant has also moved regularly to find employment. The participant stated that at one stage in the participant's adult life that they had spent several months incarcerated. Currently, the participant suffers from a muscular degenerative disorder which is incurable. They live in a private rental and survive financially on a pension. The participant stated that they were "fit as a Malley Bull", both mentally and physically, prior to their Reclink involvement.

A Reclink worker introduced the participant to the organisation, 15 years ago. Since then the participant has been involved in a supported golf activity. The participant stated that they get involved in the activity as it was a day where they could "unwind" from their troubles and be with friends. Discussing their health since beginning participation in a Reclink program,

the participant stated it was difficult to identify any significant change. The participant suggested that this was because so much has happened in the 15 years that they have been involved. The participant was unable to offer any suggestion to what they wanted to be doing in the next 12 months: "I would not have a clue".

Wayne

After leaving home at 16 the participant lived on the street where they became a regular user of heroin, speed, marijuana and alcohol. The participant cannot recall much of this period in their life as it was just a "blur" to them. It was not until many of the people around the participant started to die due to overdoses that they decided to seek help. The participant believed prior to Reclink that their physical and mental health was not good: "I knew I was in trouble". Currently, the participant lives in a boarding house and survives financially on a disability pension.

A mission worker introduced the participant to Reclink and Reclink-supported programs some 18 years ago. Since then the participant has regularly been involved in cricket, football, soccer and other one-off activities supported by the organisation. The participant still looks forward to being involved in the activities on a weekly basis as it is their chance to catch up with friends. The participant believes that being involved in the activities has also helped them to develop personally: "it's opened me up". Since the participant's involvement in Reclink, they have noticed a significant difference in their mental and physical health: "I'm alive... I wouldn't be here otherwise". In the next 12 months the participant wanted to start looking for work.

Martin

Before the participant's marriage breakdown, of 20 years, they had lived a relatively normal life; they had owned

their own home and worked full time. Since the separation five years ago, the participant has lived on the streets, sleeping in their car. The participant currently does not work and survives financially on a disability pension. The participant has been introduced to drugs since living on the streets; they stated they had never used previously. The participant further stated that they used the drugs to take them away from their situation and that it provided them with: "Dutch courage". Asked to describe their health before Reclink, they responded: "physically, not well... mentally, shattered after marriage break up".

Approximately five years ago the participant was introduced to Reclink and the activities they support by an agency worker whilst attending an organisation that provides meals to the homeless. The participant has been involved in Reclink's cricket and football competitions since. The cricket and football give the participant with some stability in their life and something to look forward to each week. The participant also said that they get great enjoyment out of being involved and that they have been able to form friendships with other participants in the activities. The participant noted that they had experienced a positive change in their mental health since being involved in Reclink: "the help you get is great". In the next 12 months the participant wanted to upgrade their current car so they had more space for living.

Henry

The participant discussed the medical issues they faced when they were born and in the early years of their life. According to the participant these issues have had a cascading affect for them for their entire life. Having learning and cognitive difficulties, as well as other mental health issues, has made life even more complicated for the participant. The participant also shared that they went through a traumatic experience as an adult

which has negatively impacted on their mental health. Currently, the participant lives in a private rental property and works part time. The participant receives a disability pension to supplement their income. When the participant was asked to describe the state of their mental and physical health prior to Reclink, they responded: “fine”, which seemed to contradict the participant’s earlier statements.

Another Reclink participant introduced this participant to Reclink and the activities they support seven years ago. Since then, the participant has been involved in a wide variety of activities, such as boxing, golf, ten-pin bowling, football, cricket, run-roll-walk around the Tan and many other one-off activities. The participant has enjoyed the activities: they stated that the activities have helped them to improve their physical fitness, have provided them with an opportunity to meet new people and have given them a weekly routine. In the next 12 months the participant wanted to move closer to family other than this they stated that they lived life “day by day”.

Andrea

After leaving school in year nine, the participant worked odd jobs as a means of surviving financially. The participant tried to further their education later in life at an adult education centre; however was unsuccessful in attaining their Victorian Certificate of Education. Currently living with their partner in a private rental, the participant said that they struggle to live day to day. The participant discussed suffering from anxiety, depression and anger management. The participant further stated that they used recreational drugs, but that their drug use was not an issue for them. More recently, the participant and their partner have had experienced the trauma of a miscarriage which has had a significant and detrimental impact on their mental health. When asked

to describe their mental and physical health prior to Reclink, the participant responded: “average”.

Another Reclink participant introduced them to Reclink and the activities they support. For the last six years the participant has been involved in several activities such as boxing, football, cricket, and a gym program. The participant stated that they enjoyed using the time they had at activities as their way of relaxing and withdrawing temporarily from their problems: “gets your mind off issues at home”. Friendships have been another notable outcome for the participant. The participant stated that their mental and physical health had improved since being involved in the activities. The participant also suggested that they noticed the decline in their overall health when they did not attend activities. In the next 12 months the participant wanted to be working full time.

Peter

The participant was left parentless after their mother died when they were only 12. Having no other relatives to take care of them, they were placed in a boy’s home. The participant spoke of how they grew up as an angry child because of the lack of support in their life: “no love shown”. Whilst in the boy’s home the participant got into “a lot of trouble”. The participant’s bad behaviour, often fuelled by the excessive consumption of alcohol, was again an issue for them as a young adult and was a contributing factor to their incarceration on several occasions. On one occasion while intoxicated the participant was assaulted in the street and was left with an acquired brain injury. For the last 11 years the participant has been living in a private rental property and works part time to financially support themselves.

The participant was introduced to Reclink 20 years ago whilst attending a meal service provided by an agency for homeless and disadvantaged

people. Since then the participant has been involved regularly in the cricket, lawn bowls and football programs. More recently, the participant has tried the run-roll-walk program. There have been many notable outcomes for the participant since being involved in Reclink activities: it taught them how to work together with other participants in a team environment; and other participants and Reclink staff have provided them with a social support network: “they are like family to me”. Most importantly, the participant believed their involvement in the programs provided them with an opportunity to do something different in their life. The participant has used Reclink’s transformational links program to gain assistance to join a mainstream soccer club. Without Reclink’s financial assistance the participant believed that they would never have been able to pay for the annual membership fee: “would not have been able to have an opportunity like this otherwise”.

Donald

The participant has always lived with mental health issues, depression, schizophrenia and mild autism. The participant has tried to live an independent life; however, maintaining their independence has been too difficult at times. Currently not working, the participant resides with their parents’ home and survives financially on a disability pension. Discussing their health prior to Reclink, the participant responded that mentally “It was up and down, I was depressed at that stage”.

A mental health agency worker introduced the participant to Reclink and the programs they support 12 months ago. The participant has been involved on a regular basis in cricket and gym activities since. Having the social activities built into the participant’s weekly routine has assisted them with managing their mental health problems: “getting out and doing these activities... really

helps. If I plan my week, I can manage my health issues". The participant further stated that their involvement in the activities has reduced their anxiety levels and suggested that this was because of the supportive nature of the activities provided by Reclink. The friends that the participant has made at Reclink activities have become an integral part of their social group. The participant was able to distinguish a difference in their mental health since being involved in Reclink activities: "my health is a lot better, because I'm mixing with others". The participant did not discuss changes in their physical health. In the next 12 months the participant wanted to be working full time.

Joe

The participant stated that they left school at a young age because they couldn't manage with a learning difficulty. After leaving school, the participant applied themselves in work across a broad range of trades but never earned a qualification. The participant is married and has two children to different partners. The participant has a long history of marijuana use; however, they claimed that their drug use had not impacted on their life in anyway. The participant stated that they had tried to join sporting clubs in the past but they were turned away after being unable to pay the registration fees. Discussing their mental and physical health prior to Reclink, they responded: "has always been good".

A friend of the participant, who was already involved in Reclink activities, introduced the participant to the organisation and the activities they support. Over the last four years the participant has been involved in the football and cricket competitions organised by Reclink. The activities have provided the participant with several positive outcomes; as listed by them: positive feelings, friends, keeping active, and staying mentally alert. The participant believed they had noticed a slight change in their mental

and physical health: "bit better, both mentally and physically". In the next 12 months the participant wanted to find more work to supplement what they were already doing.

Bobby

The participant was homeless for six years; during this time they lived on the streets and used any suitable structure they could find to sleep in at night. They visited food vans to keep themselves nourished. More recently, the participant has been able to secure crisis accommodation with a service provider. The participant divulged that whilst living on the street they had developed a serious alcohol addiction; however, they were currently seeking help for the issue. The participant believed they had never been faced with disadvantage in any way during their life. The participant described their physical health prior to being involved in Reclink activities was "pretty ordinary"; however, they believed their mental health was: "good".

A friend introduced the participant to Reclink and Reclink-supported activities six years ago. The participant has since participated in football, cricket and golf. The three foremost significant outcomes for the participant being involved in the activities have been having fun, meeting new people and being generally happier. Although the participant recognised these outcomes, they stated that they had not noticed a change in either their physical or mental health since being involved with Reclink.

The participant has used Reclink's transformational links program to join a cricket team that participates in a mainstream competition. The participant stated that they had enjoyed the experience and that it was an opportunity they believed they would have not otherwise have been able to benefit from. In the next 12 months the participant wanted to find a job and have a car.

Adel

The participant sought asylum in Australia, leaving their family behind in their home country. The participant described the horrifying situation that they faced and how they feared for their life on a daily basis: "bad situation in our country". The participant explained that their mental health was not good before being involved in Reclink activities as they had witnessed firsthand the deaths of many people as a result of suicide bombings. Currently, the participant is studying and lives with friends.

Approximately six months ago, an agency worker assigned to assist the participant introduced them to Reclink. Since this introduction the participant has been involved in Reclink's transformational links program, and has participated in a Reclink cricket team that is registered in a mainstream competition. The participant stated that being involved in the team has helped not only in their transition to this country, but it has also helped to improve their mental health: "it's a club that supports me... it relaxes you, tension is released". In the next 12 months the participant wanted to continue their involvement with Reclink and stay in the country.

Dennis

After leaving school in year ten, the participant worked full time doing odd jobs until they were 21. The participant described how a gambling addiction took control of their life while they were boarding in a room above a hotel. The participant described spending all the money they earned on gambling and not having enough for rent or even food. The addiction engulfed the participant's life and contributed to them losing their job and their accommodation. The participant described how they used tram stops and public facilities as temporary places to sleep in when they were living on the streets. The participant stated that at that point in their life they were just simply "living to die" and had closed themselves off from the rest of the

world. When the participant was asked to describe their health prior to getting involved in Reclink, they replied that they suffered from depression, low self-esteem and that they were terribly overweight.

The participant was introduced to Reclink after finding a flyer on a notice board at an agency that provides meals for the disadvantaged. The participant decided to trial one of the activities as they recognised that they needed to change the direction of their life. Over the last two and a half years the participant has been involved in a wide range of activities: football, cricket, tennis, basketball and soccer. Asked to describe what they get out of the activities, participant discussed several positive outcomes. Firstly, the participant stated that having the activities gave them an opportunity to relax and unwind, removing them from their daily problems: “for a few hours all that concerns me is my teammates and myself having a good time”. The participant also described how important the supportive environment at Reclink was for them and how this environment was perhaps different to mainstream sporting environments: “been in teams that are win-at-all-cost attitude... adds too much stress”.

The participant has been a part of Reclink’s transformational links program. The participant stated that they “worked hard” to become involved in a Reclink cricket team that competes in a mainstream competition. The participant has enjoyed the experience, stating that it has been an enjoyable challenge for them, both physically and mentally. Reflecting on the possible changes in their health since being involved in Reclink, the participant stated: “[mentally] it’s a lot better... I wake up wanting to do things... I’m definitely having some really good days”. The participant further stated that they had lost a significant amount of weight being more active. In the next 12 months the participant wanted to be employed, to have reached their weight loss goal and be living with their girlfriend.

Rhonda

At the age of 16 the participant fell pregnant and left school. After the birth of their child the participant went back to education and successfully completed certificate I and II in a TAFE course; however the participant stated they were unable to proceed any further. The participant suffers from depression, anxiety and hypertension which has had an impact on their ability to maintain their independence. The participant currently lives with their partner in a one bedroom flat and their child resides with the participant’s mother. Not working, the participant survives financially on a disability pension. The participant did not want to discuss what their health was like prior to Reclink; they deflected the question on several occasions.

A Reclink worker introduced the participant to the organisation five years ago. Initially, the participant was involved with one of Reclink’s football teams, not as a player but as support person running water to other participants during games. More recently, the participant has become involved in a dance activity supported by Reclink. The dance activity has been a positive experience for the participant and has provided them with an opportunity to have time for themselves: “once I’m out of the house, I come here, my problems go away, it’s like it’s never there... when I’m home it comes back to me”. The participant also stated that have enjoyed meeting new people and friends at the activities which has provided them with a positive social outlet. The participant stated they had noticed a positive change in their mental and physical health since being involved in Reclink activities. In the next 12 months the participant wanted to find work and have another child.

Paula

Since the age of eight the participant has lived with Tourette’s syndrome. The participant stated they have faced ridicule and discrimination

from the wider community because of a lack of understanding of the condition. Furthermore, the participant suggested that they have not been able to maintain their independence as a result of the lack of understanding in the community. The participant recalled that they have been asked to leave their place of employment or where they were staying because their condition made people feel uncomfortable; they stated that this had occurred on several occasions. The participant relies on their family to support them financially and with housing. When the participant was asked to describe what their health was like prior to their involvement with Reclink, they stated that they were physically unfit and that they had poor mental health.

A support worker that the participant visits on a regular basis introduced them to Reclink and the activities they support. In the 12 months that the participant has been involved, they have attended a dance program. The participant stated that they were happier when they were involved in the activity and that for the first time in their life they were making friends. Although the participant had noticed a slight change in their physical health since being involved in the dance group, they were unconvinced that their mental health had improved. In the next 12 months the participant wanted to get employment and go to university.

Cynthia

As a result of child hood experiences the participant suffered depression and anxiety. The participant’s mental health was so severely impacted that they extricated themselves from the outside world: “I was for quite a long time, a hermit... stay at home and stare at four walls”. The participant has not worked full time for over 30 years and survives financially on a disability pension. For the majority of the week the only human contact that the participant used to have was with their next door neighbour and the person who delivered their ‘meals on

wheels'. Reflecting on their health prior to participating in a Reclink-supported program, the participant believed that their physical health was "OK", whereas their mental health was poor: "I was mentally ill".

A friend of the participant introduced them to the organisation Reclink four years ago. The participant has been involved in a guitar and dance activity supported by Reclink. Meeting new people and learning new skills have been two of the positive outcomes for the participant. The participant believed that enjoying themselves in the activities had a positive effect on their mental health: "[I've] come out of my shell... less reserved". The participant noted that their physical health had also improved. In the next 12 months the participant wanted to: "break out of the rut [and] live more independently".

Sharon

Due to personal issues, the participant left home and school as a young teenager; with nowhere to go, the participant lived on the streets for over six months. The participant has cerebral palsy which has further complicated their life. More recently, the participant tried to further their education by attempting to complete their Victorian Certificate of Education; unfortunately the participant was unsuccessful. Currently the participant lives in transitional housing and survives financially on a disability pension. The participant also shared that they were a user of marijuana.

The participant was introduced to the organisation Reclink through a case worker, almost a year ago. In this time the participant has been involved in a dance program supported by Reclink. The outcomes for the participant have been "mixed". Although the participant finds the activity enjoyable and stated that it provides them with some structure in their week, they did not enjoy the company of the other participants. The participant stated they had not noticed a difference in

their health. In the next 12 months the participant wanted to attempt further study again.

Cindy

Three and a half years ago the participant was a victim of an incident that completely changed their life. Prior to the incident, the participant was living a very active lifestyle and working full time. Since their experience the participant has faced serious mental health issues such as post-traumatic stress syndrome, depression, anxiety and low self-esteem. The participant's mental health issues became such a burden that they attempted suicide and were institutionalised. Since their release the participant has been visiting various agencies for assistance to help them move forward. The participant believed that their physical health prior to Reclink was "OK"; however, they stated that their mental health was "really bad".

A case worker introduced them to the Reclink organisation and the activities they support two years ago. Since then the participant has had regular involvement in a Reclink-supported dance program. The participant stated that the program has been great for their confidence as it has reintroduced them to regular social interactions in a safe environment. Furthermore, the participant stated that while participating in the activity they were significantly happier and that this positive change sometimes continued beyond just the day of the activity. It was difficult for the participant to comment on the change in their health since being involved in Reclink as they experience good and bad days associated with post-traumatic stress. In the next 12 months the participant wanted to find employment.

Pamela

The participant has been through several traumatic events at different stages of their life; these experiences have had a significant impact on their

mental health and how they live. A victim of abuse as a child and an adult, the participant stated that they suffer terribly with depression, anxiety and low self-esteem. The participant had secluded themselves in the family home as they were too frightened to leave. Not until recently has the participant had the courage to seek assistance. When the participant was asked to describe what their health was like prior to their involvement in Reclink, they responded: "so much worse".

An agency worker introduced the participant to the Reclink organisation and activities they support, one year ago. The participant has been involved in dance program supported by. The participant stated that the activity has been great for their confidence and has provided them with an opportunity to meet people in a safe and secure setting. The participant stated that the friends that they have made in the activity are the only friends they have had in a long time. In discussing possible changes in their health since being involved in the activity, the participant responded: "much better... keeps me sane". The only thing the participant wanted to be doing in the next 12 months was to continue their involvement in the dance activity.

Lena

The participant moved to Australia several years ago to further their education at university level. The move was an immense culture shock for the participant who said they came here not knowing anyone and having no immediate support. Several months after the move the participant found that they had become socially isolated, unhappy and depressed.

A friend of the participant who was already involved in Reclink activities introduced the participant to the organisation. In the last two years the participant has been involved in three programs supported by Reclink: football, cricket and soccer. The participant stated that the experience

has been a very positive one as it has helped them to feel accepted into the local community and that the other participants are very supportive of them. More recently, through Reclink's transformational links program, the participant has been able to secure their first employment opportunity. This opportunity has provided the participant with a sense of achievement and a drive for their future direction. Discussing their health since participating in Reclink activities, the participant responded: "physically fit... mentally strong". In the next 12 months the participant wanted to be doing exactly what they were doing at present.

Sean

The participant was working full time and owned their own home before their drinking habit became a serious addiction. Through this addiction the participant lost their job and their home. Having no family to seek assistance from, the participant ended up on the streets living rough for several years. Currently, the participant lives in a housing commission property and survives financially on a pension. The participant believed only their physical health had suffered but that their mental health was "OK" prior to their involvement with Reclink.

A friend of the participant who was already involved in Reclink activities introduced the participant to the organisation. In the last ten years the participant has been involved in a wide variety of activities: cricket, football, lawn bowls and pool competitions. Being happier, having activities to keep them occupied and friends were cited as the benefits the participant receives from participating in the Reclink-supported activities. The participant has also used Reclink's transformational links program to join a mainstream lawn bowls club.

Reclink have paid for the participant's membership fee; the participant believed they would not be able to afford the fees without Reclink's assistance. The participant described their health since being involved with Reclink as "steadier". In the next 12 months the participant wanted to take a trip around Australia.

Darryl

The participant described having led a "long and prosperous life". The participant worked all their life until retirement and owns their own home. More recently, the participant has been through a relationship breakdown during which they became separated from their partner of more than 40 years. The stress on the participant's mental health became such a "debilitating situation" for them that they moved into a low care facility to seek help. Describing their health prior to Reclink activities, the participant stated that, although they were still physically fit, mentally they were a "very hurt man".

A support worker at the low care facility introduced the participant to Reclink-supported activities 12 months ago. The participant has since been involved in two Reclink-supported: art classes and pool competitions. The activities have assisted the participant to stay active and be social, as well as providing them with structure to their week. The participant had noticed a change in their mental health since beginning the activities; they stated they were much happier.

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